

[www.ashlandincometax.com](http://www.ashlandincometax.com)  
ASHLAND CITY INCOME TAX RETURN

2014  
INDIVIDUAL

TAX OFFICE USE ONLY
TOTAL TAX LIABILITY _____
TOTAL TAX PAID W/RETURN _____
CHECK # _____

FILING IS REQUIRED, EVEN IF NO TAX IS DUE  
EXTENSIONS DUE APRIL 15TH ALONG WITH PAYMENT

IF YOU RENT, PLEASE GIVE  
LANDLORD INFORMATION:

\_\_\_\_ RESIDENT      \_\_\_\_ NON-RESIDENT  
IF YOU MOVED DURING THE TAX YEAR GIVE DATES  
INTO / /      OUT OF / /

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

NAME: \_\_\_\_\_ TAXPAYER'S SOCIAL SEC. NO. \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ SPOUSE'S SOCIAL SEC. NO. \_\_\_\_\_  
**E-MAIL ADDRESS:** \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_  
PHONE NO. \_\_\_\_\_

**EXEMPTION FORM:** IF EXEMPT- STOP HERE, SIGN, DATE AND MAIL

UNEMPLOYED       RETIRED       UNDER 18 YEARS OF AGE - BIRTHDATE: \_\_\_\_\_  
 FULL-TIME STUDENT       ACTIVE MILITARY       OTHER: \_\_\_\_\_

1. WAGES, SALARIES & TIPS (BOX 5 OF W-2 OR HIGHEST WAGE ON W-2) (PLEASE ATTACH ALL W-2'S) 1. \$ \_\_\_\_\_
2. FEDERAL FORM 2106 DEDUCTIONS (IF APPLICABLE) (USE LINE 27 FROM FEDERAL SCHEDULE A) 2. \$ - \_\_\_\_\_  
(BOTH THE FORM 2106 AND FEDERAL SCHEDULE A **MUST BE ATTACHED TO RECEIVE DEDUCTION**)
3. OTHER INCOME: FROM Fed. Schedule C, E, K-1, 1099'S, FEES, COMMISSIONS, GAMBLING & MISCELLANEOUS 3. \$ \_\_\_\_\_  
(ATTACH ALL SCHEDULES AND TENANT ROSTERS) (1099R'S ARE NOT TAXABLE TO THE CITY)
4. TOTAL INCOME LINE 1 MINUS LINE 2 PLUS LINE 3 = 4. \$ \_\_\_\_\_
5. ASHLAND INCOME TAX 1.5% OF LINE 4 (LINE 4 X .015) 5. \$ \_\_\_\_\_
6. A. ASHLAND INCOME TAX WITHHELD BY EMPLOYER'S) 6A. \$ \_\_\_\_\_  
B. TAXES PAID TO OTHER CITIES (LIMIT 1% OF W-2 WAGES) 6B. \$ \_\_\_\_\_  
C. ESTIMATED TAX PAYMENTS PAID TO ASHLAND 6C. \$ \_\_\_\_\_  
D. OVERPAYMENT FROM PRIOR YEAR 6D. \$ \_\_\_\_\_  
E. TOTAL CREDITS (ADD A, B, C AND D) - 6E. \$ \_\_\_\_\_
7. TAX DUE (LINE 5 MINUS 6E) 7. \$ \_\_\_\_\_
8. A. OVERPAYMENT CLAIMED IF LINE 7 IS MINUS 8A. \$ \_\_\_\_\_  
B. ENTER AMT OF LINE 7 YOU WANT APPLIED TO NEXT YR 8B. \$ \_\_\_\_\_  
C. ENTER AMT OF LINE 7 YOU WANT REFUNDED 8C. \$ \_\_\_\_\_
9. INTEREST (1.5% PER MONTH OF TAX DUE ON LINE 7) 9. \$ \_\_\_\_\_
10. LATE FILING PENALTY (\$25.00) or NON PAYMENT PENALTY (\$25.00) 10. \$ \_\_\_\_\_  
No payment or refund for amount under \$5.00
11. AMOUNT DUE - PAY IN FULL WITH RETURN (DUE APRIL 15TH) 11. \$ \_\_\_\_\_

**DECLARATION OF ESTIMATED TAX FOR 2015 TAX YEAR**  
Complete this section only if amount due in 2014 is over \$100.00

12. ESTIMATED TAXABLE INCOME 12. \$ \_\_\_\_\_
13. ESTIMATED TAX DUE (Multiply line 12 by 1.5%) 13. \$ \_\_\_\_\_
14. TAXES TO BE WITHHELD AND PAID TO ASHLAND 14. \$ \_\_\_\_\_
15. TAXES PAID TO OTHER CITIES (Limit of 1%) 15. \$ \_\_\_\_\_
16. LESS OVERPAYMENT FROM 8B 16. \$ \_\_\_\_\_
17. TOTAL OF LINES 14, 15 AND 16. 17. \$ \_\_\_\_\_
18. NET ESTIMATED TAX DUE (Subtract line 17 from line 13) 18. \$ \_\_\_\_\_
19. MINIMUM AMOUNT DUE FOR FIRST QTR (Multiply line 18 by .25) 19. \$ \_\_\_\_\_
20. TOTAL AMOUNT DUE (Add lines 11 and 19) 20. \$ \_\_\_\_\_

**\*\*\*FOR YOUR CONVENIENCE, PLEASE USE OUR WEBSITE: [www.ashlandincometax.com](http://www.ashlandincometax.com) \*\*\***

Taxpayer's Signature \_\_\_\_\_ Date \_\_\_\_\_ Spouse's Signature \_\_\_\_\_ Date \_\_\_\_\_  
Preparer's Signature \_\_\_\_\_ Date \_\_\_\_\_ Company Name \_\_\_\_\_ Phone No \_\_\_\_\_

\* I (WE) AUTHORIZE THE INCOME TAX DEPT TO DISCUSS THIS RETURN AND ENCLOSURES WITH THE PREPARER ABOVE Check here \_\_\_\_\_

