

**INDIVIDUAL - 2010  
INCOME TAX RETURN  
SHELBY**

**ATTACH ALL COPIES OF W-2'S, 1099'S,  
AND FEDERAL SCHEDULES  
TAXES WITHHELD FROM OTHER CITIES  
LIMITED TO 1.25% ONLY.**

<b>Tax Office Use Only : Tax Office Use Only :</b>
TOTAL TAX LIABILITY _____
TOTAL TAX PAID W/ RETURN _____
CHECK # _____

Taxpayer's Social Security No.	
Home Telephone No.	Business Telephone No.
Spouse's Social Security No.	
Spouse's Name	
Home Telephone No.	Business Telephone No.

Name
And
Address

<b>Filing Status</b>		IF YOU HAVE MOVED DURING TAX YEAR - GIVE DATES	
<input type="checkbox"/> Single	<input type="checkbox"/> RESIDENT	INTO	/ /
<input type="checkbox"/> Married filing joint	<input type="checkbox"/> NON-RESIDENT	OUT OF	/ /
IF YOU RENT, PLEASE GIVE LANDLORDS INFORMATION			
NAME _____			
ADDRESS _____			

<b>Income</b>	<b>Use Box 5 or Largest Wage Amount on W2</b>	1	_____	
1 Wages, salaries, etc.		2	_____	
2 Other taxable income from Worksheet B		3	_____	
3 Total taxable income (add lines 1 and 2)				

<b>Tax and Credits</b>			
4 Shelby tax due before credits (1.25% of line 3)		4	_____
5 Estimated tax payments made to Shelby	5	_____	
6 Taxes withheld and paid to Shelby - (DO NOT INCLUDE SCHOOL TAX SD 7008)	6	_____	
7 Overpayment from prior year(s)	7	_____	
8 Taxes withheld and paid to other localities (Maximum Credit 1.25%)	8	_____	
9 Total credits (add lines 5 through 8)		9	_____

<b>Refund</b> (Issued if tax due is greater than)			
10 If line 9 is greater than line 4, subtract line 4 from line 9. This is the amount you overpaid		10	_____
11 Amount of line 10 to be credited to next years estimate	11	_____	
12 Amount of line 10 to be refunded (\$5.00 or greater)	12	_____	

<b>Tax Due</b> (Issued if tax due is greater than)			
13 If line 4 is more than line 9, subtract line 9 from 4, this is the tax amount you owe		13	_____
14 Penalties and interest <b>Late File / Pay</b> _____ <b>Interest</b> _____		14	_____

<b>Declaration of Estimate for 2011</b>			
15 Estimated taxable income	15	_____	
16 Estimated tax due. (multiply line 15 by 1.25%)		16	_____
17 Taxes to be withheld and paid to Shelby and other localities (Limit 1.25%)	17	_____	
18 Prior credit applied to estimated tax payments (From line 11)	18	_____	
19 Net estimated tax due (subtract line 17 & 18 from 16)		19	_____
20 Minimum amount due for first quarter (multiply line 19 by .25)	20	_____	

<b>Amount You Owe</b>			
21 Total amount due (add lines 13 and 14)		21	_____

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.

_____ Taxpayer's Signature	_____ Date
_____ Spouse's Signature	_____ Date
_____ Tax Preparer's Signature	_____ Date
(If other than taxpayer) Phone No. _____	

**MAKE CHECK OR MONEY ORDER TO:**  
CITY OF SHELBY TAX DEPT.  
  
43 WEST MAIN STREET  
SHELBY OH 44875  
  
Voice 419-342-5885 Fax 419-347-1193  
Website WWW.SHELBYOHIO.ORG

**We, the taxpayer, elect to authorize a return preparer to communicate with the tax administrator about matters pertaining to this return.** By making this election, we, the taxpayer, authorizes the tax administrator to contact the return preparer concerning questions that arise during the processing of the return and authorizes the return preparer only to provide the administrator with information that is missing from the return, to contact the administrator for information about the processing of the return or the status of the taxpayer's refund or payments, and to respond to notices about mathematical errors, offsets, or return preparation that the taxpayer has received from the administrator and has shown to the return preparer.



## INDIVIDUAL GENERAL INSTRUCTIONS

### WHO MUST FILE

All residents of the City of Shelby, 18 years of age or older, are required to file.

A non-resident having income in the City of Shelby from which city income tax has not been withheld and/or who is engaged in a business or profession in Shelby or owns rental property located in Shelby.

All companies located in or doing business in Shelby.

### WHEN AND WHERE TO FILE

By April 15.

Mail completed return with all W-2s, 1099 misc. forms, and federal schedules applicable to:

### **SHELBY CITY INCOME TAX**

**43 WEST MAIN STREET, SHELBY, OHIO 44875**

**419-342-5885**

### FILING EXTENSIONS

Send a copy of your federal extension by April 15, and we will grant an extension of time not to exceed 6 weeks beyond the time granted by the IRS. If we do not receive a copy of the extension you will be considered delinquent and charged penalty and interest as shown on the return. Extensions will not be granted, if your account is in any way delinquent.

### NET LOSSES

If a net loss has been incurred for the tax year a return must still be filed. Loss carry forwards are not permitted.

