

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 2.100 %. ....	4		
5. Adjustments of Tax for Prior Period. ....	5		
6. 0.42 per month. ....	6		
7. 50%. ....	7		
8. Total (Include Interest and Penalty if Due). ....	8		

**Tax Year 2017**

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 FEBRUARY 15, 2019**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF ST. BERNARD  
110 WASHINGTON AVE.  
ST. BERNARD OH 45217-1318

Voice 513-242-7710

Fax 513-242-5402

Name

And

Address

Period Ending JANUARY

TAX ID

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

## FORM W1 1099

## EMPLOYER'S WITHHOLDING - MONTHLY

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 2.100 %. ....	4		
5. Adjustments of Tax for Prior Period. ....	5		
6. 0.42 per month. ....	6		
7. 50%. ....	7		
8. Total (Include Interest and Penalty if Due). ....	8		

Name

And

Address

## Tax Year 2017

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 MARCH 15, 2017**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF ST. BERNARD  
110 WASHINGTON AVE.  
ST. BERNARD OH 45217-1318

Voice 513-242-7710

Fax 513-242-5402

Period Ending FEBRUARY

TAX ID

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

## FORM W1 1099

## EMPLOYER'S WITHHOLDING - MONTHLY

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 2.100 %. ....	4		
5. Adjustments of Tax for Prior Period. ....	5		
6. 0.42 per month. ....	6		
7. 50%. ....	7		
8. Total (Include Interest and Penalty if Due). ....	8		

Name

And

Address

## Tax Year 2017

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 15, 2017**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF ST. BERNARD  
110 WASHINGTON AVE.  
ST. BERNARD OH 45217-1318

Voice 513-242-7710

Fax 513-242-5402

Period Ending MARCH

TAX ID

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

## FORM W1 1099

## EMPLOYER'S WITHHOLDING - MONTHLY

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 2.100 %. ....	4		
5. Adjustments of Tax for Prior Period. ....	5		
6. 0.42 per month. ....	6		
7. 50%. ....	7		
8. Total (Include Interest and Penalty if Due). ....	8		

## Tax Year 2017

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 MAY 15, 2017**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF ST. BERNARD  
110 WASHINGTON AVE.  
ST. BERNARD OH 45217-1318

Voice 513-242-7710

Fax 513-242-5402

Name

And

Address

Period Ending APRIL

TAX ID

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

## FORM W1 1099

## EMPLOYER'S WITHHOLDING - MONTHLY

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 2.100 %. ....	4		
5. Adjustments of Tax for Prior Period. ....	5		
6. 0.42 per month. ....	6		
7. 50%. ....	7		
8. Total (Include Interest and Penalty if Due). ....	8		

## Tax Year 2017

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 JUNE 15, 2017**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF ST. BERNARD  
110 WASHINGTON AVE.  
ST. BERNARD OH 45217-1318

Voice 513-242-7710

Fax 513-242-5402

Name

And

Address

Period Ending MAY

TAX ID

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

## FORM W1 1099

## EMPLOYER'S WITHHOLDING - MONTHLY

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		
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6. 0.42 per month. ....	6		
7. 50%. ....	7		
8. Total (Include Interest and Penalty if Due). ....	8		

Name

And

Address

## Tax Year 2017

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 15, 2017**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF ST. BERNARD  
110 WASHINGTON AVE.  
ST. BERNARD OH 45217-1318

Voice 513-242-7710

Fax 513-242-5402

Period Ending JUNE

TAX ID

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

## FORM W1 1099

## EMPLOYER'S WITHHOLDING - MONTHLY

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 2.100 %. ....	4		
5. Adjustments of Tax for Prior Period. ....	5		
6. 0.42 per month. ....	6		
7. 50%. ....	7		
8. Total (Include Interest and Penalty if Due). ....	8		

Name

And

Address

## Tax Year 2017

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 AUGUST 15, 2017**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF ST. BERNARD  
110 WASHINGTON AVE.  
ST. BERNARD OH 45217-1318

Voice 513-242-7710

Fax 513-242-5402

Period Ending JULY

TAX ID

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

## FORM W1 1099

## EMPLOYER'S WITHHOLDING - MONTHLY

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 2.100 %. ....	4		
5. Adjustments of Tax for Prior Period. ....	5		
6. 0.42 per month. ....	6		
7. 50%. ....	7		
8. Total (Include Interest and Penalty if Due). ....	8		

Name

And

Address

## Tax Year 2017

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 SEPTEMBER 15, 2017**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF ST. BERNARD  
110 WASHINGTON AVE.  
ST. BERNARD OH 45217-1318

Voice 513-242-7710

Fax 513-242-5402

Period Ending AUGUST

TAX ID

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

## FORM W1 1099

## EMPLOYER'S WITHHOLDING - MONTHLY

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 2.100 %. ....	4		
5. Adjustments of Tax for Prior Period. ....	5		
6. 0.42 per month. ....	6		
7. 50%. ....	7		
8. Total (Include Interest and Penalty if Due). ....	8		

Name

And

Address

## Tax Year 2017

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 15, 2017**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF ST. BERNARD  
110 WASHINGTON AVE.  
ST. BERNARD OH 45217-1318

Voice 513-242-7710

Fax 513-242-5402

Period Ending SEPTEMBER

TAX ID

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

## FORM W1 1099

## EMPLOYER'S WITHHOLDING - MONTHLY

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		
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5. Adjustments of Tax for Prior Period. ....	5		
6. 0.42 per month. ....	6		
7. 50%. ....	7		
8. Total (Include Interest and Penalty if Due). ....	8		

Name

And

Address

## Tax Year 2017

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 NOVEMBER 15, 2017**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF ST. BERNARD  
110 WASHINGTON AVE.  
ST. BERNARD OH 45217-1318

Voice 513-242-7710

Fax 513-242-5402

Period Ending OCTOBER

TAX ID

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

## FORM W1 1099

## EMPLOYER'S WITHHOLDING - MONTHLY

1. Number of Taxable Employees. ....	1		
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6. 0.42 per month. ....	6		
7. 50%. ....	7		
8. Total (Include Interest and Penalty if Due). ....	8		

Name

And

Address

## Tax Year 2017

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 DECEMBER 15, 2017**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF ST. BERNARD  
110 WASHINGTON AVE.  
ST. BERNARD OH 45217-1318

Voice 513-242-7710

Fax 513-242-5402

Period Ending NOVEMBER

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 2.100 %. ....	4		
5. Adjustments of Tax for Prior Period. ....	5		
6. 0.42 per month. ....	6		
7. 50%. ....	7		
8. Total (Include Interest and Penalty if Due). ....	8		

**Tax Year 2017**

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 15, 2018**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF ST. BERNARD  
110 WASHINGTON AVE.  
ST. BERNARD OH 45217-1318

Voice 513-242-7710

Fax 513-242-5402

Name

And

Address

Period Ending DECEMBER

TAX ID

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