

Form IR 2015

FILE WITH AND MAKE CHECK PAYABLE TO CITY OF NORWOOD EARNINGS TAX DEPARTMENT 4645 MONTGOMERY ROAD NORWOOD, OHIO 45212	2015 NORWOOD 2015 INDIVIDUAL INCOME TAX RETURN DUE ON OR BEFORE APRIL 18, 2016 TAX OFFICE PHONE: 513-458-4590 FAX: 513-458-4581	EXTENSION REQUESTS must be made BY APRIL 18, 2016 See instructions for Extension Policy MAKE A COPY OF FORM IR FOR YOUR FILE
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TAXPAYER'S NAME & ADDRESS: IF NOT SHOWN ABOVE, PRINT NAME AND ADDRESS	REQUIRED INFORMATION: Taxpayer's Social Security No. _____ Spouse's Social Security No. _____ Home Telephone No. _____ Business Telephone No. _____ Retired _____ Social Security Disability _____ Filing Status: Single _____ Married _____ Resident _____ Move in date ____/____/____ Non-Resident _____ Move out date ____/____/____ If you rent, give Landlords' information: Name _____ Address _____
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INCOME AND TAX

1. Wages, salaries, cash, tips, etc. (attach all W-2 forms and front page of Fed. 1040)	1. _____
2. Other taxable income (attach Federal Schedules and complete side 2 schedule)	2. _____
3. Less allowable expenses not reimbursed (see instructions)	3. _____
4. Total taxable income (lines 1, 2 and 3)	4. _____
5. Norwood Tax (2.0% of line 4)	5. _____

CREDITS

6. Estimated Tax Payments made to Norwood	6. _____
7. Taxes withheld by employer and paid to Norwood	7. _____
8. Taxes withheld and paid to other localities (2% maximum credit allowed)	8. _____
9. Overpayment from prior year(s)	9. _____
10. Total Credits (add line 6 through 9)	10. _____

TAX DUE

11. If line 5 is more than line 10, subtract line 10 from line 5. THIS IS THE TAX AMOUNT YOU OWE FOR 2015.	11. _____
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OVERPAYMENT

12. If line 10 is greater than line 5, subtract line 5 from line 10. This is the amount you overpaid.	12. _____
13. Amount of line 12 to be credited to next year's tax \$ _____ or Amount to be Refunded \$ _____	

DECLARATION OF ESTIMATED TAX FOR YEAR 2016
 (Quarterly payments are mandatory if your yearly estimated liability is \$100 or higher.)

14. Total Income subject to tax _____ multiply by Tax Rate of 2.0% for Gross Tax of	14. _____
15. Less expected credits for Tax Withheld by employer for Norwood \$ _____ and/or for other cities Plus any credit from prior years \$ _____ (ALL TOTALED)	15. _____
16. Net Estimated Tax due for 2016 (line 14 minus line 15).	16. _____
17. Amount being paid with this Declaration (must be at least 1/4 of line 16)	17. _____
18. TOTAL AMOUNT OF PAYMENT with this return (Line 11 plus line 17)	18. _____

I CERTIFY THAT I HAVE EXAMINED THIS RETURN (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE. IF PREPARED BY A PERSON OTHER THAN THE TAXPAYER, THE DECLARATION IS BASED ON ALL INFORMATION OF WHICH PREPARER HAS ANY KNOWLEDGE.

_____ Signature of Taxpayer	_____ Date	FOR TAX OFFICE USE ONLY
_____ Signature of Taxpayer	_____ Date	
_____ Signature of Person Preparing if other than Taxpayer	_____ Date	
_____ Address	and	_____ Telephone Number

-PLEASE DO NOT WRITE IN THIS SPACE-

NORWOOD INCOME TAX FORM IR
SIDE TWO SCHEDULE
 (Calculation for Line 2 Front Page)

19. Net profit(s)/loss from profession and/or business operation(s) Attach Federal Schedule C.....	19. \$ _____
20. Net profit(s)/loss from rental property and/or partnership(s) Attach Federal Schedule E.....	20. \$ _____
21. Net profit(s)/loss from farm income Attach Federal Schedule F.....	21. \$ _____
22. Total net profit(s)/losses from business activities (Total lines 19, 20 and 21).....	22. \$ _____
23. Business losses from previous years' tax returns (if available) Maximum of three (3) years carryover.....	23. \$ _____
24. Other taxable income from business activities (Total line 22 minus 23).....	24. \$ _____
25. Other taxable income (see instructions – Lines 2 and 25).....	25. \$ _____
26. Total other taxable income (report this amount on Line 2 – front page).....	26. \$ _____

