

2018 Income Tax Return



File with and make checks payable to:
Village of Fairfax Tax
5903 Hawthorne Avenue
Cincinnati, OH 45227-3697
Due on or before 4/15/2019

Tax Office Phone 513-527-6506 / Fax 513-561-5748
www.fairfaxoh.org

Filing required even if no tax due.

Interest and a minimum penalty of \$25.00 will apply for the late filing of the required return

If taxpayer and spouse are fully retired and Without taxable income, place an x in this box <input type="checkbox"/> and provide date(s) retired _____.	Name of current employer(s) _____	Office Use Only
	Address: Street _____ City, State, Zip _____	

Name and Address _____ Account No. _____	Part Year Resident? _____
	Date moved in: _____
	Date moved out: _____
	Telephone: _____
	Home _____
	Business _____
	Social Security Number: _____
	Taxpayer _____
	Spouse _____

Income:		Please attach your Federal Tax Return with all applicable schedules & W-2 forms	
1. Qualifying wages (usually W-2 box 5) - Worksheet A , Box 7A	\$ _____		
2. Total Taxable Business Income (Worksheet C)	\$ _____		
3. Total Other Compensation (Federal 1040 Schedule 1 Line 21)	\$ _____		
4. Total Income (Add Lines 1, 2, and 3)	\$ _____	\$ _____	
5. Deductions from Income (Worksheet B)	\$ _____		
6. Taxable Income (Line 4 minus Line 5)	\$ _____		
7. Fairfax tax: 1.75% of Line 6	\$ _____		
Credits:			
8. Tax withheld by employer on W-2(s) - Worksheet A, Box 7F	\$ _____		
<small>Credit may NOT exceed 1.75% of earnings taxed & may be reduced by deductions on Line 5</small>			
9. Estimated taxes paid to Village of Fairfax	\$ _____		
10. Taxes paid for Business Income and/or Other Income (Worksheet D)	\$ _____		
11. Prior year overpayments	\$ _____		
12. Total credits (Add Lines 8, 9, 10, and 11)	\$ _____		
Tax Due:			
13. If Line 7 is greater than Line 12, enter balance due	\$ _____		
b. Penalty \$ _____ Interest \$ _____	\$ _____		
c. Late filing fee (\$25 per month or portion thereof to a \$150 maximum)	\$ _____		
14. Total amount due - payment must accompany return	\$ _____		
15. If Line 12 is greater than Line 7, enter overpayment	\$ _____		
16. Overpayment of \$10 or more to be refunded \$ _____ or credited \$ _____ to next year's estimate			
No additional taxes, refunds or credits of less than ten dollars (\$10.00) shall be collected or refunded, & by law, all refunds & credits are reported to the IRS.			

Declaration of Estimated Tax for Year 2019	
17. Total income subject to tax \$ _____ multiply by tax rate of 1.75% for gross tax of	\$ _____
Less expected tax credits	
18. Taxes withheld or paid to the Village of Fairfax	\$ _____
19. Withholding or payments to another municipality, not to exceed 1.75% of earnings taxed	\$ _____
20. Total credits (Add Lines 18 and 19)	\$ _____
21. Net estimated tax due for 2019 (Line 17 minus Line 20)	\$ _____
Estimated payments are required for annual tax balances of \$200 or more	
22. Overpayment from prior year	\$ _____
23. Balance of estimated tax due for 2019 (Line 21 minus Line 22)	\$ _____
24. Minimum payment due with this declaration is 22.5% of Line 23	\$ _____
25. Total due with this tax return (Line 14 plus Line 24)	\$ _____

Include Check or Money Order Payable To Village of Fairfax Tax

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 prepared by a person other than taxpayer the declaration is based on all information of which preparer has any knowledge.

Signature of Person Preparing if Other Than Taxpayer _____	Date _____	May we discuss this return with the preparer shown to the left? Yes <input type="checkbox"/> No <input type="checkbox"/>	Signature of Taxpayer (Required) _____	Date _____
Printed Name of Person Preparing if Other Than Taxpayer _____			Signature of Taxpayer (Required) _____	Date _____
Address _____	and Telephone Number _____			

Line	Worksheet A : W-2 Income	A	B	C	D	E	F
	Name of Employer	W-2 Qualifying Wages (usually Box 5)	Local City tax was withheld to (Box 20)	Local Wages (Box 18)	Local Taxes Withheld (Box 19)	Maximum Credit (Col. C x 1.75%)	Credit Allowed (Lower of Column D,E or 100% of tax withheld to Fairfax)
1							
2							
3							
4							
5							
6							
7	Totals:						

Worksheet B: Deductions from Income		Amount	Name of Employer
8	Wages earned prior to permanently moving into Fairfax		
9	Wages earned after permanently moving out of Fairfax		
If you need additional space to show calculations please attach a separate page			
10	Total: Enter on Page 1, line 5		

Worksheet C:		Available Loss	B Profit	C Loss	D Total	Remaining Loss
Net Profit/Loss from Business Activity						
11	Schedules C and/or Schedule F Income					
12	Schedule E income from Rental Income					
13	Other Schedule E income *					
14	Ordinary Income or Loss (attach Federal 4797)					
15	Totals					
16	Loss Carry Forward from 2016 & prior app. years					
17	Sub Total					
18	2017 Loss (Lesser of 50% of profit or loss can be used)					
19	Taxable Profit - If positive enter Col. D total on Page 1, line 2					
Losses prior to 2017 may be carried forward at 100% for four years. 2017 Losses may be carried forward for up to five years, however usage will be restricted to 50% per year during 2018 through 2022- please check our web site for updated instructions.						

*S Corps and partnerships doing business within the Village of Fairfax must file a separate business return to report income earned in our city.

Worksheet D for Residents Only: Credit for Business Earnings or Other Income Tax Paid	List each municipality separately & add another page if needed Attach copies of all other local tax returns for credit				
	A	B	C	D	E
Municipality taxes were paid to:	Tax Rate	Profit	Local Taxes Paid	Maximum Credit (Col. B x 1.75%)	Credit Allowed (lower of Column C or D)
20					
21					
22					
23					
24	If Total Taxable Business Income is negative, no credits are allowed				Total Possible Credits
25	Maximum Credit Allowed (Worksheet C, Line 19D x 1.75%)				