

## EMPLOYER MUNICIPAL WITHHOLDING BOOKLET

- \* **NEW DUE DATE: QUARTERLY WITHHOLDING PAYMENTS MUST BE POSTMARKED BY THE LAST DAY OF THE MONTH FOLLOWING THE END OF THE QUARTER.**
- \* **NEW PENALTY CHARGE FOR LATE PAYMENT.**

## FILING FREQUENCY: QUARTERLY

### EXAMINE THESE DOCUMENTS

This book contains 4 employer withholding tax Forms BA-12, 1 year end reconciliation Form BA-13

### PLEASE CHECK THEM FOR ACCURACY AND COMPLETENESS

### REPORT ANY ERRORS

In writing to:

CITY OF ZANESVILLE  
INCOME TAX DEPARTMENT  
401 MARKET STREET  
ZANESVILLE OH 43701-3576

**DO NOT REMOVE THIS COUPON. RETAIN IT AS A PERMANENT RECORD OF YOUR ACCOUNT NUMBER.**

## INSTRUCTIONS FOR PREPARING & FILING FORM BA-12

### WHO MUST FILE:

Each employer within or doing business within the City of Zanesville who employs one or more persons is required to withhold the tax of 1.9% (.019) from all salaries, wages (including vacation and sick pay), commissions, and other compensation before any income is deferred (contributions made by or on behalf of employees to tax deferred plans) and cost of group term life insurance over \$50,000 at the time such compensation is paid and to file Form BA-12 and remit such tax to the tax office before the last day of the next month after the quarterly period in which the withholding was made. If no compensation was paid during a said period, so indicate and explain.

### INTEREST AND PENALTY:

All taxes required to be withheld by employers and not submitted by the due date are subject up to but not exceeding 50% penalty charge of the tax due & late filing fee of \$25 a month, not to exceed \$150.

### HOW TO PREPARE:

- LINE 1** – Enter number of taxable employees.
- LINE 2** – Enter gross taxable compensation paid for all employees for the period for which the return is made. If no compensation was paid during the period so indicate and return BA-12.
- LINE 3** – Enter actual tax withheld for City of Zanesville at the rate of 1.9%.
- LINE 4** – Adjust current payment of actual tax withheld for underpayment or overpayment in previous period. Attach explanation.
- LINE 5** – Enter penalty charge and late fee charge.
- LINE 6** – Enter total amount to be remitted.

**CITY OF ZANESVILLE EMPLOYER'S RETURN OF TAX WITHHELD**

**RETURN WITH PAYMENT**

1. NUMBER OF TAXABLE EMPLOYEES .....	\$		
2. TAXABLE EARNINGS .....	\$		
3. ACTUAL TAX WITHHELD AT 1.9% (.019).....	\$		
4. ADJUSTMENTS OF TAX FOR PRIOR PERIOD .....	\$		
5. PENALTY – UP TO & NOT EXCEEDING 50% OF TAX DUE LATE FILING FEE – \$25.00 A MONTH .....	\$		
6. TOTAL INCLUDING LATE FEE AND PENALTY IF DUE .....	\$		

MAKES CHECK PAYABLE TO:  
**ZANESVILLE CITY INCOME TAX**  
**401 MARKET STREET**  
**ZANESVILLE, OH 43701-3576**

FOR THE PERIOD ENDING  
**JAN THRU MAR, 2020**

DUE ON OR BEFORE  
**APRIL 30, 2020**

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

SIGNED \_\_\_\_\_

OFFICIAL TITLE \_\_\_\_\_

FEDERAL ID NO \_\_\_\_\_

PHONE NO \_\_\_\_\_

**1**

**NOTIFY TAX OFFICE PROMPTLY OF ANY CHANGE IN OWNERSHIP, NAME OR ADDRESS**  
 BA-12

**CITY OF ZANESVILLE EMPLOYER'S RETURN OF TAX WITHHELD**

**RETURN WITH PAYMENT**

1. NUMBER OF TAXABLE EMPLOYEES .....	\$		
2. TAXABLE EARNINGS .....	\$		
3. ACTUAL TAX WITHHELD AT 1.9% (.019).....	\$		
4. ADJUSTMENTS OF TAX FOR PRIOR PERIOD .....	\$		
5. PENALTY – UP TO & NOT EXCEEDING 50% OF TAX DUE LATE FILING FEE – \$25.00 A MONTH .....	\$		
6. TOTAL INCLUDING LATE FEE AND PENALTY IF DUE .....	\$		

MAKES CHECK PAYABLE TO:  
**ZANESVILLE CITY INCOME TAX**  
**401 MARKET STREET**  
**ZANESVILLE, OH 43701-3576**

FOR THE PERIOD ENDING  
**APRIL THRU JUN, 2020**

DUE ON OR BEFORE  
**JULY 31, 2020**

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

SIGNED \_\_\_\_\_

OFFICIAL TITLE \_\_\_\_\_

FEDERAL ID NO \_\_\_\_\_

PHONE NO \_\_\_\_\_

**2**

**NOTIFY TAX OFFICE PROMPTLY OF ANY CHANGE IN OWNERSHIP, NAME OR ADDRESS**  
 BA-12

**CITY OF ZANESVILLE EMPLOYER'S RETURN OF TAX WITHHELD**

**RETURN WITH PAYMENT**

1. NUMBER OF TAXABLE EMPLOYEES .....	\$		
2. TAXABLE EARNINGS .....	\$		
3. ACTUAL TAX WITHHELD AT 1.9% (.019).....	\$		
4. ADJUSTMENTS OF TAX FOR PRIOR PERIOD .....	\$		
5. PENALTY – UP TO & NOT EXCEEDING 50% OF TAX DUE LATE FILING FEE – \$25.00 A MONTH .....	\$		
6. TOTAL INCLUDING LATE FEE AND PENALTY IF DUE .....	\$		

