

DATE OF MOVE DURING 2023:

Into Lakewood
Out of Lakewood

Prior Address:
Current Address:

- Refund
Extension
Amended - Year

Contact Information:

Telephone:

Taxpayer's Social Security Number

Spouse's Social Security Number (if joint)

Filing Status - CHECK ONLY ONE

- Single
Married - Filing Joint
Married - Filing Separately

Make checks payable and mail to:

City of Lakewood - Division of Tax
PO Box 77047
Cleveland, OH 44194

Phone: (216) 529-6620
Fax: (216) 529-6099
Website: www.lakewoodoh.gov
Email: taxdept@lakewoodoh.net

DO NOT FORGET TO ATTACH THE FOLLOWING DOCUMENTS (AS APPLICABLE):
W-2 | 1099-NEC/MISC | Federal 1040 | Schedule 1 | Schedules C, E and/or K-1

If you want Lakewood to calculate your tax - STOP, check the box, sign and date the return. Submit with W-2s before March 15, 2024.

TABLE A-1: WAGES AND COMPENSATION

Attach W-2s, Forms 1099-MISC and 1099-NEC, W-2Gs, Schedule 1, and Federal 1040

SECTION 1: Part-Year Resident Calculation

This section should only be used for moves within the State of Ohio. If you lived in Lakewood for the entire year, or if you moved directly into Lakewood from a residency out of state, calculate Columns 1 and 3 by 100%.

- 1. Number of Months Lived in Lakewood:
2. Divide Section 1, Line 1 by 12:
3. Multiply Section 1, Line 2 by 100:

SECTION 2: W-2 Income Calculation

Table with 8 columns: Dates wages were earned, LOCATION WHERE EARNED, Column 1 (Total Wages or Compensation), Column 2 (Withheld for Lakewood), Column 3 (Withheld for other localities), Column 4 (Tax Credit Limit), Column 5 (Smaller of Column 3 or 4), Column 6 (Tax Credit). Includes a 100% withholding rate for Lakewood.

INCOME

- 1. Wages and compensation (from Table A-1, Section 2, Column 1)
2. Non-Wage Income not reported on Table B (i.e. Gambling Winnings, 1099-MISC income, 1099-NEC income)
3. Total Taxable Non-Schedule Income (add Lines 1 and 2)
4. Schedule Income (From Table B, Column 6, Line 9) - DO NOT enter amount less than zero

TAX AND CREDITS

- 5. Total Non-Schedule Lakewood tax due before credits (multiply Line 3 by 1.5% or .015)
6. Taxes withheld and paid to Lakewood (from Table A, Section 2, Column 2)
7. Wage income tax credit (from Table A, Section 2, Column 6)
8. Total Non-Schedule Credits (add Lines 6 and 7)
9. Total Non-Schedule tax due before estimated payments (subtract Line 8 from Line 5)
10. Total Schedule tax due before estimated payments (from Table B, Column 6, Line 16)
11. Total tax due before estimated payments (add Lines 9 and 10)
12. 2023 estimated tax payment(s) and unused prior year credits - up-to-date amounts available at www.lakewoodoh.gov
13. Total net tax - Subtract Line 12 from Line 11 and proceed to Line 16. If \$10.00 or less, enter zero and proceed to Line 17

OVERPAYMENT

- 14. Overpayment - If Line 12 is greater than Line 11, and not \$10.00 or less, subtract Line 11 from Line 12
15. From Line 14 - Amount to be credited to 2024 - \$ Amount to be refunded - \$ (Proceed to Line 17)

BALANCE DUE

- 16. Balance Due - If Line 11 is greater than Line 12, and not less than \$10.00, subtract Line 12 from Line 11

ESTIMATED INCOME TAX FOR 2024

- 17. Estimated income tax for 2024 (from Line 11)
18. First quarter payment (multiply Line 17 by 25% or .25)
19. 2023 credit applied to first quarter 2024 estimate (from Line 15)
20. Total amount due by April 15, 2024 (add Line 16, 18, and subtract Line 19)

The undersigned declares this to be a true, correct, and complete return of Lakewood Income Tax for the period stated.

