

Reconciliation of Income Tax Withheld

AW-3 WORKSHEET

Form AW - 3 is the year end reconciliation for employee withholding. This form should be filed with us by January 31st. We accept text files or spreadsheets of your employee wage information on diskettes, CDs, or mag tapes and the standard paper W-2s. (Suggested file layout of electronic media is found at www.ci.akron.oh.us.)

- LINE 1. Enter your total payroll for the year.
- LINE 2. Enter wages which are NOT subject to the Akron tax . Write a brief explanation on the back of the form.
- LINE 3. Enter total amount of payroll that is subject to Akron at 2.25%.
- LINE 4. Enter total amount of payroll that is subject to Akron at less than 2.25%.
(e.g. Akron residents who work in the city of Stow would be withheld 2% for Stow and .25% for Akron.)
- LINE 5. Calculate 2.25% of Line 3 and add to it the amount resulting from Line 4 times the tax collection rate that is less than 2.25%. Enter the result here.
- LINE 6. Run a calculator tape of the Akron tax withheld, using your employee W-2's. Attach this tape and enter the result.

TOTAL AKRON INCOME TAX DEPOSITS

Add the withholding payments you made to Akron for each quarter and enter the results on the lines provided.

- LINE 7. Enter the quarterly total of your deposits.
- LINE 8. Enter the highest figure of LINES 5 or 6.
- LINE 9. Subtract LINE 7 from LINE 8 and enter any BALANCE DUE or CREDIT to be applied to next year here.
(Place parentheses around CREDITS.)

Income Tax Division * 1 Cascade Plaza - 11th Floor Akron, Ohio 44308 * (330) 375 - 2290 * www.ci.akron.oh.us/1040

DETACH HERE

FORM AW-3 RECONCILIATION TAX YR _____ of INCOME TAX WITHHELD City of Akron, Ohio

ACCOUNT NUMBER	DUE ON OR BEFORE	FED ID #
1-	1/31/	

ENTER NUMBER OF W-2 RECORDS OR NUMBER OF EMPLOYEES REPORTED WITH THIS FILING _____

I declare that this return has been examined by me, and to the best of my knowledge and belief, is correct and complete.

Signature and Title _____	Date _____
BUSINESS NAME _____	
ADDRESS _____	
PHONE NUMBER _____	

ENTER NAME AND ADDRESS IN THE BOX ABOVE OR MAKE NEEDED CORRECTIONS.
THIS FORM MUST BE RETURNED WITH EMPLOYEE W-2 RECORDS.

1. Total payroll for Year \$ _____
 2. Payroll not subject to Akron (Explain)..... \$ _____
 3. Payroll subject to Akron at 2.25% \$ _____
 4. Payroll subject to Akron at less than 2.25% \$ _____
 5. Total tax due (2.25% of Line 3 PLUS ____%of Line 4) ... \$ _____
 6. Total tax withheld per W-2's (Attach Tape) \$ _____
- TOTAL AKRON INCOME TAX DEPOSITS**
- Quarter Ended MAR 31st \$ _____
 - Quarter Ended JUN 30th \$ _____
 - Quarter Ended SEP 30th \$ _____
 - Quarter Ended DEC 31st \$ _____
7. Total Deposits for Year \$ _____
 8. TOTAL AKRON INCOME TAX (Higher of Line 5 or 6) \$ _____
 9. BALANCE DUE (Credit applied to next year)..... \$ _____

MAKE CHECK PAYABLE AND MAIL TO: CITY OF AKRON, OH Income Tax Division 1 Cascade Plaza - 11 th Floor Akron, OH 44308
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