FORM W1 1099 EMPLOYER'S	WITHHOLDING - SEMI-N	IONTHLY	
Number of Taxable Employees. Total Salaries, Wages, Commissions and other Compensation and all employees.	on	I hereby certify that the information in and in any schedules or exhibits	and statements contained he
		Signed	
3. Taxable Earnings (from line 2)	3	Title	Date
4. Actual Tax Withheld at 2.100 %	4	Phone #	
5. Adjustments of Tax for Prior Period	5	THIS RETURN MUST	BE FILED ON
6. interest: 0.50% per month		OR BEFORE JANUAR	Y 18, 2025
7. 50%		MAKE CHECK OR M	. BERNARD
Name		110 WASHIN ST. BERNARD (
And		Voice 513-242-7710 Ext	Fax 513-242-54(

Period Ending JAN 15

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

TAX ID

FORM W1 1099 EMPLOYER'S V	VITHHOLDING	G - SEMI-MONTHLY		
1. Number of Taxable Employees	1		_ ,	
2. Total Salaries, Wages, Commissions and other Compensation			Tax Yea	r 2025 on and statements contained here
paid all employees	2		in and in any schedules or exhibit	
			Signed	
3. Taxable Earnings (from line 2)	3			Date
A Actual Tax Withheld at 2.100 %			Phone #	Date
Adjustments of Tax for Prior Period.			THIS RETURN MUS!	T DE ETTED ON
b. interest: 0.50% per month.			1	
7. 50%	7		OR BEFORE FEBRUA	<u>'</u>
B. Total (Include Interest and Penalty if Due).	8		-	MONEY ORDER TO:
(T. BERNARD
				INGTON AVE.
Name			ST. BERNARD	OH 45217-1318
And			Value 540 040 7740 Feb	F 540 040 5400
Alla			Voice 513-242-7710 Ext	Fax 513-242-5402
Address				
Address			Period Ending JAN 31	
		TAX	X ID	
			PARTMENT PROMPTLY OF ANY CHANGE IN C	WNERSHIP OR NAME AND ADDRESS.
FORM W1 1099 EMPLOYER'S V	VITHHOLDING	S - SEMI-MONTHLY		
			Ī	
. Number of Taxable Employees			Tax Yea	r 2025
aid all employees				on and statements contained here
. ,			in and in any schedules or exhibi	
			Signed	
B. Taxable Earnings (from line 2)	. 3		Title	Date
. Actual Tax Withheld at 2.100 %			Phone #	
. Adjustments of Tax for Prior Period	. 5		THIS RETURN MUS	T BE FILED ON
6. interest: 0.50% per month	6		OR BEFORE FEBRUA	ARY 18, 2025
. 50%	7			MONEY ORDER TO:
B. Total (Include Interest and Penalty if Due)	. 8			T. BERNARD
			110 WASH	INGTON AVE.
Name			ST. BERNARD	OH 45217-1318
And			Voice 513-242-7710 Ext	Fax 513-242-5402
Address			Period Ending FEB 15	
		TAX	X ID	
		NOTIFY INCOME TAX DE	PARTMENT PROMPTLY OF ANY CHANGE IN C	WNERSHIP OR NAME AND ADDRESS.
FORM W1 1099 EMPLOYER'S V	VITHHOLDING	6 - SEMI-MONTHLY	_	
. Number of Taxable Employees	1		T V	× 2025
. Total Salaries, Wages, Commissions and other Compensation			Tax Yea	r 2025 on and statements contained here
aid all employees	2		in and in any schedules or exhibit	
			Signed	
Tayable Farnings (from line 2)				
. Taxable Earnings (from line 2).				Date
Actual Tax Withheld at 2.100 %			Phone #	
Adjustments of Tax for Prior Period	. 3		THIS RETURN MUS	
. interest: 0.50% per month.	7		OR BEFORE MARCH	3, 2025
. 50%	7		MAKE CHECK OR	MONEY ORDER TO:
. Total (Include Interest and Penalty if Due)	. 0			T. BERNARD
			110 WASH	INGTON AVE.
Name			ST. BERNARD	OH 45217-1318
And			Voice 513-242-7710 Ext	Fax 513-242-5402

