## ETT-11 City of Columbus, Income Tax Division Employer's Quarterly Return of City Tax Withheld

EIN/FID Number					DUE ON OR BEFORE		QUARTER ENDING			
Employer Name					Check this box if <b>AMENDED</b>					
Address							account be in	activated?	YES NO	
City	State Zip Code				IF YES, please explain			Effective Date		
Cities	Tax Qualified Wages Rate	Tax Due	Due	D	erest ue inst.)	Late Charge (see inst.)	Total Due	Less Prior Payment	Net Due	
01 Columbus	2.5%									
09 Groveport	2.0%									
10 Obetz	2.5%									
11 Canal Winchester	2.0%									
13 Marble Cliff	2.0%									
14 Brice	2.0%									
16 Harrisburg	1.0%						]			
88 ALT Columbus (courtesy)							]			
89 ALT Groveport (courtesy)										
90 ALT Obetz (courtesy)										
91 ALT Canal Win. (courtesy)										
93 ALT Marble Cliff (courtesy)										
94 ALT Brice (courtesy)							]			
						TOTAL	AL			
					Please do not remit amounts less than \$1.00					
OFFICER NAME (Please Print)  OFFICER SIGNATURE							OFFICER TITLE			

Make checks payable to: CITY TREASURER
Mail to: Employer Withholdin

CITY TREASURER
Employer Withholding Tax
PO Box 182489

Columbus, OH 43218-2489

This return must be filed even though no wages were paid or a tax liability incurred during the quarter. THIS FORM MUST ACCOMPANY

YOUR TAX PAYMENT

This form and Form IT-15 may be electronically filed and paid at www.columbustax.net