

# **EMPLOYER'S MUNICIPAL INCOME TAX WITHHOLDING FORMS**



VILLAGE OF NEW LEBANON INCOME TAX DEPARTMENT 198 S CLAYTON RD NEW LEBANON, OH 45345 (937) 687-1341 FAX (937) 687-1213 W-1 2022 Withholding Return W-3 2022 Reconciliation

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#### **GENERAL INFORMATION**

Each employer within or doing business within the Village of New Lebanon who employs one or more persons is required to withhold the tax of 1% from all compensation paid to employees at the time the compensation is paid, and file form W-1 and remit the tax to the Village of New Lebanon Tax Dept., 198 S. Clayton Rd, New Lebanon, Ohio 45345.

**Monthly:** All returns and payments are due on or before the 15th day of each month for the amount withheld during the preceding month.

**Quarterly:** All returns and payments are due on or before the 30th day of the month following each calendar quarter.

Delinquent payments shall be subject to penalty, interest and late filing fee charges as provided for in the New Lebanon Income Tax Rules and Regulations. Postage meter dates are not recognized as a verification of timely filing.

The failure of any employer to receive or procure Form W-1 shall not excuse him/her from making this return or from remitting the tax withheld.

How to prepare this form:

- LINE 1 Enter total compensation paid to all taxable employees during the period for which return is made. If no compensation was paid during the period, so indicate and return form W-1.
- LINE 2 Compute New Lebanon Tax due. (1% times Payroll).
- LINE 3 Enter amount remitted.

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PAYROLL THIS PERIOD      AMOUNT OF NEW LEBANON TAX WITHHELD (1%)      AMOUNT REMITTED		VILLAGE OF NEW LEBANON	I hereby certify that the information and statements contained herein are true and correct.
	\$ _		(Signed)
3. AMOUNT REMITTED	\$_		(Official Title) Date
	\$ _		Federal ID no
TOTAL REMITTANCE	\$ _		THIS RETURN MUST BE FILED ON OR BEFORE THE DUE DATE SHOWN BELOW
ls this a courtesy withholding ☐ Yes ☐ No Is this a final return ☐ Yes ☐ No If yes, attach explanation	on		MAKE CHECK OR MONEY ORDER PAYABLE TO VILLAGE OF NEW LEBANON
NAME AND ADDRESS		ERLY PERIOD EBRUARY, MARCH	MAIL TO: VILLAGE OF NEW LEBANON INCOME TAX DEPT.
	DUE ON OR APRIL 30, 20		198 S CLAYTON RD NEW LEBANON, OHIO 45345 (937) 687-1341
EMPLOYER'S RETURN OF TAX WITHHELD – NE	W LEBAN	VILLAGE OF	O (Attach Explanation) RETURN WITH PAYMEN  I hereby certify that the information and statements
		NEW LEBANON	contained herein are true and correct.
1. PAYROLL THIS PERIOD	\$ _		(Signed) Date
2. AMOUNT OF NEW LEBANON TAX WITHHELD (1%)			Federal ID no.
3. AMOUNT REMITTED			receral ID no.
TOTAL REMITTANCE	\$ _		THIS RETURN MUST BE FILED ON OR BEFORE THE DUE DATE SHOWN BELOW
ls this a courtesy withholding □ Yes □ No Is this a final return □ Yes □ No If yes, attach explanation	on		MAKE CHECK OR MONEY ORDER PAYABLE TO VILLAGE OF NEW LEBANON
NAME AND ADDRESS			MAIL TO: VILLAGE OF NEW LEBANON INCOME TAX DEPT. 198 S CLAYTON RD NEW LEBANON, OHIO 45345 (937) 687-1341

