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| 1. EMPLOYER NAME AND ADDRESS | 2. FEDERAL EMPLOYER IDENTIFICATION NUMBER |
| | DUE ON OR BEFORE 2/28/2021 |

| SUMMARY OF WITHHOLDING TAX PAID | | |
|-----------------------------------|-----------------------------------|----------------------|
| MONTH/QUARTER | TAX WITHHELD | WITHHOLDING TAX PAID |
| January | | |
| February | | |
| March | | |
| FIRST QUARTER TOTAL | | |
| April | | |
| May | | |
| June | | |
| SECOND QUARTER TOTAL | | |
| July | | |
| August | | |
| September | | |
| THIRD QUARTER TOTAL | | |
| October | | |
| November | | |
| December | | |
| FOURTH QUARTER TOTAL | | |
| | TOTAL WITHHOLDING TAX PAID | 3. |
| NUMBER OF W-2 FORMS ATTACHED | | 4. |
| TOTAL TAX WITHHELD PER W-2(S) | | 5. |
| BALANCE DUE | | 6. |
| OVERPAYMENT - ATTACH EXPLANATION* | | 7. |
| TOTAL PAYROLL | | 8. |

*SUBMIT A LETTER EXPLAINING THE OVERPAYMENT AND REQUESTING A REFUND.

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| 9. SIGNATURE | 10. NAME AND TITLE (Please Print) | 11. DATE |
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INSTRUCTIONS FOR EMPLOYER'S ANNUAL RECONCILIATION OF INCOME TAX WITHHELD

- Check identification information in Box 1 and Box 2. If incorrect, make corrections and file Notice of Change or Discontinuance, Form F-6-IT.
 - Enter tax withheld and tax payment information in the Summary of Withholding Tax Paid section.
 - Enter the total withholding tax paid in Box 3.
 - Enter the number of W-2 forms attached in Box 4.
 - Enter the amount of tax withheld per the W-2 forms attached in Box 5. **Attach an adding machine tape totaling the W-2 forms or include copies of the computer generated summary W-2 forms.**
 - If the withholding tax paid (Box 3) is less than the tax withheld per the W-2 forms (Box 5), enter the balance due in Box 6. The balance due must be paid in full with this FW-3 form. Make remittance payable to: FLINT CITY TREASURER
 - If the withholding tax paid (Box 3) is greater than the tax withheld per the W-2 forms (Box 5), enter the overpayment in Box 7. To receive a refund of any overpayment, submit a letter explaining the overpayment and requesting a refund.
 - If the withholding tax paid (Box 3) equals the tax withheld per the W-2 forms (Box 5), enter a zero (0) in Boxes 6 and 7.
 - Sign the return in box 9; Print your name and title in Box 10; and Enter the date signed in Box 11.
 - Attach the required copies of the W-2 forms (or electronic media) and payment for any balance due to the completed FW-3 form and mail to:
**CITY OF FLINT INCOME TAX DEPARTMENT, WITHHOLDING TAX SECTION, PO BOX 529,
EATON RAPIDS, MI 48827-0529 OR PAY ONLINE AT: WWW.CITYOFFLINT.COM**
- *PLEASE VISIT www.cityofflint.com/IncomeTax/forms.asp FOR ELECTRONIC W2 FILING SPECIFICATIONS