Period Ending FEB 28

TAX ID

FORM W1 1099 EMPLOYER'S W	VITHHOLDING - SEI	MI-MONTHLY		
1. Number of Taxable Employees	1		ToolVana	0005
2. Total Salaries, Wages, Commissions and other Compensation			Tax Year I hereby certify that the information a	
paid all employees	2		in and in any schedules or exhibits a	
			Signed	
2. Tarable Families (frame line 0)				
3. Taxable Earnings (from line 2)			Title	Date
4. Actual Tax Withheld at 2.100 %			Phone #	
5. Adjustments of Tax for Prior Period	. 5		THIS RETURN MUST	
6. interest: 0.50% per month	0		OR BEFORE MARCH	18, 2025
7. 50%	7		MAKE CHECK OR M	ONEY ORDER TO:
8. Total (Include Interest and Penalty if Due)			CITY OF ST.	BERNARD
			110 WASHING	GTON AVE.
Name			ST. BERNARD O	H 45217-1318
And			Voice 513-242-7710 Ext	Fax 513-242-5402
Address		P	eriod Ending MAR 15	
		TAX I	D	
		NOTIFY INCOME TAX DEPAR	RTMENT PROMPTLY OF ANY CHANGE IN OWN	ERSHIP OR NAME AND ADDRESS.
FORM W1 1099 EMPLOYER'S W	VITHHOLDING - SEI	MI-MONTHLY		
1. Number of Taxable Employees	11			
Total Salaries, Wages, Commissions and other Compensation			Tax Year	
paid all employees			I hereby certify that the information a	
			in and in any schedules or exhibits a	
			Signed	
3. Taxable Earnings (from line 2)	. 3		Title	Date
4. Actual Tax Withheld at 2.100 %			Phone #	
5. Adjustments of Tax for Prior Period	. 5		THIS RETURN MUST	BE FILED ON
6. interest: 0.50% per month	6		OR BEFORE APRIL	3, 2025
6. interest: 0.50% per month	7		MAKE CHECK OR M	<u> </u>
8. Total (Include Interest and Penalty if Due)	. 8			
			CITY OF ST.	
Name			110 WASHING ST. BERNARD O	
Name			SI. BERNARD O	7F 45217-1516
And				= = = = = = = = = = = = = = = = = = = =
And			Voice 513-242-7710 Ext	Fax 513-242-5402
A 1.1				
Address		P	eriod Ending MAR 31	
		TAX I	n	
		NOTIFY INCOME TAX DEPAR	RTMENT PROMPTLY OF ANY CHANGE IN OWN	ERSHIP OR NAME AND ADDRESS.
FORM W1 1099 EMPLOYER'S W	VITHHOLDING - SEI	MI-MONTHLY		
1. Number of Taxable Employees	1		T V	0005
2. Total Salaries, Wages, Commissions and other Compensation	1		Tax Year I hereby certify that the information a	
paid all employees	2		in and in any schedules or exhibits a	
			Signed	
3. Taxable Earnings (from line 2)			Title	Date
4. Actual Tax Withheld at 2.100 %			Phone #	
5. Adjustments of Tax for Prior Period	. 5		THIS RETURN MUST	BE FILED ON
6. interest: 0.50% per month	6		OR BEFORE APRIL	18, 2025
7. 50%	7		MAKE CHECK OR M	
8. Total (Include Interest and Penalty if Due)	. 8		CITY OF ST.	
			110 WASHING	
Namo			ST. BERNARD O	
Name			ST. BERNARD O	70217-1010
And			Vaina 540 040 7740 5 1	F F40 040 F400
/ uIU			Voice 513-242-7710 Ext	Fax 513-242-5402

