



City of Opportunity

# EZ – OREGON, OH RESIDENT INDIVIDUAL TAX RETURN

5330 Seaman Road, Oregon, OH 43616

Web: [www.oregonohio.org](http://www.oregonohio.org) \* E-Mail: [incometax@ci.oregon.oh.us](mailto:incometax@ci.oregon.oh.us)

419-698-7034

Your current name and current address must be shown below. If name and address are incorrect, please cross out what we have and write in the correct information.

Your SSN: \_\_\_\_\_  
Spouse's SSN: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_  
Email Address: \_\_\_\_\_

### IF YOU MOVED IN 2016 OR 2017, SHOW THE DATE(S) BELOW:

Date moved into Oregon: \_\_\_\_\_  
Previous Address: \_\_\_\_\_

Date moved out of Oregon: \_\_\_\_\_  
Present Address: \_\_\_\_\_

Will you have taxable income next year?  YES  NO

*If all answers to the following questions are True, you can file the EZ form.*

I lived in Oregon for the entire period in 2016 for which I am filing.  TRUE  FALSE

All of my 2016 wages were reported on W-2s, and the largest number of Box 5 or 18 was used.  TRUE  FALSE

I did not make any estimated income tax payments to Oregon in 2016.  TRUE  FALSE

I did not own or operate a business and I did not have any partnership or business income.  TRUE  FALSE

I did not claim a Federal deduction for unreimbursed employee business expenses (2106).  TRUE  FALSE

I did not fill out schedules C, E, F or SE for my Federal income taxes, nor was I required to.  TRUE  FALSE

I did not rent land, farmland, buildings, houses, apartments, or other properties to others.  TRUE  FALSE

I did not receive a Federal Form 1099-MISC.  TRUE  FALSE

**DID YOU EARN INCOME IN 2016?**  YES  NO

Please check if either apply

RETIRED  DISABLED

**STEP 1.** Add up the amounts that are in Box 5 or Box 18 (whichever is greater) of all your attached W-2s. Write the total below.

\_\_\_\_\_

**STEP 2.** Multiply Step 1 by 2.25% (.0225) and write below.

\_\_\_\_\_

**STEP 3.** Add up amounts in Box 19 of all your attached W-2s and write total below.

\_\_\_\_\_

**STEP 4.** Deduct amount in Step 3 from the amount in Step 2 and write total below.

\_\_\_\_\_

- Refunds made only if the amount in Step 4 is a negative amount of at least \$10.00.
- Payment required only if the amount in Step 4 is a positive amount of at least \$10.01.

Payments by credit card can be made by visiting our website, [www.oregonohio.org/tax-department/tax/payments.html](http://www.oregonohio.org/tax-department/tax/payments.html) or by calling us at 419-698-7034 between the hours of 8:00 a.m. and 4:30 p.m.

**IMPORTANT:** By signing this form below, I am stating that the information shown on this document is true, correct, and complete. This return is NOT considered filed until signed by taxpayer and spouse (if applicable).

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

Spouse's Signature \_\_\_\_\_

Attach all W-2s and 1<sup>st</sup> page of Federal Form 1040. Returns filed/postmarked after 4/18/2017 are subject to a \$25 late filing fee.