



City of Dublin

**INDIVIDUAL  
 INCOME TAX RETURN  
 TAX YEAR \_\_\_\_\_**

PROVIDE NAME AND CURRENT ADDRESS BELOW:

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Amended  Yes  No

Primary social security number

\_\_\_\_\_

Secondary social security number

\_\_\_\_\_

Resident  Date moved in \_\_\_\_\_

Non Resident  Date moved out \_\_\_\_\_

City of Residence \_\_\_\_\_

City of Employment \_\_\_\_\_

If partial year resident, indicate previous address \_\_\_\_\_

**FILING STATUS**  Single  
 Married filing joint return (even if only one had income). Did you file a joint return last year?  Yes  No  
 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**

|   |  |    |          |
|---|--|----|----------|
| <b>INCOME</b>                             | 1. Total W-2 wages. For multiple W-2's, complete worksheet A on reverse W-2's <b>MUST BE ATTACHED</b> ..         | 1  | \$ _____ |
|   | 2. 2106 Expenses. Complete worksheet A on reverse. See instructions. <b>MUST BE ATTACHED</b> .....               | 2  | \$ _____ |
|   | 3. TAXABLE WAGES. SUBTRACT LINE 2 FROM LINE 1 .....  | 3  | \$ _____ |
|   | 4. Other income. From schedule C, E or O on reverse. <b>MUST BE ATTACHED</b> .....                               | 4  | \$ _____ |
|   | 5. TOTAL INCOME. ADD LINES 3 AND 4 .....   | 5  | \$ _____ |
|   | 6. Adjustments. From schedule X on reverse .....   | 6  | \$ _____ |
|   | 7. DUBLIN TAXABLE INCOME. SUBTRACT LINE 6 FROM LINE 5 .....  | 7  | \$ _____ |
| <b>TAX</b>                                | 8. DUBLIN INCOME TAX. MULTIPLY LINE 7 BY 2% (.02) .....  | 8  | \$ _____ |
| <b>TAX WITHHELD, PAYMENTS AND CREDITS</b> | 9. Dublin income tax withheld. From W-2 or worksheet A on reverse .....  | 9  | \$ _____ |
|   | 10. Prior year credits .....   | 10 | \$ _____ |
|   | 11. Estimated payments .....   | 11 | \$ _____ |
|   | 12. Credit for taxes withheld to other cities ( <b>limit 2%</b> ). See instructions .....                        | 12 | \$ _____ |
|   | 13. Credit for taxes paid to other cities ( <b>limit 2%</b> ). See instructions .....                            | 13 | \$ _____ |
|   | 14. TOTAL PAYMENTS AND CREDITS. ADD LINES 9 THROUGH 13 .....   | 14 | \$ _____ |
| <b>BALANCE DUE</b>                        | 15. <b>BALANCE DUE.</b> If line 8 is more than 14, enter balance due here (No tax due if less than \$1.01) ..... | 15 | \$ _____ |
|   | 16. Penalty. 10% of balance due, if applicable (see instructions) .....  | 16 | \$ _____ |
|   | 17. Interest. 1 1/2% per month or fraction thereof, if applicable (see instructions) .....                       | 17 | \$ _____ |
|   | 18. Total due. Carry to line 28 below (No tax due if less than \$1.01) .....                                     | 18 | \$ _____ |
| <b>REFUND OR CREDIT</b>                   | 19. <b>OVERPAYMENT.</b> If line 8 is less than line 14, enter overpayment here .....                             | 19 | \$ _____ |
|   | 20. AMOUNT FROM LINE 19 TO BE <b>REFUNDED</b> (No refund if less than \$1.01) ....                               | 20 | \$ _____ |
|   | 21. AMOUNT FROM LINE 19 TO BE <b>CREDITED</b> TO NEXT YEAR .....   | 21 | \$ _____ |

ATTACH W-2'S HERE

**DECLARATION OF ESTIMATED TAX FOR** \_\_\_\_\_ **VOUCHER 1**

|                               |  |    |          |
|-------------------------------|--|----|----------|
| <b>ESTIMATE FOR NEXT YEAR</b> | 22. Total income subject to tax \$ _____ Multiply by tax rate of 2% (.02) .....  | 22 | \$ _____ |
|                               | 23. Subtract any estimated income tax to be withheld or paid to other cities .....   | 23 | \$ _____ |
|                               | 24. Estimated tax due (subtract line 23 from line 22) If Net estimated tax due is less than \$100, estimated tax payments are not required. .... | 24 | \$ _____ |
|                               | 25. Credit from line 21 above .....  | 25 | \$ _____ |
|                               | 26. First Quarter Estimate Payment (A minimum of 22.5% of line 24)* .....  | 26 | \$ _____ |
|                               | 27. If line 25 above is greater than line 26 then enter 0 .....  | 27 | \$ _____ |

|                |  |    |          |
|----------------|--|----|----------|
| <b>TAX DUE</b> | 28. Enter balance due from line 18 above (No tax due if less than \$1.01) .....          | 28 | \$ _____ |
|                | 29. TOTAL TAX DUE. ADD LINES 27 & 28. PLEASE MAKE CHECKS PAYABLE TO CITY OF DUBLIN ..... | 29 | \$ _____ |

\*First Quarter Estimate should be paid with this return.

