

DWQ-1 Employer's Quarterly Return of City Tax Withheld

		Tax Year	Quarter
EIN/FID Number:	W	Choose an item.	Choose an item.
Employer Name:		Should this account be inac IF YES	tivated? 🗆 YES 🗆 No
Address:		Please explain	
City: State:	Zip:	Effective date	

WITHHOLDING INFORMATION

	QUALIFYING WAGES	TAX RATE	TAX DUE	PENALTY	INTEREST	TOTAL DUE	LESS PRIOR PAYMENT	NET DUE
Dublin Workplace		2%						
Dublin Remote Work		2%						
Courtesy*								
	for tax due from r e or no local tax	esidents	s working in cities wi	ith a	TOTAL			

**Please do not remit amounts of \$10.00 or less

Complete this section ONLY if you are AMENDING a prior return

Explanation for Changes:

Wages Originally Reported	Tax Originally Remitted	Corrected Wages	Corrected Tax Due	Difference (Tax Originally remitted less corrected tax due)

**Please do not remit amounts of \$10.00 or less

If difference is a negative, please indicate how you would like to handle the adjustment: **REFUND** CREDIT THE ADJUSTMENT FORWARD TO NEXT QUARTER

SIGNATURE

OFFICER NAME/TITLE (Please	print)	OFFICER SIGNATURE		
Make checks payable to: Mail to:	Dublin Division of Taxation PO Box 9062 Dublin, Ohio 43017-0962	DATE:		