



## City of Macedonia City Refund Application/Questionnaire 2017

Your Social Security Number *	Spouse's Social Security Number *
Your First Name and Middle Initial *	Last Name *
If Joint Return, Spouse's First Name and Middle Initial *	Last Name *
Current Mailing Address (Number and Street) *	Apt. #
City, State, and Zip Code *	
Daytime Phone Number *	Evening Phone Number

**Filing Status:**

- Single or Married Filing Separately  
 Joint

If you have an EXTENSION check here and attach a copy:

EXTENSION

If this is an AMENDED return, check here:

In the space provided below, state why you are filing an AMENDED return. Attach an explanation if you require additional space.

**Residency Status in the City of Macedonia:**

<input type="checkbox"/>	Full-Year
<input type="checkbox"/>	Part-Year
<input type="checkbox"/>	Non-Resident

You

Spouse

Municipality where employed during July through

December 2017

Local Tax Rate for that Municipality

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To the best of my knowledge and belief, I do not have any prior outstanding income tax balances with the City of Macedonia.

I do have an outstanding income tax balance from prior years and I am aware that all or a portion of my refund will be applied to that balance (including any balance owed under a payment plan) prior to being refunded to me.



# City of Macedonia

## City Refund Application/Questionnaire

### 2017

#### 2017 Income Tax Information

In Lieu of receiving my Refund, I would like to Donate/Split my Refund to the City of Macedonia for the following (add Percentages/ Dollar Amounts on appropriate lines):

_____ Police Department	_____ Veteran's Memorial Park
_____ Fire Department	_____ Police & Firemen's Memorial Park
_____ Family Recreation Center	_____ Parks
_____ General Purposes	_____ Road Program
_____ Other (please Specify) _____	

\_\_\_\_\_ I would like to receive my Refund.

\_\_\_\_\_ Your Signature \* \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Spouse's Signature, if a Joint Refund \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ E-mail Address \* \_\_\_\_\_ \* - Required

**Mail your Refund Application along with a copy of your 2017 RITA Return to:**

**City of Macedonia,  
Finance Department,  
9691 Valley View Road,  
Macedonia, Ohio 44056**

**For Questions, please call us at 330-468-8300**

#### Refund Processing Procedures:

1. Refund is subject to Federal, State, and local law, and the rules and regulations of the Regional Income Tax Agency ("RITA"). among other things, refund amounts are subject to collection by the Internal Revenue Service ("IRS").
2. You will pay, through your withholding taxes, quarterly billing (estimates) or through your tax return, your tax to RITA. Residents are expected to make estimated payments as required by ordinance and pay any additional tax due by the return due date, without accounting for any refundable credit that they may be able to receive, and may be subject to penalty and interest for failure to do so.
3. The filing deadline for the Regional Income Tax Agency is April 15 of the following year (or after Emancipation Day, depending on how the day falls within the year). Upon filing that return, you have until July 15th to apply for the .25% refund from the City Macedonia. If an extension has been obtained from RITA, the recipient may receive an extension for the same period of time for the refund, with proof of the RITA extension. No other extensions will be considered.
4. Recipient must be in good standing with RITA - does not owe back taxes with penalties and interest, and all income tax filings must be up to date. All taxes for prior calendar year must be paid to RITA before the end of the prior year. If not in good standing, any refund amount will be applied towards satisfying back taxes to the extent any exist, and an application cannot be processed if any prior year filings are missing.
5. Applications/Questionnaires are available online on the City's website. The City of Macedonia's Refund Application/Questionnaire is separate and distinct from the annual income tax return filed with RITA.
6. The application, along with a copy of your tax return and proof that the tax payment was made, must be received at the Finance Department.
7. Finance Director must review, confirm payment with RITA, approve and/or adjust refund according to findings.
8. Refund amount will be generated to the resident subject to the foregoing.\*

**\*Please Note that the City of Macedonia must wait for the Regional Income Tax Agency to process your return in their system before the Finance Director will have access to your tax information. Refunds cannot be made until the processing is completed.**



## City of Macedonia City Refund Application Worksheet 2017

### 2017 Income Tax Information Worksheet

Your Social Security Number	Spouse's Social Security Number			
Your First Name and Middle Initial	Last Name			
If Joint Return, Spouse's First Name and Middle Initial		January to June 2017	July to December 2017	Total Amount
1 Total Taxable Income per Line 2 from the 2017 RITA Return.	1			
2 Multiply Line 1 by the City of Macedonia tax rate (2.00% from January through June and 2.25% from July through December) = Tax Due.	2			
3a Total Tax Withheld for Municipalities other than the City of Macedonia per Line 5a from the 2017 RITA Return. Do not enter estimated tax payments.	3a			
b Percentage paid to Municipalities other than the City of Macedonia	3b			
4 Total Taxes Withheld for the City of Macedonia. Do not enter estimated tax payments.	4			
5 Estimated Taxes Paid to RITA, per Line 13 from the 2017 RITA Return. Do not enter tax withheld from your W-2's. Only include payments made for the 2017 tax year.	5			
6 Total Taxes paid via withholdings and estimated payments. Add lines 3a, 4, and 5.	6			
7 Are you affected by the .25% increase in the City of Macedonia's tax rate? Mark "Yes" if you paid 2.25% to Macedonia or less to a Municipality other than Macedonia from July to December 2017. Mark "No" if you paid 2.25% or more from July to December 2017, to a Municipality other than Macedonia.	7			Yes  No
8 If you Marked Line 7 as "No", you are not eligible for a Refund.	8			
9 If you Marked Line 7 as "Yes", enter your possible Refund from the City of Macedonia. Subtract Line 6 from Line 2 for July through December 2017 only.	9			

**NOTE - This Worksheet should be used for those individuals that have income unevenly spread throughout the year.**

**HELPFUL HINTS:**

- \* The above schedule is set up to calculate amounts for you on lines 2, 3b, 6 and line 9, when you enter amounts on lines 1, 3a, 4, and line 5. However to have this calculation work you must type in your numbers - not hand write them.
- \* It would be best to have a separate sheet prepared for each tax payer instead of completing this form for one joint return.
- \* Total Amount column should be added together with your spouse's form to get the total from the appropriate lines on the RITA Return.