

Village of East Canton  
Tax Department  
130 S Cedar St  
East Canton, Ohio 44730

## EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

Due on or Before 02/15/2024  
For Period JANUARY  
Tax Year 2024

Notify Income Tax Department promptly of any change in ownership or name and address shown below.

Account Number #  
Fed. ID #

1. Total Compensation Paid This Period \$ \_\_\_\_\_
2. Total Withheld This Period \$ \_\_\_\_\_
3. Adjustments to prior returns \$ \_\_\_\_\_
4. Penalty and/or Interest \$ \_\_\_\_\_
5. Total \$ \_\_\_\_\_

Make check or money order payable to:  
**Village of East Canton**

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

(signed) \_\_\_\_\_

(Official Title) \_\_\_\_\_

Date

Village of East Canton  
Tax Department  
130 S Cedar St  
East Canton, Ohio 44730

## EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

Due on or Before 03/15/2024  
For Period FEBRUARY  
Tax Year 2024

Notify Income Tax Department promptly of any change in ownership or name and address shown below.

Account Number #  
Fed. ID #

1. Total Compensation Paid This Period \$ \_\_\_\_\_
2. Total Withheld This Period \$ \_\_\_\_\_
3. Adjustments to prior returns \$ \_\_\_\_\_
4. Penalty and/or Interest \$ \_\_\_\_\_
5. Total \$ \_\_\_\_\_

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East Canton, Ohio 44730

## EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

Due on or Before 04/15/2024  
For Period MARCH  
Tax Year 2024

Notify Income Tax Department promptly of any change in ownership or name and address shown below.

Account Number #  
Fed. ID #

1. Total Compensation Paid This Period \$ \_\_\_\_\_
2. Total Withheld This Period \$ \_\_\_\_\_
3. Adjustments to prior returns \$ \_\_\_\_\_
4. Penalty and/or Interest \$ \_\_\_\_\_
5. Total \$ \_\_\_\_\_

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(Official Title) \_\_\_\_\_

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## EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

Due on or Before 05/15/2024  
For Period APRIL  
Tax Year 2024

Notify Income Tax Department promptly of any change in ownership or name and address shown below.

Account Number #  
Fed. ID #

- |     |                                     |          |
|-----|-------------------------------------|----------|
| 6.  | Total Compensation Paid This Period | \$ _____ |
| 7.  | Total Withheld This Period          | \$ _____ |
| 8.  | Adjustments to prior returns        | \$ _____ |
| 9.  | Penalty and/or Interest             | \$ _____ |
| 10. | Total                               | \$ _____ |

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(Official Title) \_\_\_\_\_

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## EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

Due on or Before 06/15/2024  
For Period MAY  
Tax Year 2024

Notify Income Tax Department promptly of any change in ownership or name and address shown below.

Account Number #  
Fed. ID #

- |     |                                     |          |
|-----|-------------------------------------|----------|
| 6.  | Total Compensation Paid This Period | \$ _____ |
| 7.  | Total Withheld This Period          | \$ _____ |
| 8.  | Adjustments to prior returns        | \$ _____ |
| 9.  | Penalty and/or Interest             | \$ _____ |
| 10. | Total                               | \$ _____ |

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(Official Title) \_\_\_\_\_

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East Canton, Ohio 44730

## EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

Due on or Before 07/15/2024  
For Period JUNE  
Tax Year 2024

Notify Income Tax Department promptly of any change in ownership or name and address shown below.

Account Number #  
Fed. ID #

- |     |                                     |          |
|-----|-------------------------------------|----------|
| 6.  | Total Compensation Paid This Period | \$ _____ |
| 7.  | Total Withheld This Period          | \$ _____ |
| 8.  | Adjustments to prior returns        | \$ _____ |
| 9.  | Penalty and/or Interest             | \$ _____ |
| 10. | Total                               | \$ _____ |

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(signed) \_\_\_\_\_

(Official Title) \_\_\_\_\_

Date

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East Canton, Ohio 44730

**EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD**

**Due on or Before 08/15/2024  
For Period JULY  
Tax Year 2024**

Notify Income Tax Department promptly of any change in ownership or name and address shown below.

Account Number #  
Fed. ID #

- |   |          |
|---|----------|
| 11. Total Compensation Paid This Period | \$ _____ |
| 12. Total Withheld This Period          | \$ _____ |
| 13. Adjustments to prior returns        | \$ _____ |
| 14. Penalty and/or Interest             | \$ _____ |
| 15. Total                               | \$ _____ |

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(signed) \_\_\_\_\_

(Official Title) \_\_\_\_\_

Date

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Tax Department  
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East Canton, Ohio 44730

**EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD**

**Due on or Before 09/15/2024  
For Period AUGUST  
Tax Year 2024**

Notify Income Tax Department promptly of any change in ownership or name and address shown below.

Account Number #  
Fed. ID #

- |   |          |
|---|----------|
| 11. Total Compensation Paid This Period | \$ _____ |
| 12. Total Withheld This Period          | \$ _____ |
| 13. Adjustments to prior returns        | \$ _____ |
| 14. Penalty and/or Interest             | \$ _____ |
| 15. Total                               | \$ _____ |

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(signed) \_\_\_\_\_

(Official Title) \_\_\_\_\_

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Tax Department  
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East Canton, Ohio 44730

**EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD**

**Due on or Before 10/15/2024  
For Period SEPTEMBER  
Tax Year 2024**

Notify Income Tax Department promptly of any change in ownership or name and address shown below.

