

Reconciliation of Quarterly Returns of Income Tax Withheld From Wages**ACCOUNT INFORMATION**For Calendar Year **2020**
-W

EIN/FID Number _____

Employer Name _____

Address _____

City _____

State _____

Zip Code _____

- Attach W-2s or Magnetic Media (CD etc.) to the back of this return. Visit our website at: www.columbus.gov/IncomeTaxDivision for our "Magnetic Media" filing requirements or call the Withholding Section at (614) 645-8368.
- Do not enclose quarterly returns with this form. Mail quarterly returns separately.
- This annual reconciliation does not substitute for the filing of quarterly returns.
- Attach check (if any) to the front of this return. **Do not remit amounts of \$10.00 or less.**
- A late filing fee may be assessed for failure to file this return by the last day of February.
- Complete form and retain a copy.

WITHHOLDING

City tax liability from wages as shown on Form IT-11

CITY NAME	NUMBER OF W-2's (RECORDS)	City tax liability from wages as shown on Form IT-11					TOTAL WITHHOLDING PER IT-11's	WITHHOLDING PER EMPLOYEES' W-2's	DIFFERENCE BETWEEN IT-11's AND W-2's*
		FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER				
Columbus									
Alternate Columbus**									
TOTALS									

** For additional tax due from residents working in cities with a lower tax rate.

↑
Please do not
remit amounts
of \$10.00 or less.

Mail this original form and all W-2s to:

Columbus Income Tax Division
W-2/IT-13 Section
PO Box 182437
Columbus, Ohio 43218-2437

*Please explain any discrepancy shown in the above "Difference Between IT-11s and W-2s" column if applicable:

 Check this box to authorize the transfer of any overpayment shown in the "Difference Between IT-11s and W-2s" column to the first quarter of 2021.
SIGNATURE

OFFICER NAME (Please print) _____

OFFICER SIGNATURE _____

OFFICER TITLE _____

DATE _____