

Dear Employer:

This is your 2018 Employer's Monthly Return of Tax Withheld package. Included are all 12 monthly forms for your convenience. The monthly forms are due as so indicated. We have also included the Employer Reconciliation of Income Tax Withheld for 2018.

If you have any questions regarding your withholding forms, please contact the Village of Gibsonburg Income Tax Department at 526 N. Webster St., Gibsonburg, OH 43431. If you wish to contact by telephone, our number is (419) 637-6004.

Sincerely,

TAX COMMISSIONER

**PLEASE NOTE:**

**OUR ADDRESS WAS CHANGED TO:**

**526 N. WEBSTER ST., GIBSONBURG, OH 43431**

**VILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN OF TAX WITHHELD 2018**

☐ AMENDED

**RETURN WITH PAYMENT**

	DOLLARS	CENTS
1. Taxable Earnings paid all Employees subject to Village of Gibsonburg Income Tax..... 1. Is this a courtesy withholding? <input type="checkbox"/> YES Is this a final return? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, attach explanation		
2. Actual Tax Withheld in Village of Gibsonburg..... 2.		
3. Adjustment of Tax for prior month ..... 3.		
4. Penalty (50% per month) ..... 4.		
5. Interest (.42% per month) ..... 5.		
6. Total – (Lines 2-5) ..... 6.		

NAME AND ADDRESS

FOR THE PERIOD ENDING  
**JANUARY**

MUST BE RECEIVED BY  
**FEBRUARY 15, 2018**

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  
BEFORE THE DUE DATE SHOWN BELOW

MAKE CHECK OR MONEY ORDER PAYABLE TO  
**GIBSONBURG TAX DEPARTMENT**

**MAIL TO:**

**VILLAGE OF GIBSONBURG  
INCOME TAX DEPARTMENT**

526 N. WEBSTER STREET  
GIBSONBURG, OH 43431  
TELEPHONE (419) 637-6004

**1**

Notify the Income Tax Department promptly of any change in Ownership, Name or Address.

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

**VILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN OF TAX WITHHELD 2018**

☐ AMENDED

**RETURN WITH PAYMENT**

	DOLLARS	CENTS
1. Taxable Earnings paid all Employees subject to Village of Gibsonburg Income Tax..... 1. Is this a courtesy withholding? <input type="checkbox"/> YES Is this a final return? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, attach explanation		
2. Actual Tax Withheld in Village of Gibsonburg..... 2.		
3. Adjustment of Tax for prior month ..... 3.		
4. Penalty (50% per month) ..... 4.		
5. Interest (.42% per month) ..... 5.		
6. Total – (Lines 2-5) ..... 6.		

NAME AND ADDRESS

FOR THE PERIOD ENDING  
**FEBRUARY**

MUST BE RECEIVED BY  
**MARCH 15, 2018**

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  
BEFORE THE DUE DATE SHOWN BELOW

MAKE CHECK OR MONEY ORDER PAYABLE TO  
**GIBSONBURG TAX DEPARTMENT**

**MAIL TO:**

**VILLAGE OF GIBSONBURG  
INCOME TAX DEPARTMENT**

526 N. WEBSTER STREET  
GIBSONBURG, OH 43431  
TELEPHONE (419) 637-6004

**2**

Notify the Income Tax Department promptly of any change in Ownership, Name or Address.

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

## VILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN OF TAX WITHHELD 2018

☐ AMENDED RETURN WITH PAYMENT

	DOLLARS	CENTS
1. Taxable Earnings paid all Employees subject to Village of Gibsonburg Income Tax..... 1.		
Is this a courtesy withholding? <input type="checkbox"/> YES		
Is this a final return? <input type="checkbox"/> YES <input type="checkbox"/> NO		
If yes, attach explanation		
2. Actual Tax Withheld in Village of Gibsonburg..... 2.		
3. Adjustment of Tax for prior month ..... 3.		
4. Penalty (50% per month) ..... 4.		
5. Interest (.42% per month) ..... 5.		
6. Total – (Lines 2-5) ..... 6.		

NAME AND ADDRESS

FOR THE PERIOD ENDING  
MARCHMUST BE RECEIVED BY  
APRIL 15, 2018I 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  
BEFORE THE DUE DATE SHOWN BELOWMAKE CHECK OR MONEY ORDER PAYABLE TO  
GIBSONBURG TAX DEPARTMENT

## MAIL TO:

VILLAGE OF GIBSONBURG  
INCOME TAX DEPARTMENT526 N. WEBSTER STREET  
GIBSONBURG, OH 43431  
TELEPHONE (419) 637-6004

3

Notify the Income Tax Department promptly of any change in Ownership, Name or Address.