Period Ending APR 15

TAX ID

FORM W1 1099 EMPLOYER'S W	VITHHOLDING - SEMI-MO	ONTHLY	
1. Number of Taxable Employees	1		
2. Total Salaries, Wages, Commissions and other Compensation			ear 2025 ation and statements contained here
paid all employees	2		ation and statements contained here iibits attached are true and correct.
2. Tarable Families (frame line 0)			
3. Taxable Earnings (from line 2)			Date
4. Actual Tax Withheld at 2.100 %		Phone #	
5. Adjustments of Tax for Prior Period	. 5	THIS RETURN MU	
6. interest: 0.50% per month.	7	OR BEFORE MAY	3, 2025
7. 50%	7	MAKE CHECK O	R MONEY ORDER TO:
8. Total (Include Interest and Penalty if Due)	. 0	CITY OF	ST. BERNARD
		110 WAS	HINGTON AVE.
Name		ST. BERNAR	D OH 45217-1318
And		Voice 513-242-7710 E	xt Fax 513-242-5402
Address		Period Ending APR 30	1
		-	
		TAX ID	
		NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN	NOWNERSHIP OR NAME AND ADDRESS.
FORM W1 1099 EMPLOYER'S W	VITHHOLDING - SEMI-MO	ONTHLY	
1. Number of Taxable Employees	11		
Total Salaries, Wages, Commissions and other Compensation			ear 2025
paid all employees			ation and statements contained here
			libits attached are true and correct.
		Signed	
3. Taxable Earnings (from line 2)	. 3	Title	Date
4. Actual Tax Withheld at 2.100 %		Phone #	
5. Adjustments of Tax for Prior Period	. 5	THIS RETURN MU	ST BE FILED ON
6. interest: 0.50% per month	6	OR BEFORE MAY	18. 2025
7. 50%	7		R MONEY ORDER TO:
8. Total (Include Interest and Penalty if Due)	. 8		
			ST. BERNARD
Name			SHINGTON AVE. SD OH 45217-1318
Name		SI. BERNAR	D OH 45217-1316
And			
Allu		Voice 513-242-7710 E	xt Fax 513-242-5402
A 1.1			
Address		Period Ending MAY 15	;
		TAX ID	
			N CHANEBOUR OF MAME AND ADDRESS
		NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN	OWNERSHIP OR NAME AND ADDRESS.
50 DM W/4 4000	WITH HOLDING OF MAN 144		
FORM W1 1099 EMPLOYER'S W	VITHHOLDING - SEMI-MO	UNTHLY	
1. Number of Taxable Employees	1	Tay Va	ear 2025
2. Total Salaries, Wages, Commissions and other Compensation			ation and statements contained here
paid all employees	2		nibits attached are true and correct.
		Signed	
0.7 11 5 1 (6 11 0)			
3. Taxable Earnings (from line 2)			Date
4. Actual Tax Withheld at 2.100 %		Phone #	
5. Adjustments of Tax for Prior Period	. 5	THIS RETURN MU	ST BE FILED ON
6. interest: 0.50% per month.	6	OR BEFORE JUNE	3, 2025
7. 50%	7	MAKE CHECK O	R MONEY ORDER TO:
8. Total (Include Interest and Penalty if Due)	. 8		ST. BERNARD
			SHINGTON AVE.
Name			D OH 45217-1318
I Vai II C		OT. BEINNAN	5 511 40217-1010
And)/-t 540 040 7740 F	5.4 E-1: 540 040 5400
/ uIU		Voice 513-242-7710 E	ext Fax 513-242-5402

