

## INCOME TAX DIVISION

201 W Indiana Avenue | Perrysburg, OH 43551 | Office 419 872 8035 | Fax 419 872 8037 | itax@ci.perrysburg.oh.us

### If you need assistance determining your City of Perrysburg tax liability, the following documents are **REQUIRED**:

1. PERRYSBURG TAX FORM: with upper portion of tax form **completed**.
2. W-2 FORMS: include copies showing Medicare wages (box 5) and Local wages and withholding (boxes 18-20).
3. COMPLETED IRS FORM 1040 AND SCHEDULE 1 (if required to file with the IRS)
4. ADDITIONAL DOCUMENTS: such as paystubs showing year-to-date wages as of move-in or move-out date to assist in calculating taxable income as a part-year resident or any other specific instructions.

Mail documents to:  
**PERRYSBURG INCOME TAX DIVISION**  
201 W INDIANA AVE  
PERRYSBURG OH 43551

-OR-  
Hand-deliver documents to the secure drop slot located in the atrium area of the Municipal Building available 24-hours/day.

**City of Perrysburg**  
201 W Indiana Avenue, Perrysburg, OH 43551  
Phone: 419.872.8035 Fax: 419.872.8037  
Email: itax@ci.perrysburg.oh.us

**Income Tax Form I**  
**Individuals**  
Due on or before April

Taxpayer's Social Security Number  
Employer's Social Security Number  
Employer's name, address, and ZIP code

Type of filing:  
 Resident full year  
 Resident part year  
 Non-resident with rental or other income  
 Other

1. Wages, salaries, tips, etc. - complete wage worksheet and enter total taxable wages  
2. Other taxable income - complete other income worksheet and enter total income  
3. Total taxable income - add lines 1 and 2

4. Perrysburg tax before credits - multiply line 3 by 1.50%  
5. Perrysburg municipal tax withheld by employer (from wage worksheet)  
6. Credit allowed for taxes withheld by employer on wages included in line 1 (see instructions and wage worksheet CR)  
7. Tax paid directly to another municipality on income reported on line 2 or wages not withheld by employer  
8. Perrysburg tax paid by Free-to-Work/Entry on income reported on line 2b or NRE assignment assigned directly to Perrysburg  
9. Withholding credits - add lines 5 through 8  
10. Net tax liability - subtract line 9 from line 4

11. Estimated tax payments made to Perrysburg Tax Division towards this year's tax liability  
12. Credit carried over from previous year filing  
13. Refund assignment of tax withholding from another municipality to Perrysburg (attach copy of refund request)  
14. Payment submitted with Extension or previous filing  
15. Total credits - add lines 11 through 14  
16. Balance of tax due. Subtract line 15 from line 10. If positive, this is the amount you owe.  
17. Overpayment. If line 16 is negative, this is the amount you have overpaid.  
Specify how you wish to utilize your credit (amounts less than \$10.00 will not be refunded or carried forward)  
Credit to next year:  Refund:

ASSEMBLE YOUR FILING (see return assembly guide)  
Mail assembled filing to:  
PERRYSBURG INCOME TAX DIVISION  
201 W INDIANA AVE  
PERRYSBURG OH 43551  
OR  
Hand deposit in our 24 hour drop box (located in the atrium entrance to the Municipal Building)  
The drop box is open 24 hours per day, 7 days a week. It is a secure, lockable drop box for your return.  
Return by mail:  Return by drop box:

Penalty: \_\_\_\_\_  
Interest: \_\_\_\_\_  
Expense fee: \_\_\_\_\_  
OFFICE USE ONLY  
Preparer's name and address: \_\_\_\_\_  
Preparer's signature: \_\_\_\_\_

