

# VILLAGE OF COLDWATER INCOME TAX RETURN

For calendar year

**2019**DUE BY APRIL 15, 2020

Residency Status (check one)			
□ Resident □ I	Non-Resident		
□ Partial Year Resident			
From	To		
□ Final Return			

Taxpayer's	Name	and	Address
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Phone Number	
Social Security #	
Social Security #	
Federal ID #	
Email	

	LL W-2s, FORM 1040, ALL REFERENCED S		Out Ott. = 140011 11	8.6 - dt 144
Employer's Name	City Where Employed	Coldwater Tax Withheld	Other City Tax Withheld Cannot exceed 1%	Medicare Wages Box 5 on W-2
Employer's Name	City Where Employed			
-		\$ \$	\$ \$	\$
-		\$	\$	\$
-		\$	\$	\$
-	TOTAL		1b.	1c.
IF NO OTHER INCOME. COMPLIT		1a.	110.	16.
IF NO OTHER INCOME, COMPUT		ha attached)	2	ć
· ·	of Schedules C, E & H from Page 2 - must	be attached)		. \$ . \$
3. Total Taxable Income (Column 4. Coldwater Income Tax - 1% of				. \$ . \$
	Line 3		4	. <u> </u>
5. Credits	(Calvara 4 a alassa)		F - 6	
5a. Coldwater Tax Withheld	(Column 1a above)		5a. \$	_
5b. Estimated Tax Paid			5b. \$	_
5c. Credit from Prior Years	(Caluman 4h ahawa)		5c. \$	_
5d. Other City Tax Withheld (	(Column 1b above)		5d. \$	
5e. TOTAL CREDITS				. \$
6. Tax Due (Subtract Line 5e from	·		6	. <u></u> \$
IF FILED AND/OR PAID AFTER A				
7. Late Filing Fee, Penalty & Inte			<del></del> .	
	er month up to \$150.00) if past April 15		7a. \$	=
7b. Penalty (15% of Line 6) if			7b. \$	=
7c. Interest (0.58% per mont			7c. \$	<del>-</del> .
7d. TOTAL LATE FILING FEE, F			7d.	
	olus Line 7d) (Make check payable to VILI	LAGE OF COLDWATER)	8.	\$
NOTE: Refund or tax due of less				
9. Overpayment	9a. Refund \$	9b. Credit to Next Y	ear_\$	_
	DECLARATION OF	ESTIMATED TAX FOR YEAR	2020	
10. Income subject to 1% city tax	x which is not fully withheld \$	x rate of 1%	10	. \$
11. Credit: Overpayment from p				- . \$
12. Net city tax due (Subtract Line 11 from Line 10) (if \$200.00 or less, no estimate required)  12.				
13. Amount paid with this declar				. \$
14. Amount due from Line 8	- . \$			
15. Amount due from Line 13	. \$			
16. Total amount due April 15 or	105 days after fiscal year end (Line 14 p	lus Line 15)		. \$
(Make check payable to VILL				· _ T
		_ T	at a contract of the contract	
I am not required to complete this to ☐ Under 18 years of age, list birtle		☐ Taxpayer deceased, list da	rate of death xable source, list source	
☐ Total/permanent disability	n date			
	□ Total/permanent disability □ Moved out prior to 1/1/19, list date of move □ Retirement income only □ Rental property subject to village tax was sold, list date			
☐ Business terminated, list date		list whom it was sold to		
The undersigned declared that this r	eturn (and accompanying schedules) is a true,	correct and complete return	for the taxable period stated.	
If this return was prepared by a tax p	professional, may we contact them directly? $\Box$	Yes □ No		
Signature of Taxpayer	Date	Tax Preparer		Date
	Date	Telephone Number		

