

FORM IR-EZ (W-2 INCOME ONLY)
2022 - MASON INCOME TAX RETURN - 2022

FILE ON OR BEFORE APRIL 18, 2023 - 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, 2023
AND ANY REMAINING BALANCE PAID BY APRIL 18, 2023 TO AVOID LATE PAYMENT PENALTY AND INTEREST.

Account Number _____

Name(s) _____

Address _____

City/State/Zip _____

E-mail _____

MAY THE MASON TAX OFFICE COMMUNICATE WITH YOU VIA THE ABOVE E-MAIL ADDRESS? YES NO

SOCIAL SECURITY # _____
SPOUSE'S SS # _____

DID YOU FILE A MASON RETURN LAST YEAR? YES NO
ARE YOU A FULLTIME STUDENT? YES NO

ARE YOU A NEW RESIDENT/FIRST YEAR FILER? YES NO
IF YOU MOVED DURING THE YEAR/ARE A NEW RESIDENT:

PRIOR ADDRESS _____

DATE MOVED TO MASON _____

DATE MOVED FROM MASON _____

CITY OF RESIDENCE _____
 RESIDENT NON-MASON RESIDENT

FILING STATUS Single Married filing joint return (do not have to file same status as Federal). Did you file a joint or separate Mason return last year? Joint Separate
 Married filing separate return. Enter spouse's social security number above and full name here. ▶ _____

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 | COLUMN 5 |
|----------------------------|---|--|---|---|---|
| NAME OF EMPLOYER | MEDICARE WAGES W-2 (BOX 5) IF BOX 5 BLANK, USE BOX 18 | CITY WHERE EMPLOYED W-2 (BOX 20) | W-2 BOX 19 MASON TAX WITHHELD (ONLY ENTER IF "MASON" IN BOX 20) | LOCAL WAGES (OTHER THAN MASON) (W-2 BOX 18) CANNOT EXCEED COL 1 AMT | CREDIT FOR OTHER CITY'S TAX WITHHELD IF TAKING HOMEOWNER CREDIT: (COL 4 X 1%) IF NO HOMEOWNER CREDIT: (COL 4 X 1.12%) (ENTER SMALLER OF THIS AMOUNT OR W-2 BOX 19) |
| A. | | | | | |
| B. | | | | | |
| C. | | | | | |
| D. | | | | | |
| E. TOTALS, IF NONE ENTER 0 | | | | | |

↳ LINE 1 BELOW

↳ LINE 7 BELOW

↳ LINE 6 BELOW

• PLEASE RETURN TO STEP-BY-STEP INSTRUCTIONS AFTER COMPLETING WORKSHEET A • 2022 REFUND FROM ANOTHER CITY? PLEASE PROVIDE DOCUMENTATION.

| | | |
|---|---|-------|
| INCOME | 1. Total Wages from Worksheet A, line E, Column 1 (W-2s MUST BE ATTACHED)..... | 1 \$ |
| | 2. Part-year Resident Adjustment (ATTACH EXPLANATION FOR CALCULATION)..... | 2 \$ |
| | 3. MASON TAXABLE INCOME. (line 1 minus line 2) (MUST ATTACH PAGE 1 OF FEDERAL RETURN AND FEDERAL SCHEDULE 1)..... | 3 \$ |
| TAX | 4. MASON INCOME TAX. (Multiply line 3 by 1.12% (.0112).)..... | 4 \$ |
| TAX WITHHELD, PAYMENTS AND CREDITS | 5. Resident Homeowner Credit (DO YOU QUALIFY? SEE INSTRUCTIONS) Multiply line 3 by 0.12% (.0012)..... | 5 \$ |
| | 6. Credit for Taxes Withheld to Other Cities (from Worksheet A, line E, Column 5)..... | 6 \$ |
| | 7. Total Mason income tax withheld (from Worksheet A, line E, Column 3)..... | 7 \$ |
| | 8. Prior year overpayments..... | 8 \$ |
| | 9. Estimated payments..... | 9 \$ |
| | 10. TOTAL PAYMENTS AND CREDITS. (Add lines 5 through 9.)..... | 10 \$ |
| BALANCE DUE, REFUND OR CREDIT | 11. TAX DUE. If line 4 is more than line 10, enter tax due here (line 4 minus line 10)..... | 11 \$ |
| | 12. Penalty: late filing (\$25 per month or fraction thereof, not to exceed \$150)..... | 12 \$ |
| | 13. Penalty: late payment (15% of amount not timely paid) See General Information (M)..... | 13 \$ |
| | 14. Interest. See General Information (N)..... | 14 \$ |
| | 15. TOTAL DUE. (Add lines 11 through 14.) (Enter 0 if \$10 or less.)..... | 15 \$ |
| | 16. OVERPAYMENT. If line 4 is less than line 10, enter overpayment here, less P&I (lines 12-14) if any..... | 16 \$ |
| | 17. AMOUNT FROM LINE 16 TO BE CREDITED TO NEXT YEAR (Enter 0 if \$10 or less.)..... | 17 \$ |
| | 18. AMOUNT FROM LINE 16 TO BE REFUNDED (Enter 0 if \$10 or less.)..... | 18 \$ |