Period Ending MAY 31

TAX ID

FORM W1 1099	EMPLOYER'S WITHHOLDING - SEN	I-MONTHLY
Number of Taxable Employees		Tou Voor 0005
2. Total Salaries, Wages, Commission		Tax Year 2025 I hereby certify that the information and statements contained here
paid all employees	2	in and in any schedules or exhibits attached are true and correct.
		Signed
3. Taxable Earnings (from line 2)	3	Date
4. Actual Tax Withheld at 2.100 %		Phone #
5. Adjustments of Tax for Prior Period.	<u>1</u> 5	THIS RETURN MUST BE FILED ON
interest: 0.50% per month	6	OR BEFORE JUNE 18, 2025
7. 50%	I	MAKE CHECK OR MONEY ORDER TO:
3. Total (Include Interest and Penalty in	if Due)	CITY OF ST. BERNARD
		110 WASHINGTON AVE.
Name		ST. BERNARD OH 45217-1318
And		Voice 513-242-7710 Ext Fax 513-242-5402
Address		Period Ending JUN 15
		TAX ID
		NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
FORM W1 1099	EMPLOYER'S WITHHOLDING - SEM	I-MONTHLY
Number of Taxable Employees		T V 0005
2. Total Salaries, Wages, Commission	ons and other Compensation	Tax Year 2025 I hereby certify that the information and statements contained here
oaid all employees	2	in and in any schedules or exhibits attached are true and correct.
		Signed
3. Taxable Earnings (from line 2)	3	
I. Actual Tax Withheld at 2.100 %		Phone #
5. Adjustments of Tax for Prior Period.		THIS RETURN MUST BE FILED ON
3 interest: 0.50% per month	[6]	
3 interest: 0.50% per month	[6]	OR BEFORE JULY 3, 2025
6. interest: 0.50% per month		OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO:
6. interest: 0.50% per month		OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD
6. interest: 0.50% per month		OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO:
6. interest: 0.50% per month		OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE.
6. interest: 0.50% per month		OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318
6. interest: 0.50% per month		OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318
6. interest: 0.50% per month		OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318 Voice 513-242-7710 Ext Fax 513-242-5402
6. interest: 0.50% per month		OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318 Voice 513-242-7710 Ext Fax 513-242-5402 Period Ending JUN 30
6. interest: 0.50% per month		OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318 Voice 513-242-7710 Ext Fax 513-242-5402 Period Ending JUN 30 TAX ID
6. interest: 0.50% per month		OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318 Voice 513-242-7710 Ext Fax 513-242-5402 Period Ending JUN 30
6. interest: 0.50% per month		OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318 Voice 513-242-7710 Ext Fax 513-242-5402 Period Ending JUN 30 TAX ID
6. interest: 0.50% per month		OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318 Voice 513-242-7710 Ext Fax 513-242-5402 Period Ending JUN 30 TAX ID NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
6. interest: 0.50% per month	EMPLOYER'S WITHHOLDING - SEN	OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318 Voice 513-242-7710 Ext Fax 513-242-5402 Period Ending JUN 30 TAX ID NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
6. interest: 0.50% per month	EMPLOYER'S WITHHOLDING - SEN	OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318 Voice 513-242-7710 Ext Fax 513-242-5402 Period Ending JUN 30 TAX ID NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS. I-MONTHLY Tax Year 2025
6. interest: 0.50% per month	EMPLOYER'S WITHHOLDING - SEN	OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318 Voice 513-242-7710 Ext Fax 513-242-5402 Period Ending JUN 30 TAX ID NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS. I-MONTHLY Tax Year 2025 I hereby certify that the information and statements contained here
6. interest: 0.50% per month	EMPLOYER'S WITHHOLDING - SEN	OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318 Voice 513-242-7710 Ext Fax 513-242-5402 Period Ending JUN 30 TAX ID NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS. I-MONTHLY Tax Year 2025 I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.
6. interest: 0.50% per month	EMPLOYER'S WITHHOLDING - SEN	OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318 Voice 513-242-7710 Ext Fax 513-242-5402 Period Ending JUN 30 TAX ID NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS. I-MONTHLY Tax Year 2025 I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct. Signed
6. interest: 0.50% per month	EMPLOYER'S WITHHOLDING - SEN	OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318 Voice 513-242-7710 Ext Fax 513-242-5402 Period Ending JUN 30 TAX ID NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS. I-MONTHLY Tax Year 2025 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
6. interest: 0.50% per month	EMPLOYER'S WITHHOLDING - SEN	OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318 Voice 513-242-7710 Ext Fax 513-242-5402 Period Ending JUN 30 TAX ID NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS. I-MONTHLY Tax Year 2025 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 #
6. interest: 0.50% per month	EMPLOYER'S WITHHOLDING - SEN	Period Ending JUN 30 TAX ID NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS. I-MONTHLY Tax Year 2025 I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct. Signed Title Phone # THIS RETURN MUST BE FILED ON
6. interest: 0.50% per month	EMPLOYER'S WITHHOLDING - SEN	Period Ending JUN 30 TAX ID NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS. I-MONTHLY Tax Year 2025 I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct. Signed Title Phone # THIS RETURN MUST BE FILED ON OR BEFORE JULY 18, 2025
6. interest: 0.50% per month	EMPLOYER'S WITHHOLDING - SEN	Period Ending JUN 30 TAX ID NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS. I-MONTHLY Tax Year 2025 I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct. Signed Title Phone # THIS RETURN MUST BE FILED ON OR BEFORE JULY 18, 2025 MAKE CHECK OR MONEY ORDER TO:
6. interest: 0.50% per month	EMPLOYER'S WITHHOLDING - SEN ons and other Compensation 3 4 5 6 7 7	OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318 Voice 513-242-7710 Ext Fax 513-242-5402 Period Ending JUN 30 TAX ID NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS. I-MONTHLY Tax Year 2025 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 18, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD
6. interest: 0.50% per month	EMPLOYER'S WITHHOLDING - SEN	Period Ending JUN 30 TAX ID NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS. I-MONTHLY Tax Year 2025 I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct. Signed Title Phone # THIS RETURN MUST BE FILED ON OR BEFORE JULY 18, 2025 MAKE CHECK OR MONEY ORDER TO:
6. interest: 0.50% per month	EMPLOYER'S WITHHOLDING - SEN	OR BEFORE JULY 3, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318 Voice 513-242-7710 Ext Fax 513-242-5402 Period Ending JUN 30 TAX ID NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS. I-MONTHLY Tax Year 2025 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 18, 2025 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE.

