



CITY OF TOLEDO 2018 EZ INDIVIDUAL RESIDENT TAX RETURN

DIVISION OF TAXATION
ONE GOVERNMENT CENTER, STE 2070
TOLEDO, OH 43604

PHONE: (419) 245-1662
WEB SITE: WWW.TOLEDO.OH.GOV
EMAIL: INCOMETAX@TOLEDO.OH.GOV

PLEASE CHECK IF A
REFUND
BALANCE DUE
CARRY-OVER

DUE ON OR BEFORE 4/15/2019

ACCOUNT # _____ SOCIAL SECURITY # _____

SPOUSE ACCOUNT # _____ SPOUSE SOCIAL SECURITY # _____

Single Married Filing Joint Married Filing Separate

PRINT First Name, Middle Initial, Last Name
Name _____

Address _____

Phone#(____) _____ Email Address _____

May we leave detailed messages at the above phone or email address? Yes No

SPOUSE NAME First Name, Middle Initial, Last Name
Name _____

Address (If different from above) _____

PART 1 START HERE

If all answers to the following questions are TRUE, you can file the EZ Form.

I lived in Toledo for the entire year of 2018. TRUE
FALSE

All of my 2018 wages were reported on W-2s, and the largest number of Box 5 or Box 18 was used. TRUE
FALSE

If I received W2-G's (Gambling Winnings) I have included them in my income. TRUE
FALSE

I did not have a current year Schedule C, E, F loss. TRUE
FALSE

I will not be using a prior year Schedule C, E, F loss. TRUE
FALSE

I did not have Partnership Income. TRUE
FALSE

****Attach a copy of your W-2's, W2-G's, Schedule(s); C, E, F, and any 1099's along with a copy of your Federal Form 1040 to include Schedule 1.**

NOTE: Tax Returns filed or postmarked after 4/15/2019 are subject to a late filing fee.

SIGNATURE

IMPORTANT: This return is NOT considered filed until signed by taxpayer and spouse (if applicable).

The undersigned declares that this return (and accompanying schedules) is a true, correct and complete return for the taxable period stated, and that the figures used are the same as used for federal income tax purposes and understands that this information may be released to the tax administration of the city of residence and the I.R.S.

Sign Here Your Signature → _____ Date _____

If a joint return, both must sign. Spouse Signature → _____ Date _____

CHECK BOX IF CITY MAY DISCUSS YOUR RETURN WITH TAX PREPARER.

IF YOU OWE MORE THAN \$200, QUARTERLY ESTIMATE PAYMENTS ARE REQUIRED and may be subject to penalties and interest due to lack of estimated payments. Further, you may need to make estimate payments for 2019 if you expect to owe the same or greater amount next year.

Did you file a Toledo tax return in 2017? YES NO
IF YES, PLEASE COMPLETE AND FILE THIS RETURN EVEN IF NOTHING OWED
Should your Tax account be inactivated? YES NO
Reason: _____

PART 2

STEP 1. Add up all of your Municipal Income and write the total below.
(Attach all supporting documents)

STEP 2. Multiply Step 1 by 2.25% (.0225) and write below.

STEP 3. Add up amounts in Box 19 of all your W-2's and Box 17 of your W2-G's and write total below. (Limited to 2.25%)

STEP 4. Enter the amount of Carry-Over from 2017 and the amount of Estimates paid for 2018 and total below.

Carry-Over _____ + Estimates _____ = Total _____

STEP 5. Subtract the amount in Step 3 and the Total from Step 4 from the amount in Step 2 and write total below. If a positive amount, this is your balance due. If a negative amount, go to Step 6.

STEP 6. If the amount in Step 5 is a negative amount of \$10 or more, indicate the amount below you want refunded or carried-over to 2019.

Refund: _____ Credit to 2019 _____

AMOUNTS UNDER \$10 ARE NOT DUE, PAYABLE OR CARRIED FORWARD

If the amount in Step 6 is a negative amount of \$10 or more, you may request a **REFUND** of this amount, or you may **CARRY-OVER** to tax year 2019 or get a partial refund and carry-over the rest. Please indicate which you prefer by **checking the appropriate box at the top of the page** and indicating the amounts in Step 6. If neither is checked, it will be carried-over to tax year 2019.

**Payment must accompany return.
Make payable to "COMMISSIONER OF TAXATION"**

For ON-LINE payment information, visit our website (www.toledo.oh.gov).

REFUND: CITY OF TOLEDO INCOME TAX PO BOX 902 TOLEDO, OH 43697-0902
PAYMENT ENCLOSED: CITY OF TOLEDO INCOME TAX PO BOX 993 TOLEDO, OH 43697-0993
NO PAYMENT ENCLOSED: CITY OF TOLEDO INCOME TAX PO BOX 929 TOLEDO, OH 43697-0929

Paid Preparer's Use Only
Your Signature → _____ Date _____
Print Name → _____ PTIN _____