

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____

Address: _____

City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____

Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
FEIN: _____

Withholding Period 1/15/2026	Due Date 01/21/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____

Address: _____

City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____

Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
FEIN: _____

Withholding Period 1/31/2026	Due Date 02/04/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____

Address: _____

City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____

Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
FEIN: _____

Withholding Period 2/15/2026	Due Date 02/19/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____

Address: _____

City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____

Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
FEIN: _____

Withholding Period 2/28/2026	Due Date 03/04/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party

 COURTESY WITHHOLDING
 ONLY INDICATE QUARTER
 REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

 Account #: _____
 FEIN: _____

Withholding Period 3/15/2026	Due Date 03/18/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party

 COURTESY WITHHOLDING
 ONLY INDICATE QUARTER
 REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

 Account #: _____
 FEIN: _____

Withholding Period 3/31/2026	Due Date 04/03/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party

 COURTESY WITHHOLDING
 ONLY INDICATE QUARTER
 REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

 Account #: _____
 FEIN: _____

Withholding Period 4/15/2026	Due Date 04/20/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party

 COURTESY WITHHOLDING
 ONLY INDICATE QUARTER
 REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

 Account #: _____
 FEIN: _____

Withholding Period 4/30/2026	Due Date 05/05/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
 FEIN: _____

Withholding Period 5/15/2026	Due Date 05/20/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
 FEIN: _____

Withholding Period 5/31/2026	Due Date 06/03/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
 FEIN: _____

Withholding Period 6/15/2026	Due Date 06/18/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
 FEIN: _____

Withholding Period 6/30/2026	Due Date 07/06/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
 FEIN: _____

Withholding Period 7/15/2026	Due Date 07/20/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
 FEIN: _____

Withholding Period 7/31/2026	Due Date 08/05/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
 FEIN: _____

Withholding Period 8/15/2026	Due Date 08/19/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
 FEIN: _____

Withholding Period 8/31/2026	Due Date 09/03/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
 FEIN: _____

Withholding Period 9/15/2026	Due Date 09/18/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
 FEIN: _____

Withholding Period 9/30/2026	Due Date 10/05/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
 FEIN: _____

Withholding Period 10/15/2026	Due Date 10/20/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
 FEIN: _____

Withholding Period 10/31/2026	Due Date 11/04/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
 FEIN: _____

Withholding Period 11/15/2026	Due Date 11/18/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
 FEIN: _____

Withholding Period 11/30/2026	Due Date 12/03/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
 FEIN: _____

Withholding Period 12/15/2026	Due Date 12/18/2026
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1

Hillsboro Income Tax Office RETURN OF INCOME TAX WITHHELD

Name: _____
 Address: _____
 City/State/Zip: _____

Printed Name of Responsible Party _____

COURTESY WITHHOLDING
ONLY INDICATE QUARTER
REPORTED:

Signature of Responsible Party _____ Date _____
 Phone: _____ E-Mail: _____

Remit form and payment to:
 Hillsboro Income Tax Office
 130 North High Street
 Hillsboro, OH 45133

Tax Rate: 1.50%

Account #: _____
 FEIN: _____

Withholding Period 12/31/2026	Due Date 01/06/2027
1. Gross Compensation Subject to Withholding	\$
2. Tax Withheld during Period	\$
3. Adjustment to Prior Period	\$
4. Penalty	\$
5. Interest	\$
6. TOTAL DUE	\$

Number of employees during period: _____ FORM TW-1