MONTHLY MEDICARE TAX LIABILITY LEDGER

Medicare Tax Payable

Company Name:

Month / Year:

EIN:

EE Tax Rate:

ER Tax Rate:

GL Account No:

DATE	REF / PAY RUN	EMPLOYEE NAME / DESCRIPTION	GROSS TAXABLE WAGES	EMPLOYEE SHARE (1.45%)	EMPLOYER SHARE (1.45%)	ADD. MEDICARE (0.9%)	TOTAL MONTHLY LIABILITY	BALANCE PAYABLE
TOTALS								

Monthly Liability Summary & Payments

Total Month's Liability:

Less: Monthly IRS Deposit/Payment:

Date of Payment / EFTPS Ref:

Ending Balance:

Prepared By:

_____

Date:

_____

Reviewed By:

_____