**2021 CAMBRIDGE OHIO**

File with the City of Cambridge Income Tax

828 Wheeling Ave., Cambridge, Ohio 43725

Phone: (740) 439-2355 🞟 Fax: (740) 435-0149

Website: www.cambridgeoh.org

Forms available on Website

 under City Government/Treasurer

**\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Make Checks & Money Orders Payable to:

City of Cambridge Income Tax

TAX OFFICE USE ONLY

REFUND

TAX PAID

EST. PYMT.

P/I PAID

TOTAL PAID

**INCOME TAX RETURN**

FILING REQUIRED EVEN IF NO TAX IS

DUE ON OR BEFORE APRIL 15, 2022

**FISCAL YEAR DATES FROM \_\_\_\_\_\_\_ TO \_\_\_\_\_\_**

 **If Moved During Year of This Return, Give Date of Move:**

ACCT. #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_INTO CITY \_\_\_\_\_\_\_\_\_\_\_\_OUT OF CITY\_\_\_\_\_\_\_\_\_\_\_

Name

Address

City, State ZIP

 **Check status as a taxpayer:**

🞏 Resident Full Yr. 🞏 Proprietor 🞏 Corporation 🞏 Part Yr. 🞏 Partner 🞏 Partnership 🞏 Non-Resident 🞏Professional 🞏 Rental

 YOUR SOCIAL SECURITY NO.

 SPOUSE'S SOCIAL SECURITY NO.

 FEDERAL ID NO.

**COPY OF EXTENSION MUST BE RECEIVED BY APRIL 15, 2022**

**ATTACH**

**W-2s, 1099s, SCH. 1, AND**

**FED 1040**

**TO BACK OF THIS FORM**

 1. TOTAL GROSS WAGES, SALARIES, TIPS & OTHER COMPENSATION $

 2. OTHER TAXABLE INCOME

 A. Business Profit or Loss (Attach Federal Business Schedule) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 B. Rental Income or Loss - Include Oil/Gas (Attach Federal Schedule) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 C. Gambling & Lottery winnings over $1,200.00 $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 D. Total other taxable income - Note: Losses cannot offset wages/W-2 income $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**INCOME** 3. **Taxable Income**: (Line 1 plus 2D) $

**TAX** 4. Cambridge Tax Due - 2% of line 3 $

**CREDITS** 5. CREDITS

 A. Cambridge Income Tax Withheld by Employers $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 B. Income Tax Paid to Other Cities (Cannot be higher than 2.0%) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 C. Estimated Tax Paid $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 D. Prior Year Overpayment $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 E. **Total Credits** (Add lines 5A thru 5D) $

**BALANCE** 6. Balance Tax Due (Subtract line 5E from line 4) $

 7. Penalty: 15% $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ + Interest 5%\_\_\_\_\_\_\_\_\_\_\_\_\_\_ + Late Charge $\_\_\_\_\_\_\_\_\_\_\_\_\_\_ = (see instructions) (see instructions) (see instructions)

 8. **Total Amount Due** NOTE: No payment is due if amount is $10.00 or less. $

 9. **Overpayment Claimed** $

 A. Enter amount from Line 8 you want **CREDITED** to your next year tax estimate $

 B. Enter amount from Line 8 you want **REFUNDED** (must be greater than $10.00) $

**NOTE: NO REFUND WILL BE MADE UNTIL NEXT DECLARATION IS FILED AND FIRST QUARTER PAYMENT MADE.**

**INSTRUCTIONS ONLINE AT WWW.CAMBRIDGEOH. ORG**

**DECLARATION OF ESTIMATED TAX FOR YEAR 2022 (DUE APRIL 15 WITH FIRST QUARTER PAYMENT)**

**VOUCHER 1** **Must Be Filed If Tax Balance Due for 2021 Was Over $200.00**

 1. Income subject to tax \_\_\_\_\_\_\_\_\_\_\_ Times tax rate of 2.0% for gross tax of $

**ESTIMATED**

**PAYMENTS DUE**

**2nd Qtr - June 15, 2022**

**3rd Qtr - Sept. 15, 2022**

**4th Qtr - Jan. 15, 2023**

 2. Less Expected Tax Credits:

 A. Tax withheld by employer $\_\_\_\_\_\_\_\_\_\_\_\_

 B. Income Tax paid to other cities (cannot be higher than 2.0%) $\_\_\_\_\_\_\_\_\_\_\_\_

 C. Overpayment from prior years $\_\_\_\_\_\_\_\_\_\_\_\_

 D. Total Credits (Add lines 2A, B, & C) $

 3. Net Tax Due (line 1 less line 2D) $

 4. Amount due with this declaration (1/4 of line 3) $

**TOTAL AMOUNT DUE** **2021 Balance Due** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **2022 First Quarter Pmt** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Total Due** $

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 & COMPLETE.