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

## VILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN OF TAX WITHHELD 2018

☐ AMENDED RETURN WITH PAYMENT

	DOLLARS	CENTS
1. Taxable Earnings paid all Employees subject to Village of Gibsonburg Income Tax..... 1.		
Is this a courtesy withholding? <input type="checkbox"/> YES		
Is this a final return? <input type="checkbox"/> YES <input type="checkbox"/> NO		
If yes, attach explanation		
2. Actual Tax Withheld in Village of Gibsonburg..... 2.		
3. Adjustment of Tax for prior month ..... 3.		
4. Penalty (50% per month) ..... 4.		
5. Interest (.42% per month) ..... 5.		
6. Total – (Lines 2-5) ..... 6.		

NAME AND ADDRESS

FOR THE PERIOD ENDING  
APRILMUST BE RECEIVED BY  
MAY 15, 2018I 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  
BEFORE THE DUE DATE SHOWN BELOWMAKE CHECK OR MONEY ORDER PAYABLE TO  
GIBSONBURG TAX DEPARTMENT

## MAIL TO:

VILLAGE OF GIBSONBURG  
INCOME TAX DEPARTMENT526 N. WEBSTER STREET  
GIBSONBURG, OH 43431  
TELEPHONE (419) 637-6004

4

Notify the Income Tax Department promptly of any change in Ownership, Name or Address.

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

## VILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN OF TAX WITHHELD 2018

☐ AMENDED RETURN WITH PAYMENT

	DOLLARS	CENTS
1. Taxable Earnings paid all Employees subject to Village of Gibsonburg Income Tax..... 1.		
Is this a courtesy withholding? <input type="checkbox"/> YES		
Is this a final return? <input type="checkbox"/> YES <input type="checkbox"/> NO		
If yes, attach explanation		
2. Actual Tax Withheld in Village of Gibsonburg..... 2.		
3. Adjustment of Tax for prior month ..... 3.		
4. Penalty (50% per month) ..... 4.		
5. Interest (.42% per month) ..... 5.		
6. Total – (Lines 2-5) ..... 6.		

NAME AND ADDRESS

FOR THE PERIOD ENDING  
MAYMUST BE RECEIVED BY  
JUNE 15, 2018I 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  
BEFORE THE DUE DATE SHOWN BELOWMAKE CHECK OR MONEY ORDER PAYABLE TO  
GIBSONBURG TAX DEPARTMENT

## MAIL TO:

VILLAGE OF GIBSONBURG  
INCOME TAX DEPARTMENT526 N. WEBSTER STREET  
GIBSONBURG, OH 43431  
TELEPHONE (419) 637-6004

5

Notify the Income Tax Department promptly of any change in Ownership, Name or Address.

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

## VILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN OF TAX WITHHELD 2018

☐ AMENDED RETURN WITH PAYMENT

	DOLLARS	CENTS
1. Taxable Earnings paid all Employees subject to Village of Gibsonburg Income Tax..... 1.		
Is this a courtesy withholding? <input type="checkbox"/> YES		
Is this a final return? <input type="checkbox"/> YES <input type="checkbox"/> NO		
If yes, attach explanation		
2. Actual Tax Withheld in Village of Gibsonburg..... 2.		
3. Adjustment of Tax for prior month ..... 3.		
4. Penalty (50% per month) ..... 4.		
5. Interest (.42% per month) ..... 5.		
6. Total – (Lines 2-5) ..... 6.		

NAME AND ADDRESS

FOR THE PERIOD ENDING  
JUNEMUST BE RECEIVED BY  
JULY 15, 2018I 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  
BEFORE THE DUE DATE SHOWN BELOWMAKE CHECK OR MONEY ORDER PAYABLE TO  
GIBSONBURG TAX DEPARTMENT

## MAIL TO:

VILLAGE OF GIBSONBURG  
INCOME TAX DEPARTMENT526 N. WEBSTER STREET  
GIBSONBURG, OH 43431  
TELEPHONE (419) 637-6004

6

Notify the Income Tax Department promptly of any change in Ownership, Name or Address.