Taxpayer's Signature Date
Spouse's Signature Date
Tax Preparer's Signature (if other than taxpayer) Phone # Date

Pay by Credit Card - Mastercard/Visa/Discover/American Express
Acct. Number
Exp. Date Security Code
Amount Paid \$
Signature

I authorize the City of Lakewood - Division of Municipal Income Tax to discuss my account and enclosures with my preparer (above)

Vertical text on the left margin: [ATTACH ALL CITY COPY W-2 & 1099 FORMS HERE]

Vertical text on the left margin: [ATTACH CHECK OR MONEY ORDER HERE]

Name(s) on return _____ Primary Taxpayer's Social Security Number _____

TABLE A-2: WAGES AND COMPENSATION (EXTENDED TABLE)									
Attach W-2s, Forms 1099-MISC and 1099-NEC, W-2Gs, Schedule 1, and Federal 1040									
Dates wages were earned		LOCATION WHERE EARNED List each W2 separately	Column 1	Column 2	Column 3	Column 4	Column 5	Column 6	
MM	DD		MM	DD	Total Wages or Compensation	Withheld for Lakewood	Withheld for other localities	Tax Credit Limit (Column 1 x .01)	Smaller of Column 3 or 4
		Enter Table A-1, Section 1, Line 3 in Column 1 and Column 3, and multiply each listing in Columns 1 and 3 by percentage before entering on form.	_____ %	100%	_____ %				
			Lakewood (Calculate at 100%)						
Totals to Table A-1, Section 2:									
			(To Column 1)	(To Column 2)				(To Column 6)	

TABLE B: NET OPERATING LOSS (NOL) CONSOLIDATED TAX CALCULATION SCHEDULE							
Attach all copies of Federal Schedules and Non-Lakewood Municipal Tax returns							
		Column 1 Earned in Lakewood	Column 2 Earned in	Column 3 Earned in	Column 4 Earned in	Column 5 Earned in	Column 6 Totals
	Taxable Non-Wage Income						
1	Municipality Where Earned						
2	NOL Carryforward from 2022						
	NOL Carryforward from 2021						
	NOL Carryforward from 2020						
	NOL Carryforward from 2019						
	NOL Carryforward from 2018						
3	Federal Schedule C Income (Loss)						
	Federal Schedule E Income (Loss)						
	Federal Schedule E pg 2, K-1 Income (Loss)						
4	Taxable non-wage income						
5	Amounts greater than \$0 from Line above						
6	Total of positive net profits						
7	Percentage of total positive net profits						
8	Prior year NOL and current net (loss) totals						
9	If (loss) exceeds profit, STOP and enter 0						
10	Allowable (loss) based on percentage calculation						
11	Net profit after (loss) application						
12	Net profit * 1.5% City of Lakewood gross tax rate						
13	Enter amount of taxes paid to other municipality (Proof of taxes paid must be attached to return)						
14	Credit of 0.5% for taxes paid to other municipality						
15	Tax due						
16	Total tax due after credit calculation, enter on page 1, Line 10						

TABLE C: TAXPAYER AND/OR SPOUSE EXEMPTION	
Proof may be required. Please see instructions.	
<p>Primary Taxpayer</p> <p><input type="checkbox"/> Retired as of _____</p> <p><input type="checkbox"/> Social Security / disability income only for all of 2023</p> <p><input type="checkbox"/> Unemployment income for all of 2023</p> <p><input type="checkbox"/> No taxable income for 2023 - explain: _____</p> <p><input type="checkbox"/> Under 18 for all of 2023 - Date of birth: ____ / ____ / ____</p> <p><input type="checkbox"/> Active military duty income only for all of 2023</p> <p><input type="checkbox"/> Non-resident for all of 2023</p> <p><input type="checkbox"/> Business/rental closed or sold - _____</p>	<p>Joint Taxpayer</p> <p><input type="checkbox"/> Retired as of _____</p> <p><input type="checkbox"/> Social Security / disability income only for all of 2023</p> <p><input type="checkbox"/> Unemployment income for all of 2023</p> <p><input type="checkbox"/> No taxable income for 2023 - explain: _____</p> <p><input type="checkbox"/> Under 18 for all of 2023 - Date of birth: ____ / ____ / ____</p> <p><input type="checkbox"/> Active military duty income only for all of 2023</p> <p><input type="checkbox"/> Non-resident for all of 2023</p> <p><input type="checkbox"/> Business/rental closed or sold - _____</p>