City of Columbus, Income Tax Division Joint Economic Development District/Zone (JEDD(Z))

## **§IT-13J**

## **Reconciliation of Quarterly Returns of Income Tax Withheld From Wages**

| For Calendar Year 2011 EIN/FID NUMBER  |                            |                                       |                                       |                 | <ul> <li>Attach W-2s or Magnetic Media (CD etc.) to the back of this return. Visit www.columbustax.net for our "Magnetic Media" filing requirements or call the Withholding Section at (614) 645-8368.</li> <li>Do not enclose quarterly returns with this form. Mail quarterly returns separately.</li> <li>This annual reconciliation does not substitute for the filing of quarterly returns.</li> <li>Attach check (if any) to the front of this return.</li> </ul> |  |                                  |                                     |  |
|--|----------------------------|---------------------------------------|---------------------------------------|-----------------|---|--|----------------------------------|-------------------------------------|--|
| (Do not remit amounts less than \$1.00).  • A late filing fee may be assessed for failure to file th by February 29th. Returns received by March 1st will considered timely filed.  • Complete and retain Taxpayer's Copy. |                            |                                       |                                       |                 |   |  |                                  |                                     |  |
| JEDD(Z) NAME   | NUMBER<br>OF<br>W-2s       | -                                     |                                       |                 | Return of Tax Withhel   | TOTAL                                      | WITHHOLDING<br>PER<br>EMPLOYEES' | DIFFERENCE<br>BETWEEN<br>IT-11s AND |  |
| North Pickaway<br>County JEDD  | (Records)                  |                                       |                                       |                 |   | PER IT-11s                                 | W-2s                             | W-2s                                |  |
| Prairie-Obetz JEDZ   |                            |                                       |                                       |                 |   |  |                                  |                                     |  |
|  |                            |                                       |                                       |                 | TOTALS  |  |                                  |                                     |  |
| NAME OF OFFICER (Plea  | se Print)                  |                                       |                                       | SIGNATI         | JRE OF OFFICER  |  |                                  |                                     |  |
| OFFICERTITLE   |                            |                                       |                                       | DATE            | DATE  |  |                                  |                                     |  |
| the front of this  | side of this<br>form. File | s form. If you can be the original of | alculate an amou<br>this form and W-2 | nt owed, attach |   |  |                                  |                                     |  |
| Columbus Income Tax Division<br>W-2/IT-13 Section<br>50 W. Gay Street, 4th Floor<br>Columbus, Ohio 43215-9037  |                            |                                       |                                       |                 | E-  | Office Use Only: E-Media Uploaded on:  By: |                                  |                                     |  |

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