Hillsboro Income Tax Office

130 North High Street Hillsboro, OH 45133 (937) 393-3848 tax@hillsboroohio.net

2022 INDIVIDUAL INCOME TAX RETURN

ACCOUNT NUMBER

YOUR SOCIAL SECURITY NUMBER SPOUSE'S SOCIAL SECURITY NUMBER

			□ RESIDENT	DATE MOVED IN				
			☐ NON RESIDENT	DATE MOVED OUT				
			□ SOLE PROPRIETOR	FORMER ADDRESS:				
			CITY OF RESIDENCE					
			PHONE #:					
			NAME AND ADDRESS OF OWNER:					
	□ Singl							
		ed Filing Joint Return (even if only one had income	•	-				
	□ Marie	d Filing Separate Return. Enter Spouse's social sec	surity number and full name here	3:				
4	TOTAL IM S INOC			<u></u>				
1.	TOTAL W-2 INCO			1.				
2.		THAN WAGES from worksheets. (Attach Federal S	Schedules, forms, documentation	hedules, forms, documentation.) 2.				
3.	TOTAL INCOME	(Add box 1 Plus box 2)		3.				
4.	TAX LIABILITY	Multiply box 3 by 1.50%		4.				
5.	CREDITS	A. City of Hillsboro tax withheld	5A.					
		B. Credit for other city tax withheld	5B.					
		C. 2022 Estimated tax payments	5C.					
		D. Prior year credit carried forward	5D.					
		E. Total of credits. Add 5A through 5D and enter h	nere.	5E.				
6.	If box 4 is greater t	han box 5E, enter your BALANCE DUE here (\$10.0	6.					
7.	If box 5E is greater							
		UNDED \$ or CREDITED 1						
8.		INTEREST: LATE FILI		8.				
9.		OR 2022 Add box 6 and box 8 (Tax + Penalty +Int		9.				
		2023 DECLARATION OF ESTIMATED TAX DUE						
				<u> </u>				
10.	Total estimated for	tax year 2023 (gross taxable income multiplied by	1.50%)	10.				
11.	Less credits (includ	ing tax anticipated to be withheld from employers)	11.					
12.	Net tax owed for ta	x year 2023 estimated tax		12.				
13.	Amount paid with th	nis declaration for FIRST QUARTER ESTIMATED T	5% of 13.					
14. 1	ine 12) OTAL DUE, ADD I	BOXES 9 and 13 FOR TOTAL BALANCE DUE.	14.					
certif	that I have examined	this return including accompanying Federal 1040 page of	one, W-2's, schedules and statemen	nts, and to the best of my knowledge and belief, it is				
rue ar of this	id accurate, and corre return.	ct. If my return was prepared by a tax practitioner, I have NO (Note: Preparer must completely fill out so	indicated whether or not you may e ection below regarding "Preparer.")	contact my preparer directly concerning the preparation				
			,					
You	r signature		Occupation	Date				
Spo	use signature (if filing	joint return)	Occupation	Date				
Sign	ature and address of	preparer (if not prepared by taxpayer):	•					
	NE NUMBER OF PR			Date:				

1. REQUIRED AT	TACHMENTS: ALLA	N-2'S, FRONT	PAGE OF FORM	1040, ALL REFE	RENCED SCHEDULES			
Employer's		ocality Name Box 20	Resident Tax Withheld	Other City Tax W/H	Medicare Wages Box 5 of W-2			
		TOTAL						
VORKSHEET 1 - IN	COME OTHER THAN	N WAGES						
	National Control of the Control of t	239923041244694326001999334469001999444		_				
se this worksheet ON	LY to report any income If you are unsure if the i	e that is not repor	rted on a W-2. If yo call the tax departr	ou do not see your ment for clarification	income listed here, use the			
	llocation from Workshe							
chedule E line 21					***			
orm 1099 (Do not repo	ort refunds, dividends, ir	nterest or retireme	ent distibutions)	***************************************				
OTAL Carry to line 2, p	oage 1							
VORKSHEET 2 - SO								
determination of where	e your small business his worksheet can be u ch as rent and utilities.	is taxable. This sed if you did not	worksheet will assi claim business use	ist in making the do of your home and i	et will assist in making the etermination of where your if you do not have any other have employees, go to our			
Product or service prov	uct or service provided: Date began:							
s all of your work perfo proceed on. If your an	ormed at your home site swer is no, continue wit	e? h this worksheet.	If yes, record your	net income or loss	on worksheet 1 and			
Work must be perform much you were paid fo	ed inside the city limits or jobs inside different si	of a city before yo ities and list them	ou are taxable to that here.	t city. Organize yoા	ur work and determine how			
City	Amount received before expenses	Total gross red from Schedu		Net Profit from Sch				
		.÷	=	×	=			
		÷	=	x	=			

RESIDENTS: Record 100% of line 31 of Schedule C on Worksheet 1. Attach Worksheet 1, Schedule C, and copies of the city returns for tax credit. List this tax credit on line 1, box 4.

NONRESIDENTS: Use the amount shown to be taxable to the city for which you are filing and list on Worksheet 1. Do not take credit for taxes paid to other cities.