

Post Office Box 862, Findlay, Ohio, 45839-0862
Phone: 419-424-7133 • Fax: 419-424-7410
findlayohio.gov/incometax

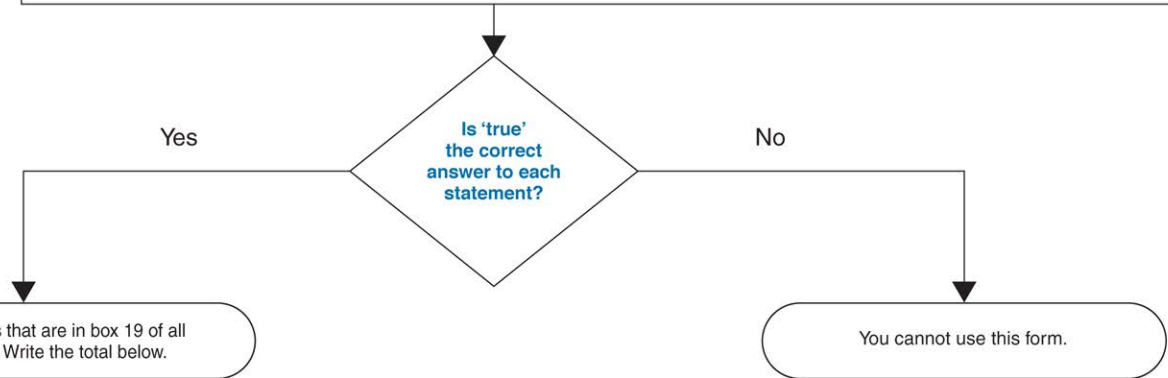
Read the Taxable Income and the Non-taxable Income sections of the filing instructions at the website above.

Then, circle True or False in response to each statement at the right about your 2023 income.

Please file a joint return, even if you filed separately with the IRS.

Attach all your W-2s and page 1 of your Federal 1040 and file by April 15, 2024.

1. I lived in Arlington for the entire period in 2023 for which I am filing.	True	False
2. My only sources of taxable income are wages I earned while I worked in Arlington.	True	False
3. All of my 2023 wages were reported on W-2s.	True	False
4. Arlington is clearly shown on my W-2s as the tax that has been withheld (usually box 20).	True	False
5. The amount reported in box 18 of each of my attached W-2s is equal to or higher than each of the amounts reported in boxes 1 and 5.	True	False
6. Arlington tax was withheld correctly at 1.00% on all of my wages.	True	False
7. I did not work in or pay income tax to any other cities or villages.	True	False
8. I did not own or operate a business and I did not have any partnership or business income.	True	False
9. I did not claim a Federal deduction for unreimbursed employee business expenses (Form 2106).	True	False
10. I did not fill out Schedules C, E, or SE for my Federal income taxes, nor was I required to.	True	False
11. I did not rent land, farmland, buildings, houses, apartments, or other properties to others.	True	False
12. I did not receive a Federal Form 1099-MISC.	True	False
13. I did not receive any lottery or gambling winnings.	True	False



Add up the amounts that are in box 19 of all your attached W-2s. Write the total below.

, .

If you moved in 2023 or 2024, show the dates below:
Date moved into the village ____ / ____ / ____
Date moved out of the village ____ / ____ / ____

Print your full name(s) and current address below.

By signing this form below, I am stating that the information shown on this document is true, correct, and complete.

Signature Phone Date

Spouse's signature (only if filing jointly) Date

Write your Social Security number below.

Write your spouse's Social Security number, only if filing jointly.

- -

- -