	- NEW LEBANON	LI AMENDI	ED (Attach Explanation) RETURN WITH PAYME
		/ILLAGE OF W LEBANON	I hereby certify that the information and statements contained herein are true and correct.
1. PAYROLL THIS PERIOD	\$		(Signed)
2. AMOUNT OF NEW LEBANON TAX WITHHELD (1%)			(Official Title) Date
3. AMOUNT REMITTED			Federal ID no.
TOTAL REMITTANCE			THIS RETURN MUST BE FILED ON OR BEFORE
ls this a courtesy withholding ☐ Yes ☐ No			THE DUE DATE SHOWN BELOW
ls this a final return ☐ Yes ☐ No If yes, attach e	xplanation		MAKE CHECK OR MONEY ORDER PAYABLE TO VILLAGE OF NEW LEBANON
NAME AND ADDRESS	FOR QUARTERLY	DEDIOD	MAIL TO:
	APRIL, MAY, JUN		VILLAGE OF NEW LEBANON INCOME TAX DEPT.
	DUE ON OR BEFO	ORE	198 S CLAYTON RD NEW LEBANON, OHIO 45345
	JULY 30, 2022		NEW LEBANON, OHIO 45345 (937) 687-1341
1. PAYROLL THIS PERIOD	NE\$\$	/ILLAGE OF W LEBANON	I hereby certify that the information and statements contained herein are true and correct.  (Signed)
s this a final return	xplanation		MAKE CHECK OR MONEY ORDER PAYABLE TO VILLAGE OF NEW LEBANON
		PERIOD	MAIL TO: VILLAGE OF NEW LEBANON
		PERIOD	
NAME AND ADDRESS  Notify the Income Tax Department promptly of any change in FORM W-1	FOR QUARTERLY APRIL, MAY, JUN DUE ON OR BEFO JULY 30, 2022  ownership or name and ac	<b>E</b> DRE	INCOME TAX DEPT. 198 S CLAYTON RD NEW LEBANON, OHIO 45345 (937) 687-1341
Notify the Income Tax Department promptly of any change in FORM W-1	APRIL, MAY, JUN  DUE ON OR BEFG  JULY 30, 2022  ownership or name and ac	E DRE ddress shown ab	INCOME TAX DEPT.  198 S CLAYTON RD  NEW LEBANON, OHIO 45345  (937) 687-1341
Notify the Income Tax Department promptly of any change in FORM W-1	APRIL, MAY, JUN  DUE ON OR BEFG  JULY 30, 2022  ownership or name and ac	E DRE ddress shown ab	INCOME TAX DEPT. 198 S CLAYTON RD NEW LEBANON, OHIO 45345 (937) 687-1341
Notify the Income Tax Department promptly of any change in FORM W-1  EMPLOYER'S RETURN OF TAX WITHHELD	APRIL, MAY, JUN  DUE ON OR BEFG JULY 30, 2022  ownership or name and accommodate  - NEW LEBANON  NE	DRE  ddress shown ab  AMENDI  //ILLAGE OF W LEBANON	INCOME TAX DEPT. 198 S CLAYTON RD NEW LEBANON, OHIO 45345 (937) 687-1341  ED (Attach Explanation) RETURN WITH PAYME  I hereby certify that the information and statements contained herein are true and correct. (Signed)
Notify the Income Tax Department promptly of any change in FORM W-1  EMPLOYER'S RETURN OF TAX WITHHELD  PAYROLL THIS PERIOD	APRIL, MAY, JUN  DUE ON OR BEFG JULY 30, 2022  ownership or name and accompany  NEW LEBANON  NE	DRE  ddress shown ab  AMENDI  //ILLAGE OF W LEBANON	INCOME TAX DEPT. 198 S CLAYTON RD NEW LEBANON, OHIO 45345 (937) 687-1341  ED (Attach Explanation) RETURN WITH PAYME  I hereby certify that the information and statements contained herein are true and correct. (Signed)
Notify the Income Tax Department promptly of any change in FORM W-1  EMPLOYER'S RETURN OF TAX WITHHELD  PAYROLL THIS PERIOD	APRIL, MAY, JUN  DUE ON OR BEFO JULY 30, 2022  ownership or name and ac  - NEW LEBANON  NE  NE	DRE  ddress shown ab  AMENDI  //ILLAGE OF  W LEBANON	INCOME TAX DEPT. 198 S CLAYTON RD NEW LEBANON, OHIO 45345 (937) 687-1341  ED (Attach Explanation) RETURN WITH PAYME  I hereby certify that the information and statements contained herein are true and correct. (Signed)
Notify the Income Tax Department promptly of any change in FORM W-1  EMPLOYER'S RETURN OF TAX WITHHELD  I. PAYROLL THIS PERIOD	APRIL, MAY, JUN  DUE ON OR BEFG JULY 30, 2022  ownership or name and accompany  NE  NE  S  S  S  S  S  S  S  S  S  S  S  S  S	DRE  ddress shown ab  AMENDI  //ILLAGE OF W LEBANON	INCOME TAX DEPT. 198 S CLAYTON RD NEW LEBANON, OHIO 45345 (937) 687-1341   ED (Attach Explanation) RETURN WITH PAYME  I hereby certify that the information and statements contained herein are true and correct. (Signed)  (Official Title) Date Federal ID no  THIS RETURN MUST BE FILED ON OR BEFORE
Notify the Income Tax Department promptly of any change in	APRIL, MAY, JUN  DUE ON OR BEFG JULY 30, 2022  ownership or name and ad  - NEW LEBANON  NE	DRE  ddress shown ab  AMENDI  //ILLAGE OF W LEBANON	INCOME TAX DEPT. 198 S CLAYTON RD NEW LEBANON, OHIO 45345 (937) 687-1341   ED (Attach Explanation) RETURN WITH PAYME  I hereby certify that the information and statements contained herein are true and correct.  (Signed)  (Official Title) Date  Federal ID no  THIS RETURN MUST BE FILED ON OR BEFORE THE DUE DATE SHOWN BELOW  MAKE CHECK OR MONEY ORDER PAYABLE TO
Notify the Income Tax Department promptly of any change in FORM W-1  EMPLOYER'S RETURN OF TAX WITHHELD  1. PAYROLL THIS PERIOD	APRIL, MAY, JUN  DUE ON OR BEFG JULY 30, 2022  ownership or name and ad  - NEW LEBANON  NE	DRE  ddress shown ab  AMENDI  //ILLAGE OF W LEBANON	INCOME TAX DEPT.  198 S CLAYTON RD NEW LEBANON, OHIO 45345 (937) 687-1341  FED (Attach Explanation) RETURN WITH PAYMENT PAYMEN

