

CITY OF WAUSEON

DUE ON OR BEFORE APRIL 15 SUFFIEIRS

Or within three months and fifteen days after the close of a fiscal year or period.

FOR CALENDAR YEAR ENDING DECEMBER 31

OR FOR THE MONTH ENDING

ACCOUNT NO.	SOCIAL SECURITY NO. OR E.I.D. NO.

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	MAIL	TO	$\overline{\ \ }$
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Commissioner of Taxation 230 Clinton St. Wauseon, OH 43567



OFFICE USE ONLY
AMOUNT PAID
CHECK NO
CASH RECEIPT NO
REFUND □
CARRY OVER □
AUDIT DATE
FINAL RETURN? ☐ YES

☐ CHECK BLOCK IF ADDRESS CHANGE

Moved into City	
Moved Out of City	

PHONE: (419) 335-1171 FAX: (419) 335-0063 Our website is www.wauseon.com

1. COMPENSATION FROM WAGES - ATTACH W-2'S

	NAME OF EMPLOYER	TAXPAYER OCCUPATION	A. Wauseon Tax Withheld	B. Other 0	City Tax W 6 LIMITA	/ithheld TION	GR	OSS WAGES	S
	ALL YOUR INCOME IS FROM W-2 WAGE IE 1 AND ON LINE 11 TO COMPUTE TAX	& TAX STATEMENTS ATTACHED, F	PUT TOTAL GRO	SS EARNII	NGS A	MOUNT ON	1	1.	
2.	Income from self-employment (Attach Fe	deral Schedule 'C', 'E' & 'K-1s')					2		
3.	Income from rents, leases, or farm income	e (Attach Federal Schedules 'E', &	'F')				3		-
4.	Partnership income (Attach Federal Form	n 1065, K-1s, or 8825 where applic	able)						-
5.	Corporation income (Attach Federal 1120), 1120S, 1120A, including Other In	come & Deducti	ion Schedu	ıles)				-
6.	Misc. income (Attach 1099's or explain s	source) Do not include Dividends, In	terest, Unemploy	ment or Wo	orker's	Compensation			-
7.	Additions to income (From Section A, Line	e 26 on Page 2)					7		
8.	Deductions from income (From Section B	, Line 31 on Page 2)						3. (.)
9.	Adjusted net income (Add Lines 1 thru 8)						9) <u>.</u>	-
10.	Percent of Line 9 allocable to Wauseon if	allocation formula is used from							
	section Y, Line 35 on page 2	% x Line 9 (at least four decimal plac	ces)						-
11.	Total income subject to Wauseon income	tax (See instructions for losses)					11	-	
12.	WAUSEON INCOME TAX AT 11/2% (.015	OF AMOUNT ON LINE 11					12	<u> </u>	-
3A.	CITY TAX WITHHELD PER W-2 FORMS	(11/2% LIMITATION) (Total of column	ns 1A & 1B)		13A.	`)		
3B.	Tax on income with no withholding. Paid or Du	e City of (Not to Exceed 1.	.5%) (Attach copy	of return)		(.)		
3C.	Estimated tax paid this city and prior year	overpayment			13C.	(.)		
14.	TOTAL CREDITS			(L	_ines 1	3A + 13B + 130) 14	ł. <u> </u>	-
15.	BALANCE OF TAX DUE (Amounts under	\$1.00 are not due nor refundable no	r credited to next	tax year.)(l	_ine 12	less Line 14)			-
16.	OVERPAYMENT (IF TAX CREDITS EXCE	EED TAX DUE, ENTER DIFFERENC	E)				16	*	-
17.	UNDERPAYMENT PENALTY (COMPLET	E WA2210 OR MULTIPLY LINE 15 B	3Y .20525)						-
18.	LATE FILING FEE \$25.00 OR 10% (WHICE	CHEVER IS GREATER) OF LINE 15						-	-
19.	INTEREST AT 11/2% PER MONTH (OR F	RACTION THEREOF) OF LINE 15, I	REGARDLESS C	F EXTENS	SION				-
20.	TOTAL TAX, PENALTIES & INTEREST D	UE (LINES 15, 17, 18 & 19) Make ch	neck payable to C	OMMISSIC	NER	OF TAXATION	20).	•
21.	PAYMENT IN FULL MUST ACCOMPANY IF LINE 16 IS AN OVERPAYMENT, INDIC	CATE THE AMOUNT TO BE CREDIT			λR ()			

21. IF LINE 16 IS AN OVERPAYMENT, INDICAT	TE THE AMOUNT TO BE CREDITED TO THE NEXT TAX YEAR ($___$. $___$
OR THE AMOUNT TO BE REFUNDED ()