ADDITIONAL INFORMATION

If your tax status has changed, please complete applicable items below:

A. I permanently discontinued work and have no taxable income after: _____ (State reason in "C" below)

B. I sold the following rental property subject to Norwood tax:

Location Address	Date Sold:	Purchaser's Name and Address
_____	_____	_____
_____	_____	_____

C. Additional Notations: _____

FILING INSTRUCTIONS

MANDATORY FILING: All residents 16 years and older are required to file a return whether or not any tax is due and regardless if you rent or own. If for some reason, you do not have any taxable income, please return your form with an explanation and applicable verification and documentation. **If you do not respond, your account will be considered delinquent.** To avoid penalties and interest, your tax return and payment must be received on or before April 18th.

Line 1 Is to be grand total of all gross wages, salaries and compensation from all W-2 forms for the year. Generally use box 5 on the W-2. Attach copies of W-2s and a copy of your Federal 1040 Form.

Line 13 Your overpayment may either be credited to next year's taxes or refunded to you.

Line 2 Is for reporting such items as income from business activities, non-employee income listed on a 1099-MISC, sales commissions, fees, gambling winnings and other 1099 income received not pursuant to retirement and other taxable income. (See note for Line 24.) Attach Federal Schedules.

Line 14 through 18 – Calculate estimated tax due for 2016.

Line 19 through 23 Self Explanatory – call office with further questions.

Line 3 If during the tax year, you incurred expenses directly connected with your employment and essential to your earnings, they are allowable as a deduction from your gross earnings. Expenses are deductible only if recognized for Federal Income Tax purposes authorized by Norwood Earnings Tax Regulations and required by your employer. Such items as clothing, lodging, transportation to and from place of employment are not allowable. An itemized statement of all claimed expenses (copy of Federal travel expense sheet) must be furnished. All claimed expenses must be substantiated by actual records. Federal 2106 expenses are allowed with accompanying Schedule A.

Line 24 Total of other taxable income from business activities. NOTE: LOSSES FROM BUSINESS, INCLUDING RENTALS, MAY NOT BE OFFSET AGAINST PERSONAL SERVICES COMPENSATION. HOWEVER, LOSSES MAY BE CARRIED OVER FOR A MAXIMUM OF THREE YEARS.

Line 25 Show other taxable income not from business activities – see items listed in Line 2 instructions.

Line 26 Total of other income. Add Line 24 and 25. This amount should be shown on front page, Line 2.

Line 4 Total taxable income for Norwood.

PENALTIES AND INTEREST : UNPAID TAXES ACCUMULATE PENALTIES AND INTEREST AT 1% PER MONTH EACH (2% TOTAL PER MONTH). MINIMUM LATE PENALTY IS \$20.00.

Line 5 Tax due before credits – multiply Line 4 by 2%.

EXTENSION POLICY – A copy of your federal extension or other written request must be filed with the Norwood Tax Office by the due date of the Norwood return. An extension does not extend the time to pay taxes.

Line 6 Estimated tax payments made to Norwood for tax year 2015.

Line 7 Taxes withheld by employer and paid to Norwood.

NOTES: Protection of Taxpayer Information – Any information gained as a result of returns, investigations, etc., shall be confidential. No disclosures shall be made except for official purposes or as ordered by a court of competent jurisdiction or where disclosure is necessary to conduct a hearing before the Board of Appeals.

Line 8 Taxes withheld by employer and paid to other localities. Credit is only allowed on income taxed in another city or county

Line 9 Overpayments from prior years' tax returns.

Be sure to complete the 2016 Estimated Tax Form on the bottom of page 1 if tax will be more than \$200.00.

Line 10 Total credit for the tax year.

RETIREEES: If you no longer work at all, please attach a copy of your annual Social Security statement and a copy of your annual 1099 Form for your pension received, if any. Also, indicate the date of your retirement on Line C above OR provide a statement from your former employer showing your retirement date. Please advise your date of birth on Line C above, also.

Line 11 This is your tax due. Subtract Line 10 from Line 5. Balance must be remitted with this return.

Line 12 This is the amount you overpaid. Subtract Line 5 from Line 10.