**EMPLOYER'S RETURN OF TAX WITHHELD - NEW LEBANON** 

1. PAYROLL THIS PERIOD		LLAGE OF LEBANON	I hereby certify that the information and statements contained herein are true and correct.
3. AMOUNT REMITTED  TOTAL REMITTANCE	\$		(Signed)
TOTAL REMITTANCE	\$		(Official Title) Date
	\$		Federal ID no.
	\$		THIS RETURN MUST BE FILED ON OR BEFORE THE DUE DATE SHOWN BELOW
Is this a courtesy withholding ☐ Yes ☐ No Is this a final return			MAKE CHECK OR MONEY ORDER PAYABLE TO VILLAGE OF NEW LEBANON
	OR QUARTERLY F		MAIL TO: VILLAGE OF NEW LEBANON INCOME TAX DEPT.
	UE ON OR BEFOR		198 S CLAYTON RD NEW LEBANON, OHIO 45345 (937) 687-1341
EMPLOYER'S RETURN OF TAX WITHHELD – NEW	VII	☐ AMENDED	(Attach Explanation) RETURN WITH PAYME  I hereby certify that the information and statements contained herein are true and correct.
PAYROLL THIS PERIOD	\$		(Signed)
2. AMOUNT OF NEW LEBANON TAX WITHHELD (1%)			(Official Title) Date
3. AMOUNT REMITTED		1	Federal ID no.
FOTAL REMITTANCE			THIS RETURN MUST BE FILED ON OR BEFOR
s this a courtesy withholding			THE DUE DATE SHOWN BELOW
ls this a final return ☐ Yes ☐ No If yes, attach explanation			MAKE CHECK OR MONEY ORDER PAYABLE TO VILLAGE OF NEW LEBANON
JL DL	OR QUARTERLY F JLY, AUGUST, SE UE ON OR BEFOR CTOBER 30, 2022	PTEMBER RE	MAIL TO: VILLAGE OF NEW LEBANON INCOME TAX DEPT. 198 S CLAYTON RD NEW LEBANON, OHIO 45345 (937) 687-1341

