

City of Tipp City, Ohio employer's monthly return of tax withheld

Final Courtesy Amended

		Do not round	
1. Taxable earnings paid all employees subject to City of Tipp City, Ohio 1.5% income tax	1.		
2. Actual tax withheld in month for city income tax	2.		
3. Adjustment of tax for prior month (see instructions)	3.		
4. Penalty and interest (see instructions)	4.		
5. Late filing fee (see instructions)	5.		
6. Total (Lines 2-5)	6.		

Return Form With Payment

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

Signed _____
 Official title _____
 Date _____

Federal ID # _____

This return must be received on or before the due date shown. Make check or money order payable to Tipp City Tax.

Account # _____

Name & Address: _____

Form TW-1

January 2019

Due on or before:
February 15, 2019

Mail to:
Tipp City Tax Department
260 S. Garber Dr.
Tipp City, OH 45371-3116

Phone (937) 667-8426; Fax (937) 667-6734
www.tippcityohio.gov

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Account # _____

Name & Address: _____

Form TW-1

February 2019

Due on or before:
March 15, 2019

Mail to:
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260 S. Garber Dr.
Tipp City, OH 45371-3116

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Account # _____

Name & Address: _____

Form TW-1

March 2019

Due on or before:
April 15, 2019

Mail to:
Tipp City Tax Department
260 S. Garber Dr.
Tipp City, OH 45371-3116

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Account # _____

April 2019

Name & Address:

Due on or before:
May 15, 2019

Mail to:
 Tipp City Tax Department
 260 S. Garber Dr.
 Tipp City, OH 45371-3116

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Account # _____

May 2019

Name & Address:

Due on or before:
June 15, 2019

Mail to:
 Tipp City Tax Department
 260 S. Garber Dr.
 Tipp City, OH 45371-3116

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Federal ID # _____

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Account # _____

June 2019

Name & Address:

Due on or before:
July 15, 2019

MAIL TO:
 Tipp City Tax Department
 260 S. Garber Dr.
 Tipp City, OH 45371-3116

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Date _____

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Account # _____

July 2019

Name & Address:

Due on or before:
August 15, 2019

Mail to:
Tipp City Tax Department
260 S. Garber Dr.
Tipp City, OH 45371-3116

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Official title _____
Date _____

Federal ID # _____

This return must be received on or before the due date shown. Make check payable to Tipp City Tax.

Account # _____

August 2019

Name & Address:

Due on or before:
September 15, 2019

Mail to:
Tipp City Tax Department
260 S. Garber Dr.
Tipp City, OH 45371-3116

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Official title _____
Date _____

Federal ID # _____

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Account # _____

September 2019

Name & Address:

Due on or before:
October 15, 2019

Mail to:
Tipp City Tax Department
260 S. Garber Dr.
Tipp City, OH 45371-3116

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 Official title _____
 Date _____

Federal ID # _____

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Account # _____

Name & Address: _____

Form TW-1

October 2019

Due on or before:
November 15, 2019

Mail to:
Tipp City Tax Department
260 S. Garber Dr.
Tipp City, OH 45371-3116

Phone (937) 667-8426; Fax (937) 667-6734
www.tippcityohio.gov

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Signed _____
 Official title _____
 Date _____

Federal ID # _____

This return must be received on or before the due date shown. Make check or money order payable to Tipp City Tax.

Account # _____

Name & Address: _____

Form TW-1

November 2019

Due on or before:
December 15, 2019

Mail to:
Tipp City Tax Department
260 S. Garber Dr.
Tipp City, OH 45371-3116

Phone (937) 667-8426; Fax (937) 667-6734
www.tippcityohio.gov

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Signed _____
 Official title _____
 Date _____

Federal ID # _____

This return must be received on or before the due date shown. Make check or money order payable to Tipp City Tax.

Account # _____

Name & Address: _____

Form TW-1

December 2019

Due on or before:
January 15, 2020

Mail to:
Tipp City Tax Department
260 S. Garber Dr.
Tipp City, OH 45371-3116

Phone (937) 667-8426; Fax (937) 667-6734
www.tippcityohio.gov

Tipp City Annual Reconciliation for Tax Year 2019

(Submit by February 28, 2020. W-2 forms or list must be attached.)

Form TW-3

Mail to: Tipp City Tax Department
260 S. Garber Dr.
Tipp City, OH 45371-3116

Phone: (937) 667-8426

Final Amended Courtesy WH

Account # _____

Name & Address:

January	July
February	August
March	September
1 ST Quarter	3 RD Quarter
April	October
May	November
June	December
2 ND Quarter	4 TH Quarter

Summary must be completed.	
1. NUMBER OF EMPLOYEES	_____
2. WAGES SUBJECT TO TIPP CITY TAX	\$ _____
3. TIPP CITY TAX WITHHELD	\$ _____
4. TIPP CITY TAX REMITTED	\$ _____
5. BALANCE DUE OR REFUND	\$ _____

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

Signed _____ Date _____

Title _____

Fed. ID # _____

Phone # _____

GENERAL INFORMATION

1. Each employer within or doing business within the City of Tipp City, Ohio is required to withhold the Tipp City income tax according to the provisions found in the Tipp City income tax codes at the rate of 1.5% from all qualifying wages paid to employees at the time the qualifying wages are paid, and remit the amount withheld to the Tipp City Tax Department, 260 S. Garber Dr., Tipp City, Ohio 45371-3116.
2. Monthly withholding returns are required if the amount to be withheld is expected to be more than \$2,399 annually, or if the total amount of taxes deducted and withheld in any month of the preceding calendar quarter exceeded \$200. Monthly withholding returns are due on or before the 15th day of the month following the period in which the taxes were withheld.
3. Quarterly withholding returns are permitted when the amount to be withheld is expected to be less than \$2,399 annually. Quarterly withholding returns are due on or before the last day of the month following the period in which the taxes were withheld.
4. Withholding returns that are received after the filing deadline will be subject to the following penalties:
 - A penalty that shall not exceed 50% of the amount not timely paid.
 - Interest shall be imposed at the current rate (found on the city's website) on all unpaid withholding tax. Imposition of interest shall be assessed per month, or fraction of a month.
 - A late filing fee of \$25 per month (or fraction thereof), maximum \$150 per return.
5. Employers must now report for each employee with Tipp City tax withheld from wages the total amount of tax withheld and the name of every other municipal corporation for which tax was withheld for the tax year.

INFORMATION FOR PREPARING & FILING FORM TW-3 (Annual Reconciliation)

On or before February 28th of each year, each employer who withheld Tipp City income tax must file a withholding reconciliation using Form TW-3 or a similar generic form. Copies of all W-2 forms applicable to the reconciliation must be attached. All W-2 forms must furnish the name, address, social security number, qualifying wages, city tax withheld, name of city for which the 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 Tipp City tax. The listing shall report the same type of information as is required on the employee W-2 form.

Form TW-3 must show a breakdown of all withholding payments made either quarterly or monthly in the boxes provided. Numbers 1, 2, 3, 4 and 5 must be completed. The total tax remitted (line 4) should be equal to 1.5% of the wages on line 2. The completed form TW-3 and all attachments must be submitted to the Tipp City Tax Department, 260 S. Garber Dr., Tipp City, OH 45371-3116 on or before February 28th of each year.

Any individual, association, or business entity that is required under the Internal Revenue Code to issue Form 1099 to any person shall on or before February 28th of each year, file copies of said 1099 forms to the Tipp City Tax Department. If 1099 copies are not available, a listing with the same information as contained on form 1099 shall be submitted.

Any questions regarding form TW-3 should be referred to the Tipp City tax department at (937) 667-8426.