File With Form IR CITY OF MASON TAX OFFICE 6000 Mason-Montgomery Road Mason, Ohio 45040

2019 - MASON INCOME TAX RETURN - 2019

FILE ON OR BEFORE APRIL 15, 2020 – FILING REQUIRED EVEN IF NO TAX IS DUE.

LATE FILING AND/OR LATE PAYMENT OF TAX DUE SUBJECTS YOU TO A PENALTY. 90% OF THE TAX MUST BE PAID BY
JANUARY 15, 2020 AND ANY REMAINING BALANCE PAID BY APRIL 15, 2020 TO AVOID LATE PAYMENT PENALTY AND INTEREST.

Phone: (513) 229-8535 Fax: (513) 229-8531 www.imaginemason.org Make checks payable to: CITY OF MASON TAX OFFICE

Account Number						SOCIAL SECURITY #											
														Name			
Address						ARE YOU A NEW RESIDENT? ☐ YES ☐ NO IF YOU MOVED DURING THE YEAR:											
City/State	PRIOR ADDRESS																
City/State/Zip						DATE MOVED TO MASON											
E-mail							DATE MOVED FROM MASON										
MAY THE TAX	K OFFIC	E COMMUNICATE WITH YOU VIA THE ABO	VE E-MAIL ADDRESS? ☐ YE	s 🗆 NO				RE	SIDEN	т 🗆	NON-MA	SON I	RESID	ENT			
FILING	□ S	ingle													0.0	ADEL	
STATUS	\square M	arried filing joint return (do not have to f		as Federal). Did you file a joint or separate Mason return last year? ☐ Joint ☐ Separate ial security number above and full name here. ▶							IF FILING PAPER RETURN, YOU MUST ATTACH:						
INCOME	ME 1. Total Wages from page 2, Worksheet A, line E, Column 1 (W-2s MUST BE ATTACHED)								FED. 1040 PG 1 FED. SCH 1 FED. SCHS C,E,F 1099-MISC								
TAX	6.	MASON INCOME TAX - MULTIF	PLY LINE 5 BY 1.12% (.0112)				6	\$_				1	ORM /2-G	479	7	
TAX WITHHELD PAYMENT AND CREDITS	b. Credit for Taxes Withheld for Other Cities (from page 2, Worksheet A, line E, Column 5A or 5B) 7b C. Credit for Taxes Paid to Other Cities (from page 2, Worksheet C, line C)							7 \$	O' Fi	THER (CHS						
BALANCE DUE, REFUND OR CREDIT	13. 14. 15. 16. 17.	Penalty: late filine 6 is more than Penalty: late filing (\$25 per mon Penalty: late payment (15% of t Interest: See General Informatio TOTAL DUE (ADD LINES 12 THOVERPAYMENT. If line 6 is less AMOUNT FROM LINE 17 TO BI AMOUNT FROM LINE 17 TO BI	th or fraction thereof, none amount not timely point (N)	ot to exceed \$150 aid)	3-15) if any				\$ _ \$ _		13 14 15 16	\$ \$ 4 \$ 5 \$ 6 \$					-
DECLA	RAT	ION OF ESTIMATED TAX FO	R 2020 – REQUIRE	D IF ESTIMATE	D TAX LIAE	BILI	TY I	S \$	200	OR C	REAT	ER					
ESTIMATE FOR NEXT YEAR	21. 22. 23. 24.	a. RESIDENT HOMEOWNER CREDIT (IF b. TOTAL INCOME TAXED BY ANOTHE HOMEOWNER CREDIT; OTHERWISE c. TAX WITHHELD FOR MASON d. TOTAL CREDITS (ADD LINES NET ESTIMATED TAX LIABILITY TAX LIABILITY MUST BE PAID ENTER PRIOR YEAR CARRYON SUBTRACT LINE 23 FROM LIN FIRST QUARTER ESTIMATED F	YOU QUALIFY) MULTIPLY TO R CITY \$ MU MULTIPLY BY 1.12% (.0112 N	TAL INCOME BY 0.129 LTIPLY BY 1% (.01) IF) IF OTHER CITY TAXIN FROM LINE 20) NO LINE 20) NO LINE 48 LINE 2020FOR 2020	% (.0012) F CLAIMING RESING RATE IS ≥ 1. COTE: 90% OENALTY	IDEN 12%	OUR	a b c	\$ _ \$ _ \$ _ TUAI	L	21 22 23	1 \$ 2 \$ 3 \$ 4 \$]
TOTAL DUE		Enter balance due from line 16 a TOTAL TAX DUE ADD LINES 25															
		included here. Subsequent payments are due bares that this return (and accompanying schedule				t the fi	gures u	ised h	nerein a	re the s	ame as use	ed for I	Federa			,	
SIGNATURE	OF TAX	PAYER (REQUIRED)	DATE		VISA NO.			Ī	1	1 1			1			1	l
SIGNATURE	OF SPC	DUSE (REQUIRED IF JOINT RETURN)	PHONE #		MemberCare. NO.												
SIGNATURE	OF PRE	PARER, IF OTHER THAN TAXPAYER	DATE E-I	MAIL	CVV CODE		EXP. DATE	- 1	/	/		OUNT THORIZ	ZED: \$				
NAME AND A	ADDRES	S OF PREPARER	PHONE #		PHONE NUMBER: (H)						(W)						۰
MAY THE MA	ASON T	AX OFFICE DISCUSS THIS RETURN WITH	THE PREPARER SHOWN?	☐ YES ☐ NO	CARDHOLDER SIGNATURE:												٠

