Dear Employer:

This is your 2016 Employer's Quarterly Return of Tax Withheld package. Included are all four quarterly forms for your convenience. The quarterly forms are due as so indicated. We have also included the Employer Reconciliation of Income Tax Withheld for 2016.

If you have any questions regarding your withholding forms, please contact the Village of Wayne Income Tax Department at 125 Schoolhouse St., Wayne, OH 43466. If you wish to contact by telephone, our number is (419) 288-3075.

Sincerely,

INCOME TAX ADMINISTRATOR

PLEASE NOTE: OUR ADDRESS WAS CHANGED TO: 125 SCHOOLHOUSE ST., WAYNE, OH 43466

If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.

1.	Taxable Earnings paid all Employees	DOLLARS	CENTS	I hereby certify that the information and statements		
	subject to Village of Wayne Income Tax1.			contained herein are true and correct.		
	Is this a courtesy withholding? ☐ YES					
	Is this a final return? ☐ YES ☐ NO			(Signed)		
	If yes, attach explanation			(Official Title) Date		
2.	Actual Tax Withheld in Village of Wayne			Federal ID no		
3.	Adjustment of Tax for prior quarter			THE PETHEN MUST BE DESCRIVED ON OR		
4.	Penalty (\$5.00 per month)4.			THIS RETURN MUST BE <u>RECEIVED</u> ON OR BEFORE THE DUE DATE SHOWN BELOW		
5.	Interest (1% per month)			MAKE CHECK OR MONEY ORDER PAYABLE T		
6.	Total – (Lines 2-5)			WAYNE TAX DEPARTMENT		
NAME AND ADDRESS		FOR THE PERIOD ENDING MARCH 31, 2016		MAIL TO: VILLAGE OF WAYNE INCOME TAX DEPARTMENT		
		MUST BE RECEIVED BY APRIL 15, 2016		125 SCHOOLHOUSE ST., PO BOX 39 WAYNE, OH 43466 TELEPHONE (419) 288-3075		
No	tify the Income Tax Department promptly of any change in Ownership, Nam	ne or Address.				
				enclose self-addressed, stamped envelope		
VII	LLAGE OF WAYNE EMPLOYER'S QUARTERLY RETURN OF			AMENDED RETURN WITH PAYMENT		
VII	LLAGE OF WAYNE EMPLOYER'S QUARTERLY RETURN OF	TAX WITHH	ELD [enclose self-addressed, stamped envelope. AMENDED RETURN WITH PAYMENT		
VII	LLAGE OF WAYNE EMPLOYER'S QUARTERLY RETURN OF Taxable Earnings paid all Employees subject to Village of Wayne Income Tax	TAX WITHH	ELD [enclose self-addressed, stamped envelope. AMENDED RETURN WITH PAYMENT I hereby certify that the information and statements		
VII	Taxable Earnings paid all Employees subject to Village of Wayne Income Tax	TAX WITHH	ELD [AMENDED RETURN WITH PAYMENT I hereby certify that the information and statements contained herein are true and correct.		
VII	Taxable Earnings paid all Employees subject to Village of Wayne Income Tax	TAX WITHH	ELD [enclose self-addressed, stamped envelope. AMENDED RETURN WITH PAYMENT I hereby certify that the information and statements		
VI I 1.	Taxable Earnings paid all Employees subject to Village of Wayne Income Tax	TAX WITHH	ELD [enclose self-addressed, stamped envelope AMENDED RETURN WITH PAYMENT I hereby certify that the information and statements contained herein are true and correct. (Signed)		
1.	Taxable Earnings paid all Employees subject to Village of Wayne Income Tax	TAX WITHH	ELD [I AMENDED RETURN WITH PAYMENT I hereby certify that the information and statements contained herein are true and correct. (Signed)		
1. 2. 3.	Taxable Earnings paid all Employees subject to Village of Wayne Income Tax	TAX WITHH	ELD [enclose self-addressed, stamped envelope AMENDED RETURN WITH PAYMENT 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 RECEIVED ON OR		
1.	Taxable Earnings paid all Employees subject to Village of Wayne Income Tax	TAX WITHH	ELD [enclose self-addressed, stamped envelope AMENDED RETURN WITH PAYMENT I hereby certify that the information and statements contained herein are true and correct. (Signed)		
1. 2. 3. 4. 5.	Taxable Earnings paid all Employees subject to Village of Wayne Income Tax	TAX WITHH	ELD [AMENDED RETURN WITH PAYMENT 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 RECEIVED ON OR		
1. 2. 3. 4. 5. 6.	Taxable Earnings paid all Employees subject to Village of Wayne Income Tax	TAX WITHH	CENTS	enclose self-addressed, stamped envelope AMENDED RETURN WITH PAYMENT I hereby certify that the information and statement contained herein are true and correct. (Signed)		

