CITY OF DUBLIN

Telephone (614) 410-4460
Toll Free (888) 490-8154
Fax (614) 923-5520

Forms available On Internet at
www.dublintax.com

PROVIDE NAME AND ADDRESS IN SPACE BELOW

INDIVIDUAL INCOME TAX RETURN 2008

FILE ON OR BEFORE APRIL 15, 2009

FORM D-1040EZ

FOR TAX DIVISION USE ONLY
☐ W-2 ☐ 2106

Primary social security number

Secondary social security number

Resident ☐ | Date moved in _____
Non Resident ☐ | Date moved out _____

City of Residence _____
City of Employment _____

FILING STATUS

☐ Single
☐ Married filing joint return (even if only one had income). Did you file a joint or separate return last year? ☐ Joint ☐ Separate
☐ Married filing separate return. Enter spouse's social security number above and full name here. ► _____

ALL APPROPRIATE W-2'S, FEDERAL SCHEDULES, EXPLANATIONS MUST BE ATTACHED

INCOME

1. Total W-2 wages. For multiple W-2's, complete worksheet A below W-2's **MUST BE ATTACHED** ..... 1 $ 0
2.* 2106 Expenses. Complete worksheet A below. See instructions. **MUST BE ATTACHED** ..... 2 $ 0
3. DUBLIN TAXABLE INCOME SUBTRACT LINE 2 FROM LINE 1 ..... 3 $ 0

TAX

4. DUBLIN INCOME TAX. MULTIPLY LINE 3 BY 2% (.02) ..... 4 $ 0

TAX WITHHELD, PAYMENTS AND CREDITS

5. Dublin income tax withheld from W-2 ..... 5 $ 0
6. Prior year credits ..... 6 $
7. Estimated payments ..... 7 $
8. Credit for taxes withheld to other cities (limit 2%). See instructions ..... 8 $ 0
9. Credit for taxes paid to other cities (limit 2%). See instructions ..... 9 $
10. TOTAL PAYMENTS AND CREDITS. ADD LINES 5 THROUGH 9 ..... 10 $ 0

BALANCE DUE, REFUND OR CREDIT

11. Total due. (No tax due if less than $1.01) ..... 11 $ 0
12. **OVERPAYMENT.** If line 4 is less than line 10, enter overpayment here ..... 12 $ 0
13. AMOUNT FROM LINE 12 TO BE REFUNDED (No refund if less than $1.01) ..... 13 $ 0
14. AMOUNT FROM LINE 12 TO BE CREDITED TO NEXT YEAR ..... 14 $

WORKSHEET A SALARIES,WAGES, TIPS AND OTHER EMPLOYEE COMPENSATION

ATTACH W-2'S HERE

COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5
CITY WHERE EMPLOYED	INCOME FROM EACH LOCAL W-2	*2106 EXPENSES, IF ANY	DUBLIN TAX WITHHELD	*OTHER CITY TAX WITHHELD
A.				
B.				
C.				
D.				
E. **TOTALS**	0	0	0	0
ENTER ON:	LINE 1	LINE 2	LINE 5	LINE 8

***Income reduced by 2106 and earned in another city must also reduce the tax withheld for that city by the same percentage.**

The undersigned declares that this return (and accompanying W-2's and schedules) is a true, correct and complete return for the taxable period stated and that the figures used herein are the same as used for Federal Income Tax purposes.

☐ If this return was prepared by a tax practitioner, check here if we may contact him/her directly with questions regarding the preparation of this form.

SIGNATURE OF PREPARER, IF OTHER THAN TAXPAYER | DATE

NAME AND ADDRESS OF PREPARER | TELEPHONE NUMBER

SIGNATURE OF TAXPAYER | DATE

SIGNATURE OF SPOUSE (IF JOINT RETURN) | TELEPHONE NUMBER

File with the City of Dublin
Division of Taxation
P.O. Box 9062, Dublin, Ohio 43017-0962

REFUNDS:
City of Dublin
Division of Taxation
P.O. Box 800, Dublin, Ohio 43017-0900

ONLINE PAYMENTS CAN BE MADE AT https://ipn.payments.com/otp/stde/codb