



TELE: (330) 689-2849
FAX: (330) 689-2847
www.stowohio.org

CITY OF STOW, OHIO INCOME TAX RETURN FOR THE CALENDAR YEAR 2017

PRINT NAME, ADDRESS AND PHONE NUMBER

Primary Taxpayer

- Retired as of ____/____/____
- Social Security / disability income only for all of 2017
- Unemployment income for all of 2017
- No taxable income for 2017 - explain: _____
- Under 18 for all of 2017 - Date of birth: ____/____/____
- Active duty military income only for all of 2017
- Non-resident for all of 2017
- Business / rental closed or sold: ____/____/____

Joint Taxpayer

- Retired as of ____/____/____
- Social Security / disability income only for all of 2017
- Unemployment income for all of 2017
- No taxable income for 2017 - explain: _____
- Under 18 for all of 2017 - Date of birth: ____/____/____
- Active duty military income only for all of 2017
- Non-resident for all of 2017
- Business / rental closed or sold: ____/____/____

PRIMARY SOCIAL SECURITY

JOINT SOCIAL SECURITY

Did you move during 2017? FROM STOW ON _____ TO _____
 YES NO TO STOW ON _____ FROM _____

PART YEAR RESIDENTS: You should complete this form using only information on income received and taxes withheld or paid while living or working in Stow.

INCOME

- 1. GROSS WAGES AND SALARIES (FROM WORKSHEET I COLUMN C ON BACK OF FORM.).....1 \$ _____
- 2. NON-WAGE TAXABLE INCOME (FROM WORKSHEET II LINE 5 ON BACK OF FORM,WORKSHEET III, LINE 16.)....2 \$ _____
- 3. TOTAL TAXABLE INCOME (ADD LINES 1 & 2.)3 \$ _____

TAX

- 4. STOW TAX DUE BEFORE CREDITS (MULTIPLY LINE 3 BY 2%).....4 \$ _____

CREDITS

- 5. CREDIT FOR TAX WITHHELD ON WAGES & SALARIES (FROM WORKSHEET I COLUMN F.)5 \$ _____
- 6. CREDIT FOR TAX PAID ON NON-WAGE INCOME (FROM WORKSHEET III,LINE 20.).....6 \$ _____
- 7. 2017 ESTIMATED TAX PAYMENTS MADE TO THE CITY OF STOW.7 \$ _____
INCLUDES ANY OVERPAYMENT CARRIED FROM 2016 TO 2017.
- 8. TOTAL CREDITS (ADD LINES 5, 6 & 7.).....8 \$ _____
- 9. SUBTRACT LINE 8 FROM LINE 4.9 \$ _____

OVERPAYMENT

NO TAXES OF \$10.00 OR LESS SHALL BE REFUNDED OR CREDITED

- 10. ENTER THE OVERPAYMENT AMOUNT YOU WANT APPLIED TO YOUR 2018 ESTIMATED TAX.10 \$ _____
- 11. ENTER THE OVERPAYMENT AMOUNT YOU WANT REFUNDED. (ALLOW 90 DAYS FOR YOUR REFUND).....11 \$ _____

BALANCE DUE

- 12. IF THE AMOUNT ON LINE 9 IS GREATER THAN \$10.00, ENTER THAT AMOUNT HERE. THIS IS YOUR 2017 BALANCE DUE.12 \$ _____
THIS AMOUNT MUST BE PAID WITH THIS FORM ON OR BEFORE APRIL 15, 2018 OR THE IRS DUE DATE.
- 13. PENALTY AND INTEREST (SEE INSTRUCTIONS.)13 \$ _____

ESTIMATED INCOME TAX (LEAVE LINES 14-20 BLANK IF YOU WANT THE CITY TO CALCULATE YOUR ESTIMATED TAX FOR 2018 BASED ON YOUR 2017 INCOME.)

