

Income Tax Division  
 4200 Dryden Rd  
 Moraine, OH 45439  
 Phone: (937) 535-1026  
 Fax: (937) 535-1026  
 Website: www.ci.moraine.oh.us

DUE ON OR BEFORE APRIL 15, 2021

(A copy of the Federal Extension must be Attached with Return)

This space is for official use only

Taxpayer(s) Name and Address     Attached copy of Federal 1040 and Schedules is required per State of Ohio	ALL Residents Must File a Return or Exempt Form   Partial Year Resident From _____ to _____ Prior/New Address: _____	Primary SSN _____ - _____ - _____ Joint SSN _____ - _____ - _____ Phone # _____
---	--	---

I AM NOT REQUIRED TO COMPLETE LINES 1-20 OF THIS RETURN BECAUSE: **MUST ATTACH FEDERAL 1040 IF FILED**

UNEMPLOYMENT ONLY  DECEASED, LIST DATE OF DEATH \_\_\_\_\_

PERM DISABILITY/FULLY RETIRED/SS  ONLY INCOME FROM NONTAXABLE SOURCE, LIST: \_\_\_\_\_

1. Total Qualifying Wages (generally found in Box 5 of Form W-2) ( <b>Attach W-2 Forms</b> )	1	\$	
2. Other Income/(loss) From gambling income, Federal Schedules C, E, F, K-1, 1099-MISC (See Worksheet B Line 6) ( <b>Attach all copies of all Federal Schedules</b> )	2	\$	
3. Moraine Taxable Income (line 1 plus Line 2). <b>losses on Line 2 do not offset W-2 Income</b>	3	\$	
4. Moraine Income Tax (Multiply Line 3 by <b>2.5%</b> [.0250])	4	\$	
5a. Moraine Tax Withheld	5a	\$	
5b. Other City Taxes Paid (Credit limited to 2.5%)	5b	\$	
5c. Estimates Paid	5c	\$	
5d. Prior Year Credit	5d	\$	
6. Total Payments and Credits (Total of Lines 5a through 5d)	6	\$	
7. <b>Balance Due/(Overpayment) (Line 4 minus Line 6)</b>	7	\$	
8. Late Filing Penalty (\$25.00 per month, not to exceed \$150.00)	8	\$	
9a. Penalty Due (15% of the amount not timely paid/underpayment)	9a	\$	
9b. Interest Due (5% Imposed on all tax not timely paid)	9b	\$	
10. <b>Total Due</b> (Total of Lines 7, 8, 9a and 9b) No payment due if Line 10 is \$10.00 or less	10	\$	
11. Overpayment from Line 10	11	\$	
12. Amount to be Refunded (Amounts \$10.00 or less will not be refunded)	12	\$	
13. Credit to Next Year	13	\$	

**Part B Declaration of Estimated Tax for 2021 - Required if estimated tax liability is \$200 or greater**

14. Total Estimated Income Subject to Tax \$ _____ Multiply by Tax Rate of 2.5%	14	\$	
15. Estimated Taxes Withheld from Wages	15	\$	
16. Tax due after Withholding (line 14 minus Line 15) STOP if this amount is less than \$0.00	16	\$	
17. Less credits (from Line 13 above)	17	\$	
18. Net Estimated Tax Due (Line 16 minus 17 if greater than zero)	18	\$	
19. Amount paid with this declaration (not less than 1/4 of Line 18)*	19	\$	

\*Subsequent estimated payments are due by the 15th of June, September and January

<b>20. TOTAL AMOUNT DUE - Add Lines 10 and 19 (Payable to the City of Moraine)</b>	<b>20</b>	<b>\$</b>	
--	-----------	-----------	--

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 herein are the same as used for Federal Income Tax purposes

SIGNATURE OF PREPARER	DATE	SIGNATURE OF TAXPAYER	DATE
NAME AND ADDRESS OF PREPARER	PHONE NUMBER	SIGNATURE OF JOINT	DATE

Check here if we may contact the above preparer with questions regarding the preparation of this return.

**WORKSHEET A - SALARIES, WAGES, TIPS AND OTHER COMPENSATION**  
**TO BE COMPLETED BY TAXPAYERS WHO RECEIVE W-2 INCOME FROM MORE THAN ONE SOURCE**  
**ATTACH COPIES OF ALL W-2S USED TO COMPUTE YOUR INCOME/WITHHOLDINGS**

City of Employment	Employer	Wages (W-2 Box 5)	Moraine Tax Withheld (W-2 Box 19)	Other City Tax Withheld (Not to exceed 2.5%)

**TOTALS**                      1a. \_\_\_\_\_                      1b. \_\_\_\_\_                      1c. \_\_\_\_\_  
 Enter Total on Pg 1 Line 1      Enter Total on Pg 1 Line 5a      Enter Total on Pg 1 Line 5b

**WORKSHEET B - BUSINESS INCOME or LOSS**  
**ATTACH COPIES OF FEDERAL FORMS AND SCHEDULES USED TO COMPUTE RETURN**

	Schedules	Column A Income/Loss from Federal Schedules	Column B Moraine %	Moraine Taxable Income Column A x Column B
1.	<b>Schedule C - Business Income</b> (Combine the net income or loss of all Schedules C's)	\$	%	\$
2.	(Residents enter profit/loss from ALL properties. Nonresidents enter only profit/loss from Moraine properties)	\$	100%	\$
3.	(Residents enter profit/loss from entities that do not withhold Moraine tax on entire distributive share)	\$	100%	\$
4.	<b>Miscellaneous Income</b> - Gambling Income, 1099-MISC, W-2G, Schedule F, etc	\$	%	\$
5.	NOL Carry Forward (Attach worksheet and enter as a loss)			\$
6.	<b>Total Income/Loss (Combine Lines 1 through 5 and enter this amount on Pg 1 Line 2)</b>			\$

**SCHEDULE Y - BUSINESS APPORTIONMENT FORMULA**

To be completed by all **Non-Residents** who earn a portion of their net profits in Moraine

	a. Located Everywhere	b. located in Moraine	c. Percentage (b ÷ a)
<b>Step 1.</b> Original Cost of Real and Tangible Personal Property Gross Annual Rentals Paid Multiplied by 8 <b>TOTAL STEP 1</b>	_____	_____	_____ %
<b>Step 2.</b> Wages, Salaries, & Other Compensation Paid	_____	_____	_____ %
<b>Step 3.</b> Gross Receipts from Sales Made and/or Work or Services performed	_____	_____	_____ %
<b>Step 4.</b> Total Percentages (Add Percentages from Steps 1-3)			_____ %
<b>Step 5.</b> Apportionment Percentage (Divide Total Percentage by Number of Percentages Used)			_____ %