CELINA WITHHOLDING TAX RECONCILIATION Celina Tax Office PO Box 117 Celina, Ohio 45822-0117

ACCOUNT # YEAR

		1	. Total Numbe	er of W-2's attac	ched							
Company Name		2. Total Wages subject to Withholding tax \$										
AddressAddressAuthorized SignatureFederal I.D		3. Total Tax to be Withheld\$										
						Due by February 28 th W-2's must be attac	ched	Second Quarter,				
								Third Quarter \$				
								Fourth Quarter \$\$				
		5. Total Withholding paid \$										
		6. Lines 3 and 5 should agree: if not Pay Additional Tax Due \$										
			Make checks payable to: Celina Tax Administrator									
INS	TRUCTIONS F	OR FIL	ING W-3									
On or before February 28th of each year a W-3 Reconciliation Return shall be completed and submitted along with copies of W-2's (also applicable 1099 forms). The W-3 form must report all withholding payments either by quarter or month on the lines provided. Rate of Tax: 1.5% Celina Failure to File: Each employer shall be liable for the		Late Filing Fee: \$25.00										
		Penalty: 50% of withholding tax due										
		Interest: .58% per month or fraction of a month (based on Federal rate and may change annually)										
		Quarterly: All returns and tax payments are due on or before the last day of the month following the end										
						payment of the taxes required to be deducted or withheld, whether or not such taxes have in fact been withheld. Employers who fail to withhold taxes or file returns required by the Ordinance shall be subject to penalty, interest, and late fee.			of calendar quarter. Monthly: All returns and tax payments are due no later than fifteen days after the last day of each month. Monthly payments are required when amount of taxes to be deducted have exceeded \$2399 in the preceding calendar year I or exceeded			
\$200 in any month of the preceding calendar year.												
Withholding Record	d for Tay Vear											
With Holding Reserve	a for rax rear											
	AMOUN	NT	AMOUNT		AMOUNT							
A. Monthly Withholding	\$	\$	\$		\$							
	\$	\$	\$		\$							
	\$	\$	\$		\$							
	\$	\$	\$		\$							

TOTAL WITHHOLDING

B. Verify Payments/Attach All W-2's With This Filing