#### \*\*\* DO NOT USE THIS PAGE IF YOUR ONLY SOURCE OF INCOME IS FROM WAGES \*\*\*

	DO NOT USE THIS PA	GE IF YOUR ONLY SO	DURCE OF INCOME IS F	ROIM WAGES ***		
SCHEDULE C - BUSINESS IN					1	
1. ATTACH COPIES OF FEDERAL SCH	· · · · · · · · · · · · · · · · · · ·	NCOME FROM SCHEDU	JLES)		\$	
2. A. ITEMS NOT DEDUCTIBLE (FROM LINE M SCHEDULE X) \$						
B. ITEMS NOT TAXABLE (FROM L				\$		
C. DIFFERENCE BETWEEN LINES 2	2A AND 2B TO BE ADDED	TO OR SUBRACTED FR	OM LINE 1		\$	
3. A. ADJUSTED INCOME (LINE 1 PL	US OR MINUS 2C IF SCHE	EDULE X IS USED)			\$	
B. AMOUNT OF LINE 3A ALLOCAI	BLE TO THIS CITY	_%			\$	
4. NET OPERATING LOSS FROM PRIC	OR YEARS, IF ALLOWED				\$	
5. NET BUSINESS INCOME					\$	
					·	
SCHEDULE E - INCOME FROM R	ENTS (ATTACH STATE	MENT EXPLAINING C	OLUMNS 3, 4 AND 5)			
1. KIND & LOCATION OF PROPERTY	2. RENT AMOUNT	3. DEPRECIATION	4. REPAIRS	5. OTHER EXPENSES	6. NET INCOME (OR LOSS)	
					\$	
					Ś	
					\$	
					\$	
NET INCOME (OR LOSS) SCHEDULE	<u> </u>				\$	
, ,					1.	
SCHEDULE H - OTHER INCOME I	NOT INCLUDED IN SCH	EDULE E FROM PAR	TNERSHIPS, S CORPOR	ATIONS, ESTATES, TRU	STS, FEES, ETC.	
RECEIVED FRO	OM		FOR (DESCRIBE)		AMOUNT	
					\$	
					\$	
					Ś	
TOTAL INCOME SCHEDULE H					\$	
ADD TOTALS OF SCHEDULES C, E &	H FNTER HERE AND ON	IINF 2 PAGE 1			Ś	
ADD TOTALS OF SCHEDOLES C, E G	II. EIVIER HERE AND OIV	LINE 2, I MOL I			Υ	
CCHEDITIE A BECONCILIA	TION WITH FEDER	AL INCOME TAV	DETLIDM (ATTACH CHI	DODTING COLLEGE HECK		
SCHEDULE X - RECONCILIA	ATION WITH FEDER		·	•		
ITEMS NOT DEDUCTIBLE		ADD	ITEMS NOT TAXA	RLE	DEDUCT	
A. CAPITAL LOSSES - EXCLUDING ORDIN	ARY LOSSES		N. CAPITAL GAINS, EXCLU	DING ORDINARY GAINS (IRC	1221 OR	
(IRC 1221 OR 1231 PROPERTY DISPOS	SITIONS)	\$	·	SITIONS EXCEPT TO THE EX		
B. 5% OF INTANGIBLE INCOME REPORT		· · · · · · · · · · · · · · · · · · ·	INCOME AND GAINS A	PPLY TO THOSE DESCRIBED	IN IRC	
EXCEPT THAT FROM IRC 1221 PROPE	ERTY DISPOSITIONS	\$	1245 OR 1250)		\$	
C. TAXES BASED ON INCOME (STATE)		\$	O. FEDERALLY REPORTED	INTANGIBLE INCOME SUCH	AS,	
D. TAXES BASED ON INCOME (CITY)		\$	BUT NOT LIMITED TO, INTEREST, DIVIDENDS, PATENT			
E. GUARANTEED PAYMENTS OR ACCRU			AND COPYRIGHT INCO		\$	
CURRENT OR FORMER PARTNERS OF		\$		TAX CREDITS TO THE EXTEN		
F. FEDERALLY DEDUCTED DIVIDENDS, D	·			ESPONDING OPERATING EXP		
			Q. NOT PREVIOUSLY DEDUCTED IRC SECTION 179 EXPENSES  R. PARTNERSHIP, S CORP, LLC CHARITABLE CONTRIBUTIONS  \$			
TO REIT OR RIC INVESTORS  G. FEDERALLY DEDUCTED AMOUNTS PA	VID OB ACCRITED TO	\$	S. OTHER	LLC CHARITABLE CONTRIBU	\$	
OR FOR QUALIFIED SELF-EMPLOYED			Z. TOTAL LINES N THROUGH	SHIS (CARRY TO LINE 2R)	\$	
HEALTH AND LIFE INSURANCE PLANS	•		Z. TOTAL LINES IV TIMOOV	SITS (CARRY TO LINE 25)	<u> </u>	
OWNER-EMPLOYEES NON C CORP EI		\$				
H. RENTAL ACTIVITIES BY PARTNERSHIP		\$	_			
I. OTHER	<u> </u>	\$	<del>_</del>			
M. TOTAL LINES A THROUGH I (CARRY T	TO LINE 2A)	\$	_			
		·				
<b>SCHEDULE Y - BUSINESS A</b>	PPORTIONMENT F	ORMULA				
			A. LOCATED	B. LOCATED	C. PERCENTAGE	
			EVERYWHERE	IN THIS CITY	(B ÷ A)	
STEP 1. ORIGINAL COST OF REAL 8	& TANGIRI F PERSONAL P	ROPERTY	\$	\$	(5 . 7.)	
GROSS ANNUAL RENTALS		NOT ENT	\$	\$		
TOTAL STEP 1			Ś	\$	%	
STEP 2. GROSS RECEIPTS FROM SA	ALES MADE AND/OR WO	RK	•	·		
OR SERVICES PERFORMED	·		Ś	\$	%	
STEP 3. WAGES, SALARIES AND OT		AID	\$	\$		
STEP 4. TOTAL OF PERCENTAGES			7	<u> </u>	%	
STEP E AVERAGE DEDCENTAGE					- 70	