Account Number #  
Fed. ID #

- |   |          |
|---|----------|
| 11. Total Compensation Paid This Period | \$ _____ |
| 12. Total Withheld This Period          | \$ _____ |
| 13. Adjustments to prior returns        | \$ _____ |
| 14. Penalty and/or Interest             | \$ _____ |
| 15. Total                               | \$ _____ |

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(Official Title) \_\_\_\_\_

Date

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## EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

Due on or Before 11/15/2024  
For Period OCTOBER  
Tax Year 2024

Notify Income Tax Department promptly of any change in ownership or name and address shown below.

Account Number #  
Fed. ID #

16. Total Compensation Paid This Period \$ \_\_\_\_\_  
17. Total Withheld This Period \$ \_\_\_\_\_  
18. Adjustments to prior returns \$ \_\_\_\_\_  
19. Penalty and/or Interest \$ \_\_\_\_\_  
20. Total \$ \_\_\_\_\_

Make check or money order payable to:  
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(signed) \_\_\_\_\_

(Official Title) \_\_\_\_\_

Date

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## EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

Due on or Before 12/15/2024  
For Period NOVEMBER  
Tax Year 2024

Notify Income Tax Department promptly of any change in ownership or name and address shown below.

Account Number #  
Fed. ID #

16. Total Compensation Paid This Period \$ \_\_\_\_\_  
17. Total Withheld This Period \$ \_\_\_\_\_  
18. Adjustments to prior returns \$ \_\_\_\_\_  
19. Penalty and/or Interest \$ \_\_\_\_\_  
20. Total \$ \_\_\_\_\_

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(Official Title) \_\_\_\_\_

Date

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East Canton, Ohio 44730

## EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

Due on or Before 01/15/2025  
For Period DECEMBER  
Tax Year 2024

Notify Income Tax Department promptly of any change in ownership or name and address shown below.

Account Number #  
Fed. ID #

16. Total Compensation Paid This Period \$ \_\_\_\_\_  
17. Total Withheld This Period \$ \_\_\_\_\_  
18. Adjustments to prior returns \$ \_\_\_\_\_  
19. Penalty and/or Interest \$ \_\_\_\_\_  
20. Total \$ \_\_\_\_\_

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**Village of East Canton**

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(signed) \_\_\_\_\_

(Official Title) \_\_\_\_\_

Date

**ANNUAL RECONCILIATION OF VILLAGE INCOME  
TAX WITHHELD FROM WAGES**

DUE ON OR BEFORE THE LAST DAY OF FEBRUARY

<p>1. Total number of employees as represented by</p> <p>Forms W-2 submitted herewith ..... _____</p> <p>2. Total Village Income Tax withheld from wages</p> <p>during ..... as shown by employee's statement</p> <p>(Form W-2).....\$ _____</p> <p>Account Number # _____</p> <p>Fed. ID # _____</p>	<p>3. Total Village Income Tax Withheld during <b>2024</b> , for: (Form EQR)</p> <p>Quarter ended March 31, \$ _____</p> <p>Quarter ended June 30, \$ _____</p> <p>Quarter ended September 30, \$ _____</p> <p>Quarter ended December 31, \$ _____</p> <p>4. TOTAL..... \$ _____</p> <p>5. Difference between Lines 2 &amp; 4 \$ _____</p> <div style="border: 1px solid black; height: 30px; width: 100%; margin-top: 10px;"></div> <p>* If Line 5 indicates a balance due, the amount thereof should accompany this return; If Line 5 indicates an overpayment, a refund request signed by the employer should be made.</p>
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If receipt is desired, return Taxpayer's Copy of this form and enclose self-addressed, stamped envelope.

Attach all copies of W-2s. Notify Income Tax Department promptly of any change in ownership or name and address shown above.

**Who Must File:**

Each employer within East Canton Village limits who employs one or more persons is required to withhold the tax of one and one half percent (1.5%) from all compensation paid taxable employees at the time such compensation is paid, and to file Form EQR and remit tax to the Village Income Tax Dept. on or before the 15<sup>th</sup> day of the month next following the MONTHLY period in which the withholding deduction was made.

than six (6) months, or both. The failure of any taxpayer to receive a return or declaration form shall not excuse him from making a return or declaration or from paying the tax.

**How to prepare this Form:**

**Who Must Pay:**

All persons must pay village income tax as it may apply in accordance with village ordinances.

Line 1 - Enter total compensations PAID all taxable employees during the quarter for which return is made. If no compensation was paid during the month, so indicate and return Form.

Line 2 - Enter total ACTUAL tax withheld from taxable employees during the month for East Canton, Ohio – Income Tax.

Line 3 - To Adjust current payment of actual tax withheld for underpayment or overpayment in previous month.

**Failure to File Return and Pay Tax:**

Any taxpayer who shall fail or refuse to make any return or declaration required by the Ordinance, or any taxpayer who shall refuse to pay the tax imposed by the Ordinance, or any taxpayer who shall refuse to permit the administrator to examine his books, or who shall knowingly make any incomplete, false or fraudulent return, or who shall attempt to avoid the payment of tax, shall be guilty of a 1<sup>st</sup> degree misdemeanor and shall be fined not more than \$1,000.00 or imprisoned for not more