22222 Employer's social security number  
OMB No. 1545-0046

1 Wages, tips, other compensation  
2 Federal income tax withheld  
3 Social security wages  
4 Social security tax withheld  
5 Medicare wages and tips  
6 Medicare tax withheld  
7 Social security tips  
8 Allocated tips  
9 Control number  
10 Dependent care benefits  
11 Nonqualified plans  
12a  
12b  
12c  
12d  
13  
14 Other  
15 State Employer's state ID number  
16 State wages, tips, etc.  
17 State income tax  
18 Local wages, tips, etc.  
19 Local income tax  
20 Locally name

**Form W-2 Wage and Tax Statement**  
Copy 1 - For State, City, or Local Tax Department  
Department of the Treasury - Internal Revenue Service

**1040** U.S. Individual Income Tax Return  
OMB No. 1545-0047  
OMB No. 1545-0047  
OMB No. 1545-0047

1 Filing status  
2 Adjusted gross income  
3 Taxable income  
4 Tax  
5 Refund or overpayment  
6 Other payments and credits  
7 Total payments and credits  
8 Total tax liability  
9 Total tax paid  
10 Taxable income  
11 Total tax liability  
12 Total tax paid  
13 Total tax liability  
14 Total tax paid  
15 Total tax liability  
16 Total tax paid  
17 Total tax liability  
18 Total tax paid  
19 Total tax liability  
20 Total tax paid

**SCHEDULE 1** Additional Income and Adjustments to Income  
OMB No. 1545-0048

1 Taxable income  
2 Alimony received  
3 Other gains or losses  
4 Rental real estate, royalties, partnerships, S corporations, trusts, etc.  
5 Farm income or loss  
6 Unemployment compensation  
7 Other income  
8 Capital gains and losses  
9 Dividends and capital gains  
10 Other income  
11 Other income  
12 Other income  
13 Other income  
14 Other income  
15 Other income  
16 Other income  
17 Other income  
18 Other income  
19 Other income  
20 Other income

# Income Tax Form I Individuals

Due on or before April 18, 2023

## City of Perrysburg

201 W. Indiana Avenue, Perrysburg, OH 43551

Phone: 419.872.8035  
Email [itax@ci.perrysburg.oh.us](mailto:itax@ci.perrysburg.oh.us)

Fax: 419.872.8037  
[www.ci.perrysburg.oh.us](http://www.ci.perrysburg.oh.us)

# 2022

I (we) have requested an extension of time to file for this year with the IRS.  
(please include copy of extension request with filing)

FILE # \_\_\_\_\_  
NAME(S) \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY, STATE, ZIP \_\_\_\_\_

Taxpayer's Social Security Number \_\_\_\_\_  
Spouse's Social Security Number \_\_\_\_\_  
(If joint filing)  
Taxpayer's phone number \_\_\_\_\_

Type of filing:  
 Resident full year.  
 Resident part year.  
 Non-resident with rental or other income.  
 Other: \_\_\_\_\_

If you changed address during the tax year, please indicate move dates  
INTO Perrysburg \_\_\_\_\_ OUT OF Perrysburg \_\_\_\_\_  
Previous address \_\_\_\_\_  
Current address \_\_\_\_\_

<p>1. Wages, salaries, tips, etc. _____</p> <p>2. Other taxable income _____</p> <p>3. Total taxable income - add lines 1 and 2. _____</p>	C/F Loss	<div style="border: 1px solid red; width: 50px; height: 15px; margin: 0 auto;"></div>	1.	<div style="border: 1px solid black; width: 100%; height: 15px;"></div>	2.	<div style="border: 1px solid black; width: 100%; height: 15px;"></div>	3.	<div style="border: 1px solid black; width: 100%; height: 15px;"></div>
<p>4. Perrysburg tax before credits – multiply line 3 by 1.50%. _____</p> <p>5. Perrysburg municipal tax withheld by employer. _____</p> <p>6. Credit allowed for taxes withheld by employer. _____</p> <p>7. Credit for tax paid on other income or additional tax paid on wages from other income). _____</p>			5.	<div style="border: 1px solid black; width: 100%; height: 15px;"></div>	6.	<div style="border: 1px solid black; width: 100%; height: 15px;"></div>	7.	<div style="border: 1px solid black; width: 100%; height: 15px;"></div>
<p>8. Perrysburg tax paid by Pass-through Entity on income reported on line 2. _____</p> <p>9. Withholding credits – add lines 5 through 8. _____</p> <p>10. Net tax liability – subtract line 9 from line 4. _____</p>			8.	<div style="border: 1px solid black; width: 100%; height: 15px;"></div>	9.	<div style="border: 1px solid black; width: 100%; height: 15px;"></div>	10.	<div style="border: 1px solid black; width: 100%; height: 15px;"></div>

