

VILLAGE OF MCCONNELSVILLE  
INCOME TAX DEPARTMENT  
9 WEST MAIN STREET  
MCCONNELSVILLE OH 43756

**IMPORTANT**

**2016 EMPLOYER'S MONTHLY  
RETURNS OF TAX WITHHELD**

*This packet contains  
withholding tax forms  
you are required to file.*

The Rate for 2016 is 1% (.01)

PLEASE DO NOT DESTROY -  
IMPORTANT TAX FORMS

Dear Employer:

This is your 2016 Employer's Monthly Return of Tax Withheld package. Included are twelve monthly forms for your filing requirements. We have also included the Employer Reconciliation of Income Tax Withheld for 2016. **This is the only time these forms will be sent. They will not be sent each month. Please keep for further payments.**

If you have any questions regarding the below forms, please contact us at 9 West Main Street, McConnelsville, Ohio 43756. If you wish to contact by telephone, our number is (740) 962-3163, or email: ehemry@vomcc.com.

Sincerely,

INCOME TAX ADMINISTRATOR

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN NAME OR ADDRESS.  
Form W-1

**TAX RATE 1%**

**EMPLOYER'S RETURN OF TAX WITHHELD**

VILLAGE OF MCCONNELSVILLE  
INCOME TAX DEPARTMENT  
9 WEST MAIN STREET  
MCCONNELSVILLE, OHIO 43756  
PHONE (740) 962-3163

FOR THE PERIOD ENDING  
**January 31, 2016**

DUE ON OR BEFORE  
**February 15, 2016**

FID# \_\_\_\_\_ PHONE # \_\_\_\_\_

- |   |          |
|---|----------|
| 1. Total Wages subject to McConnelsville Tax: | \$ _____ |
| 2. McConnelsville Taxes due @ 1%              | \$ _____ |
| 3. Adjustment to prior return                 | \$ _____ |
| 4. Penalty                                    | \$ _____ |
| 5. Interest                                   | \$ _____ |
| 6. Total Balance/Due                          | \$ _____ |
| 7. Amount Paid                                | \$ _____ |

ACCT# \_\_\_\_\_ SS#/ FED# \_\_\_\_\_

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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TAX RATE 1%

Form W-1

**EMPLOYER'S RETURN OF TAX WITHHELD**

VILLAGE OF MCCONNELSVILLE  
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9 WEST MAIN STREET  
MCCONNELSVILLE, OHIO 43756  
PHONE (740) 962-3163

FID# \_\_\_\_\_ PHONE # \_\_\_\_\_

ACCT#

SS#/ FED#

FOR THE PERIOD ENDING

**February 28, 2016**

DUE ON OR BEFORE

**March 15, 2016**

- 1. Total Wages subject to McConnellsville Tax: \$ \_\_\_\_\_
- 2. McConnellsville Taxes due @ 1% \$ \_\_\_\_\_
- 3. Adjustment to prior return \$ \_\_\_\_\_
- 4. Penalty \$ \_\_\_\_\_
- 5. Interest \$ \_\_\_\_\_
- 6. Total Balance/Due \$ \_\_\_\_\_
- 7. Amount Paid \$ \_\_\_\_\_

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

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature Date

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TAX RATE 1%

Form W-1

**EMPLOYER'S RETURN OF TAX WITHHELD**

VILLAGE OF MCCONNELSVILLE  
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9 WEST MAIN STREET  
MCCONNELSVILLE, OHIO 43756  
PHONE (740) 962-3163

FID# \_\_\_\_\_ PHONE # \_\_\_\_\_

ACCT#

SS#/ FED#

FOR THE PERIOD ENDING

**March 31, 2016**

DUE ON OR BEFORE

**April 15, 2016**

- 1. Total Wages subject to McConnellsville Tax: \$ \_\_\_\_\_
- 2. McConnellsville Taxes due @ 1% \$ \_\_\_\_\_
- 3. Adjustment to prior return \$ \_\_\_\_\_
- 4. Penalty \$ \_\_\_\_\_
- 5. Interest \$ \_\_\_\_\_
- 6. Total Balance/Due \$ \_\_\_\_\_
- 7. Amount Paid \$ \_\_\_\_\_

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

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature Date

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TAX RATE 1%

Form W-1

**EMPLOYER'S RETURN OF TAX WITHHELD**

VILLAGE OF MCCONNELSVILLE  
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9 WEST MAIN STREET  
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FID# \_\_\_\_\_ PHONE # \_\_\_\_\_

ACCT#

SS#/ FED#

FOR THE PERIOD ENDING

**April 30, 2016**

DUE ON OR BEFORE

**May 15, 2016**

- 1. Total Wages subject to McConnellsville Tax: \$ \_\_\_\_\_
- 2. McConnellsville Taxes due @ 1% \$ \_\_\_\_\_
- 3. Adjustment to prior return \$ \_\_\_\_\_
- 4. Penalty \$ \_\_\_\_\_
- 5. Interest \$ \_\_\_\_\_
- 6. Total Balance/Due \$ \_\_\_\_\_
- 7. Amount Paid \$ \_\_\_\_\_