VILLAGE OF WAYNE EMPLOYER	R'S QUARTERLY RETURN OF	TAX WITHHE	LD 🗆	AMENDE	D RETURN WITH PAYMENT	
Taxable Earnings paid all Employee	98	DOLLARS	CENTS	I hereby	certify that the information and statements	
subject to Village of Wayne Income				contain	ed herein are true and correct.	
Is this a courtesy withholding?						
ls this a final return? ☐ YES ☐ N				(Signed)	
If yes, attach explanation				(Official	Title) Date	
Actual Tax Withheld in Village of Wa	avne 2.			Federal	ID no.	
Adjustment of Tax for prior quarter.						
4. Penalty (\$5.00 per month)					HIS RETURN MUST BE <u>RECEIVED</u> ON OR BEFORE THE DUE DATE SHOWN BELOW	
5. Interest (1% per month)					SE CHECK OR MONEY ORDER PAYABLE TO	
6. Total – (Lines 2-5)				IVIA	WAYNE TAX DEPARTMENT	
NAME AND ADDRESS		FOR THE PERIOD SEPTEMBER 30,			MAIL TO: VILLAGE OF WAYNE INCOME TAX DEPARTMENT	
	y the Income Tax Department promptly of any change in Ownership, Nam			125 SCHOOLHOUSE ST., PO BOX 39 WAYNE, OH 43466 TELEPHONE (419) 288-3075 If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.		
THE PARTY OF THE P						
VILLAGE OF WAYNE EMPLOYER				AMENDE		
		DOLLARS	CENTS			
Taxable Earnings paid all Employee		STO MAN CONTRACT PRO VONCE			certify that the information and statements ed herein are true and correct.	
subject to Village of Wayne Income						
Is this a courtesy withholding?				(Signed)	
Is this a final return? YES N	O			(Official	Title) Date	
If yes, attach explanation						
2. Actual Tax Withheld in Village of Wa				Federal	ID no.	
Adjustment of Tax for prior quarter.					HIS RETURN MUST BE <u>RECEIVED</u> ON OR	
4. Penalty (\$5.00 per month)				Е	BEFORE THE DUE DATE SHOWN BELOW	
5. Interest (1% per month)				MAK	KE CHECK OR MONEY ORDER PAYABLE TO WAYNE TAX DEPARTMENT	
6. Total – (Lines 2-5)	6.					
NAME AND ADDRESS		FOR THE PERIOD DECEMBER 31, 2 MUST BE RECEIV JANUARY 15, 20	2016 /ED BY		MAIL TO: VILLAGE OF WAYNE INCOME TAX DEPARTMENT 125 SCHOOLHOUSE ST., PO BOX 39 WAYNE, OH 43466 TELEPHONE (419) 288-3075	
Notify the Income Tax Department promp	partment promptly of any change in Ownership, Nai			If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.		
VILLAGE OF WAYNE	ı	1ST QUARTER	3RD QUA	TER	ALL SECTIONS	
ANNUAL RECONCILIATION	N RETURN	2ND QUARTER	4TH QUAI		MUST BE COMPLETED 1. TOTAL # WAYNE	
W-2'S MUST BE ATTACHED					W-2'S\$	
MAIL TO: INCOME TAX DEPARTM VILLAGE OF WAYNE	ENT				2. WAYNE	
125 SCHOOLHOUSE ST.	, PO BOX 39				WAGES SUBJECT TO WITHHOLDING TAX\$	
WAYNE, OH 43466 PHONE: (419) 288-3075					- N	
FHONE: (419) 200-30/5					3. AMOUNT OF WAYNE TAX WITHHELD\$	
FOR TAX YEAR ENDING 2016	DUE FEBRUARY 28, 2017				4. AMOUNT OF RESIDENCE	
PAYMENT ENCLOSED					TAX WITHHELD\$	
					5. TOTAL WAYNE	
REFUND REQUESTED					TAX DUE\$	
NAME:	FIN:	I hereby certify the	hat the inforn	ormation and statements contained herein are true and correct.		
		Signed			Title	
					Date	
	Phone no					