



NAME(S) AND ADDRESS:

VILLAGE OF SOUTH ZANESVILLE, OHIO
EMPLOYER'S RETURN OF TAX WITHHELD

PAYMENT 1

PLEASE MAIL THIS FORM TO US - EVEN IF NO TAX IS DUE FOR THE PERIOD

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF SOUTH ZANESVILLE INCOME TAX DEPARTMENT
24 EAST MAIN STREET
SOUTH ZANESVILLE, OHIO 43701

PERIOD OF EMPLOYEE WITHHOLDINGS:

MONTH OF: JANUARY 2020 **Due 2/15**

Number of Taxable Employees: _____

Total Payroll Subject to
South Zanesville Earnings Tax: \$ _____

South Zanesville
Withholding Tax at 1.5%: \$ _____

(APPROVAL SIGNATURE)

(DATE)

(PHONE NUMBER)



NAME(S) AND ADDRESS:

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PAYMENT 2

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24 EAST MAIN STREET
SOUTH ZANESVILLE, OHIO 43701

PERIOD OF EMPLOYEE WITHHOLDINGS:

MONTH OF: FEBRUARY 2020 **Due 3/15**

Number of Taxable Employees: _____

Total Payroll Subject to
South Zanesville Earnings Tax: \$ _____

South Zanesville
Withholding Tax at 1.5%: \$ _____

(APPROVAL SIGNATURE)

(DATE)

(PHONE NUMBER)



NAME(S) AND ADDRESS:

VILLAGE OF SOUTH ZANESVILLE, OHIO
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PAYMENT 3

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24 EAST MAIN STREET
SOUTH ZANESVILLE, OHIO 43701

PERIOD OF EMPLOYEE WITHHOLDINGS:

MONTH OF: MARCH 2020 **Due 4/15**

Number of Taxable Employees: _____

Total Payroll Subject to
South Zanesville Earnings Tax: \$ _____

South Zanesville
Withholding Tax at 1.5%: \$ _____

(APPROVAL SIGNATURE)

(DATE)

(PHONE NUMBER)



VILLAGE OF SOUTH ZANESVILLE, OHIO
EMPLOYER'S RETURN OF TAX WITHHELD

PAYMENT 4

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MAKE CHECK OR MONEY ORDER TO:
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24 EAST MAIN STREET
SOUTH ZANESVILLE, OHIO 43701

NAME(S) AND ADDRESS:

PERIOD OF EMPLOYEE WITHHOLDINGS:

MONTH OF: APRIL 2020 **Due** 5/15

Number of Taxable Employees: _____

Total Payroll Subject to
South Zanesville Earnings Tax: \$ _____

South Zanesville
Withholding Tax at 1.5%: \$ _____

(APPROVAL SIGNATURE)

(DATE)

(PHONE NUMBER)



VILLAGE OF SOUTH ZANESVILLE, OHIO
EMPLOYER'S RETURN OF TAX WITHHELD

PAYMENT 5

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MAKE CHECK OR MONEY ORDER TO:
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24 EAST MAIN STREET
SOUTH ZANESVILLE, OHIO 43701

NAME(S) AND ADDRESS:

PERIOD OF EMPLOYEE WITHHOLDINGS:

MONTH OF: MAY 2020 **Due** 6/15

Number of Taxable Employees: _____

Total Payroll Subject to
South Zanesville Earnings Tax: \$ _____

South Zanesville
Withholding Tax at 1.5%: \$ _____

(APPROVAL SIGNATURE)

(DATE)

(PHONE NUMBER)



VILLAGE OF SOUTH ZANESVILLE, OHIO
EMPLOYER'S RETURN OF TAX WITHHELD

PAYMENT 6

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MAKE CHECK OR MONEY ORDER TO:
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24 EAST MAIN STREET
SOUTH ZANESVILLE, OHIO 43701

NAME(S) AND ADDRESS:

PERIOD OF EMPLOYEE WITHHOLDINGS:

MONTH OF: JUNE 2020 **Due** 7/15

Number of Taxable Employees: _____

Total Payroll Subject to
South Zanesville Earnings Tax: \$ _____

South Zanesville
Withholding Tax at 1.5%: \$ _____

(APPROVAL SIGNATURE)

(DATE)

(PHONE NUMBER)



VILLAGE OF SOUTH ZANESVILLE, OHIO
EMPLOYER'S RETURN OF TAX WITHHELD

PAYMENT 7

PLEASE MAIL THIS FORM TO US - EVEN IF NO TAX IS DUE FOR THE PERIOD

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF SOUTH ZANESVILLE INCOME TAX DEPARTMENT
24 EAST MAIN STREET
SOUTH ZANESVILLE, OHIO 43701

NAME(S) AND ADDRESS:

PERIOD OF EMPLOYEE WITHHOLDINGS:

MONTH OF: JULY 2020 **Due 8/15**

Number of Taxable Employees: _____

Total Payroll Subject to
South Zanesville Earnings Tax: \$ _____

South Zanesville
Withholding Tax at 1.5%: \$ _____

(APPROVAL SIGNATURE)

