Form IR Filed With MORROW TAX DEPT. 150 E. PIKE STREET MORROW, OH 45152

MORROW INCOME TAX RETURN 20

FIILING REQUIRED EVEN IF NO TAX IS DUE
ON OR BEFORE APRIL 15TH
LATE FILING SUBJECTS YOU TO A \$20.00 PENALTY
AND INTEREST ON ANY TAX DUE

MAKE CHECK OR MONEY ORDER PAYABLE TO: VILLAGE OF MORROW TAX DEPT. PHONE: (513) 899-2821 FAX: (513) 899-3170

8:00 A.M. to 4:30 P.M.

TAXPAYER'S NAME AND ADDRESS (IF SS#, Name, Address is incorrect make corrections) SSN TAXPAYER SSN SPOUSE TAXPAYER EMPLOYER SPOUSE EMPLOYER PHONE NO. (If moved since the previous return was filed give date: Moved INTO Morrow: Moved OUT of Morrow: __ PART A. I/WE ARE NOT REQUIRED TO COMPLETE PART B OF THIS RETURN DUE TO THE FOLLOWING REASON (PLEASE CHECK) SIGNATURE(S) REQUIRED AT BOTTOM OF FORM. _ TOTAL/PERMANENT DISABILITY MOVED OUT PRIOR TO; LIST MOVE DATE: __ LIST NEW ADDRESS: RETIREMENT INCOME ONLY DECEASED: DATE OF DEATH: ONLY INCOME IS FROM NON-TAXABLE SOURCE; LIST SOURCE: PART B. FORMS RECEIVED WITHOUT COMPLETE DOCUMENTATION WILL BE RETURNED. OFFICE USE ONLY 1. TOTAL GROSS WAGES, SALARIES, TIPS, AND OTHER COMPENSATION (USE GREATER OF BOXES 1, 5 OR 18 FROM W-2) 2. OTHER TAXABLE INCOME OR DEDUCTIONS FROM SIDE 2 - SEE INSTRUCTIONS\$ 4. MORROW TAX – 1% OF LINE 3 5. CREDITS: A. TAX WITHHELD BY EMPLOYER FOR VILLAGE OF MORROW _ ESTIMATED TAX PAID TO VILLAGE OF MORROW....... \$_____ ESTIMATED TAX PAID CITY OR VILLAGE OF\$ (NOT TO EXCEED ½%) \$_____ D. PRIOR YEAR OVERPAYMENTS.....\$_ E. TOTAL CREDITS......\$ \$_____ 6. IF LINE 4 IS GREATER THAN LINE 5D PAYMENT OF BALANCE MUST ACCOMPANY THIS RETURN -TAX DUE: \$. INTEREST \$ __ TOTAL ... \$ 7. OVERPAYMENT TO BE REFUNDED \$ OR CREDITED \$ TO NEXT YEARS ESTIMATED *NO TAXES DUE OR REFUNDS OF LESS THAN \$1.00 SHALL BE COLLECTED OR REFUNDED* DECLARATION OF ESTIMATED TAX FOR YEAR 20 _ MULTIPLY BY TAX RATE 1% FOR GROSS TAX OF\$ ____ 8. TOTAL INCOME SUBJECT TO TAX \$ 9. LESS EXPECTED TAX CREDITS: WITHHELD BY EMPLOYER FOR VILLAGE OF MORROW...... OVERPAYMENT FROM PRIOR YEAR\$ TOTAL CREDITS \$ 12. 20___ TAX DUE (LINE 6B) \$ _ __, PLUS 20____ DECLARATION (LINE 11) \$ __ = TOTAL DUE \$ 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 TAXPAYER, THE DECLARATION IS BASED ON ALL INFORMATION OF WHICH THE PREPARER HAS ANY KNOWLEDGE. Signature of Person Preparing (if other than taxpayer) Date Signature of Taxpayer Date May the Morrow Tax Dept. discuss this return with the preparer show Address to the left? Telephone No. (Signature of Spouse

YES

NO