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 return.

The undersigned declares that this return (and accompanying 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.

\_\_\_\_\_  
 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

All appropriate Federal schedules must be attached. A return is not complete unless such schedules are included.

**WORKSHEET A SALARIES, WAGES, TIPS AND OTHER EMPLOYEE COMPENSATION**

| COLUMN 1            | COLUMN 2             | COLUMN 3              | COLUMN 4               | COLUMN 5            | COLUMN 6                 | COLUMN 7                                     |
|---------------------|----------------------|-----------------------|------------------------|---------------------|--------------------------|--|
| CITY WHERE EMPLOYED | BOX 5 WAGES FROM W-2 | BOX 18 WAGES FROM W-2 | *2106 EXPENSES, IF ANY | DUBLIN TAX WITHHELD | *OTHER CITY TAX WITHHELD | CREDIT FOR TAXES WITHHELD TO OTHER CITY/JEDD |
| A.                  |                      |                       |                        |                     |                          |  |
| B.                  |                      |                       |                        |                     |                          |  |
| C.                  |                      |                       |                        |                     |                          |  |
| D.                  |                      |                       |                        |                     |                          |  |
| E. <b>TOTALS</b>    |                      |                       |                        |                     |                          |  |
| ENTER ON:           | PAGE 1 LINE 1        |                       | PAGE 1 LINE 2          | PAGE 1 LINE 9       |                          | PAGE 1 LINE 12                               |

\*Income reduced by 2106 and earned in another city must also reduce the tax withheld for that city by the same percentage and is limited to 2%.

**1. SCHEDULE C (If taxes paid to other cities, other cities' returns must be attached)**

Business Name \_\_\_\_\_ Business Address \_\_\_\_\_  
 Kind of Business \_\_\_\_\_ Date Started \_\_\_\_\_ Date Ended \_\_\_\_\_

A. Net Profit or Loss Attach Schedule C(s) ..... \$ \_\_\_\_\_  
 B. Percentage Amount Allowable to the Municipality (Attach allocation calculation) (see instructions) residents enter 100% ..... %  
 C. Amount subject to tax. Multiply A times B. .... **Total (1)** \$ \_\_\_\_\_

The net loss from an unincorporated business activity may not be used to offset salaries, wages, commissions or other compensation. However, if a taxpayer is engaged in two or more taxable business activities to be included on the same return, the net loss of one unincorporated business activity (except any portion of a loss separately reportable for municipal tax purposes to another taxing entity) may be used to offset the profits of another for purposes of arriving at overall net profits.

**2. SCHEDULE E - INCOME FROM RENTS [Attach Federal Schedule E(s)]**

| KIND AND EXACT LOCATION OF PROPERTY<br>(LOSSES WITHOUT EXACT LOCATION WILL BE DISALLOWED) | NET PROFIT OR (LOSS) | KIND AND EXACT LOCATION OF PROPERTY<br>(LOSSES WITHOUT EXACT LOCATION WILL BE DISALLOWED) | NET PROFIT OR (LOSS) |
|---|----------------------|---|----------------------|
| NAME _____<br>ADDRESS _____<br>CITY, STATE, ZIP _____                                     | <input type="text"/> | NAME _____<br>ADDRESS _____<br>CITY, STATE, ZIP _____                                     | <input type="text"/> |
| NAME _____<br>ADDRESS _____<br>CITY, STATE, ZIP _____                                     | <input type="text"/> | NAME _____<br>ADDRESS _____<br>CITY, STATE, ZIP _____                                     | <input type="text"/> |
|   |                      | <b>Total (2)</b>  | \$ _____             |

Please see unincorporated business activity in instructions.

**3. SCHEDULE 0 - OTHER INCOME NOT INCLUDED IN SCHEDULES C OR E (Attach Federal Schedules)**

INCOME FROM PARTNERSHIPS, ESTATES, TRUSTS, FEES, TIPS, LOTTERY, PRIZES, ETC.

| RECEIVED FROM NAME/I.D. NUMBER | FOR (DESCRIPTION AND/OR LOCATION)<br>(APPLICABLE LOSSES W/O EXACT LOCATIONS WILL BE DISALLOWED) | AMOUNT |
|--------------------------------|---|--------|
| A.                             |   |        |
| B.                             |   |        |

**Total (3)** \$ \_\_\_\_\_

TOTAL OTHER INCOME (Add lines 1-3) \$ \_\_\_\_\_  
 Enter on Page 1, line 4

**SCHEDULE X - ADJUSTMENT TO INCOME (Part year residents, income not subject to tax, miscellaneous income, etc.) (Attach Federal Schedules)**

If part year resident, enter previous address \_\_\_\_\_

| EXPLANATION                            | COLUMN 1  | COLUMN 2   |
|--|-----------|------------|
|  | ADDITIONS | DEDUCTIONS |
|  |           |            |
|  |           |            |
| Net adjustment (combine Columns 1 & 2) |           |            |

ENTER ON PAGE 1 LINE 6