



City of Coshocton
Individual/ Joint Income Tax Return 2022
Due on or before April 18, 2023
DROP BOX AVAILABLE 8TH STREET PARKING LOT

760 Chestnut Street
 Coshocton, Ohio 43812
 Phone 740-622-9515
 Fax 740-622-9374
Jackie.cushman@cityofcoshocton.com
 Website www.cityofcoshocton.com

Division of Taxation
 Taxpayers filing Under SSN

NAME _____

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

Taxpayer SSN# _____

Spouse SSN# _____

Phone # _____

Email Address _____

Status

Resident _____ Non Resident Tax Withheld _____ Part Year Resident _____ Date Moved In _____ Date Moved Out _____ Non Resident Tax Not Withheld _____ Retired No Taxable Income _____ \$5000 or under and tax was withheld _____ Exempt _____

- | | |
|---|-------------|
| 1. Total Qualifying Wages (W-2 Box 5 or Box 18 whichever is higher (Attach all W-2 Forms) _____ | 1. \$ _____ |
| 2. Less Non-taxable Income (Part year or non-residents only) (provide calculations) | 2. \$ _____ |
| 3. Taxable Qualified Wages (Line 2 minus Line 1)..... | 3. \$ _____ |

4. Other Income or (Loss) ATTACH FEDERAL SCHEDULES

- a) Schedule C _____
- b) Schedule E _____
- c) All other Non-Wage Income _____

- | | |
|---|---------------------|
| 5. Total Other Income or Loss (Line 4a, 4b, 4c) _____ | 5. \$ _____ |
| 6. Total Taxable Income (Line 3 plus Line 5) Losses on Line 5 cannot offset W-2 income) | 6. \$ _____ |
| 7. Tax Due (Multiply Line 6 by 2%) | 7. \$ _____ |
| 8. a. City of Coshocton Tax Withheld (Per W-2's)..... | a. \$ _____ |
| b. Estimated Tax Payments Paid (Including credit from previous year)..... | b. \$ _____ |
| c. Other City Taxes Paid (Allowed up to 1% credit)..... | c. \$ _____ |
| 9. Total Tax Paid, and Credits (Line 8a, 8b, 8c) | 9. \$ _____ |
| 10. Net Tax Due (Subtract Line 9 from Line 7) (Amount \$10.00 or less not payable)..... | 10. \$ _____ |
| 11. Overpayment – Credit to 2023 _____ Refund _____ (\$10.00 or less nonrefundable) | |

2023 Estimated Tax Declaration

- | | |
|--|---------------------|
| 12. Total Estimated 2022 Income Subject to Tax (Employer does not withhold)..... | 12. \$ _____ |
| 13. Tax Declared (Multiply Line 12 by 2%)..... | 13. \$ _____ |
| 14. Declaration Due (25% of Line 13)..... | 14. \$ _____ |
| 15. Less Credits (From Line 11 above)..... | 15. \$ _____ |
| 16. Net Estimated Tax Due (Line 15 minus Line 14) | 16. \$ _____ |
| 17. Late File Penalty 25.00/ month (Max 150.00) | 17. \$ _____ |
| 18. Interest rate 7% per annum (.583 % per month) | 18. \$ _____ |
| 19. Late pay penalty (15% of the amount not timely paid) | 19. \$ _____ |
| 20. I would like to donate toward Coshocton City Services | 20. \$ _____ |
| 21. TOTAL AMOUNT DUE (add lines 10,16,17,18 ,19) (minus line 20) | 21. \$ _____ |

***Make check payable to: Coshocton Income Tax, 760 Chestnut St Coshocton, Ohio 43812**

There is also a drop box outside in the 8th St. parking lot for your convenience as well as a drop box in the lobby
I certify that I have examined this return including accompanying schedules and statements and to the best of my knowledge and belief it is true, correct and complete.

_____ If return was prepared by a Tax Preparer, check here if we may contact him/her directly with questions regarding the preparation of this return.

 SIGNATURE OF PREPARER

 DATE

 SIGNATURE OF TAXPAYER

 DATE

 SIGNATURE OF TAXPAYER

 DATE