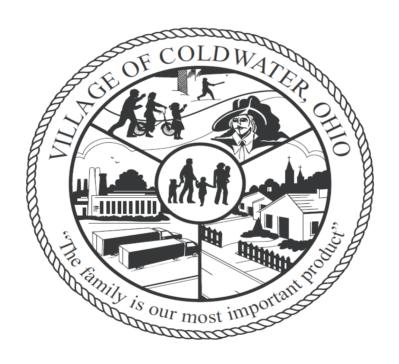
### **VILLAGE OF COLDWATER 2019 INCOME TAX RETURN**

# **DUE APRIL 15, 2020**

### FILING REQUIRED, EVEN IF NO TAX IS DUE

### PENALTY AND INTEREST WILL BE ASSESSED FOR REFUSAL TO COMPLY

# PLEASE PROVIDE A COPY OF YOUR FEDERAL EXTENSION ON OR BEFORE APRIL 15, 2020, IF APPLICABLE



#### **MAILING:**

Mail your final return complete with W2s, 1040, and/or appropriate Federal Schedules

#### TO:

Village of Coldwater Income Tax 610 West Sycamore Street Coldwater, OH 45828

#### **ASSISTANCE:**

For questions not answered in the General Instructions or help in filing please call (419) 678-2685 or stop in the office between the hours of 8 am to 5 pm Monday thru Thursday, or 8 am to 4 pm on Friday, or visit our web site at www.villageofcoldwater.com Fax: (419) 678-2365

Email: TaxDept@villageofcoldwater.com

#### **GENERAL INSTRUCTIONS**

- 1. WHO SHOULD FILE THIS RETURN: All Coldwater residents, 18 years of age and older, regardless of taxable income, are required to file. Part year residents are required to file a return on wages earned while living in Coldwater. Please note that if wages are pro-rated, credit for tax withheld must also be pro-rated. Also, all individuals, partnerships, corporations or other entities that performed work or business in Coldwater are required to file.
- 2. WHEN AND WHERE TO FILE RETURN: The filing deadline is no later than April 15 following the close of the tax year. All wage earners must file on a calendar year basis. Fiscal year taxpayers must file on or before the 105th day following the close of the fiscal year. A return is considered timely filed when received by the Village of Coldwater on April 15 or earlier. A return that is mailed must be postmarked April 15 or earlier. Returns are filed with the Village of Coldwater Income Tax Department, 610 West Sycamore Street, Coldwater, Ohio 45828.
- 3. EXTENSION OF TIME TO FILE: An extension must be filed on or before the original due date of the return, must be in writing, and for a period not to exceed 6 months or not more than 30 days beyond any extension requested and granted by the IRS. A copy of the Federal Extension form is acceptable.
- 4. INCOME SUBJECT TO TAX: Income subject to taxation includes, but is not limited to the following:
  - A. All salaries and wages (reported in Box 5 of your W-2 as Medicare wages), commissions, tips, director's fees, executor fees, sick pay, severence pay, bonuses, deferred compensation, incentive payments, strike pay, wage continuation plans, income received as a result of a covenant not to compete, supplemental unemployment benefits, vacation pay, lottery winnings, compensation received by residents of the Village of Coldwater, regardless of where earned, income received from the exercise of stock options. This includes ordinary gains from the sale of business property as reported on Form 4797.
  - B. The net profits of all unincorporated business, partnerships, professions, rentals, farm income or other activities conducted by residents of the Village of Coldwater regardless of where earned.
  - The net profits of all corporations derived from work done or services performed or rendered in the Village of Coldwater.

