FORM W1 1493   EMPLOYER'S WITHHOLDING - QUARTERLY

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 1.500 %	4
5. Adjustments of Tax for Prior Period	5
6. Interest: .750% per month	6
7. Penalty: 50% of tax due	7
8. Total (Include Interest and Penalty if Due)	8

Name

And

Address

Tax Year 2026

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 30, 2026

MAKE CHECK OR MONEY ORDER TO:

EAST LIVERPOOL TAX DEPARTMENT
126 W 6th St
East Liverpool OH 43920

Voice 330-385-5437 Ext   Fax 330-386-7865

Period Ending JAN-FEB-MAR

TAX ID

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

FORM W1 1493   EMPLOYER'S WITHHOLDING - QUARTERLY

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Name

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Address

Tax Year 2026

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 31, 2026

MAKE CHECK OR MONEY ORDER TO:

EAST LIVERPOOL TAX DEPARTMENT
126 W 6th St
East Liverpool OH 43920

Voice 330-385-5437 Ext   Fax 330-386-7865

Period Ending APR-MAY-JUN

TAX ID

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

FORM W1 1493   EMPLOYER'S WITHHOLDING - QUARTERLY

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Name

And

Address

Tax Year 2026

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 31, 2026

MAKE CHECK OR MONEY ORDER TO:

EAST LIVERPOOL TAX DEPARTMENT
126 W 6th St
East Liverpool OH 43920

Voice 330-385-5437 Ext   Fax 330-386-7865

Period Ending JUL-AUG-SEP

TAX ID

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

FORM W1 1493   EMPLOYER'S WITHHOLDING - QUARTERLY

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 1.500 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. Interest: .750% per month.	6	
7. Penalty: 50% of tax due.	7	
8. Total (Include Interest and Penalty if Due).	8	

Tax Year 2026

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 31, 2027

MAKE CHECK OR MONEY ORDER TO:
EAST LIVERPOOL TAX DEPARTMENT
126 W 6th St
East Liverpool OH 43920

Voice 330-385-5437 Ext   Fax 330-386-7865

Name

And

Address

Period Ending OCT-NOV-DEC

TAX ID

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