

Q-1 Employer Quarterly Return of Withholding Tax

Name and Address:

CINCINNATI INCOME TAX DIVISION
P O BOX 634580
CINCINNATI OH 45263-4580

2025

Account #:

Fed ID#: _____ SSN#: _____

Quarter Ending: **March 31, 2025**

Due Date: **April 30, 2025**

Amount Due: \$ _____

Save a stamp, file online at <https://web2.civicacmi.com/Cincinnati>

Make check payable to: "City of Cincinnati"

Q-2 Employer Quarterly Return of Withholding Tax

Name and Address:

CINCINNATI INCOME TAX DIVISION
P O BOX 634580
CINCINNATI OH 45263-4580

2025

Account #:

Fed ID#: _____ SSN#: _____

Quarter Ending: **June 30, 2025**

Due Date: **July 31, 2025**

Amount Due: \$ _____

Save a stamp, file online at <https://web2.civicacmi.com/Cincinnati>

Make check payable to: "City of Cincinnati"

Q-3 Employer Quarterly Return of Withholding Tax

Name and Address:

CINCINNATI INCOME TAX DIVISION
P O BOX 634580
CINCINNATI OH 45263-4580

2025

Account #:

Fed ID#: _____ SSN#: _____

Quarter Ending: **September 30, 2025**

Due Date: **October 31, 2025**

Amount Due: \$ _____

Save a stamp, file online at <https://web2.civicacmi.com/Cincinnati>

Make check payable to: "City of Cincinnati"

Q-4 Employer Quarterly Return of Withholding Tax

Name and Address:

CINCINNATI INCOME TAX DIVISION
P O BOX 634580
CINCINNATI OH 45263-4580

2025

Account #:

Fed ID#: _____ SSN#: _____

Quarter Ending: **December 31, 2025**

Due Date: **January 31, 2026**

Amount Due: \$ _____

Save a stamp, file online at <https://web2.civicacmi.com/Cincinnati>

Make check payable to: "City of Cincinnati"