Tax Year 2023

FORM W3 1493 EMPLOYER'S WITHHOLDING RECONCILIATION

EAST LIVERPOOL TAX DEPARTMENT

126 W 6th St East Liverpool OH 43920

Voice 330-385-5437

Fax 330-386-7865

DUE DATE 02/15/2024

	FEDERAL ID NUMBER
Name	NAME OF PERSON
And	COMPLETING FORM
Address	LOCAL PHONE NUMBER
	NUMBER OF EMPLOYEES LISTED

EMPLOYEE W2'S MUST ACCOMPANY THIS FORM

INSTRUCTIONS

- 1. Attach check payable to East Liverpool Tax Department, for difference if withholding exceeds remittance.
- 2. If remittance exceeds amount withheld, give explanation and request refund below.
- 3. Attach explanation if column 2 is used.

ENTER PAYROLL BY QUARTERLY OR MONTHLY TOTALS							
	(1)	(2)	(3)	(4)	(5)		
	Gross	Payroll Not	Payroll	Tax	Tax Paid		
Period	Payroll	Subject to Tax	Subject to Tax	Due	Per Your Records		
January							
February							
March/Qtr-1							
April							
May							
June/Qtr-2							
July							
August							
September/Qtr-3							
October							
November							
December/Qtr-4							
TOTALS							
			TOTAL REMITTANCE MADE				
Employer - Explain any differences:			DIFFERENCE				