

FORM W-3 EMPLOYER'S RECONCILIATION OF TAX WITHHELD MONTHLY
VILLAGE OF CROOKSVILLE INCOME TAX DEPARTMENT
98 SOUTH BUCKEYE STREET, CROOKSVILLE, OH 43731 740-982-6973, X 109

**TAX
YEAR
2018**

1. Total number of employees	_____	Crooksville Income Tax Withheld for Tax Year 2018:	
2. Total payroll for Tax Year 2018	\$ _____	Ending January 31	\$ _____
3. Less payroll not subject to tax	\$ _____	Ending February 28	\$ _____
Attach explanation		Ending March 31	\$ _____
4. Payroll subject to tax	\$ _____	Ending April 30	\$ _____
5. Withholding tax liability at		Ending May 31	\$ _____
1.5% (.015) of line 4	\$ _____	Ending June 30	\$ _____
		Ending July 31	\$ _____
Federal I.D. Number: _____		Ending August 31	\$ _____
Business Name: _____		Ending September 30	\$ _____
Address: _____		Ending October 31	\$ _____
City: _____ ST _____ Zip _____		Ending November 30	\$ _____
		Ending December 31	\$ _____
ATTACH W-2'S AND SUBMIT BY FEBRUARY 28, 2019		6. Total remitted for the year	\$ _____
		7. Difference between Lines 5 & 6	\$ _____

Income Tax enclosed	\$ _____
Penalty enclosed	\$ _____
Interest enclosed	\$ _____
TOTAL ENCLOSED	\$ _____

If Line 7 indicates a balance due, the amount thereof should accompany this return. Penalty and Interest charges do apply. Penalty is 50% of amount due. Interest in .50% of amount due per month.
If Line 7 indicates an overpayment, a written refund request containing explanation must be attached to this form. Refunds or credits will not be issued without the written request. (No Refund/Credit under \$10.00)

Submitted by: _____

Official Title: _____

Date: _____