

**2020 MW-3 CITY OF MUSKEGON 2020**  
**EMPLOYER'S ANNUAL RECONCILIATION OF INCOME TAX WITHHELD**

*DUE ON OR BEFORE*  
*MARCH 1, 2021*

**SUMMARY OF WITHHOLDING TAX PAID**

<b>MONTH/QUARTER</b>	<b>MONTHLY RETURN PAYMENTS</b>	<b>QUARTERLY RETURN PAYMENTS</b>
JANUARY		
FEBRUARY		
MARCH		
<b>FIRST QUARTER</b>		
APRIL		
MAY		
JUNE		
<b>SECOND QUARTER</b>		
JULY		
AUGUST		
SEPTEMBER		
<b>THIRD QUARTER</b>		
OCTOBER		
NOVEMBER		
DECEMBER		
<b>FOURTH QUARTER</b>		
	TOTAL WITHHOLDING TAX PAID>>>>>>>>>>	1.

NUMBER OF W-2 FORMS ATTACHED	2.
TOTAL LOCAL WAGES	3.
TOTAL TAX WITHHELD PER W-2'S	4.
BALANCE DUE	5.
OVERPAYMENT- Attach explanation	6.

SIGNATURE	TITLE	PHONE	DATE

- Check Federal Employer Identification Number. If incorrect, make corrections and file Notice of Change or Discontinuance, Form M-6-IT.
- Enter withholding tax payment information in the Summary of Withholding Tax Paid Section.
- Enter the total withholding tax paid in Box 1.
- Enter the number of W-2 forms attached in Box 2.
- Enter the total of Local Wages in Box 3.
- Enter the amount of Local tax withheld per the W-2 forms attached in Box 4. Attach an adding machine tape totaling W-2 forms or include copies of the computer generated summary W-2 forms.
- If the withholding tax paid (Box 1) is less than the tax withheld per the W-2 forms (Box 4), enter the balance due in Box 5. The Balance must be paid in full with this return. Make remittances payable to: **CITY OF MUSKEGON**.
- If the withholding tax paid (Box 1) is greater than the tax withheld per the W-2 forms (Box 4), enter the overpayment in Box 6.  
*To receive a refund of any overpayment, submit a letter explaining the overpayment and requesting a refund*
- If the withholding tax paid (Box 1) equals the tax withheld per the W-2 forms (Box 4), enter a zero (0) in Boxes 5 and 6.
- Sign the return, Enter your title, Phone number, And Enter the dated signed.
- Attach the required copies of the W-2 forms and payment for any balance due to the completed MW-3 form and mail to: **INCOME TAX DEPARTMENT, P.O. BOX, MUSKEGON, MI 49443-0029.**