



2017 VILLAGE OF MARIEMONT – EASY INDIVIDUAL 2017 INCOME TAX RETURN

DUE DATE 04/17/2018 | Federal 1040 MUST be attached to this return. | Make Check or Money Order Payable To: Village of Mariemont, Tax Office, 6907 Wooster Pike, Mariemont, Ohio 45227-4428

TAXPAYER NAME: _____ SOCIAL SECURITY NUMBER: _____

HOME PHONE NO.: _____ WORK PHONE NO.: _____

SPOUSE'S NAME: _____ SOCIAL SECURITY NUMBER: _____

HOME PHONE NO.: _____ WORK PHONE NO.: _____

CURRENT ADDRESS: _____

FILING STATUS: -SINGLE -MARRIED FILING JOINTLY -MARRIED FILING SEPARATELY | -FULLTIME RESIDENT -PART YEAR -NON-RESIDENT

If you moved during the tax year, please give Moved into Mariemont Date: _____ Moved out of Mariemont Date: _____

If you have an EXTENSION check here and attach a copy.

NEW: If you are requesting that your account be inactivated due to moving from the jurisdiction with no intent to return, although retaining a mailing address within the jurisdiction as your address of record, please enter the date of your move and the reason, and attach supporting documentation with regard to your relocation.

If this is an Amended return check here and attach an explanation.

MAY THE TAX OFFICE COMMUNICATE WITH YOU VIA E-MAIL? YES NO If YES, what is your e-mail address? _____

Part A Tax Calculation		
1. Total Qualifying Wages (generally found in Box 5 of Form W-2; see instructions) - Attach W-2 Forms		1
2. Mariemont Taxable Income (If prorated for move in/out, put percentage here _____ %)		2
3. Mariemont Income Tax - 1.25% (Multiply Line 2 by .0125)		3
4a. Mariemont Tax Withheld (per W-2's)	4a.	
4b. Other Municipal Taxes Paid (Credit limited to 1%)- Residents only	4b.	
4c. Estimates Paid	4c.	
4d. Prior Year Credit	4d.	
5. Total Payments and Credits (Total of Lines 4a through 4d)		5
6. Balance Due/(Overpayment) (Line 3 minus Line5)		6
7. Late Filing Penalty (\$25.00 per month or fraction thereof, not to exceed \$150.00)		7
8a. Penalty Due (15% of the amount not timely paid)		8a
8b. Interest Due (Imposed on all tax not timely paid)		8b
9. Total Due (Total of Lines 6, 7, 8a and 8b.) No payment due if Line 9 is \$10.00 or less.		9
10. Overpayment from Line 9	10	
11. Amount to be Refunded (Amounts \$10.00 or less will not be refunded)	11	
12. Credit to Next Year	12	

Part B Declaration of Estimated Tax for 2018 – Must be completed by Taxpayers who anticipate a net tax liability of at least \$200.00		
13. Total Estimated Income Subject to Tax \$ _____ Multiply by tax rate – 1.25%	13	
14. Mariemont Tax to be Withheld or Credit for Tax Paid to Other Cities (Other city tax is Limited to 1%)	14	
15. 2018 Estimated Tax Due (Line 13 minus Line 14)	15	
16. Declaration Due (Multiply Line 15 by 22.5%)	16	
17. Less: Overpayment from Prior Year (from Line 12 above)	17	
18. Net Estimated Tax Due with this return- subsequent estimated payments are due by 6/15,9/15 & 1/15	18	
19. TOTAL AMOUNT DUE – Add Lines 9 and 16. Make checks payable to Village of Mariemont.	19	