Address

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

Period Ending JUL 15

TAX ID

FORM W1 1099 EMPLOYER'S W	WITHHOLDING - SEMI-MONTHLY		
1. Number of Taxable Employees	. 11		
2. Total Salaries, Wages, Commissions and other Compensation		Tax Year 20	
paid all employees	. 2	I hereby certify that the information and in and in any schedules or exhibits atta	
		Signed	
2. Tarable Families (frame line 0)			
3. Taxable Earnings (from line 2)		Title	Date
4. Actual Tax Withheld at 2.100 %		Phone #	
5. Adjustments of Tax for Prior Period	. 5	THIS RETURN MUST BE	_
6. interest: 0.50% per month.	. 0	OR BEFORE AUGUST	3, 2025
7. 50%	. [/]	MAKE CHECK OR MOI	NEY ORDER TO:
8. Total (Include Interest and Penalty if Due)	. 0	CITY OF ST. BE	RNARD
		110 WASHINGT	ON AVE.
Name		ST. BERNARD OH	45217-1318
And		Voice 513-242-7710 Ext	Fax 513-242-5402
Address		Period Ending JUL 31	
		-	
		TAX ID	
	NOTIFY INCOM	ME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERS	HIP OR NAME AND ADDRESS.
FORM W1 1099 EMPLOYER'S W	WITHHOLDING - SEMI-MONTHLY		
1. Number of Taxable Employees	1		
Total Salaries, Wages, Commissions and other Compensation		Tax Year 20	=
paid all employees		I hereby certify that the information and	
		in and in any schedules or exhibits atta	
		Signed	
3. Taxable Earnings (from line 2)	. 3	Title	Date
4. Actual Tax Withheld at 2.100 %		Phone #	
5. Adjustments of Tax for Prior Period	. 5	THIS RETURN MUST BE	FILED ON
6. interest: 0.50% per month	. 6	OR BEFORE AUGUST 1	8. 2025
7. 50%	. 7	MAKE CHECK OR MOI	
8. Total (Include Interest and Penalty if Due)	. 8		
		CITY OF ST. BE	
Name		110 WASHINGT ST. BERNARD OH	
Name		ST. BERNARD OF	45217-1310
And			= = = = = = = = = = = = = = = = = = = =
And		Voice 513-242-7710 Ext	Fax 513-242-5402
A 1.1			
Address		Period Ending AUG 15	
		TAX ID	
	NOTIFY INCOM	ME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERS	HIP OR NAME AND ADDRESS.
FORM W1 1099 EMPLOYER'S W	WITHHOLDING - SEMI-MONTHLY		
1. Number of Taxable Employees	. 11	Tou Voor 00	.O.F
2. Total Salaries, Wages, Commissions and other Compensation	n T	Tax Year 20 I hereby certify that the information and	
paid all employees	. 2	in and in any schedules or exhibits atta	
		Signed	
3. Taxable Earnings (from line 2)		Title	Date
4. Actual Tax Withheld at 2.100 %		Phone #	
5. Adjustments of Tax for Prior Period	. 5	THIS RETURN MUST BE	FILED ON
6. interest: 0.50% per month.	. 6	OR BEFORE SEPTEMBER	3, 2025
7. 50%	. [/]	MAKE CHECK OR MOI	
8. Total (Include Interest and Penalty if Due)	. 8	CITY OF ST. BE	
Nama		110 WASHINGT	
Name		ST. BERNARD OH	43217-1310
And			
And		Voice 513-242-7710 Ext	Fax 513-242-5402

