## **Hillsboro Income Tax Office**

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

## 2023 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 CITY OF RESIDENCE		
		NAME AND ADDRESS O	F OWNER:		
	□ Single		)D:1 (1 1 : 4 G	1	<b>–</b> S
		ed Filing Joint Return (even if only one had incon d Filing Separate Return. Enter Spouse's social so		•	□ Separate
	□ Marie	u Filling Separate Return. Enter Spouse's social si	ecurity number and full hame here	z	<del></del>
1.	TOTAL W-2 INCO	ME		1.	
2.	INCOME OTHER	THAN WAGES from worksheets. (Attach Federa	al Schedules, forms, documentation	`` <b> </b>	
3.	TOTAL INCOME	· · · · · · · · · · · · · · · · · · ·			
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. 2023 Estimated tax payments	5C.		
		D. Prior year credit carried forward	5D.		
		E. Total of credits. Add 5A through 5D and enter	er here.	5E.	
6.	If box 4 is greater than box 5E, enter your BALANCE DUE here (\$10.00 or more)				
7.	If box 5E is greate	rthan box 4, enter your OVERPAYMENT here (\$	10.00 or more) 7.		
	Amount to be REF				
8.	PENALTY:	INTEREST: LATE F	ILING FEE:	8.	
9.	BALANCE DUE F	OR 2023 Add box 6 and box 8 (Tax + Penalty +	Interest + Late Filing Fee)	9.	
		2024 DECLARATION OF ESTIMATED TAX DU	E - Complete this section if 202	3 tax due exceeds \$2	200
10.	Total estimated fo	r tax year 2024 (gross taxable income multiplied	by 1.50%)	10.	
11.	Less credits (include	ding tax anticipated to be withheld from employer	s) 11.		
12.	Net tax owed for ta	x year 2024 estimated tax		12.	
13.	Amount paid with t	25% of 13.			
14.	line 12) TOTAL DUE. ADD	14.			
true a	nd accurate, and corre	d this return including accompanying Federal 1040 pagect. If my return was prepared by a tax practitioner, I h.  NO (Note: Preparer must completely fill out	ave indicated whether or not you may	contact my preparer dire	
Yo	ur signature		Occupation		Date
Sp	ouse signature (if filing		Date		
Sig	nature and address of	preparer (if not prepared by taxpayer):			
-	IONE NUMBER OF PI	· · · · · · · · · · · · · · · · · · ·	NL:	Date:	

B 1. REQUIRED	ATTACHMENTS: A	ALL W-2'S, FRONT	PAGE OF FORM	1040, ALL REFERE	NCED SCHEDULES
Employ	yer's Name	Locality Name Box 20	Resident Tax Withheld	Other City Tax W/H	Medicare Wages Box 5 of W-2
		TOTAL			
WORKSHEET 1 -	INCOME OTHER T	HAN WAGES			
WORKSHEET 1-	INCOME OTTICK I	TIAN WAGES			
		come that is not report the income is taxable			ome listed here, use the
	•		•		
Form 4835 line 32					
Form 1099 (Do not re	eport refunds, dividen	ds, interest or retireme	ent distibutions)		
Miscellaneous					
TOTAL Carry to line	2, page 1				
WORKSHEET 2 -	SCHEDULE C				
determination of who business is taxable.	nere your small busin This worksheet can be such as rent and utili	ess is taxable. This be used if you did not a	worksheet will assi claim business use	st in making the deter of your home and if yo	will assist in making the rmination of where your ou do not have any other re employees, go to our
Product or service p	rovided:		Date beg	an:	
Is all of your work peroceed on. If your	erformed at your home answer is no, continue	e site?e with this worksheet.	If yes, record your	net income or loss on	worksheet 1 and
		mits of a city before yo nt sities and list them		t city. Organize your w	ork and determine how
City	Amount recei before expen	•		Net Profit or L from Schedu	
		÷	=	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.