CITY OF NAPOLEON INCOME TAX DEPARTMENT P.O. BOX 151 NAPOLEON, OHIO 43545-0151

IMPORTANT TAX INFORMATION

EMPLOYER MUNICIPAL QUARTERLY WITHHOLDING BOOKLET

PLEASE USE THESE LABELS TO RETURN YOUR QUARTERLY WITHHOLDING PAYMENTS AND ANNUAL PAYROLL RECONCILIATION TO THE CITY. CITY OF NAPOLEON INCOME TAX DEPARTMENT P.O. BOX 151 NAPOLEON, OHIO 43545-0151

CITY OF NAPOLEON INCOME TAX DEPARTMENT P.O. BOX 151 NAPOLEON, OHIO 43545-0151

CITY OF NAPOLEON INCOME TAX DEPARTMENT P.O. BOX 151 NAPOLEON, OHIO 43545-0151 CITY OF NAPOLEON INCOME TAX DEPARTMENT P.O. BOX 151 NAPOLEON, OHIO 43545-0151

CITY OF NAPOLEON INCOME TAX DEPARTMENT P.O. BOX 151 NAPOLEON, OHIO 43545-0151

INSTRUCTIONS FOR PREPARING AND FILING FORM W-1

WHO MUST FILE:

Each employer within/working within the City of Napoleon, Ohio who employs one or more persons is required to withhold the tax of 1.5 percent (1.5%) from qualifying wages paid and/or earned by all employees at the time such compensation is paid and/or earned, and to file Form W-1 and remit tax to the City Income Tax Department on or before 30 days from end of quarter.

FAILURE TO FILE RETURN AND PAY TAX:

Any taxpayer who shall fail, or refuse to make any return or declaration required by the Ordinance, or any taxpayer who shall refuse to pay the tax, penalties and interest imposed by the Ordinance, or any taxpayer who shall refuse to permit the Finance Director or his duly authorized agent or employee to examine his books, or who shall knowingly make any incomplete, false or fraudulent return, or who shall attempt to avoid the payment of tax, shall be guilty of a misdemeanor and shall be fined not more than \$1000 and/or imprisoned for not more than 6 months. The failure of any taxpayer to receive a return or declaration or form shall not excuse him from making a return or declaration or from paying the tax.

CREDIT CARD INFORMATION:

City of Napoleon accepts credit card payments for Income Tax, Estimated Tax, and Withholding Tax online at www.officialpayments.com. There will be a nominal fee charged for this service.

HOW TO PREPARE THIS FORM:

- Line 1 Enter qualifying wages paid and/or earned to all taxable employees during quarter for which return is made. If no compensation was paid during the quarter, so indicate and return Form W-1 signed.
- Line 2 Enter total ACTUAL tax withheld from taxable employees during the quarter for CITY OF NAPOLEON, OHIO INCOME TAX.
- Line 3 To adjust current payment of actual tax withheld for under payment or overpayment in previous quarter.
- Line 4 Compute 1% interest per month or fraction thereof and penalty of 2% per month and enter total on Line 4 if paid after due date.
- Line 5 Enter total of lines 2, 3 and 4.

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

1. QUALIFYING EARNINGS PAID ALL EMPLOYEES		DOLLARS		Please submit an explanation for any amount on Line 3.	
SUBJECT TO NAPOLEON TAX Tax rate 1.5% (.015)				I hereby certify that the information and statements contained herein are true and correct.	
18x 18te 1.570 (.010)				Herein are true and correct.	
2. NAPOLEON TAX WITHHELD	<u> </u>			(Signed)	
3. ADJUSTMENT OF TAX FOR PRIOR QUARTER (see instructions)				(Official Title)	
4. INTEREST AND PENALTY TOTAL = 3% (INTEREST = 1% AND PENALTY = 2%)				Date	
5. TOTAL DUE				THIS RETURN MUST BE FILED	

If no wages paid this quarter, mark "NONE" and return this form with explanation.

FOR THE PERIOD

DUE ON OR BEFORE

ON OR BEFORE THE DUE DATE SHOWN BELOW ANY RETURNS MAILED MUST BE POSTMARKED ON OR BEFORE DUE DATE TO BE TIMELY FILED

MAKE CHECK OR MONEY ORDER PAYABLE TO: **CITY OF NAPOLEON INCOME TAX DEPARTMENT**

> MAIL TO: CITY OF NAPOLEON INCOME TAX DEPARTMENT P.O. BOX 151 NAPOLEON, OHIO 43545-0151

Notify Income Tax Department promptly of any change in ownership or name and address shown above.

WITHHOLDING RECONCILIATION INSTRUCTIONS

GENERAL INFORMATION

On or before February 28 of each year, each employer must file a withholding reconciliation. Copies of all W-2 forms applicable to the reconciliation must be attached. All W-2's must furnish the name, address, social security number, qualifying wages, city tax withheld, name of city for which tax was withheld, and any other compensation paid to the individual. If copies of the W-2 forms are not available, each employer must provide a listing of all employees subject to Napoleon tax. The listing shall require the same type of information as is required of the W-2 forms as stated above.

Any individual(s) or business entity compensating individuals on a commission or contract labor basis for services rendered in Napoleon city limits must furnish copies of the 1099 or appropriate earnings statement on or before February 28 of each year. All 1099's or earnings statements shall require the same type of information as is required of the W-2 forms as stated above.

SPECIFIC FILING INFORMATION:

The front of the Form W-3 must show a breakdown of all withholding payments made quarterly in the boxes provided. The number of employees, total paid, and the total Napoleon tax withheld boxes must also be completed. Please keep a copy for your records. The completed W-3 form and all attachments must be submitted to the City of Napoleon Income Tax Department, P.O. Box 151, Napoleon, OH 43545-0151, on or before February 28 of each year. Any questions in completing the Form W-3 should be referred to the Department of Taxation – 419-599-2821.

Division of Taxation---City of Napoleon Reconciliation of Napoleon Income Tax Withheld and Transmittal of W-2 Forms for 2014

QUARTERLY PAYMENTS

Please inactivate this account (attach explanation)				
	Signature	Title	Date	
	I have examined this ret	turn and to the best of my	knowledge it is correct	
	Addi	lditional tax due-attach payment		
	6) DIFFERENCE BETWE OTHER THAN ROUND	' ·		
Contact Person (Print Name) Phone	5) TOTAL CITY TAX WITH FOR THE YEAR	HHELD AND REMITTED \$_		
()	4) TAX LIABILITY (LINE 2	2 x LINE 3) \$_		
3rd Qtr 4th Qtr	3) NAPOLEON TAX RATE	_	X 1.5%	
1st Qtr 2nd Qtr	 TOTAL QUALIFYING V REPORTED ON W-2 F 	VAGES TO NAPOLEON AS ORMS ATTACHED		
	I) NUMBER OF W-2 FOR	RIVIS ATTACHED _		

QUARTERLY WITHHOLDING TAX WORKSHEET (Keep for your records - Do not file)

QUARTER <u>ENDING</u>			DATE	AMOUNT	
3/31	4/30				
6/30	7/31				
9/30	10/31				
12/31	1/31				