DECLARATION OF ESTIMATED TAX FOR 2023 - REQUIRED IF ESTIMATED TAX IS \$200 OR GREATER

| | | |
|---------------------------------------|---|--------|
| ESTIMATE FOR NEXT YEAR | 19. TOTAL INCOME SUBJECT TO TAX \$ _____ Multiply by tax rate of 1.12% (.0112)..... | 19 \$ |
| | 20. a. RESIDENT HOMEOWNER CREDIT (IF YOU QUALIFY) Multiply total income by 0.12% (.0012)..... | a \$ |
| | b. TOTAL INCOME TAXED BY ANOTHER CITY \$ _____ Multiply by 1% (.01) if claiming Resident Homeowner Credit; otherwise multiply by 1.12% (.0112) if other city taxing rate is ≥ 1.12%..... | b \$ |
| | c. TAX WITHHELD FOR MASON..... | c \$ |
| | d. TOTAL CREDITS (Add lines 20a through 20c.)..... | 20d \$ |
| | 21. NET ESTIMATED TAX LIABILITY (Subtract line 20d from line 19.) NOTE: 90% OF YOUR ACTUAL 2023 TAX LIABILITY MUST BE PAID BY JANUARY 15, 2024 TO AVOID A PENALTY..... | 21 \$ |
| | 22. Enter prior year carryover credit from line 17 above..... | 22 \$ |
| | 23. Subtract line 22 from line 21 (Estimated Tax for 2023)..... | 23 \$ |
| | 24. FIRST QUARTER ESTIMATED PAYMENT (line 23 divided by 4)*..... | 24 \$ |
| TOTAL DUE | 25. Enter 2022 balance due from line 15 above. (Enter 0 if \$10 or less.)..... | 25 \$ |
| | 26. TOTAL TAX DUE. (Add lines 24 & 25.) PLEASE MAKE CHECKS PAYABLE TO CITY OF MASON TAX OFFICE..... | 26 \$ |

*First Quarter Estimate included here. Subsequent payments are due by the 15th of June, September and January. Blank 2nd, 3rd and 4th Quarter Courtesy Coupons are available at www.imagemason.org.
The undersigned declares that this return (and accompanying schedules) is a true, correct, and complete return for the taxable period stated and that the figures used herein are the same as used for federal income tax purposes.

SIGNATURE OF TAXPAYER (REQUIRED) _____ DATE _____ PHONE # _____
SIGNATURE OF SPOUSE (REQUIRED IF JOINT RETURN) _____ DATE _____
SIGNATURE OF PREPARER, IF OTHER THAN TAXPAYER _____ DATE _____ E-MAIL _____
NAME AND ADDRESS OF PREPARER _____ PHONE # _____

MAY THE MASON TAX OFFICE DISCUSS THIS RETURN WITH THE PREPARER SHOWN? YES NO

TO PAY BY CREDIT CARD: Enter number and expiration date fully and accurately.

VISA NO. _____
EXP. DATE / / AMOUNT AUTHORIZED: \$ _____
PHONE NUMBER: (H) _____ (W) _____
CARDHOLDER SIGNATURE: _____

ATTACH W-2(s) HERE