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

## VILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN OF TAX WITHHELD 2018

☐ AMENDED RETURN WITH PAYMENT

	DOLLARS	CENTS
1. Taxable Earnings paid all Employees subject to Village of Gibsonburg Income Tax..... 1.		
Is this a courtesy withholding? <input type="checkbox"/> YES		
Is this a final return? <input type="checkbox"/> YES <input type="checkbox"/> NO		
If yes, attach explanation		
2. Actual Tax Withheld in Village of Gibsonburg..... 2.		
3. Adjustment of Tax for prior month ..... 3.		
4. Penalty (50% per month) ..... 4.		
5. Interest (.42% per month) ..... 5.		
6. Total – (Lines 2-5) ..... 6.		

NAME AND ADDRESS

FOR THE PERIOD ENDING  
JULYMUST BE RECEIVED BY  
AUGUST 15, 2018I 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  
BEFORE THE DUE DATE SHOWN BELOWMAKE CHECK OR MONEY ORDER PAYABLE TO  
GIBSONBURG TAX DEPARTMENT

## MAIL TO:

VILLAGE OF GIBSONBURG  
INCOME TAX DEPARTMENT526 N. WEBSTER STREET  
GIBSONBURG, OH 43431  
TELEPHONE (419) 637-6004

7

Notify the Income Tax Department promptly of any change in Ownership, Name or Address.

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

## VILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN OF TAX WITHHELD 2018

☐ AMENDED RETURN WITH PAYMENT

	DOLLARS	CENTS
1. Taxable Earnings paid all Employees subject to Village of Gibsonburg Income Tax..... 1.		
Is this a courtesy withholding? <input type="checkbox"/> YES		
Is this a final return? <input type="checkbox"/> YES <input type="checkbox"/> NO		
If yes, attach explanation		
2. Actual Tax Withheld in Village of Gibsonburg..... 2.		
3. Adjustment of Tax for prior month ..... 3.		
4. Penalty (50% per month) ..... 4.		
5. Interest (.42% per month) ..... 5.		
6. Total – (Lines 2-5) ..... 6.		

NAME AND ADDRESS

FOR THE PERIOD ENDING  
AUGUSTMUST BE RECEIVED BY  
SEPTEMBER 15, 2018I 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  
BEFORE THE DUE DATE SHOWN BELOWMAKE CHECK OR MONEY ORDER PAYABLE TO  
GIBSONBURG TAX DEPARTMENT

## MAIL TO:

VILLAGE OF GIBSONBURG  
INCOME TAX DEPARTMENT526 N. WEBSTER STREET  
GIBSONBURG, OH 43431  
TELEPHONE (419) 637-6004

8

Notify the Income Tax Department promptly of any change in Ownership, Name or Address.

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

## VILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN OF TAX WITHHELD 2018

☐ AMENDED RETURN WITH PAYMENT

	DOLLARS	CENTS
1. Taxable Earnings paid all Employees subject to Village of Gibsonburg Income Tax..... 1.		
Is this a courtesy withholding? <input type="checkbox"/> YES		
Is this a final return? <input type="checkbox"/> YES <input type="checkbox"/> NO		
If yes, attach explanation		
2. Actual Tax Withheld in Village of Gibsonburg..... 2.		
3. Adjustment of Tax for prior month ..... 3.		
4. Penalty (50% per month) ..... 4.		
5. Interest (.42% per month) ..... 5.		
6. Total – (Lines 2-5) ..... 6.		

NAME AND ADDRESS

FOR THE PERIOD ENDING  
SEPTEMBERMUST BE RECEIVED BY  
OCTOBER 15, 2018I 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  
BEFORE THE DUE DATE SHOWN BELOWMAKE CHECK OR MONEY ORDER PAYABLE TO  
GIBSONBURG TAX DEPARTMENT

## MAIL TO:

VILLAGE OF GIBSONBURG  
INCOME TAX DEPARTMENT526 N. WEBSTER STREET  
GIBSONBURG, OH 43431  
TELEPHONE (419) 637-6004

9

Notify the Income Tax Department promptly of any change in Ownership, Name or Address.

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

## VILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN OF TAX WITHHELD 2018

☐ AMENDED RETURN WITH PAYMENT

	DOLLARS	CENTS
1. Taxable Earnings paid all Employees subject to Village of Gibsonburg Income Tax..... 1.		
Is this a courtesy withholding? <input type="checkbox"/> YES		
Is this a final return? <input type="checkbox"/> YES <input type="checkbox"/> NO		
If yes, attach explanation		
2. Actual Tax Withheld in Village of Gibsonburg..... 2.		
3. Adjustment of Tax for prior month ..... 3.		
4. Penalty (50% per month) ..... 4.		
5. Interest (.42% per month) ..... 5.		
6. Total – (Lines 2-5) ..... 6.		