Period Ending AUG 31

TAX ID

FORM W1 1099 EMPLOYER'S W	VITHHOLDING -	SEMI-MONTHLY		
1. Number of Taxable Employees	. 11] -	
2. Total Salaries, Wages, Commissions and other Compensation			Tax Year 2 I hereby certify that the information a	
paid all employees	. 2		in and in any schedules or exhibits a	
			Signed	
2. Tarable Families (frame line 0)				
3. Taxable Earnings (from line 2)			Title	Date
4. Actual Tax Withheld at 2.100 %			Phone #	
5. Adjustments of Tax for Prior Period	. 5		THIS RETURN MUST	
6. interest: 0.50% per month.	7		OR BEFORE SEPTEMBE	ER 18, 2025
7. 50%	7		MAKE CHECK OR MO	ONEY ORDER TO:
8. Total (Include Interest and Penalty if Due)	. 0		CITY OF ST. E	BERNARD
			110 WASHING	STON AVE.
Name			ST. BERNARD OF	H 45217-1318
And			Voice 513-242-7710 Ext	Fax 513-242-5402
Address			Period Ending SEP 15	
		TA	X ID	
		NOTIFY INCOME TAX DE	EPARTMENT PROMPTLY OF ANY CHANGE IN OWNE	RSHIP OR NAME AND ADDRESS.
FORM W1 1099 EMPLOYER'S V	VITHHOLDING -	SEMI-MONTHLY		
1. Number of Taxable Employees	11		7	
Total Salaries, Wages, Commissions and other Compensation			Tax Year 2	2025
paid all employees			I hereby certify that the information a	
F			in and in any schedules or exhibits a	
			Signed	
3. Taxable Earnings (from line 2)	. 3		Title	Date
4. Actual Tax Withheld at 2.100 %			Phone #	
5. Adjustments of Tax for Prior Period			THIS RETURN MUST	BE FILED ON
6 interest: 0.50% per month	6		OR BEFORE OCTOBER	
6. interest: 0.50% per month	7			•
8. Total (Include Interest and Penalty if Due)	8		MAKE CHECK OR MO	
on rotal (molado microst and roman) in Duoj,			CITY OF ST. E	
			110 WASHING	
Name			ST. BERNARD OF	H 45217-1318
A . I				
And			Voice 513-242-7710 Ext	Fax 513-242-5402
Address			Period Ending SEP 30	
		Τ Δ	_	
		IA	X ID	
		NOTIFY INCOME TAX DE	EPARTMENT PROMPTLY OF ANY CHANGE IN OWNE	RSHIP OR NAME AND ADDRESS.
FORM W1 1099 EMPLOYER'S V	VITHHOLDING -	SEMI-MONTHLY		
1. Number of Taxable Employees	11		7	
Total Salaries, Wages, Commissions and other Compensation			Tax Year 2	
paid all employees			I hereby certify that the information a	
			in and in any schedules or exhibits a	
			Signed	
3. Taxable Earnings (from line 2)	. 3		Title	Date
4. Actual Tax Withheld at 2.100 %			Phone #	
5. Adjustments of Tax for Prior Period			THIS RETURN MUST	BE FILED ON
6. interest: 0.50% per month.	6		OR BEFORE OCTOBER	
7. 50%	7			
8. Total (Include Interest and Penalty if Due).			MAKE CHECK OR MO	
o. Total (morado mitorest ana Ferialty ii Due)	· [-]	ļ	CITY OF ST. E	BERNARD
			110 WASHING	
Name			ST. BERNARD OF	H 45217-1318
And			Voice 513-242-7710 Ext	Fax 513-242-5402

