

1. Number of Taxable Employees.	1		
2. Total Salaries, Wages, Commissions and other Compensation paid all employees.	2		
3. Taxable Earnings (from line 2).	3		
4. Actual Tax Withheld at 0.000 %.	4		
5. Adjustments of Tax for Prior Period.	5		
6. Interest: 0.50% per month.	6		
7. Penalty: 50%.	7		
8. Total (Include Interest and Penalty if Due).	8		

Tax Year 2022

I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.

Signed _____

Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE APRIL 30, 2022**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF GNADENHUTTEN
POBox 877
Gnadenhutten OH 44629

Voice 740-254-4307 Ext Fax 740-254-4986

Name
And
Address

Period Ending JAN-FEB-MAR

TAX ID

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.

1. Number of Taxable Employees.	1		
2. Total Salaries, Wages, Commissions and other Compensation paid all employees.	2		
3. Taxable Earnings (from line 2).	3		
4. Actual Tax Withheld at 0.000 %.	4		
5. Adjustments of Tax for Prior Period.	5		
6. Interest: 0.50% per month.	6		
7. Penalty: 50%.	7		
8. Total (Include Interest and Penalty if Due).	8		

Name
 And
 Address

Tax Year 2022

I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.

Signed _____

Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
 OR BEFORE JULY 31, 2022**

MAKE CHECK OR MONEY ORDER TO:
 VILLAGE OF GNADENHUTTEN
 POBox 877
 Gnadenhutten OH 44629

Voice 740-254-4307 Ext Fax 740-254-4986

Period Ending APR-MAY-JUN

TAX ID

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.

1. Number of Taxable Employees.	1		
2. Total Salaries, Wages, Commissions and other Compensation paid all employees.	2		
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6. Interest: 0.50% per month.	6		
7. Penalty: 50%.	7		
8. Total (Include Interest and Penalty if Due).	8		

Name
 And
 Address

Tax Year 2022

I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.

Signed _____

Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
 OR BEFORE OCTOBER 31, 2022**

MAKE CHECK OR MONEY ORDER TO:
 VILLAGE OF GNADENHUTTEN
 POBox 877
 Gnadenhutten OH 44629

Voice 740-254-4307 Ext Fax 740-254-4986

Period Ending JUL-AUG-SEP

TAX ID

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.

1. Number of Taxable Employees.	1		
2. Total Salaries, Wages, Commissions and other Compensation paid all employees.	2		
3. Taxable Earnings (from line 2).	3		
4. Actual Tax Withheld at 0.000 %.	4		
5. Adjustments of Tax for Prior Period.	5		
6. Interest: 0.50% per month.	6		
7. Penalty: 50%.	7		
8. Total (Include Interest and Penalty if Due).	8		

Tax Year 2022

I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.

Signed _____

Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE JANUARY 31, 2023**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF GNADENHUTTEN
POBox 877
Gnadenhutten OH 44629

Voice 740-254-4307 Ext _____ Fax 740-254-4986

Name _____

And _____

Address _____

Period Ending OCT-NOV-DEC

TAX ID _____

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.