NAME AND ADDRESS

FOR THE PERIOD ENDING  
OCTOBERMUST BE RECEIVED BY  
NOVEMBER 15, 2018I 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  
BEFORE THE DUE DATE SHOWN BELOWMAKE CHECK OR MONEY ORDER PAYABLE TO  
GIBSONBURG TAX DEPARTMENT

## MAIL TO:

VILLAGE OF GIBSONBURG  
INCOME TAX DEPARTMENT526 N. WEBSTER STREET  
GIBSONBURG, OH 43431  
TELEPHONE (419) 637-6004

10

Notify the Income Tax Department promptly of any change in Ownership, Name or Address.

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

## VILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN OF TAX WITHHELD 2018

☐ AMENDED RETURN WITH PAYMENT

	DOLLARS	CENTS
1. Taxable Earnings paid all Employees subject to Village of Gibsonburg Income Tax..... 1.		
Is this a courtesy withholding? <input type="checkbox"/> YES		
Is this a final return? <input type="checkbox"/> YES <input type="checkbox"/> NO		
If yes, attach explanation		
2. Actual Tax Withheld in Village of Gibsonburg..... 2.		
3. Adjustment of Tax for prior month ..... 3.		
4. Penalty (50% per month) ..... 4.		
5. Interest (.42% per month) ..... 5.		
6. Total – (Lines 2-5) ..... 6.		

NAME AND ADDRESS

FOR THE PERIOD ENDING  
NOVEMBERMUST BE RECEIVED BY  
DECEMBER 15, 2018I 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  
BEFORE THE DUE DATE SHOWN BELOWMAKE CHECK OR MONEY ORDER PAYABLE TO  
GIBSONBURG TAX DEPARTMENT

## MAIL TO:

VILLAGE OF GIBSONBURG  
INCOME TAX DEPARTMENT526 N. WEBSTER STREET  
GIBSONBURG, OH 43431  
TELEPHONE (419) 637-6004

11

Notify the Income Tax Department promptly of any change in Ownership, Name or Address.

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

	DOLLARS	CENTS
1. Taxable Earnings paid all Employees subject to Village of Gibsonburg Income Tax..... 1.		
Is this a courtesy withholding? <input type="checkbox"/> YES		
Is this a final return? <input type="checkbox"/> YES <input type="checkbox"/> NO		
If yes, attach explanation		
2. Actual Tax Withheld in Village of Gibsonburg..... 2.		
3. Adjustment of Tax for prior month ..... 3.		
4. Penalty (50% per month) ..... 4.		
5. Interest (.42% per month) ..... 5.		
6. Total – (Lines 2-5) ..... 6.		

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  
BEFORE THE DUE DATE SHOWN BELOW

MAKE CHECK OR MONEY ORDER PAYABLE TO  
**GIBSONBURG TAX DEPARTMENT**

NAME AND ADDRESS

FOR THE PERIOD ENDING  
**DECEMBER**

MUST BE RECEIVED BY  
**JANUARY 15, 2019**

**MAIL TO:**  
**VILLAGE OF GIBSONBURG**  
**INCOME TAX DEPARTMENT**  
526 N. WEBSTER STREET  
GIBSONBURG, OH 43431  
TELEPHONE (419) 637-6004

**12**

Notify the Income Tax Department promptly of any change in Ownership, Name or Address.

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

## VILLAGE OF GIBSONBURG ANNUAL RECONCILIATION RETURN

W-2'S MUST BE ATTACHED

**MAIL TO: INCOME TAX DEPARTMENT**  
**VILLAGE OF GIBSONBURG**  
**526 N. WEBSTER ST.**  
**GIBSONBURG, OH 43431**  
**PHONE: (419) 637-6004**

**FOR TAX YEAR ENDING 2018 DUE FEBRUARY 28, 2019**

**PAYMENT ENCLOSED** ☐

**REFUND REQUESTED** ☐

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

- TOTAL # GIBSONBURG  
W-2'S .....\$ \_\_\_\_\_
- GIBSONBURG  
WAGES SUBJECT TO  
WITHHOLDING TAX .....\$ \_\_\_\_\_
- AMOUNT OF GIBSONBURG  
TAX WITHHELD .....\$ \_\_\_\_\_
- AMOUNT OF RESIDENCE  
TAX WITHHELD .....\$ \_\_\_\_\_
- TOTAL GIBSONBURG  
TAX DUE .....\$ \_\_\_\_\_

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

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

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

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