Period Ending OCT 15

TAX ID

FORM W1 1099 EMPLOYER'S W	WITHHOLDING - SEN	MI-MONTHLY	
1. Number of Taxable Employees	. 11	- v	
2. Total Salaries, Wages, Commissions and other Compensation		Tax Year 2	
paid all employees	. 2	in and in any schedules or exhibits a	
		Signed	
2. Tarable Families (frame line 0)			
3. Taxable Earnings (from line 2)		Title	Date
4. Actual Tax Withheld at 2.100 %		Phone #	
5. Adjustments of Tax for Prior Period	. 5	THIS RETURN MUST	
6. interest: 0.50% per month.	7	OR BEFORE NOVEMBEI	R 3, 2025
7. 50%	. [/]	MAKE CHECK OR MO	ONEY ORDER TO:
8. Total (Include Interest and Penalty if Due)	. 0	CITY OF ST. I	BERNARD
		110 WASHING	STON AVE.
Name		ST. BERNARD OF	H 45217-1318
And		Voice 513-242-7710 Ext	Fax 513-242-5402
Address		Period Ending OCT 31	
		_	
		TAX ID	
		NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNER	ERSHIP OR NAME AND ADDRESS.
FORM W1 1099 EMPLOYER'S V	WITHHOLDING - SEN	/II-MONTHLY	
1. Number of Taxable Employees	11		
Total Salaries, Wages, Commissions and other Compensation		Tax Year 2	
paid all employees		I hereby certify that the information a	
		in and in any schedules or exhibits a	
		Signed	
3. Taxable Earnings (from line 2)	. 3	Title	Date
4. Actual Tax Withheld at 2.100 %		Phone #	
5. Adjustments of Tax for Prior Period	. 5	THIS RETURN MUST	BE FILED ON
6. interest: 0.50% per month	6	OR BEFORE NOVEMBER	R 18, 2025
7. 50%	7	MAKE CHECK OR MO	
8. Total (Include Interest and Penalty if Due)	. 8		
		CITY OF ST. I	
Name		110 WASHING ST. BERNARD OF	
Name		S1. BERNARD OF	1 40217-1010
And			= = = = = = = = = = = = = = = = = = = =
And		Voice 513-242-7710 Ext	Fax 513-242-5402
A 1.1			
Address		Period Ending NOV 15	
		TAX ID	
		NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNE	RSHIP OR NAME AND ADDRESS.
FORM W1 1099 EMPLOYER'S W	WITHHOLDING - SEN	MI-MONTHLY	
1. Number of Taxable Employees	. 1	Tou Voor 1	2005
2. Total Salaries, Wages, Commissions and other Compensation	n T	Tax Year 2	
paid all employees	. 2	in and in any schedules or exhibits a	
		Signed	
3. Taxable Earnings (from line 2)		Title	Date
4. Actual Tax Withheld at 2.100 %		Phone #	
5. Adjustments of Tax for Prior Period	. 5	THIS RETURN MUST	BE FILED ON
6. interest: 0.50% per month	6	OR BEFORE DECEMBER	R 3, 2025
7. 50%	. [/]	MAKE CHECK OR MO	
8. Total (Include Interest and Penalty if Due)	. 8	CITY OF ST. E	
		110 WASHING	
Nama			
Name		ST. BERNARD OF	1 40211-1010
And		V	F., 540.040.515
And		Voice 513-242-7710 Ext	Fax 513-242-5402