TAX PREPARER	(Other than Taxpayer)	
MUST		
SIGN HERE	(Signature of Tax Preparer)	(Date)
(Print name)		
(Firm & Phone No.)		
(Address) THIS BC	X FOR TAX PREPARER LISE ONLY	

TAXPAYER MUST X	
SIGN HERE (Signature of Taxpayer)	(Date)
□ x	
(Signature of Taxpayer)	(Date)
Check the box next to your signature to authorize us to speak directly to your prep	parer regarding your return.
Taxpayer Phone Number	

PAGE 2

SECTION A - ADDITIONS TO INCOME

22. GUARANTEED PAYMENTS TO PARTNERS		22.	
23. INCOME TAXES TAKEN AS A DEDUCTION ON LINES 2, 3, 4, OR 5 ON PAGE 1		23.	
24. EXPENSES ATTRIBUTABLE TO THE PRODUCTION OF NONTAXABLE INCOME. AT LEAST 5% OF SECTION B-LINE 31			
25. CONTRIBUTIONS IN EXCESS OF 10% OF NET PROFITS, SOLE PROPRIETOR KEOUGH, 401(k),	OR SIMILAR PLANS;		
OTHER EXPENSES NOT CONSIDERED ORDINARY AND NECESSARY			+
26. TOTAL ADDITIONS TO INCOME (Add Lines 22-25) - TRANSFER TO LINE 7 ON PAGE 1		26.	
SECTION B - DEDUCTIONS FROM INCOME			
27. DEDUCT INTEREST INCOME INCLUDED IN ENTITIES SHOWN ON PAGE 1, LINES 2-5		27.	.
28. DEDUCT DIVIDEND INCOME (LESS FEDERAL EXCLUSIONS)		20	
29. DEDUCT INCOME FROM PATENTS AND COPYRIGHTS		20	
30. OTHER DEDUCTIONS - DESCRIBE ATTACH DOCUMENTATION.			
- ATTACH BOOMENTATION:			
(CITY CODIFIED TAX ORDINANCE DOES NOT ALLOW FEDERAL SCHEDULE A (ITEMIZED DEDI	JCTIONS) FOR	30.	
UNREIMBURSED EMPLOYEE BUSINESS EXPENSE BASED ON FEDERAL 2106 FORM.)	•	31.	
31. TOTAL DEDUCTIONS FROM INCOME (Add Lines 27-30) - TRANSFER TO LINE 8 ON PAGE 1		31.	
SECTION C - PARTNERSHIP INCOME			
32. NAME AND ADDRESS OF PARTNERSHIP AND EID NO. (Attach K-1's and Schedule E)			
	- \$		
	- \$ 		
TOTAL PARTNERSHIP INCOME - TRANSFER TO LINE 2, PAGE 1		32.	
SECTION D - PARTNER'S DISTRIBUTIVE SHARE OF PARTNERSHIP INCOME			
33. TO BE COMPLETED IF PARTNERSHIP FILES AN INFORMATION ONLY RETURN			
N. B. I. All CO.N. I. (E. I.B.)	Share of Each Partner		
Name, Residence, Address, S.S. Number of Each Partner Distributive	Amount		
	_		
		33.	
TOTAL LINE 33 TRANSFER TO LINE 4, ON PAGE 1 (attach all forms)TOTAL	L ———	33.	<u> </u>
SECTION Y - BUSINESS ALLOCATION			
a. Located	b. Located in		c. Percentage
34. BUSINESS ALLOCATION FORMULA Everywhere	<u>Wauseon</u>		<u>(b ÷ a)</u>
STEP 1 AVERAGE NETBOOK VALUE OF REAL AND TANGIBLE PERSONAL PROPERTY		_	
GROSS ANNUAL RENTALS MULTIPLIED BY 8		_	
TOTAL STEP 1			%
STEP 2 WAGES, SALARIES OTHER COMPENSATION			
STEP 3 GROSS RECEIPTS FROM SALES			%
STEP 4 TOTAL PERCENTAGES		- 	%
STEP 5 AVERAGE PERCENTAGE (Divide Total Percentages by Number of Percentages Used (at least four decimal places)		35.	%

ESTIMATED PAYMENTS ARE REQUIRED

GENERAL INFORMATION

Any taxpayer having or anticipating a tax liability to the City of Wauseon shall file a declaration of estimated tax and pay the estimated tax due in quarterly installments. If a taxpayer's income is from wages and the taxpayer's employer withholds the proper amount of Wauseon Tax, the taxpayer is not required to file an estimate of Wauseon Tax due. Joint filing is permitted but each spouse must file an estimate based on their separate income. Complete the estimated Wauseon Tax form for each quarterly payment. Detach the form and mail it to the address provided. Keep a record of your payments on the worksheet provided.