WORKSHEET A - SALARIES, WAGES, TIPS AND OTHER EMPLOYEE COMPENSATION PER W-2(S) (PLEASE SEE THE STEP-BY-STEP INSTRUCTIONS)

	COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLU	MN 5
			USE ONLY IF "MASON" IN BOX 20	USE ONLY IF CITY OTHER THAN "MASON" IN BOX 20	A USE ONLY IF TAKING RESIDENT HOMEOWNER CREDIT (ON PAGE 1 LINE 7A)	B USE ONLY IF <i>NOT</i> TAKING RESIDENT HOMEOWNER CREDIT (ON PAGE 1 LINE 7A)
NAME OF EMPLOYER	W-2 BOX 5 MEDICARE WAGES; IF BOX 5 BLANK, USE BOX 18	CITY WHERE EMPLOYED (W-2 BOX 20)	W-2 BOX 19 MASON TAX WITHHELD	LOCAL WAGES (OTHER THAN MASON) FROM W-2 BOX 18 (ENTRY CANNOT EXCEED AMOUNT IN COLUMN 1)	CREDIT FOR OTHER CITY'S TAX WITHHELD COL 4 multiply BY 1%) (ENTER SMALLER OF THIS AMOUNT OR W-2 BOX 19)	CREDIT FOR OTHER CITY'S TAX WITHHELD COL 4 multiply BY 1.12%) (ENTER SMALLER OF THIS AMOUNT OR W-2 BOX 19)
A.						
B.						
C.						
D.						
E. TOTALS, IF NONE ENTER 0						

 \hookrightarrow PAGE 1, LINE 1 \hookrightarrow PAGE 1, LINE 8 \hookrightarrow PAGE 1, LINE 7b \hookleftarrow

- 2019 REFUND FROM ANOTHER CITY? CALCULATE COLUMN 5 CREDIT USING FINAL WAGES TAXABLE TO OTHER CITY, not BOX 18 AMOUNT. ATTACH DOCUMENTATION
- PART YEAR RESIDENT? REMEMBER, COLUMN 4 MAY NEED TO BE PRORATED. SEE STEP BY STEP INSTRUCTIONS
- PLEASE RETURN TO STEP-BY-STEP INSTRUCTIONS AFTER COMPLETING WORKSHEET A