EMPLOYER'S RETURN OF TAX WITHHELD -	IALAA LEDAI	VILLAGE OF NEW LEBANON	(Attach Explanation) <b>RETURN WITH PAYMENT</b> I hereby certify that the information and statements contained herein are true and correct.
PAYROLL THIS PERIOD	\$		(Signed)
2. AMOUNT OF NEW LEBANON TAX WITHHELD (1%)			(Official Title) Date
3. AMOUNT REMITTED			Federal ID no.
TOTAL REMITTANCE			THIS RETURN MUST BE FILED ON OR BEFORE
Is this a courtesy withholding ☐ Yes ☐ No			THE DUE DATE SHOWN BELOW
Is this a final return $\square$ Yes $\square$ No $\square$ If yes, attach explanation	anation		MAKE CHECK OR MONEY ORDER PAYABLE TO VILLAGE OF NEW LEBANON
NAME AND ADDRESS	FOR OUA	RTERLY PERIOD	MAIL TO:
		, NOVEMBER, DECEMBER	VILLAGE OF NEW LEBANON R INCOME TAX DEPT.
	DUE ON O	D DEEODE	198 S CLAYTON RD
	DUE ON O JANUARY		NEW LEBANON, OHIO 45345 (937) 687-1341
Notify the Income Tax Department promptly of any change in ow FORM W-1  EMPLOYER'S RETURN OF TAX WITHHELD —	·		e.  (Attach Explanation) RETURN WITH PAYMENT
		VILLAGE OF NEW LEBANON	I hereby certify that the information and statements contained herein are true and correct.
PAYROLL THIS PERIOD	\$		(Signed)
2. AMOUNT OF NEW LEBANON TAX WITHHELD (1%)			(Official Title) Date
3. AMOUNT REMITTED			Federal ID no
TOTAL REMITTANCE			THIS RETURN MUST BE FILED ON OR BEFORE
	*		THE DUE DATE SHOWN BELOW
	anation		MAKE CHECK OR MONEY ORDER PAYABLE TO VILLAGE OF NEW LEBANON
NAME AND ADDRESS			198 S CLAYTON RD NEW LEBANON, OHIO 45345
Is this a courtesy withholding    Yes    No    If yes, attach explanation    If yes, attach explanation    If yes, attach explanation    No    If yes, attach explanation    If yes, attach expl	FOR QUAF OCTOBER DUE ON O JANUARY	R, NOVEMBER, DECEMBER R BEFORE 30, 2023	MAKE CHECK OR MONEY ORDER PAYABLE TO VILLAGE OF NEW LEBANON  MAIL TO: VILLAGE OF NEW LEBANON INCOME TAX DEPT. 198 S CLAYTON RD NEW LEBANON, OHIO 45345 (937) 687-1341
EMPLOYER'S RETURN OF TAX WITHHELD -	NEW LEBA	NON   AMENDED	(Attach Explanation) RETURN WITH PAYMEN
		VILLAGE OF NEW LEBANON	I hereby certify that the information and statements contained herein are true and correct.  (Signed)
1. PAYROLL THIS PERIOD	\$		(Official Title) Date
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3. AMOUNT REMITTED	\$		Federal ID no
TOTAL REMITTANCE	\$		THIS RETURN MUST BE FILED ON OR BEFORE THE DUE DATE SHOWN BELOW
Is this a courtesy withholding ☐ Yes ☐ No Is this a final return ☐ Yes ☐ No If yes, attach expl	anation		MAKE CHECK OR MONEY ORDER PAYABLE TO VILLAGE OF NEW LEBANON
NAME AND ADDRESS		RTERLY PERIOD I, NOVEMBER, DECEMBER	INCOME TAX DEFT.
	DUE ON O JANUARY		198 S CLAYTON RD NEW LEBANON, OHIO 45345 (937) 687-1341

#### 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 New Lebanon 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 commission or contract labor basis 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. Failure to provide this information can result in a \$500.00 penalty.

#### SPECIFIC FILING INFORMATION

The front of the FORM W-3 must show a breakdown of all withholding payments made either quarterly or monthly in the boxes provided. The number of employees, total paid, New Lebanon taxable wages and the total New Lebanon tax withheld boxes must also be completed. Please keep a copy for your records. An explanation of any difference, other than rounding, between the tax liability and the tax remitted must be submitted. The completed W-3 form and all attachments must be submitted to the Village of New Lebanon Income Tax Department, 198 S. Clayton, New Lebanon, OH 45345, on or before February 28 of each year. Any questions in completing the Form W-3 should be referred to the Income Tax Department.

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# VILLAGE OF NEW LEBANON ANNUAL RECONCILIATION RETURN

#### W-2'S MUST BE ATTACHED

MAIL TO: INCOME TAX DEPARTMENT

VILLAGE OF NEW LEBANON 198 S CLAYTON RD

NEW LEBANON, OHIO 45345 PHONE: (937) 687-1341

FOR TAX YEAR ENDING 2022 DUE FEBRUARY 28, 2023

PAYMENT ENCLOSED

REFUND REQUESTED

SEE INSTRUCTIONS

FIN:

JANUARY	JULY
FEBRUARY	AUGUST
MARCH	SEPTEMBER
1ST QUARTER	3RD QUARTER
APRIL	OCTOBER
MAY	NOVEMBER
JUNE	DECEMBER
2ND QUARTER	4TH QUARTER

# ALL SECTIONS MUST BE COMPLETED 1. TOTAL NUMBER NEW LEBANON W-2'S 2. NEW LEBANON WAGES SUBJECT TO WITHHOLDING TAX \$ 3. AMOUNT OF NEW LEBANON TAX WITHHELD \$ 4. AMOUNT OF

I hereby certify that the information and	statements contained herein are true and correct.
Signed	Title
Federal ID no	Date
Phone no.	

