

# CITY OF SPRINGDALE

## WITHHOLDING TAX RECONCILIATION

FOR TAX OFFICE USE ONLY

SPRINGDALE TAX COMMISSION  
11700 SPRINGFIELD PIKE  
SPRINGDALE, OHIO 45246

DUE ON OR BEFORE FEBRUARY 28, 2017

### 2016

TAX OFFICE PHONE 513-346-5715 \* FAX 346-5756

EMPLOYER'S NAME AND ADDRESS:

  
  
  

EMPLOYER'S SPRINGDALE ACCOUNT NUMBER:

### SPRINGDALE WITHHOLDING TAX RECONCILIATION

THE EMPLOYER IS REQUIRED TO WITHHOLD ON "QUALIFYING WAGES" AS DEFINED IN THE INTERNAL REVENUE CODE SECTION 3121 (o), GENERALLY THE MEDICARE WAGE BOX OF THE W-2. IF THE MEDICARE WAGES BOX IS NOT THE LARGEST WAGE FIGURE ON THE W-2 FORM, A WRITTEN EXPLANATION IS REQUIRED TO BE ATTACHED TO THIS FILING.

SPRINGDALE "COURTESY RESIDENT" TAX (SEE LINE 4 BELOW)			
WORK CITY	PAYROLL	SPRINGDALE RESIDENT TAX RATE	SPRINGDALE COURTESY RESIDENT INCOME TAX
BLUE ASH	\$	X .25%	
EVENDALE		X .3%	
LOVELAND		X .5%	
MASON		X .38%	
MONTGOMERY		X .5%	
WYOMING		X .7%	
TOWNSHIP		X 1.5%	
OUT OF STATE		X 1.5%	
		X %	
		X %	
TOTAL SPRINGDALE "COURTESY" RESIDENT TAX DUE			(Enter total amount on line 4)

SPRINGDALE "EMPLOYMENT" TAX (SEE LINE 6 BELOW)				
QUARTER	TOTAL TAXABLE PAYROLL	TAX RATE	SPRINGDALE INCOME TAX	TAX OFFICE USE ONLY
1ST QTR - DUE 4/15	\$	X 1.5% =	\$	
2ND QTR - DUE 7/15		X 1.5% =		
3RD QTR - DUE 10/15		X 1.5% =		
4TH QTR - DUE 1/15		X 1.5% =		
TOTAL ALL QUARTERS	\$		\$	

AMOUNTS REMITTED TO SPRINGDALE ON FORM W-1				
1ST QUARTER	2ND QUARTER	3RD QUARTER	4TH QUARTER	TOTAL
\$				\$

1. Total number of employees as represented by the W-2's submitted.....
2. Total Springdale taxable wages as shown on the W-2's ..... \$
3. Total Springdale tax withheld as shown on the W-2's ..... \$
4. Total "Courtesy" Resident tax due Springdale.....\$  
(If you withhold a courtesy resident tax, complete the boxes on the above left and enter the total tax here.)
5. Total Springdale Employment tax due .....\$  
(If you withhold tax based on Springdale as the employment/work city, complete the boxes on the above right and enter the total tax here. Do not include residency tax in these boxes or on this line.)
6. Total Springdale tax due .....\$  
(Add lines 4 and 5)
7. Less payments remitted to Springdale .....\$
8. Difference between lines 6 & 7. (If an underpayment, make check payable to the City of Springdale)  
\$

NOTICE

1. Copies of all W-2's listing full federal information must be included when filing this form. A computer generated form containing the identical information is also acceptable.
2. If non-employee compensation was paid (\$600 or more per individual) for work performed in Springdale, include copies of the 1099's when filing this form.
3. Mail the original of this form and copies of the W-2's to the Springdale Tax Commission on or before February 28, 2017.

SUBMITTED BY (PRINT/TYPE NAME)

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TITLE

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SIGNATURE

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DATE

EMPLOYER FID NO

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PHONE NUMBER

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E-MAIL CONTACT

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