WORKSHEET B - OTHER TAXABLE INCOME (SEE GENERAL INFORMATION K AND STEP-BY-STEP INSTRUCTIONS)								
	Х	Υ	Z					
SCHEDULESAttach all Federal Schedules and Other Applicable Documentation	INCOME/LOSS FROM FEDERAL SCHEDULES	% TAXABLE TO MASON (FULL YEAR RESIDENTS 100%)	TAXABLE INCOME (X x Y)					
1 SCHEDULE C – TOTAL BUSINESS INCOME (LOSS) PER FORM 1040 Schedule 1, LINE 3			1					
2 SCHEDULE F – TOTAL FARM INCOME (LOSS) PER FORM 1040 Schedule 1, LINE 6			2					
3 (a) SCHEDULE E - NET RENTAL INCOME (LOSS)			3a					
3 (b) SCHEDULE E - NET INCOME (LOSS) FROM PARTNERSHIPS, S CORPORATIONS, ESTATES AND TRUSTS, OTHER			3b					
PLEASE NOTE THAT 3 (a) PLUS 3 (b) SHOULD EQUAL LINE 5 OF 1040 Schedule 1								
4 FORM 4797 - ORDINARY INCOME (LOSS) PER FORM 1040 Schedule 1, LINE 4			4					
5 (a) TOTAL 1099-Misc (if not included in Schedule C)			5a					
5 (b) TOTAL GAMBLING WINNINGS FROM W-2G			5b					
5 (c) TOTAL OTHER (TIPS, PRIZES, JURY DUTY, HSA EXCESS CONTRIB., ETC.)			5c					
PLEASE NOTE, MOST INCOME FROM LINES 5(a) through 5(c) IS REPORTED ON LINE 8 OF	1040 Schedule 1							
6 TOTAL 2019 BUSINESS AND OTHER NON-WAGE INCOME/LOSS (Add Lines 1 through 5C)			6					
7 LESS: 2014-2016 LOSS CARRYFORWARD LOSS FROM YEARS: 2014 + 2015 + 2016 =		2014-2016 NOL being used →	7 (
8 SUBTOTAL (Line 6 plus Line 7)			8					
9 LESS: 2017-2018 LOSS CARRYFORWARD (limited) Line 8 × 50% =	(1)	2017-2018 NOL being used →						
2017 LOSS \times 50% = (9a) 2018 LOSS \times 50% = (9b) \rightarrow (9a) + (9b) =	(2)	(USE LESSER of (1) and (2))	9 (
10 TOTAL OTHER TAXABLE INCOME (Line 8 plus Line 9)			10					

→ PAGE 1, LINE 4
Note: enter "0" if Line 10 is a loss

• PLEASE RETURN TO STEP-BY-STEP INSTRUCTIONS AFTER COMPLETING WORKSHEET B

WORKSHEET C - CALCULATION OF CREDIT FOR TAXES PAID TO CITIES FOR NON W-2 INCOME ONLY										
	COLUMN 1	COLUMN 3	COLUMN 4							
INCOME SOURCE BUSINESS NAME/RENTAL/ETC.	NAME OF CITY	YOUR SHARE OF INCOME TAXED BY OTHER CITY	AMOUNT TAXED BY MASON (AS SHOWN ABOVE)	CREDIT FOR TAXES PAID TO ANOTHER CITY (MULTIPLY SMALLER OF COLUMN 2 OR 3 BY 1%) (NOTE: IF NOT TAKING RESIDENT HOMEOWNER CREDIT, MULTIPLY BY UP TO 1.12% — NOT TO EXCEED OTHER CITY TAX RATE)						
Α.										
В.										
SUBTOTAL										
C. MULTIPLY THE SUBTOTAL IN COLUMN 4 BY THE PERCENTAGE ON WORKSHEET B. COLUMN B										

[•] PLEASE RETURN TO STEP-BY-STEP INSTRUCTIONS AFTER COMPLETING WORKSHEET C