IF PREPARED BY PERSON OTHER THAN TAXPAYER, THE DECLARATION IS BASED ON ALL INFORMATION OF WHICH PREPARER HAS ANY KNOWLEDGE.

By signed return you authorize direct communication with return preparer.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PREPARER (PLEASE PRINT) DATE SIGNATURE OF TAXPAYER DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS SIGNATURE OF SPOUSE (IF JOINT FILING) DATE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE NUMBER PHONE NUMBER

**CITY OF CAMBRIDGE OHIO INCOME TAX RETURN 2021 PAGE 2**

**SCHEDULE C - BUSINESS INCOME (FROM FEDERAL RETURN)**

**ATTACH W-2S HERE**

 1. ENTER TOTAL INCOME FROM SCHEDULES $

 2. A. ITEMS NOT DEDUCTIBLE (FROM LINE M SCHEDULE X) $

 B. ITEMS NOT TAXALBE (FROM LINE Z SCHEDULE X) $

 C. DIFFERENCE BETWEEN LINES 2A AND 2B TO BE ADDED OR SUBTRACTED FROM LINE 1 $

 3. A. ADJUSTED INCOME (LINE 1 PLUS OR MINUS 2C IF SCHEDULE X IS USED) $

 B. AMOUNT ALLOCABLE TO THIS CITY (LINE 5 OF SCHEDULE Y) $

 4. NET BUSINESS INCOME (LINE 3A MULTIPLIED BY LINE 3B) $

 (IF POSITIVE, ENTER ON LINE 2A, PAGE 1 OR IF NEGATIVE, ENTER LOSS ON LINE 2A, PAGE 1)

**SCHEDULE E - RENTAL INCOME (ATTACH FEDERAL RETURN)**

1. ENTER TOTAL RENTAL INCOME $

2. ENTER TOTAL RENTAL EXPENSES $

3. ENTER NET INCOME (DIFFERENCE BETWEEN LINES 1 AND 2) $

 (IF POSITIVE, ENTER ON LINE 2B, PAGE 1 OR IF NEGATIVE, ENTER LOSS ON LINE 2B, PAGE 1)

**ALL OTHER NON WAGE INCOME (ATTACH FEDERAL RETURN)**

1. ENTER TOTAL INCOME $

2. ENTER TOTAL EXPENSES $

3. ENTER NET INCOME (DIFFERENCE BETWEEN LINES 1 AND 2) $

 (IF POSITIVE, ENTER ON LINE 2C, PAGE 1 OR IF NEGATIVE, ENTER LOSS ON LINE 2C, PAGE 1)

**SCHEDULE X - BUSINESS INCOME SCHEDULE (including resident pass-through income)**

**ITEMS NOT DEDUCTIBLE ADD ITEMS NOT TAXABLE DEDUCT**

A. Losses from IRC 1221 or 1231 property dispositions $ N. Gains from IRC 1221 or 1231 property distributions

B. 5% of intangible income reported in line O of this except IRC 1245 or 1250 $

 Sch. X except that from IRC 1221 property distribution$ \_\_\_\_\_\_\_\_\_\_\_ O. Intangible income, including interest, dividends,

C. Taxes based on income $ patent & copyright income $

D. Dividends, distributions to REIT investors $ P. Federal tax credits to extent they reduced

E. Payments, accruals for qualified self-employed $ corresponding operating expenses $

 retirement plans, health insurance plans, and life $ Q. Other (explain & provide documentation)

F. Other (explain & provide documentation) $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_$ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_$ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ $

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_$

M. TOTAL ADDITIONS (lines A through F) $ Z. TOTAL DEDUCTIONS (lines N through Q) $

 Enter on Line 2A above Enter on Line 2B above

**SCHEDULE X - BUSINESS INCOME SCHEDULE (including resident pass-through income)**

NOTE: This schedule is applicable only to entities doing business both within and outside Cambridge city limits.

 **A. Located B. Located In C. Percentage**

 **Everywhere This Municipality (B ÷ A)**

**STEP 1:** AVERAGE ORIGINAL COST OF REAL AND TANGIBLE PERSONAL PROPERTY \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 GROSS ANNUAL RENTALS PAID MULTIPLIED BY 8 \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 TOTAL STEP 1 \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_%

**STEP 2:** WAGES, SALARIES, AND OTHER COMPENSATION PAID \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_%

**STEP 3:** GROSS RECEIPTS FROM SALES MADE AND/OR WORK

 OR SERVIES PERFORMED \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_%

**STEP 4:** TOTAL PERCENTAGES \_\_\_\_\_\_\_\_\_\_\_\_\_\_%

**STEP 5:** AVERAGES PERCENTAGE (DIVIDE TOTAL PERCENTAGES BY NUMBER OF PERCENTAGES USED

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_%