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

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature Date

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Form W-1

TAX RATE 1%

**EMPLOYER'S RETURN OF TAX WITHHELD**

VILLAGE OF MCCONNELSVILLE  
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PHONE (740) 962-3163

FID# \_\_\_\_\_ PHONE # \_\_\_\_\_

FOR THE PERIOD ENDING  
**May 31, 2016**

DUE ON OR BEFORE  
**June 15, 2016**

ACCT#

SS#/ FED#

- 1. Total Wages subject to McConnsville Tax: \$ \_\_\_\_\_
- 2. McConnsville Taxes due @ 1% \$ \_\_\_\_\_
- 3. Adjustment to prior return \$ \_\_\_\_\_
- 4. Penalty \$ \_\_\_\_\_
- 5. Interest \$ \_\_\_\_\_
- 6. Total Balance/Due \$ \_\_\_\_\_
- 7. Amount Paid \$ \_\_\_\_\_

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

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature Date

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Form W-1

TAX RATE 1%

**EMPLOYER'S RETURN OF TAX WITHHELD**

VILLAGE OF MCCONNELSVILLE  
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PHONE (740) 962-3163

FID# \_\_\_\_\_ PHONE # \_\_\_\_\_

FOR THE PERIOD ENDING  
**June 30, 2016**

DUE ON OR BEFORE  
**July 15, 2016**

ACCT#

SS#/ FED#

- 1. Total Wages subject to McConnsville Tax: \$ \_\_\_\_\_
- 2. McConnsville Taxes due @ 1% \$ \_\_\_\_\_
- 3. Adjustment to prior return \$ \_\_\_\_\_
- 4. Penalty \$ \_\_\_\_\_
- 5. Interest \$ \_\_\_\_\_
- 6. Total Balance/Due \$ \_\_\_\_\_
- 7. Amount Paid \$ \_\_\_\_\_

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

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature Date

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Form W-1

TAX RATE 1%

**EMPLOYER'S RETURN OF TAX WITHHELD**

VILLAGE OF MCCONNELSVILLE  
INCOME TAX DEPARTMENT  
9 WEST MAIN STREET  
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PHONE (740) 962-3163

FID# \_\_\_\_\_ PHONE # \_\_\_\_\_

FOR THE PERIOD ENDING  
**July 31, 2016**

DUE ON OR BEFORE  
**August 15, 2016**

ACCT#

SS#/ FED#

- 1. Total Wages subject to McConnsville Tax: \$ \_\_\_\_\_
- 2. McConnsville Taxes due @ 1% \$ \_\_\_\_\_
- 3. Adjustment to prior return \$ \_\_\_\_\_
- 4. Penalty \$ \_\_\_\_\_
- 5. Interest \$ \_\_\_\_\_
- 6. Total Balance/Due \$ \_\_\_\_\_
- 7. Amount Paid \$ \_\_\_\_\_

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

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature Date

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TAX RATE 1%

**EMPLOYER'S RETURN OF TAX WITHHELD**

VILLAGE OF MCCONNELSVILLE  
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PHONE (740) 962-3163

FID# \_\_\_\_\_ PHONE # \_\_\_\_\_

ACCT#

SS#/ FED#

FOR THE PERIOD ENDING  
**August 31, 2016**

DUE ON OR BEFORE  
**September 15, 2016**

- 1. Total Wages subject to McConnelville Tax: \$ \_\_\_\_\_
- 2. McConnelville Taxes due @ 1% \$ \_\_\_\_\_
- 3. Adjustment to prior return \$ \_\_\_\_\_
- 4. Penalty \$ \_\_\_\_\_
- 5. Interest \$ \_\_\_\_\_
- 6. Total Balance/Due \$ \_\_\_\_\_
- 7. Amount Paid \$ \_\_\_\_\_

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

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature Date

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Form W-1

TAX RATE 1%

**EMPLOYER'S RETURN OF TAX WITHHELD**

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PHONE (740) 962-3163

FID# \_\_\_\_\_ PHONE # \_\_\_\_\_

ACCT#

SS#/ FED#

FOR THE PERIOD ENDING  
**September 30, 2016**

DUE ON OR BEFORE  
**October 15, 2016**

- 1. Total Wages subject to McConnelville Tax: \$ \_\_\_\_\_
- 2. McConnelville Taxes due @ 1% \$ \_\_\_\_\_
- 3. Adjustment to prior return \$ \_\_\_\_\_
- 4. Penalty \$ \_\_\_\_\_
- 5. Interest \$ \_\_\_\_\_
- 6. Total Balance/Due \$ \_\_\_\_\_
- 7. Amount Paid \$ \_\_\_\_\_

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

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature Date

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Form W-1

TAX RATE 1%

**EMPLOYER'S RETURN OF TAX WITHHELD**

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FID# \_\_\_\_\_ PHONE # \_\_\_\_\_