Period Ending NOV 30

TAX ID

Address

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

FORM W1 1099 EMPLOYER'S WITHHOLDI	NG - SEINI-INION I TILT
1. Number of Taxable Employees	Tax Year 2025
Total Salaries, Wages, Commissions and other Compensation paid all employees	I hereby certify that the information and statements contained here
paid all ellipioyees	in and in any schedules or exhibits attached are true and correct.
	Signed
3. Taxable Earnings (from line 2)	Title Date
4. Actual Tax Withheld at 2.100 %	Phone #
5. Adjustments of Tax for Prior Period	THIS RETURN MUST BE FILED ON
6. interest: 0.50% per month	OR BEFORE DECEMBER 18, 2025
7. 50%	MAKE CHECK OR MONEY ORDER TO:
8. Total (Include Interest and Penalty if Due)	CITY OF ST. BERNARD
	110 WASHINGTON AVE.
Name	ST. BERNARD OH 45217-1318
And	Voice 513-242-7710 Ext Fax 513-242-5402
Address	Period Ending DEC 15
	TAX ID
	NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
1. Number of Taxable Employees	NG - SEMI-MONTHLY Tax Year 2025
1. Number of Taxable Employees	NG - SEMI-MONTHLY
1. Number of Taxable Employees	Tax Year 2025 I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct. Signed
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1. Number of Taxable Employees	Tax Year 2025 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
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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. interest: 0.50% per month. 6 7. 50%. 7	Tax Year 2025 I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct. Signed Title Phone # THIS RETURN MUST BE FILED ON OR BEFORE JANUARY 3, 2026 MAKE CHECK OR MONEY ORDER TO:
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. interest: 0.50% per month. 6 7. 50%. 7	Tax Year 2025 I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct. Signed Title Phone # THIS RETURN MUST BE FILED ON OR BEFORE JANUARY 3, 2026 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD
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. interest: 0.50% per month. 6 7. 50%. 7 8. Total (Include Interest and Penalty if Due). 8	Tax Year 2025 I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct. Signed Title Phone # THIS RETURN MUST BE FILED ON OR BEFORE JANUARY 3, 2026 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE.
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. interest: 0.50% per month. 6 7. 50%. 7	Tax Year 2025 I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct. Signed Title Phone # THIS RETURN MUST BE FILED ON OR BEFORE JANUARY 3, 2026 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD
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1. Number of Taxable Employees	Tax Year 2025 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 3, 2026 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318 Voice 513-242-7710 Ext Fax 513-242-5402 Period Ending DEC 31
1. Number of Taxable Employees	Tax Year 2025 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 3, 2026 MAKE CHECK OR MONEY ORDER TO: CITY OF ST. BERNARD 110 WASHINGTON AVE. ST. BERNARD OH 45217-1318 Voice 513-242-7710 Ext Fax 513-242-5402