

Division of Taxation --- City of Solon
34200 Bainbridge Rd. – Solon, OH 44139

Form S-W3

Reconciliation of City Income Tax Withheld and Transmittal of W-2 Forms for 20__

MONTHLY PAYMENTS

JAN.	_____	JULY	_____
FEB.	_____	AUG.	_____
MAR.	_____	SEPT.	_____
APRIL	_____	OCT.	_____
MAY	_____	NOV.	_____
JUNE	_____	DEC.	_____

Federal Employer
Identification No. _____

NAME _____

ADDRESS _____

CITY _____

STATE _____ ZIP _____

QUARTERLY PAYMENTS

1 st Qtr.	_____	2 nd Qtr.	_____
3 rd Qtr.	_____	4 th Qtr.	_____

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- 1) Number of W-2 Forms attached _____
 - 2) Total Taxable Wages as reported on
W-2 Forms attached _____
 - 3) Solon Tax Rate _____ x 2%
 - 4) Tax Liability \$ _____
 - 5) Total City Tax withheld as remitted
on Form S-941 for year \$ _____
 - 6) Difference between line 4 and 5, other
than rounding _____

I have examined this return and to the best of my knowledge it is correct.

Signature	Title	Date
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