(DATE)

(PHONE NUMBER)



VILLAGE OF SOUTH ZANESVILLE, OHIO
EMPLOYER'S RETURN OF TAX WITHHELD

PAYMENT 8

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SOUTH ZANESVILLE, OHIO 43701

NAME(S) AND ADDRESS:

PERIOD OF EMPLOYEE WITHHOLDINGS:

MONTH OF: AUGUST 2020 **Due 9/15**

Number of Taxable Employees: _____

Total Payroll Subject to
South Zanesville Earnings Tax: \$ _____

South Zanesville
Withholding Tax at 1.5%: \$ _____

(APPROVAL SIGNATURE)

(DATE)

(PHONE NUMBER)



VILLAGE OF SOUTH ZANESVILLE, OHIO
EMPLOYER'S RETURN OF TAX WITHHELD

PAYMENT 9

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SOUTH ZANESVILLE, OHIO 43701

NAME(S) AND ADDRESS:

PERIOD OF EMPLOYEE WITHHOLDINGS:

MONTH OF: SEPTEMBER 2020 **Due 10/15**

Number of Taxable Employees: _____

Total Payroll Subject to
South Zanesville Earnings Tax: \$ _____

South Zanesville
Withholding Tax at 1.5%: \$ _____

(APPROVAL SIGNATURE)

(DATE)

(PHONE NUMBER)



NAME(S) AND ADDRESS:

VILLAGE OF SOUTH ZANESVILLE, OHIO
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PAYMENT 10

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24 EAST MAIN STREET
SOUTH ZANESVILLE, OHIO 43701

PERIOD OF EMPLOYEE WITHHOLDINGS:

MONTH OF: OCTOBER 2020 **Due 11/15**

Number of Taxable Employees: _____

Total Payroll Subject to
South Zanesville Earnings Tax: \$ _____

South Zanesville
Withholding Tax at 1.5%: \$ _____

(APPROVAL SIGNATURE)

(DATE)

(PHONE NUMBER)



NAME(S) AND ADDRESS:

VILLAGE OF SOUTH ZANESVILLE, OHIO
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PAYMENT 11

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SOUTH ZANESVILLE, OHIO 43701

PERIOD OF EMPLOYEE WITHHOLDINGS:

MONTH OF: NOVEMBER 2020 **Due 12/15**

Number of Taxable Employees: _____

Total Payroll Subject to
South Zanesville Earnings Tax: \$ _____

South Zanesville
Withholding Tax at 1.5%: \$ _____

(APPROVAL SIGNATURE)

(DATE)

(PHONE NUMBER)



NAME(S) AND ADDRESS:

VILLAGE OF SOUTH ZANESVILLE, OHIO
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PAYMENT 12

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SOUTH ZANESVILLE, OHIO 43701

PERIOD OF EMPLOYEE WITHHOLDINGS:

MONTH OF: DECEMBER 2020 **Due 1/15**

Number of Taxable Employees: _____

Total Payroll Subject to
South Zanesville Earnings Tax: \$ _____

South Zanesville
Withholding Tax at 1.5%: \$ _____

(APPROVAL SIGNATURE)

(DATE)

(PHONE NUMBER)

WITHHOLDING TAX RECONCILIATION – VILLAGE OF SOUTH ZANESVILLE

DUE FEBRUARY 28TH, 2021

24 E. MAIN STREET • SOUTH ZANESVILLE, OH 43701 • (740) 454-0492 EXT. 105

INSTRUCTIONS

Copies of W-2's of taxable employees must accompany the filing of this form. Include an adding machine tape showing how you obtained the actual tax withheld. If nonemployee compensation was paid in excess of \$600.00 per individual, copies of 1099's must also accompany this return. Mail Original To: South Zanesville Income Tax Department: ATTENTION TAYLOR BENNETT, 24 E. Main Street, Zanesville, Ohio 43701 on or before February 28, 2021.

NAME(S) AND ADDRESS:

FOR OFFICE USE ONLY

Total number of current South Zanesville Employees: _____

Total South Zanesville payroll for the year \$ _____

Less payroll not subject to tax \$ _____
(Attach explanation)

Payroll subject to tax \$ _____

Withholding Tax Liability at 1.5% \$ _____

Additional Tax Due (*under \$10.00 – do not remit*) \$ _____

(APPROVING SIGNATURE) (DATE)

Total of South Zanesville Income Tax Withheld for Tax Year 2020

(PHONE NUMBER)

Payment 1 ending January 31 \$ _____

Payment 2 ending February 29 \$ _____

Payment 3 ending March 31 \$ _____

Payment 4 ending April 30 \$ _____

Payment 5 ending May 31 \$ _____

Payment 6 ending June 30 \$ _____

Payment 7 ending July 31 \$ _____

Payment 8 ending August 31 \$ _____

Payment 9 ending September 30 \$ _____

Payment 10 ending October 31 \$ _____

Payment 11 ending November 30 \$ _____

Payment 12 ending December 31 \$ _____

Total Remitted for the Tax Year 2020 \$ _____