- 14. ESTIMATED TAXABLE INCOME FOR 2018 TAX YEAR.....14 \$ _____
- 15. ESTIMATED TAX DUE (MULTIPLY LINE 14 BY 2%)15 \$ _____
- 16. TAXES TO BE WITHHELD AND PAID TO STOW AND OTHER MUNICIPALITIES.16 \$ _____
- 17. ESTIMATED TAX DUE FOR 2018 TAX YEAR (SUBTRACT LINE 16 FROM LINE 15.)17 \$ _____
- 18. FIRST QUARTER OF ESTIMATED TAX PAYABLE TO CITY OF STOW (MULTIPLY LINE 17 BY 25%).....18 \$ _____
- 19. 2017 OVERPAYMENT (FROM LINE 10) APPLIED TO 2018 ESTIMATED TAXES.19 \$ _____
- 20. NET AMOUNT DUE FOR FIRST QUARTER 2018 (SUBTRACT LINE 19 FROM LINE 18.)20 \$ _____

TOTAL AMOUNT DUE WITH FORM

- 21. ADD LINES 12, 13 AND 20 AND ENTER THE SUM HERE. **This is the total amount due with this form on or before April 15, 2018 or the IRS Due Date.**...21 \$ _____

Make checks payable to: CITY OF STOW INCOME TAX DIVISION. MAIL TO: PO Box 3649 Akron, OH 44309-3649

RETURNS WITHOUT PAYMENT – MAIL COMPLETED RETURN AND ALL REQUIRED SCHEDULES TO: CITY OF STOW, PO BOX 1668, STOW OHIO 44224

I AUTHORIZE THE INCOME TAX DIVISION TO DISCUSS MY ACCOUNT WITH THE PREPARER NAMED BELOW. CHECK HERE
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE EXAMINED THIS RETURN AND ACCOMPANYING SCHEDULES AND STATEMENTS, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THEY ARE TRUE, CORRECT AND COMPLETE.
DECLARATION OF PREPARER (OTHER THAN TAXPAYER) IS BASED ON ALL INFORMATION OF WHICH PREPARER HAS ANY KNOWLEDGE.

SIGNATURE OF TAXPAYER

DATE

SIGNATURE OF TAXPAYER'S SPOUSE (IF JOINT RETURN)

DATE

SIGNATURE OF PERSON (AND FIRM) PREPARING RETURN, ADDRESS & PHONE NO.

WORKSHEET I - WAGE AND SALARY

A COPY OF EACH FORM W-2, 1099-MISC, 1099-K, W-2G, PAGE 1 OF FEDERAL FORMS 1040/1040A/1040EZ
FORM 2106 AND SCHEDULE A

SPECIAL INSTRUCTIONS

- I. The amount in Column D must have been withheld or paid to your work city. If it was not, enter zero in Column D.
- II. Employee business expenses, from Form 2106, must be allocated to a specific municipality and subtracted from gross wages before those wages are entered in Column C.
- III. If the tax withheld was paid to the City of Stow, enter the actual amount of tax withheld for Stow in Column F and ignore the amounts in Columns D & E.

Column A Date wages were earned (month/day).	Column B Name of municipality in which income was earned.	Column C Income earned in Column B municipality.	Column D Multiply Column C by Column B's tax rate.	Column E Multiply Column C by 2%.	Column F enter smaller of Column D or E.
Total Column C			Total Column F		

WORKSHEET II - NON-WAGE INCOME

A COPY OF EACH FEDERAL FORM OR SCHEDULE USED MUST BE ATTACHED.

- | | |
|--|----------|
| 1. NET PROFIT (LOSS) FROM SCHEDULE C. | \$ _____ |
| 2. RENTAL PROFIT (LOSS) FROM SCHEDULE E. | \$ _____ |
| 3. OTHER NON-WAGE INCOME (ATTACH EXPLANATION). | \$ _____ |
| 4. LOSS CARRY FORWARD FROM PRIOR YEAR(S). | \$ _____ |
| 5. COLUMN TOTAL (IF LESS THAN ZERO, USE ZERO). | \$ _____ |

CARRY TOTAL FROM LINE 5 TO FRONT OF RETURN LINE 2.

WORKSHEET III- NON-WAGE INCOME

FOR USE BY THOSE INDIVIDUALS WITH NET PROFIT/DISTRIBUTIVE SHARE INCOME SOURCED IN MULTIPLE MUNICIPALITIES WITH CURRENT AND/OR PRIOR YEAR LOSSES. CONTACT THE CITY OF STOW INCOME TAX OFFICE OR INCOME TAX WEBSITE TO OBTAIN THIS SCHEDULE.