

**FEDERAL EXTENSION REQUESTS MUST BE ATTACHED TO YOUR RETURN.**

I AM NOT REPORTING ANY INCOME ON THIS RETURN BECAUSE:

ACTIVE DUTY MILITARY  ONLY INCOME IS FROM NON-TAXABLE SOURCE, LIST SOURCE \_\_\_\_\_

NO EMPLOYMENT THIS YEAR  MOVED FROM MIDDLETOWN ON \_\_\_\_\_ LIST DATE \_\_\_\_\_

UNDER 18 YEARS OF AGE,  TAXPAYER DECEASED, LIST DATE OF DEATH: \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_  65 YEARS OR OLDER, NON-TAXABLE INCOME ONLY. DATE OF BIRTH \_\_\_\_\_

IF NAME OR ADDRESS IS INCORRECT MAKE NECESSARY CHANGES (LIST BOTH NAMES & SOCIAL SECURITY NUMBERS IF FILING A JOINT RETURN)	EMAIL: _____ TAXPAYER SSN: _____ SPOUSE SSN: _____ PHONE - HOME: _____ BUSINESS: _____ IF YOU MOVED DURING THE YEAR YOU MUST COMPLETE LINES BELOW DATE OF MOVE: _____ PRESENT ADDRESS: _____ _____ OLD ADDRESS: _____ _____
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1. QUALIFYING WAGES, SALARIES, TIPS AND OTHER EMPLOYEE COMPENSATION (ATTACH ALL W-2 FORMS) .....	1.	
2. INCOME OTHER THAN WAGES FROM WORKSHEETS ON REVERSE - LOSS 2a <input type="text"/> OR PROFIT .....	2b.	
3. TOTAL INCOME (ADD BOX 1 AND 2b) .....	3.	
4. MIDDLETOWN TAX - BOX 3 MULTIPLIED BY 1.75% .....	4.	
5. a. MIDDLETOWN TAX WITHHELD .....	5a.	
b. CREDIT FOR OTHER CITY TAX WITHHELD (not to exceed 1.75%) WORKSHEET ON BACK .....	5b.	
c. SUBTOTAL OF CREDITS - ADD 5a AND 5b .....	5c.	
d. ESTIMATE PAYMENTS .....	5d.	
e. PRIOR YEAR CREDIT CARRIED FORWARD .....	5e.	
f. TOTAL OF CREDITS - ADD 5c, 5d, AND 5e .....	5f.	
6. IF BOX 4 IS GREATER THAN BOX 5F ENTER BALANCE DUE .....	TAX DUE 6.	
CHECK PAYABLE TO MIDDLETOWN INCOME TAX DIVISION (SEE REVERSE FOR CREDIT CARD PAYMENT)		
7. IF BOX 5f IS GREATER THAN BOX 4 ENTER OVERPAYMENT .....	7.	
a. AMOUNT TO REFUND _____ OR b. CREDIT TO NEXT YEAR _____		

NO TAX DUE OR REFUNDED  
 IF LESS THAN \$10.01

NOTICE: By law, all refunds and credits in excess of \$10.00 are reported to IRS.

**INCLUDE A COPY OF YOUR 1040, PAGE 1**

**DECLARATION OF ESTIMATED TAX FOR YEAR 2018**

8. TOTAL ESTIMATED 2018 INCOME \$ _____ MULTIPLY BY TAX RATE 1.75% = TOTAL 2018 ESTIMATED TAX .....	8.	
9. ESTIMATED WITHHOLDINGS:		
a. ESTIMATED TAX TO BE WITHHELD BY EMPLOYER(S) FOR CITY OF MIDDLETOWN .....	9a.	
b. ESTIMATED TAX, NOT OVER 1.75%, WITHHELD FOR OR PAYABLE TO OTHER CITIES .....	9b.	
10. ESTIMATED TAX NOT WITHHELD BY EMPLOYERS (LINE 8 MINUS LINES 9a, 9b) (IF LESS THAN \$200, NO ESTIMATE DUE) .....	10.	
11. TAX OVERPAYMENT FROM PREVIOUS TAX YEAR: ENTER AMOUNT FROM LINE 7b .....	11.	
12. TOTAL ESTIMATED TAX DUE AND PAYABLE TO MIDDLETOWN DURING 2018 (LINE 10 MINUS LINE 11) .....	12.	
(LAST DATE TO PAY ESTIMATED TAX WITHOUT PENALTY AND INTEREST IS JANUARY 15, 2019)		
13. a. TOTAL DUE: TAX DUE FOR 2017 (BOX 6) \$ _____ b. PLUS 1/4 2018 ESTIMATED TAX (BOX 12) \$ _____ .....	13.	

