Dear Employer:

This is your 2020 Employer's Quarterly Return of Tax Withheld package. Included are all four quarterly forms for your convenience. The quarterly forms are due as so indicated. We have also included the Employer Reconciliation of Income Tax Withheld for 2020. **All copies of W-2's for employee withholding and 1099's for work or ser ices performed in Strasburg must be submitted with the reconciliation.**

If you have any questions regarding your withholding forms, please contact the Village of Strasburg Income Tax Division at P.O. Box 527, Eaton Rapids, MI 48827. If you wish to contact by telephone, our number is (330) 878-7213.

Sincerely, INCOME TAX ADMINISTRATOR

Per ordinance No. O-20-2006 Sect 6, D: any employer with more than 15 employees must submit the reconciliation and W-2's electronically. An email with the information in MMREF or EFW2 format may be sent securely to https://securecontact.me/strasburgtax@issi-central.com.

WITHHOLDING PAYMENTS

P.O. BOX 527

EATON RAPIDS, MI 48827

TELEPHONE (330) 878-7213

If receipt is desired, submit additional copy and

enclose self-addressed, stamped envelope.

VILLAGE OF STRASBURG EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD ☐ AMENDED RETURN FORM WITH PAYMENT DO NOT ROUND Taxable Earnings paid all Employees subject to I hereby certify that the information and statements contained herein are true and correct Is this a courtesy withholding?..... ☐ YES ☐ NO Is this a final return? ☐ YES ☐ NO If yes, attach explanation (Official Title) _____ Date ___ Actual Tax Withheld in quarter for Village of Strasburg................................ 2. Federal ID no. Adjustment of tax for prior quarter (see instructions)................................ 3. 3. Phone no Penalty, 50% of the tax due4. 4. THIS RETURN MUST BE POSTMARKED ON OR 5. BEFORE THE DUE DATE SHOWN BELOW MAKE CHECK OR MONEY ORDER PAYABLE TO VILLAGE OF STRASBURG NAME AND ADDRESS MAIL TO: **1ST QUARTER** VILLAGE OF STRASBURG WITHHOLDING PAYMENTS JAN, FEB, MAR P.O. BOX 527 DUE ON OR BEFORE EATON RAPIDS, MI 48827 **APRIL 30, 2020** TELEPHONE (330) 878-7213 If receipt is desired, submit additional copy and FORM WH-Q enclose self-addressed, stamped envelope. VILLAGE OF STRASBURG EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD ☐ AMENDED **RETURN FORM WITH PAYMENT** DO NOT ROUND Taxable Earnings paid all Employees subject to I hereby certify that the information and statements contained herein are true and correct. Is this a courtesy withholding?..... ☐ YES ☐ NO (Signed) Is this a final return? ☐ YES ☐ NO If yes, attach explanation _____ Date ___ (Official Title) Actual Tax Withheld in quarter for Village of Strasburg............................... 2. Federal ID no. ___ Adjustment of tax for prior quarter (see instructions)................................ 3. 3. Penalty, 50% of the tax due4. 4. THIS RETURN MUST BE POSTMARKED ON OR 5 Interest 5. BEFORE THE DUE DATE SHOWN BELOW. MAKE CHECK OR MONEY ORDER PAYABLE TO **VILLAGE OF STRASBURG** NAME AND ADDRESS MAIL TO: 2ND QUARTER VILLAGE OF STRASBURG

APR, MAY, JUN

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