<p>REQUIRED SIGNATURES:</p> <p>_____ Taxpayer's Signature Date _____</p> <p>_____ Spouse's Signature Date _____</p> <p>_____ Tax Preparer's Signature Date _____</p> <p>Preparer's Phone No.: _____</p> <p>May the VILLAGE OF MARIEMONT discuss this return with the preparer shown above? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>CREDIT CARD INFORMATION FOR PAYMENT:</p> <p>CARD TYPE: <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD</p> <p>ACCOUNT NUMBER: _____</p> <table border="1" style="width: 100%;"> <thead> <tr> <th>AMOUNT</th> <th>SECURITY PIN</th> <th>CARD EXPIRATION DATE</th> </tr> </thead> <tbody> <tr> <td>\$ _____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table> <p>PRINT NAME ON CARD: _____</p> <p>AUTHORIZATION SIGNATURE: _____</p>	AMOUNT	SECURITY PIN	CARD EXPIRATION DATE	\$ _____	_____	_____
AMOUNT	SECURITY PIN	CARD EXPIRATION DATE					
\$ _____	_____	_____					

LINE 1: Enter total amount of Qualifying Wages, which generally includes amounts reported in the Medicare wage base (Box 5 of Form W-2), with exceptions including compensation of Medicare-exempt employees hired before April 1, 1986 and income from disqualifying disposition of stock options. If you have multiple W-2s, complete Worksheet A on page 2 of this return. Attach all W-2s and front page of Federal Form 1040.

Credit for tax paid to another municipality is limited to 1% of the qualifying wage taxed by said municipality. If taxes are paid directly to another city rather than by withholding, a copy of that City return must be attached to claim credit. Credit applies to Mariemont residents only. Credit must be adjusted to move in/out dates.

No credit is allowable for county taxes paid!

PLEASE NOTE: If only a portion of a Mariemont resident's income is taxed by the City of employment, the untaxed balance of the individual's income is subject to the 1.25 Mariemont tax. This applies to refunds from the City of employment for time out of the City.

Overpayment will be applied to 2018 estimate unless you request a refund.

LINE 13: Estimate your income for 2018. Estimation should not be less than last year's income unless a reason is attached.

NOTE: Tax rate is 1.25%. Allowable credit is limited to 1% of the wages taxed by another city.

You may pay the entire amount declared with the filing of this form. First quarter (25%) must accompany this form.

Attach a copy of your Federal form 1040.

Taxable income may be adjusted for residents who move in/out during the year. Credit for tax paid to another city must also be adjusted. Income earned as a resident is taxable. Documentation must be attached, pay stubs are preferred.

EXTENSION POLICY: If you have a federal extension, we will also give you an extension until **OCTOBER 15, 2018**, provided that you have attached a copy of your Federal extension. If you do not have a federal extension you may go to our website and complete a request for a Mariemont extension on the form provided there.

Worksheet A Qualifying Wages (generally include Box 5 (Medicare) wages. See line by line instructions for details. Attach all Forms W-2.

Column 1	Column 2	Column 3	Column 4	Column 5
Employer	City Where Employed	Income from each Local W-2	Mariemont Tax Withheld	*Other city withheld Not to exceed 1%
1				
2				
3				
4				
5 TOTALS				

ENTER ON:

PAGE 1 LINE 1

PAGE 1 LINE 7a.

PAGE 1 LINE 7b.

NEW: If you are requesting that your account be inactivated due to moving from the jurisdiction with no intent to return, although retaining a mailing address within the jurisdiction as your address of record, please enter the date of your move and the reason, and attach supporting documentation with regard to your relocation.

NOTE: unless accompanied by all required substantiating documents, payment of the balance of the Tax Due (Line 6) and, if required, at least 1/4th of the Estimated Tax (Line 15), this form is not a legal final return or declaration.

DECLARATION AND RETURN PAYMENT CALENDAR

April 15,
File Declaration with
1/4th payment

June 15,
Make 2nd
Quarterly Payment

September 15,
Make 3rd
Quarterly Payment

January 15,
Make 4th
Quarterly Payment

April 15,
File return, Pay
Total Due

**FAILURE TO FILE A REQUIRED RETURN AND/OR PAY TAXES DUE BY THE DUE DATE,
MAY SUBJECT YOU TO AN IMPOSITION OF PENALTIES AND INTEREST.**