- D. Employee business expenses that have been properly reported on Federal Form 2106 and that have been deducted from Federal tax purposes may be included as an adjustment to taxable income if that total of such expenses does not exceed the related income from the same employer. When income is pro-rated, employee business expenses relating to that income must also be pro-rated. Employee business expenses related to income earned in another taxing municipality may by eligible for a refund from that city. When claiming a deduction for employee business exprenses, a copy of Form 2106 and Federal Schedule A must be filed with the income tax return.
- 5. INCOME NOT TAXABLE: Dividends, interest, military pay and allowances (including Ohio National Guard Reserve), pensions, annuities, alimony, Social Security, Medicare, welfare benefits, unemployment benefits, lump sum distributions, disability income, capital gains, and Section 125 (cafeteria plans) contributions.
- 6. Losses from Federal Schedules may NOT be used to reduce wages. The portion of a net operating loss sustained for a tax year allocable to the Village of Coldwater may be applied against the portion of the profit of the succeeding year(s) allocable to the Village of Coldwater until exhausted, but in no event for more than five (5) years.
- TAX CREDIT: Credit for municipal tax withheld or paid to other communities is given, not to exceed 1%.
- CITY vs. FEDERAL RETURNS: Exemptions and certain itemized deductions as available on individual federal returns are NOT DEDUCTIBLE on city returns. Items not deductible: moving expense, tax sheltered annuity, IRA or Keogh contributions, capital losses, alimony expense, expenses applicable to non-taxable income.
- 9. **PENALTY AND INTEREST:** Penalty and interest are assessed for failure to file a return and/or pay the tax when due.
- 10. DECLARATION: A declaration is required to be filed when a taxpayer anticipates taxable income that is not subject to 1% withholding. If estimated tax is \$200.00 or less, no declaration is necessary. A declaration must be filed on or before April 15. Fiscal year taxpayers must file within 105 days after the beginning of each fiscal year. For individual filers, payment of the estimated tax is due on or before the fourth, seventh, tenth and thirteenth months after the beginning of the taxable year. For non-individual filers, payment of the estimated tax is due on or before the fourth, seventh, tenth, and twelfth months after the beginning of the taxable year. The first quarter voucher is on the bottom of the tax return. The remaining vouchers will be mailed on a quarterly basis.

#### INSTRUCTIONS FOR COMPLETING CITY TAX RETURN

- List each W-2 separately entering employer's name, city where work performed, amount of Coldwater tax withheld, credit for other city tax withheld (see Line 5d below), and wage amount from Box 5 of the W-2 (Medicare wage). If your W-2s and earnings summaries are marked "various" or "all cities" in the local tax withheld box, please request an itemized breakdown by city from your employers and attach this to your return. Total each column.
- Line 2 If W-2 income only, proceed to Line 3. If earnings are other than W-2 wages, enter the total of all Other Income from Page 2.

  Attach all appropriate Federal Schedules.
- Line 3 Total of Column 1c and 2.
- **Line 4** Multiply the amount on Line 3 by 1% (0.01).
- Line 5 Credits
  - a. Enter total Coldwater tax withheld (from Column 1a)
  - b. Enter estimated tax paid
  - c. Enter credit from prior years
  - d. If your income was earned in a city with a tax rate greater than 1%, multiply your wage amount by 1% - this is the amount you will receive as a credit.
  - e. Add Lines a through d.
- **Line 6** Subtract Line 5e from Line 4. This is tax due. If overpayment, enter amount on Line 9. NOTE: Refunds or tax due of less than \$10.01 are not payable.

- Line 7 Complete only if return is being filed and/or paid after April 15 (or appropriate fiscal year end). Penalty and interest are figured on the net tax due.
- Line 8 Line 6 plus Line 7d. Make check payable to VILLAGE OF COLDWATER.
- Line 9 Refund or credit from Line 6.

## TAXPAYERS WHO ARE NOT FULLY WITHHELD MUST CONTINUE ON TO LINE 10.

- **Line 10** List estimated income subject to taxation which is not fully withheld by employer and/or is reported on Line 2. Multiply this figure by 1% which is your estimated tax.
- **Line 11** Enter credit from prior year (Line 9b).
- Line 12 Calculate net city tax due (if \$200.00 or less, no estimate required).
- Line 13 Enter amount paid with return (at least 22.5% of Line 12).
- Line 14 Enter amount due from Line 8.
- Line 15 Enter amount from Line 13.
- **Line 16** Total Lines 14 and 15. Make check payable to: VILLAGE OF COLDWATER.

**Sign and date return.** Mail return and payment prior to April 15 to avoid late filing fee/penalty.