REMITTED

5. ADJUSTMENTS

6. TOTAL NEW LEBANON TAX DUE

FORM W3

NAME:



# VILLAGE OF NEW LEBANON ANNUAL RECONCILIATION RETURN

#### W-2'S MUST BE ATTACHED

MAIL TO: INCOME TAX DEPARTMENT

VILLAGE OF NEW LEBANON

198 S CLAYTON RD

NEW LEBANON, OHIO 45345 PHONE: (937) 687-1341

FOR TAX YEAR ENDING 2022 DUE FEBRUARY 28, 2023

PAYMENT ENCLOSED □

REFUND REQUESTED □

SEE INSTRUCTIONS

NAME: FIN:

FEBRUARY AUGUST

MARCH SEPTEMBER

1ST QUARTER 3RD QUARTER

APRIL OCTOBER

MAY NOVEMBER

JUNE DECEMBER

2ND QUARTER 4TH QUARTER

JULY

JANUARY

ALL SECTIONS MUST BE COMPLETED					
1.	TOTAL NUMBER NEW LEBANON W-2'S				
2.	NEW LEBANON WAGE SUBJECT TO WITHHOLDING TAX				
3.	AMOUNT OF NEW LEE				
4.	AMOUNT OF REMITTED	\$			
5.	ADJUSTMENTS	\$			
6.	TOTAL NEW LEBANON TAX DUE	\$			

I hereby certify that the information and statements contained herein are true and correct.

Signed \_\_\_\_\_\_ Title \_\_\_\_\_

Federal ID no. \_\_\_\_\_\_ Date \_\_\_\_\_

Phone no. \_\_\_\_\_

FORM W3



# VILLAGE OF NEW LEBANON ANNUAL RECONCILIATION RETURN

#### W-2'S MUST BE ATTACHED

MAIL TO: INCOME TAX DEPARTMENT

VILLAGE OF NEW LEBANON

198 S CLAYTON RD

NEW LEBANON, OHIO 45345 PHONE: (937) 687-1341

FOR TAX YEAR ENDING 2022 DUE FEBRUARY 28, 2023

PAYMENT ENCLOSED □

REFUND REQUESTED □

SEE INSTRUCTIONS

NAME: FIN:

JANUARY	JULY
FEBRUARY	AUGUST
MARCH	SEPTEMBER
1ST QUARTER	3RD QUARTER
APRIL	OCTOBER
MAY	NOVEMBER
JUNE	DECEMBER
2ND QUARTER	4TH QUARTER

ALL SECTIONS MUST BE COMPLETED				
1.	TOTAL NUMBER NEW LEBANON W-2'S			
2.	NEW LEBANON WAGE SUBJECT TO WITHHOLDING TAX			
3.	AMOUNT OF NEW LEE	\$ANON \$		
4.	AMOUNT OF REMITTED	\$		
5.	ADJUSTMENTS	\$		
6.	TOTAL NEW LEBANON TAX DUE	\$		

I hereby certify that the information and statemen	nts contained herein are true and correct.
Signed	Title
Federal ID no	Date
Phone no.	

# WITHHOLDING TAX WORKSHEET

(Keep for your records - Do not file)

Voucher <u>Number</u>	Quarter <u>Ending</u>	Payment <u>Due</u>	Check Number	<u>Date</u>	Amount Paid
1.	3/31	4/30			
2.	6/30	7/30			
3.	9/30	10/30			<del></del>
4.	12/31	1/30			
				Total Amount Paid	

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(Keep for your records - Do not file)

Voucher <u>Number</u>	Quarter <u>Ending</u>	Payment <u>Due</u>	Check Number	<u>Date</u>	Amount Paid
1.	3/31	4/30			
2.	6/30	7/30			
3.	9/30	10/30			
4.	12/31	1/30			

Total Amount Paid	

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(Keep for your records - Do not file)

Voucher <u>Number</u>	Quarter <u>Ending</u>	Payment <u>Due</u>	Check Number	<u>Date</u>	Amount Paid
1.	3/31	4/30			
2.	6/30	7/30			
3.	9/30	10/30			
4.	12/31	1/30		- <u></u> -	

otal Amount Paid	