

CITY OF AMHERST

480 PARK AVENUE, AMHERST, OH 44001
DUE DATE APRIL 15, 2009

2008

OR

FISCAL YEAR FILERS MUST FILE ON OR BEFORE THE 15TH DAY OF THE FOURTH MONTH AFTER THE CLOSE OF THAT FISCAL YEAR. FISCAL PERIOD _____ TO _____
 Your Name and Address as they appear on our records: Make any Necessary Corrections

INCOME TAX DEPARTMENT
 (440) 988-4212 FAX (440) 988-3749
 On-line tax preparation tool now available at:
www.amherstohio.org PIN:

FOR INCOME TAX DEPARTMENT USE ONLY

TAX _____ AUD _____
 INT/PEN _____ CK NO. _____
 TOTAL _____
 PAID _____
 DUE _____ CR TO 2008 _____ REFUND _____

FULLY RETIRED WITH NO EARNED INCOME

Date _____

IF YOU MOVED DURING THE TAX YEAR, COMPLETE THIS BLOCK

Date moved into Amherst _____

Previous Address _____

Date moved out of Amherst _____

Present Address _____

Your Social Security No. or Federal ID _____ Spouse's Social Security No. _____

W-2 WORKSHEET

SEE INSTRUCTIONS BEFORE COMPLETING

COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5
CITY WHERE EMPLOYED	GROSS WAGES—HIGHEST WAGE ON W-2	2106 EXPENSES, REDUCES CREDIT ALLOWED IN COL. 5	AMHERST TAX WITHHELD	OTHER CITY TAX WITHHELD LIMIT 1% OF COL. 2 MINUS COL. 3
A.				
B.				
C.				
D.				
E. TOTALS				

ATTACH A COPY OF 1040 (1ST PG. ONLY), ALL APPLICABLE W-2S, FEDERAL SCHEDULES, EXPLANATIONS ETC...

INCOME	1. Total W-2 wages from column 2	1	\$
	2. 2106 Expenses from column 3	2	\$
	3. TAXABLE WAGES. SUBTRACT LINE 2 FROM LINE 1	3	\$
	4. Other income. From schedule C, E or H on reverse	4	\$
	5. TOTAL AMHERST INCOME. ADD LINES 3 AND 4	5	\$
TAX WITHHELD, PAYMENTS AND CREDITS	6. AMHERST INCOME TAX. MULTIPLY LINE 5 BY 1-1/2% (.015)	6	\$
	7. Amherst income tax withheld from column 4	7	\$
	8. Prior year credits	8	\$
	9. Estimated payments	9	\$
	10. Credit for taxes withheld to other cities from column 5	10	\$
	11. Credit for taxes paid to other cities (limit 1%). See instructions	11	\$
	12. TOTAL PAYMENTS AND CREDITS. ADD LINES 7 THROUGH 11	12	\$
	13. BALANCE DUE. If line 6 is more than 12, enter balance due here	13	\$
	14. Late Filing Penalty. \$25, if applicable	14	\$
	15. Interest. 1-1/2% per month, if applicable	15	\$
	16. TOTAL DUE. Add lines 13 through 15. Carry to line 26 below (No tax due if less than \$3.00)	16	\$
	17. OVERPAYMENT. If line 6 is less than line 12, enter overpayment here ..	17	\$
18. AMOUNT FROM LINE 17 TO BE REFUNDED (No refund if less than \$3.00)	18	\$	
19. AMOUNT FROM LINE 17 TO BE CREDITED TO NEXT YEAR	19	\$	
ESTIMATE FOR NEXT YEAR			
DECLARATION OF ESTIMATED TAX FOR 2009 (NOT MANDATORY)			
20. Total estimated income subject to tax \$ _____ Multiply by tax rate of 1-1/2% (.015)	20	\$	
21. Subtract any estimated income tax to be withheld or paid to other cities (limit 1% of wages)	21	\$	
22. Balance of city income tax declared. Subtract line 21 from line 20	22	\$	
23. Tax due before credits. Enter at least 25% of line 22	23	\$	
24. Less credits. Enter line 19 from above	24	\$	
25. Net estimated tax due. Subtract line 24 from line 23	25	\$	
26. Enter balance due from line 16 above (No tax due if less than \$3.00)	26	\$	
27. TOTAL TAX DUE. ADD LINES 25 & 26. PLEASE MAKE CHECKS PAYABLE TO AMHERST INCOME TAX DEPT.	27	\$	

If this return was prepared by a tax practitioner, check here if we may NOT contact him/her directly with questions regarding the preparation of this return.

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 PREPARER, IF OTHER THAN TAXPAYER _____

DATE _____

SIGNATURE OF TAXPAYER _____

DATE _____

NAME AND ADDRESS OF PREPARER (PLEASE PRINT) _____

TELEPHONE NUMBER _____

SIGNATURE OF SPOUSE (IF JOINT RETURN) _____

TELEPHONE NUMBER _____

ATTACH W-2'S AND 1099'S TO THE BACK OF THIS RETURN

