

CITY OF IRONTON, OHIO

INCOME TAX RETURN - INDIVIDUAL OR BUSINESS

TAX YEAR **2017**

CALENDAR YEAR _____ FISCAL YEAR _____ (BUSINESS)

RESIDENCY STATUS: _____ RESIDENT or _____ NON-RESIDENT PART YEAR RESIDENT - FROM _____ TO _____

DUE BY APRIL 15 OF EVERY YEAR -- FILING IS REQUIRED EVEN IF NO TAX IS DUE**TAXPAYERS NAME AND ADDRESS:****ACCOUNT NUMBER:****SOCIAL SECURITY NUMBERS:**

TAXPAYER

SPOUSE

BUSINESS / FEDERAL ID

PAGE 2 MUST BE COMPLETED IF YOU HAVE TAXABLE RENTAL PROPERTY OR BUSINESS INCOME.

CORPORATIONS BEGIN WITH LINE 2 PLEASE...

1. **BOX 5 MEDICARE WAGES**, SALARIES, TIPS, LOCAL WAGES, ETC. AND OTHER EMPLOYEE COMPENSATION (DEFERRED INCOME OF ANY KIND) 1 \$ _____
 MUST BE INCLUDED FOR CITY TAX PURPOSES) *** **ATTACH ALL W-2'S AND COPY OF FEDERAL RETURN**
2. OTHER TAXABLE INCOME FROM FEDERAL SCHEDULE C, E, K-1, 1099-MISC - **ATTACH ALL SCHEDULES** a loss is not deductible from wages 2 \$ _____
3. IF YOU, THE TAXPAYER ARE A FULL-TIME STUDENT/RESIDENT UNDER THE AGE OF 26 - APPLY THE STUDENT EXEMPTION -\$3000.00..... 3 \$(_____)
*** ATTACH COPY OF STUDENT INFORMATION AND I.D. FOR THE STUDENT EXEMPTION**
4. TAXABLE INCOME: LINE 1 PLUS LINE 2 MINUS LINE 3 IF APPLICABLE 4 \$ _____
5. IRONTON TAX LIABILITY (1% OF LINE 4) 5 \$ _____
6. CREDITS (Each W-2 stands independent)
- A. IRONTON INCOME TAX WITHHELD BY EMPLOYER(S) 6A \$ _____
- B. ESTIMATED TAXES PAID TO IRONTON 6B \$ _____
- C. PRIOR YEAR OVERPAYMENTS 6C \$ _____
- D. TOTAL CREDITS (ADD A, B, & C) 6D \$ _____
7. IF LINE 5 IS GREATER THAN LINE 6D PAYMENT OF BALANCE MUST ACCOMPANY THIS RETURN IF OVER \$10.00

TAX DUE (REFUND) LINE 5 MINUS 6D \$ _____***PENALTIES & INTEREST CHANGES AS PER OHIO HB5.**

- * A. LATE FILING PENALTY-AFTER DUE DATE, (APRIL 15) WILL BE \$25.00 PER MONTH, NOT TO EXCEED \$150.00 7A \$ _____
- * B. PENALTY - 15% OF AMOUNT SHOWN ON LINE 7 (IF NOT PAID BY APRIL 15) 7B \$ _____
- * C. INTEREST - 0.5% PER MONTH OF AMOUNT SHOWN ON LINE 7 (IF NOT PAID BY APRIL 15) 7C \$ _____
- D. TOTAL AMOUNT DUE - PAY IN FULL WITH RETURN** 7D \$ _____

8. OVERPAYMENT, IF OVER \$10.00, **TO BE REFUNDED \$** _____ **OR CREDITED \$** _____ TO NEXT YEAR ESTIMATE

NO PAYMENT OR REFUND / CREDIT FOR AMOUNT \$10.00 OR LESS**NOTICE:** BY LAW, ALL REFUNDS AND CREDITS, IN EXCESS OF \$10.00 ARE BEING REPORTED TO THE IRS

I CERTIFY THAT I HAVE EXAMINED THIS RETURN (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE. IF PREPARED BY A PERSON OTHER THAN TAXPAYER, THE DECLARATION BASED ON ALL INFORMATION OF WHICH PREPARER HAS ANY KNOWLEDGE.

Signature of Person Preparing if Other than Taxpayer

Date

Signature of Taxpayer or Agent

Date

Spouse's Signature (If Joint Return)

Date

Address

Phone Number

*I (we) authorize the Income Tax Department to discuss this return and enclosures with the preparer above..... Initial here _____

MAKE CHECK OR MONEY ORDER PAYABLE TO:**IRONTON INCOME TAX**

P.O. BOX 704, 301 SOUTH 3RD STREET

IRONTON, OHIO 45638

PH: 740-532-9241 FAX 740-533-6104

www.iron-ton-ohio.comtax1@iron-ton-ohio.com or tax2@iron-ton-ohio.com**DECLARATION OF ESTIMATED IRONTON, OHIO CITY INCOME TAX**

- 1 TOTAL ESTIMATED INCOME SUBJECT TO IRONTON INCOME TAX _____
- 2 IRONTON INCOME TAX (1% OF AMOUNT SHOWN ON LINE 1)..... _____
- 3 LESS OVERPAYMENT/CREDIT FROM PREVIOUS YEAR & EST. OF EMPLOYER WITHHOLDINGS _____
- 4 NET ESTIMATED TAX _____
- 5 AMOUNT DUE WITH DECLARATION (1/4 OF LINE 4) _____

Note: 1/4 of Declaration Payment is Due April 15th. Quarterly Payments Due June 15, Sept. 15 & Jan. 15.