

DUBLIN INDIVIDUAL INCOME TAX RETURN FOR RESIDENTS ONLY (DIR-1040)

DUE ON OR BEFORE APRIL 18, 2022

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CITY OF DUBLIN DIVISION OF TAXATION PO BOX 9062 DUBLIN, OHIO 43017-0962

NO PAYMENT/REFUNDS - MAIL TO: CITY OF DUBLIN DIVISION OF TAXATION PO BOX 4480 DUBLIN, OH 43016-4480

For Office Use Only	
Amt Rec	Cash
Check #	Check

MAKE CHECK PAYABLE TO CITY OF DUBLIN				
Taxpayer Name Spouse (If applicable) Current Home Address City/State/Zip		Social Security # Spouse Social Security # If you moved during year, provide date Moved into Dublin		
Filing Status: Single Married Filing Joint Married Filing	g Separate	Moved out of Dublin		
Previous Address(if moved)		Should your account be inactivated? Yes No If yes, explain:		
	TAXPAYER USE	OFFICE USE ONLY/AMENDED		
Income from QUALIFYING WAGES from Page 2 (Attach <u>ALL</u> W2's)	1			
 Other adjustments explanation (Select reason and complete Page 2): 	2.	2.		
3. Income from Self-Employment (Attach Federal Schedule C)	3.			
4. Income from Rents or Leases (Attach Federal Schedule E)	4.			
5. Other Taxable Income (Attach applicable Federal Schedules)	5.	5.		
6. Prior Year Loss Carryforward (See instructions for limitations)	6.	6.		
7. Net Business/Rental Income (Add lines 3, 4 and 5 minus line 6)	7.			
8. Taxable Income (Add lines 1 and 7)	8			
9. Tax Due on Income (2% Tax Due on line 8)	9	9		
10. Dublin Tax Withheld	10			
11. Taxes Withheld or Paid to Other Cities (subject to the 2% limitation)	11	11		
12. Estimated Taxes paid	12	12		
13. Prior Year Credit/Extension Payments	13	13		
14. Total Payments and Credits (Add lines 10 through 13)	14	14		
15. Tax Due: (Line 9 minus 14) – If amount is overpaid, enter as a negative #	15			
16. Penalty (15%) (+) Interest (5%)	16			
17. Total Tax Due (Add lines 15 and 16) - If Amount is \$10 or less enter -0-	17			
18. Overpayment (\$10 or less will not be refunded) Credited to 2022	18a	18a		
Refunded	18b	18b		
DECLARATION OF ESTIMATED TAX FOR 2022				
Estimated Income Subject to Tax \$ @ Tax Rate of 2%		19		
Estimated Tax Withheld by Your Employer(s)				
Overpayment Applied from 2021				
Other Payments and Credits Total Payments and Credits (Add Lines 20, 21, and 22)	22			
Total Payments and Credits (Add Lines 20, 21, and 22) Net Estimated Tax Due (Line 19 minus line 23)		23		
Estimate Paid with Return (not less than 25% of line 24)		24 25.		
TOTAL DUE (Line 17 plus line 25)		23 26.		
TOTAL DOL (Line 17 plus line 23)		20		
By signing this return, the undersigned hereby declares under penalty of perthe undersigned also declares that they have not requested and/or received taxable income listed above.	• •	· · · · · · · · · · · · · · · · · · ·		
Signature of Tax Preparer (Third Party Designee) Date	Signature of Taxpa	ayer Date		
Do you authorize us to contact your 3 rd Party Designee regarding this return?				

Signature of Spouse

Date

NO

YES

Taxpayer Name (As shown on Page 1) Social Sec								curity #		
ENITED TAVABLE	QUALIFYING WAGES (A	TTACH ALL V	\/2's\ *∩uali:	fuing wages a	ro Modi	icaro (Pov E) or Local (Pov 19	2): whichover is higher		
Employer	City Where Physically Employed	Qualifying Wages (See Above)	Dublin Tax Withheld	Other City Tax Withheld	Adjustments to Income (Provide Explanation on Line 2)); whichever is higher Credit Limit for taxes paid to other cities (lesser of the amount withheld or 2%)		
TOTALS:										
		·L	Page 1, Line 10	I.	Page 1	, Line 2	Page 1, Line 1	Page 1, Line 11		
	E C, E, F and PARTNERSH PLICABLE FEDERAL SCHE	DULES					it for tay paid on your	hohalf/crodits are		
rederal Schedu	Earned	·		Net Income from applicable Schedule			Credit for tax paid on your behalf (credits are only allowed to the extent of the tax assessed, not to exceed 2%)			
TOTALS:										
TOTALS.										
SCHEDULE Y	- BUSINESS ALLOCA	TION FOR	MULA							
 Combine Lir All wages, sa municipal ta 	al on rented and leased r nes 1 and 2 alaries and other comper exation under O.R.C 718.0 ceipts from sales made o	nsation paid 011	to employees wh	nerever their	services	are pe	3. erformed except comp 4.	pensation exempt from		
City	Property	Wa	ges	Gross Re	Gross Receipts Column C		Average %	Allocated Net		
City	Column A		umn B				Column D	Profits (Column E) Transfer figure to Line 3, Page 1		
	\$	\$		\$						
DUBLIN		%		%		%	S	% \$		
Under 18 1. If you were 2. Wages earn Enter your o	under the age of 18 for a ed while under the age of ate of birth here: e 2 from 1; transfer this	all or part of the stract of t	of your b	oirth certifica	te OR a	сору о	f your driver's license 2.			
improperly With	nheld by Employer		vithholding was where work phy			·•				
-	as improperly withheld fr	rom your wa	ges, enter your t	otal wages fr		emplo	· ·			
 Enter income upon which tax was improperly withheld by employer. Subtract Line 5 from 4; transfer this figure to Line 1 (page 1) along with any other taxable wages 								5 6		
		IISUIC LU LIIIE	- T (hage T) aiolis	with any ou	iici taxai	VIC WA	be3 0.			
Part-Year Reside	ent d, enter your total wages	s for the year	r				7			
-	a, enter your total wages ages while not a resident	-						7 3		
	Subtract Line 8 from 7; transfer this figure to Line 1 (page 1) along with any other taxable wages 9.									