ACCT#

SS#/ FED#

FOR THE PERIOD ENDING  
**October 31, 2016**

DUE ON OR BEFORE  
**November 15, 2016**

- 1. Total Wages subject to McConnelville Tax: \$ \_\_\_\_\_
- 2. McConnelville Taxes due @ 1% \$ \_\_\_\_\_
- 3. Adjustment to prior return \$ \_\_\_\_\_
- 4. Penalty \$ \_\_\_\_\_
- 5. Interest \$ \_\_\_\_\_
- 6. Total Balance/Due \$ \_\_\_\_\_
- 7. Amount Paid \$ \_\_\_\_\_

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

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature Date

**EMPLOYER'S RETURN OF TAX WITHHELD**

VILLAGE OF MCCONNELSVILLE  
 INCOME TAX DEPARTMENT  
 9 WEST MAIN STREET  
 MCCONNELSVILLE, OHIO 43756  
 PHONE (740) 962-3163

FOR THE PERIOD ENDING

**November 30, 2016**

DUE ON OR BEFORE

**December 15, 2016**

FID# \_\_\_\_\_ PHONE # \_\_\_\_\_

ACCT# \_\_\_\_\_ SS#/ FED# \_\_\_\_\_

- 1. Total Wages subject to McConnelville Tax: \$ \_\_\_\_\_
- 2. McConnelville Taxes due @ 1% \$ \_\_\_\_\_
- 3. Adjustment to prior return \$ \_\_\_\_\_
- 4. Penalty \$ \_\_\_\_\_
- 5. Interest \$ \_\_\_\_\_
- 6. Total Balance/Due \$ \_\_\_\_\_
- 7. Amount Paid \$ \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Signature Date

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

Form W-1

**EMPLOYER'S RETURN OF TAX WITHHELD**

VILLAGE OF MCCONNELSVILLE  
 INCOME TAX DEPARTMENT  
 9 WEST MAIN STREET  
 MCCONNELSVILLE, OHIO 43756  
 PHONE (740) 962-3163

FOR THE PERIOD ENDING

**December 31, 2016**

DUE ON OR BEFORE

**January 15, 2017**

FID# \_\_\_\_\_ PHONE # \_\_\_\_\_

ACCT# \_\_\_\_\_ SS#/ FED# \_\_\_\_\_

- 1. Total Wages subject to McConnelville Tax: \$ \_\_\_\_\_
- 2. McConnelville Taxes due @ 1% \$ \_\_\_\_\_
- 3. Adjustment to prior return \$ \_\_\_\_\_
- 4. Penalty \$ \_\_\_\_\_
- 5. Interest \$ \_\_\_\_\_
- 6. Total Balance/Due \$ \_\_\_\_\_
- 7. Amount Paid \$ \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Signature Date

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

**EMPLOYER'S RECONCILIATION OF TAX WITHHELD - VILLAGE OF MCCONNELSVILLE, INCOME TAX DEPARTMENT**

Form W-3 9 West Main Street • McConnelville, Ohio 43756 • (740) 962-3163

Income Tax Withheld for the year 2016

- 1. Total number of employees \_\_\_\_\_
- 2. Total payroll subject to tax \$ \_\_\_\_\_
- 3. Withholding tax liability at .01 of line 2 \$ \_\_\_\_\_
- 4. Total remitted for the year (brought over from line 5) \$ \_\_\_\_\_

**PAYMENT SUMMARY**

- 5. Total remitted for the year \$ \_\_\_\_\_
  - 6. Overpayment \$ \_\_\_\_\_ or additional tax due \$ \_\_\_\_\_
- No Taxes or Refunds of less than \$1.00 shall be collected or refunded

ACCT# \_\_\_\_\_ SS#/ FED# \_\_\_\_\_

If additional tax is due, enclose payment with return
Submitted by: _____
Official Title: _____
Date: _____ / _____ / _____

**WITHHOLDING TAX WORKSHEET**

(Keep for your records - Do not file)

<u>Month Ending</u>	<u>Due Date</u>	<u>Check #</u>	<u>Date</u>	<u>Amount</u>
1/31	2/15	_____	_____	_____
2/29	3/15	_____	_____	_____
3/31	4/15	_____	_____	_____
or 1st qtr	4/15	_____	_____	_____
4/30	5/15	_____	_____	_____
5/31	6/15	_____	_____	_____
6/30	7/15	_____	_____	_____
or 2nd qtr	7/15	_____	_____	_____

**WITHHOLDING TAX WORKSHEET**

(Keep for your records - Do not file)

<u>Month Ending</u>	<u>Due Date</u>	<u>Check #</u>	<u>Date</u>	<u>Amount</u>
7/31	8/15	_____	_____	_____
8/31	9/15	_____	_____	_____
9/30	10/15	_____	_____	_____
or 3rd qtr	10/15	_____	_____	_____
10/31	11/15	_____	_____	_____
11/30	12/15	_____	_____	_____
12/31	1/15	_____	_____	_____
or 4th qtr	1/15	_____	_____	_____