

WITHHOLDING TAX RECONCILIATION

Village of Malta
Income Tax Department
P.O. Box 307
Malta, Ohio 43758

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

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

LEGIBLE COPIES OF W-2 FORMS MUST
ACCOMPANY THIS FORM BY FEB 29, 2025

3. Total Income Tax Withheld from compensation during
2024 for:

1st Quarter ending March 31 \$ _____

2nd Quarter ending June 30 \$ _____

3rd Quarter ending September 30 \$ _____

4th Quarter ending December 31 \$ _____

4. Total Amount Withheld _____

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