## WITHHOLDING TAX RECONCILIATION FOR EMPLOYER'S QUARTERLY RETURNS

MAKE CHECK OR MONEY ORDER TO:	SEE INSTRUCTIONS (ON BACK) BEFORE COMPLETING THIS FORM		ΑX	YEAR	2 0
CITY OF BRUNSWICK TAX DEPARTMENT P.O. BOX 0816 BRUNSWICK, OH 44212-0816		4. PAYROLL SUBJECT TO TAX (Line 2 minus Line 3) \$			
1. TOTAL NUMBER OF EMPLOYEES REPRESENTED EN HEREWITH		QUARTER ENDING MARCH 31 QUARTER ENDING JUNE 30 QUARTER ENDING SEPT. 30 QUARTER ENDING DEC. 31	\$ - \$ - \$ -	\$	
		TOTAL REMITTED  7. DIFFERENCE BETWEEN LINES (5 & 6) \$ OR TAX DUE \$			
		FEDERAL I D NO			

ORIGINAL - RETURN THIS COPY WITH PAYMENT

## **INSTRUCTIONS**

The original of this reconciliation form must be filed with the City of Brunswick Income Tax Department by January 31 of the subsequent year. This form must be accompanied by copies of employee's wage statements (W-2's) showing (1) name and address of employee (The employee's residence address should show the correct political subdivision - NOT CLEVELAND AND A ZIP CODE NUMBER); (2) Social Security Number; (3) Gross Earnings PAID BEFORE ANY PAYROLL DEDUCTIONS; (4) Amount of Brunswick and any other city income tax withheld; and name, address and Federal Identification Number of the employer.

An adding mcahine Tape, listing the amounts of Brunswick Income tax withheld, as indicated by individual employees statements (W-2's) should be attached. Any difference posted on Line 7 MUST BE FULLY EXPLAINED IN AN ATTACHED STATEMENT

If Line 7 indicates a balance due, the amount should accompany this return; make checks payable to the City of Brunswick, P.O. Box 0816, Brunswick, OH 44212.