

**WITHHOLDING TAX RECONCILIATION**

Village of Tuscarawas  
Income Tax Department  
P.O. Box 388  
Tuscarawas, Ohio 44682

LEGIBLE COPIES OF W-2 FORMS MUST  
ACCOMPANY THIS FORM BY JAN 31<sup>ST</sup>

1. Total Number of employees as represented by  
Forms W-2 submitted herewith \_\_\_\_\_

2. Total Income Tax Withheld from compensation  
Paid all employees \$ \_\_\_\_\_

3. Total Income Tax Withheld from compensation during  
for:

1<sup>st</sup> Quarter ending March 31 \$ \_\_\_\_\_

2<sup>nd</sup> Quarter ending June 30 \$ \_\_\_\_\_

3<sup>rd</sup> Quarter ending September 30 \$ \_\_\_\_\_

4<sup>th</sup> Quarter ending December 31 \$ \_\_\_\_\_

4. Total Amount Withheld \_\_\_\_\_

Parts 2 and 4 should be identical, explain fully any discrepancy.