

City of Moraine

Income Tax Division
4200 Dryden Rd
Moraine OH 45439

www.ci.moraine.oh.us/taxes

Declaration of Exemption – Tax Year _____

The City of Moraine requires all residents to file a yearly tax return.
If you meet one of the following exemptions,
completion of this form will fulfill the filing requirement.

| | | | |
|--|---|----|---|
| All information requested on this form must be provided in order for the exemption to be processed. Any missing information will result in a non-filing status. | | | |
| Last Name | First Name | MI | Social Security Number |
| Current Street Address | | | Phone Number |
| City, State, and Zip Code | | | <i>If your Spouse also has no taxable income, they will need to fill out a separate form.</i> |
| Permanent Exemption: | | | |
| Please check the reason an exemption is being requested and provide the corresponding information. | | | |
| Permanently Retired: I only receive pension income and/or other non-taxable income every year. | | | |
| <input type="checkbox"/> | Date of Retirement _____ Please attach a copy of your Federal 1040. **If you earn any taxable income (lottery, 1099NEC, etc.) you MUST file a return for that year** | | |
| Permanently Disabled: I only receive non-taxable income every year. | | | |
| <input type="checkbox"/> | Date of Disability _____ Please attach a copy of proof of permanent disability. **If you earn any taxable income (lottery, 1099NEC, etc.) you MUST file a return for that year** | | |
| <input type="checkbox"/> | Taxpayer is Deceased. Date of Death _____ | | |
| Current Year Exemption: | | | |
| Please check the reason an exemption is being requested and provide the corresponding information. | | | |
| No taxable income: I did not work or receive any taxable income for the year _____. | | | |
| <input type="checkbox"/> | The only income source I had for the year was _____. (Welfare, Unemployment, etc.) Please attach a copy of your Federal 1040 | | |
| <input type="checkbox"/> | United States of America Armed Forces: I was active duty. I had no income taxable to the City of Moraine. | | |

I hereby declare the information provided above to be true, correct, and complete.

Signature _____

Date _____