

QUARTERLY STATE AND LOCAL PAYROLL TAX RECONCILIATION

Reconciliation Statement

Company Name:

Federal EIN:

State Tax ID:

Local Tax ID:

Calendar Year:

Quarter (Q1/Q2/Q3/Q4):

State:

Locality / City:

1. Monthly Payroll Summary

Month	Gross Payroll (\$)	Subject Wages (\$)	SIT Withheld (\$)	SUI Withheld (\$)	Local Tax Withheld (\$)	Total Taxes Withheld (\$)
Month 1						
Month 2						
Month 3						
Total Quarter						

2. Tax Liability vs. Deposits Reconciliation

Tax Jurisdiction & Category	Total Tax Liability (\$)	Total Tax Deposited (\$)	Variance / Balance Due (Overpayment) (\$)
State Income Tax (SIT)			
State Unemployment Insurance (SUI/SUTA)			
State Disability Insurance (SDI) / Other State Tax			
Local Income Tax 1			
Local Income Tax 2			
Total Reconciliation			

3. Explanation of Variances (If Any)

Prepared By (Signature / Name)

Title

Date