MAKES CHECK PAYABLE TO:  
**ZANESVILLE CITY INCOME TAX**  
**401 MARKET STREET**  
**ZANESVILLE, OH 43701-3576**

FOR THE PERIOD ENDING  
**JUL THRU SEPT, 2020**

DUE ON OR BEFORE  
**OCTOBER 31, 2020**

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

SIGNED \_\_\_\_\_

OFFICIAL TITLE \_\_\_\_\_

FEDERAL ID NO \_\_\_\_\_

PHONE NO \_\_\_\_\_

**3**

**NOTIFY TAX OFFICE PROMPTLY OF ANY CHANGE IN OWNERSHIP, NAME OR ADDRESS**  
 BA-12

**CITY OF ZANESVILLE EMPLOYER'S RETURN OF TAX WITHHELD**

**RETURN WITH PAYMENT**

1. NUMBER OF TAXABLE EMPLOYEES .....	\$		
2. TAXABLE EARNINGS .....	\$		
3. ACTUAL TAX WITHHELD AT 1.9% (.019).....	\$		
4. ADJUSTMENTS OF TAX FOR PRIOR PERIOD .....	\$		
5. PENALTY – UP TO & NOT EXCEEDING 50% OF TAX DUE LATE FILING FEE – \$25.00 A MONTH .....	\$		
6. TOTAL INCLUDING LATE FEE AND PENALTY IF DUE .....	\$		

MAKES CHECK PAYABLE TO:  
**ZANESVILLE CITY INCOME TAX**  
**401 MARKET STREET**  
**ZANESVILLE, OH 43701-3576**

FOR THE PERIOD ENDING  
**OCT THRU DEC, 2020**

DUE ON OR BEFORE  
**JANUARY 31, 2021**

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

SIGNED \_\_\_\_\_

OFFICIAL TITLE \_\_\_\_\_

FEDERAL ID NO \_\_\_\_\_

PHONE NO \_\_\_\_\_

**4**

**NOTIFY TAX OFFICE PROMPTLY OF ANY CHANGE IN OWNERSHIP, NAME OR ADDRESS**  
 BA-12

**INSTRUCTIONS FOR COMPLETING EMPLOYER'S RECONCILIATION**

**FORM BA-13**

Every employer who is required to prepare Form BA-12 must file Form BA-13 Reconciliation of Tax Withheld. Completing and filing BA-12's does not fulfill your filing requirement. This reconciliation is due on or before February 28, 2021. Copies of all W-2's are to be submitted with this form.

- LINE 1** – Number of Employees for the year
- LINE 2** – Gross wages on all employees
- LINE 3** – Tax withheld at 1.9% (.019)
- LINE 4** – Amount of fee and penalty paid thru the year
- LINE 5** – Total amount due
- LINE 6** – Total amount paid through year
- LINE 7** – If 5 and 6 are not identical list reason on back – if amount is due send a check with this form – if amount is overpayment indicate either refund or carryover to next year on front of form

**CITY OF ZANESVILLE EMPLOYER'S RECONCILIATION**

**2020**

1. TOTAL NUMBER TAXABLE EMPLOYEES			
2. TOTAL TAXABLE EARNINGS .....	\$		
3. ACTUAL TAX WITHHELD AT 1.9% (.019).....	\$		
4. FEES AND PENALTY PAID.....	\$		
5. TOTAL AMOUNT DUE.....	\$		
6. TOTAL AMOUNT PAID TO CITY .....	\$		
7. ITEMS 5 & 6 SHOULD BE IDENTICAL .....	\$		
SHOW AMOUNT AND EXPLAIN DISCREPANCY ON REVERSE SIDE			

SIGNED \_\_\_\_\_

FEDERAL IDENTIFICATION NO \_\_\_\_\_

SIGNATURES \_\_\_\_\_

TITLE \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

**DUE ON OR BEFORE FEBRUARY 28, 2021**

## CHANGE OF EMPLOYER STATUS

Please use this form to report any changes of mailing address, name merger information, or out of business information.

FEDERAL EMPLOYER'S I.D. NO.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

MAIL TO:

**CITY OF ZANESVILLE**  
 INCOME TAX DEPT.  
 401 MARKET STREET  
 ZANESVILLE, OH 43701

### NEW NAME AND MAILING ADDRESS

BUSINESS NAME \_\_\_\_\_

OWNER'S NAME \_\_\_\_\_

NEW MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_

TELEPHONE \_\_\_\_\_

## WITHHOLDING TAX WORKSHEET

(Keep for your records - Do not file)

Month Ending	Due Date	Check Number	Date	Amount	Month Ending	Due Date	Check Number	Date	Amount
1/31	2/15	_____	_____	_____	7/31	8/15	_____	_____	_____
2/28	3/15	_____	_____	_____	8/31	9/15	_____	_____	_____
3/31	4/15	_____	_____	_____	9/30	10/15	_____	_____	_____
or 1st qtr	4/30	_____	_____	_____	or 3rd qtr	10/31	_____	_____	_____
4/30	5/15	_____	_____	_____	10/31	11/15	_____	_____	_____
5/31	6/15	_____	_____	_____	11/30	12/15	_____	_____	_____
6/30	7/15	_____	_____	_____	12/31	1/15	_____	_____	_____
or 2nd qtr	7/31	_____	_____	_____	or 4th qtr	1/31	_____	_____	_____