Note that in no case may credits on line 6 added to credits on line 7 exceed 50% of tax shown on line 4.

Note that if line 10 is greater than \$200.00 you may need to submit quarterly tax estimates in 2023 to avoid penalty and interest. Minimum payment may be calculated by dividing the amount on line 10 (or 90% of the current year net tax liability) by 4.

<p>11. Estimated tax payments made to Perrysburg Tax Division towards this years tax liability. _____</p> <p>12. Credit carried over from previous year tax filing. _____</p> <p>13. Refund assignment of tax withholding from another municipality to Perrysburg (attach copy of refund request). _____</p> <p>14. Payment submitted with Extension or previous filing. _____</p> <p>15. Total credits – add lines 11 through 14. _____</p>	11.	<div style="border: 1px solid black; width: 100%; height: 15px;"></div>	12.	<div style="border: 1px solid black; width: 100%; height: 15px;"></div>	13.	<div style="border: 1px solid black; width: 100%; height: 15px;"></div>	14.	<div style="border: 1px solid black; width: 100%; height: 15px;"></div>
<p>16. Balance of tax due. Subtract line 15 from line 10. If positive, this is the amount you owe. _____</p>	15.	<div style="border: 1px solid black; width: 100%; height: 15px;"></div>	16.	<div style="border: 1px solid black; width: 100%; height: 15px;"></div>				

16. Balance of tax due. Subtract line 15 from line 10. If positive, this is the amount you owe.  
Make payment to: City of Perrysburg Income Tax Commissioner (amounts less than \$10.00 will not be billed).  
Electronic payments :[www.officialpayments.com](http://www.officialpayments.com) and by telephone at 1(800)272-9829 (using jurisdiction code 4547).

17. **Overpayment.** If Line 16 is negative, this is the amount you have overpaid.  
Specify how you wish to utilize your credit (amounts less than \$10.00 will not be refunded or carried forward).  
Credit to next year:  Refund:

Penalty \_\_\_\_\_

Interest \_\_\_\_\_

Balance due \_\_\_\_\_

OFFICE USE ONLY

### ASSEMBLE YOUR FILING (see return assembly guide).

Mail **assembled** filing to: \_\_\_\_\_ -OR- \_\_\_\_\_

PERRYSBURG INCOME TAX DIVISION  
201 W INDIANA AVE  
PERRYSBURG OH 43551

Hand deposit in our 24 hour drop  
box (located in the atrium entrance  
to the Municipal Building).

- Late filing penalty of \$25.00 is charged per month (maximum penalty of \$150.00). Any anticipated tax due must be paid by April 18, 2023.
- Late payment penalty of 15% is charged on any unpaid income tax (including each quarter's unpaid or underpaid estimated tax).
- Interest of 0.42% per month is charged on 2022 past due tax amounts.

The undersigned declares that the information provided on, and documentation submitted with, this form are true, correct, and complete. The undersigned further requests the City of Perrysburg income tax division to determine their municipal income tax liability on their behalf.

\_\_\_\_\_  
Taxpayer signature Date  
\_\_\_\_\_  
Signature of taxpayer's spouse if this is a joint return or title of person signing for a business Date