

**CITY OF MORAINÉ: 2014 ANNUAL RECONCILIATION OF TAX WITHHELD FROM WAGES**

FORM W-3

PLEASE REMIT TO:  
CITY OF MORAINÉ  
INCOME TAX DIVISION  
4200 DRYDEN ROAD  
MORAINÉ, OH 45439

FEID# \_\_\_\_\_  
CO. NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_

NUMBER OF W-2'S ATTACHED \_\_\_\_\_

I have examined this return and to the best of my knowledge it is correct.

\_\_\_\_\_  
SIGNATURE DATE

\_\_\_\_\_  
PRINT NAME TITLE PHONE

**1) GROSS PAYROLL**      **2) PAYROLL (NOT SUBJECT TO TAX)**      **3) PAYROLL (SUBJECT TO TAX)**      **4) TAX DUE**      **5) TAX PAID (PER YOUR RECORDS)**

	***	1-1-14 Tax Rate 2%	***		
JAN	_____	_____	_____	_____	_____
FEB	_____	_____	_____	_____	_____
MAR	_____	_____	_____	_____	_____
APR	_____	_____	_____	_____	_____
MAY	_____	_____	_____	_____	_____
JUN	_____	_____	_____	_____	_____
<b>Subtotal</b>	_____	_____	_____	_____	_____
	***	7-1-14 Tax Rate 2.5%	***		
JUL	_____	_____	_____	_____	_____
AUG	_____	_____	_____	_____	_____
SEP	_____	_____	_____	_____	_____
OCT	_____	_____	_____	_____	_____
NOV	_____	_____	_____	_____	_____
DEC	_____	_____	_____	_____	_____
<b>TOTAL</b>	_____	_____	_____	_____	_____

TOTAL PAYMENTS \_\_\_\_\_

BALANCE DUE \_\_\_\_\_

REFUND \_\_\_\_\_

**DUE ON OR BEFORE FEBRUARY 28, 2015**