### REFUNDS

If any taxpayer has paid more tax than the City is entitled to, a refund of the overpayment will be made, provided a proper claim for refund is filed. The net loss from an unincorporated business may not be used to offset salaries, wages, commissions and other compensation. Amount under \$5.00 will not be refunded.

### MISCELLANEOUS

1. Payments to the City of under \$5.00 do not have to be paid.
2. Double check your credit on line 5 of the return by calling 419-342-5885.
3. Cafeteria plans are no longer city taxable.
4. Contributions to 401Ks, IRAs or other deferred plans are not deductible.
5. SUB pay and sick pay are city taxable.

### EXEMPT INCOME (non inclusive)

Unemployment Compensation (not including SUB pay).  
Social Security  
Payouts from pensions  
Military Pay (proof of military is required)  
Alimony  
Interest  
Dividends

### EXEMPTION FOR TAXPAYERS

If your income is solely from a non-taxable source, please contact our tax office for exemption form.

## INSTRUCTIONS FOR INCOME TAX RETURN

Married couples should file jointly. (Whether or not you do so for your Federal or State Returns)

Enter name and address and social security number(s) or Federal ID No.

Taxpayer status - indicate how you are filing by marking one of the boxes.

Residency - indicate if you live in the City of Shelby; also if you moved into or out of the city during the year.

- Line 1** Total Tax withheld & wages (include sub pay, sick pay & deferred income) (From Worksheet A)
- Line 2** Other taxable income (From Worksheet B)
- Line 3** Total Lines 1 & 2 - Losses on Line 2 - cannot offset losses on Line 1
- Line 4** Shelby Income Tax 1.25%
- Line 5** Estimated tax payments made to Shelby
- Line 6** Taxes withheld and paid to Shelby (**DO NOT INCLUDE SCHOOL TAX SD 7008**)
- Line 7** Overpayment from prior years
- Line 8** Taxes withheld and paid to other localities **maximum credit 1.25%**
- Line 9** Total credits add lines 5 through 8
- Line 10** Amount overpaid
- Line 11** Amount of Line 10 credited to next year estimate
- Line 12** Amount to be refunded (\$5.00 or greater)
- Line 13** Amount of tax owed
- Line 14** Late File/Pay Penalties \$50.00 Interest 1½% compounded monthly

### DECLARATION OF ESTIMATE

(Line 15 - 20) self-explanatory

**Line 21** Total amount due (add lines 13 and 14)

**WORKSHEET C - EXEMPTION (Check correct boxes and return signed form)**

**SIGN FORM AND ATTACH ALL W2S, 1099 MISC AND FEDERAL SCHEDULES**

**Use Box 5 or  
Largest Wage  
Amount on W2**

**DECLARATION OF ESTIMATED TAX FOR YEAR 2011**

**VOUCHER # 1 - DUE APRIL 15, 2011**

NAME \_\_\_\_\_ SOC. SEC. # \_\_\_\_\_

ADDRESS \_\_\_\_\_

- 1) Total income subject to tax \$ \_\_\_\_\_ (Multiply by .0125) .....\$ \_\_\_\_\_
- 2) Less income tax withheld by other city (Credit limited to 1.25%) .....\$ \_\_\_\_\_
- 3) Total declaration (line 1 minus line 2) .....\$ \_\_\_\_\_
- 4) Payment amounts (line 3 times 0.25).....\$ \_\_\_\_\_
- 5) Overpayment from previous year (if not refunded) .....\$ \_\_\_\_\_
- 6) 1st payment amount (line 4 minus line 5) .....\$ \_\_\_\_\_

CUT LINE

**VOUCHER # 2 - DUE JULY 31, 2011**

NAME \_\_\_\_\_ SOC. SEC. # \_\_\_\_\_

ADDRESS \_\_\_\_\_

- 1) Payment enclosed .....\$ \_\_\_\_\_
- 2) Check # \_\_\_\_\_
- 3) Prior amount paid .....\$ \_\_\_\_\_
- 4) Remaining Balance \$ \_\_\_\_\_
- Contact person \_\_\_\_\_ Phone # \_\_\_\_\_

**SEND PAYMENT TO: CITY OF SHELBY, INCOME TAX DEPT., 43 W. MAIN ST.  
SHELBY, OHIO 44875 PHONE# (419) 342-5885**

CUT LINE

**VOUCHER # 3 - DUE OCTOBER 31, 2011**

NAME \_\_\_\_\_ SOC. SEC. # \_\_\_\_\_

ADDRESS \_\_\_\_\_

- 1) Payment enclosed .....\$ \_\_\_\_\_
- 2) Check # \_\_\_\_\_
- 3) Prior amount paid .....\$ \_\_\_\_\_
- 4) Remaining Balance \$ \_\_\_\_\_
- Contact person \_\_\_\_\_ Phone # \_\_\_\_\_

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SHELBY, OHIO 44875 PHONE# (419) 342-5885**

CUT LINE

**VOUCHER # 4 - DUE JANUARY 31, 2012**

NAME \_\_\_\_\_ SOC. SEC. # \_\_\_\_\_

ADDRESS \_\_\_\_\_

- 1) Payment enclosed .....\$ \_\_\_\_\_
- 2) Check # \_\_\_\_\_
- 3) Prior amount paid .....\$ \_\_\_\_\_
- 4) Remaining Balance \$ \_\_\_\_\_
- Contact person \_\_\_\_\_ Phone # \_\_\_\_\_

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