

VILLAGE OF LOUDONVILLE
Income Tax Department
P.O. Box 115
Loudonville, Ohio 44842
FORM W-3

WITHHOLDING TAX RECONCILIATION

1. Total number of Loudonville employees _____

2. Total Loudonville payroll for the year \$ _____

3. Less payroll not subject to tax \$ _____
(Employees under 18 years of age)

4. Payroll subject to tax \$ _____

5. Withholding tax liability @ 1.75% of Line 4 \$ _____

Total Loudonville Income Tax Withheld during Tax Year 19_____. .

First quarter ending March 31 \$ _____

Second quarter ending June 30 \$ _____

Third quarter ending September 30 \$ _____

Fourth quarter ending December 31 \$ _____

6. Total remitted for the year \$ _____

7. (a) Overpayment \$ _____

(b) Additional Tax Due \$ _____

If item 7(a) above indicates overpayment and refund is desired, attach explanation and request to this Form. If additional tax due 7(b) is indicated, attach payment when filing.

Submitted By: _____

Official Title: _____
OWNER, PARTNER, MEMBER, PRESIDENT, TREASURER

Date: _____

Telephone: _____