The undersigned declares that this return (and accompanying schedules) is a true, correct and complete return for the taxable period stated. If this return was prepared by a Tax Practitioner, may we contact your practitioner directly with questions regarding the preparation of this return?  Yes  No

\_\_\_\_\_  
 Taxpayer Signature Date

\_\_\_\_\_  
 Spouse's signature (if filing jointly, BOTH must sign even if only one had income.) Date

\_\_\_\_\_  
 Tax Preparer (Print name and phone if other than taxpayer)

**FOR OFFICE USE ONLY - PENALTY & INTEREST**

FAILURE TO PAY ESTIMATE BY DEC 15 \$ _____
FAILURE TO FILE BY APRIL 17 \$ _____
FAILURE TO PAY TAX DUE BY APRIL 17
INTEREST \$ _____
PENALTY \$ _____
TOTAL PENALTY & INTEREST \$ _____
<b>GRAND TOTAL \$ _____</b>

**INCOME OTHER THAN WAGES**

A. INCOME FROM ANY BUSINESS OWNED (ATTACH FEDERAL SCHEDULE C) ..... A.

B. RENTS, ROYALTIES, PARTNERSHIPS, ESTATES, TRUSTS, ETC. (ATTACH FEDERAL SCHEDULE E & FORM(S) K-1) .. B.

C. OTHER INCOME (ATTACH APPROPRIATE FEDERAL SCHEDULE OR 1099-MISC.) ..... C.

D. TOTAL OTHER INCOME (BOXES A, B & C) IF LOSS, STOP HERE AND ENTER IN BOX 2a. IF PROFIT CONTINUE TO BOX E ..... D.

E. PRIOR YEARS LOSSES (LIMITED TO LAST 5 YEARS) MAY NOT EXCEED BOX D ..... E.

F. NET OTHER TAXABLE INCOME (BOX D LESS BOX E) ENTER IN BOX 2b, PAGE 1 ..... F.

**TAX WITHHELD WORKSHEET**

Column 1	Column 2	Column 3	Column 4	Column 5
LIST ALL CITIES EXCEPT MIDDLETOWN	QUALIFYING WAGES ETC. (USUALLY BLOCK 18 OF THE W-2)	TAX WITHHELD	1.75% OF COLUMN 2	LESSER OF COLUMN 3 OR COLUMN 4
TOTAL ALLOWED:		CARRY TOTAL OF COLUMN 5 TO LINE 5b, PAGE 1		

**CREDIT CARD PAYMENT**

1. Circle One:   

2. Account Number (16 digits) \_\_\_\_\_

3. Expiration Date: \_\_\_\_\_

4. Amount to be Paid: \$ \_\_\_\_\_

5. Your Signature for Authorization: \_\_\_\_\_

**PENALTY AND INTEREST CHARGES**

**PENALTY AND INTEREST WILL BE CALCULATED BY THE TAX DEPARTMENT**

FAILURE TO FILE BY APRIL 17: \$25 PER MONTH OR PORTION THEREOF (MAXIMUM \$150)

FAILURE TO PAY THE REQUIRED ESTIMATE BY JANUARY 15 ON BALANCES GREATER THAN \$200  
 PENALTY: 15% OF TAX DUE

FAILURE TO PAY TAX DUE BY APRIL 17:  
 MONTHLY INTEREST: FEDERAL SHORT-TERM RATE ROUNDED TO THE NEAREST WHOLE NUMBER PERCENT -  
 1% + 5% ANNUM = 6% ÷ 12 (= 0.05% PER MONTH)  
 PENALTY: 15% OF TAX DUE

HAVE YOU BEEN AUDITED BY IRS IN THE PAST YEAR? (YOU ARE REQUIRED TO NOTIFY US.)  
 \_\_\_\_\_ Yes \_\_\_\_\_ No

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