



CITY OF TOLEDO 2025 INDIVIDUAL RESIDENT TAX RETURN

DUE ON OR BEFORE 4/15/2026

PLEASE CHECK IF :
REFUND <input type="checkbox"/>
CREDIT TO 2026 <input type="checkbox"/>
AMENDED <input type="checkbox"/>
BALANCE DUE <input type="checkbox"/>
PAID ONLINE <input type="checkbox"/>

TAXPAYER ACCOUNT #	TAXPAYER SOCIAL SECURITY #

SPOUSE ACCOUNT #	SPOUSE SOCIAL SECURITY #

Single Married Filing Joint Married Filing Separate

TAXPAYER First Name, Middle Initial, Last Name
Name _____

SPOUSE First Name, Middle Initial, Last Name
Name _____

Address _____

City _____ State _____ Zip _____

Phone#(____) _____

Email Address _____

May we leave detailed messages at the above phone or email address? Yes No

Were you a Toledo Resident in 2025? Yes No

IF NO, PLEASE COMPLETE AND FILE THE NON RESIDENT TAX RETURN

Did you file a Toledo tax return in 2024? Yes No

IF YES, PLEASE COMPLETE AND FILE THIS RETURN EVEN IF NOTHING OWED

Should your Tax account be made inactive? Yes No

Reason: _____

DATE MOVED IN: _____ MOVED OUT: _____

Note: Your return is not considered filed until these documents are received. Attach a copy of your W-2's, W2-G's, Schedule(s): C, E, F, and any 1099-MISC, 1099-NEC or 1099-K, along with a copy of your FEDERAL FORM 1040 to include Schedule 1.

File online at <https://toledo.oh.gov/pay-taxes>

	1. W-2 Income (Box 1 from Worksheet A)	1. \$ _____
	2. Other Income (Line 5C from Worksheet B) – IF A LOSS enter here \$(_____) and ZERO on Line 2	2. \$ _____
INCOME	3. Net Loss Carryforward from the TOTAL box of the Schedule NOL (Figure cannot exceed amount on Line 2)	3. \$ _____
	4. Adjusted Other Income (subtract Line 3 from 2) cannot be a negative – see instructions	4. \$ _____
	5. Adjusted net income subject to Toledo income tax (add Lines 1 & 4)	5. \$ _____
TAX	6. Toledo Income Tax – Enter 2.5% of Line 5	6. \$ _____
	7. Toledo Income Tax withheld by employers (add Box 2 from Worksheet A and Box 4B from Worksheet B)	7. \$ _____
TAX WITHHELD, PAYMENTS & CREDITS	8. Tax withheld to other municipalities or JEDDs – Do not exceed 2.5% (Box 3 from Worksheet A)	8. \$ _____
	9. Tax paid to other municipalities or JEDDs (Attach other city/JEDD tax return).	9. \$ _____
	<i>If you worked remotely, attach copies of any tax returns from other municipalities for which you are claiming credit.</i>	
	The taxpayer declares that, I did not work remote during 2025. (signature required) _____	
	10. Estimated payments 10a \$_____ and/or credit from 2024 10b \$_____ Total 10a + 10b = 10c. \$ _____	
BALANCE DUE	11. Total allowable credits (add 7, 8, 9 and 10c)	11. \$ _____
	12. Balance due (subtract Line 11 from Line 6) PAYMENT IS REQUIRED WITH RETURN if greater than \$10	12. \$ _____
	13. Add 2210 assessment for Underpayment of Estimated Tax (see instructions)	13. \$ _____
	14. Add penalty & interest for late payment and late filing fee (see instructions)	14. \$ _____
	15. Balance due to include penalty & interest (add Lines 12 + 13 + 14)	15. \$ _____
CREDIT FOR NEXT YEAR OR REFUND	16. If Line 11 is greater than Line 6, enter the difference here, if more than \$10	16. \$ _____
	Disburse as follows: 17. CREDIT APPLIED TO NEXT YEAR (Check box at top of form)	17. \$ _____
	18. REFUND (Check box at top of form)	18. \$ _____
	Under the age of 18 during 2025 – See instructions	

Signature **Important:** This return is NOT considered filed until signed by taxpayer and spouse (if applicable).

The undersigned declares that this return (and accompanying schedules) is a true, correct and complete return for the taxable period stated, and that the figures used are the same as used for federal income tax purposes and understands that the information may be released to the tax administration of the city of residence and the I.R.S.

Sign Here Your Signature → _____ Date _____

If a joint return both must sign Spouse Signature → _____ Date _____

CHECK BOX IF CITY MAY DISCUSS YOUR RETURN WITH YOUR TAX PREPARER

IF YOU OWE MORE THAN \$200, QUARTERLY ESTIMATE PAYMENTS ARE REQUIRED and you may be subject to penalties and interest due to lack of estimated payments. Further, you may need to make estimate payments for 2026 if you expect to owe the same or greater amount next year.

Payment must accompany return. Make payable to "COMMISSIONER OF TAXATION" & MAIL TO:

REFUND: CITY OF TOLEDO INCOME TAX PO BOX 902 TOLEDO, OH 43697-0902	PAYMENT ENCLOSED CITY OF TOLEDO INCOME TAX PO BOX 632014 CINCINNATI, OH 45263-2014	NO PAYMENT ENCLOSED CITY OF TOLEDO INCOME TAX PO BOX 929 TOLEDO, OH 43697-0929
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Paid Preparer's Use Only

Preparer Signature → _____ Date _____

Print Name → _____ PTIN _____

Phone Number → _____

Email → _____

WORKSHEET A **W-2 INCOME**

ENTER TOTAL COMPENSATION RECEIVED					
Print Employer's Name	Locality Where You Physically Work	Remote ? Y/N	Greater of Box 5 or Box 18 of W-2	Toledo Income Tax Withheld	Tax Withheld or Paid to Other City or JEDD
(NUMBER OF W-2's ATTACHED _____)			Totals →	1) \$	2) \$
				3) \$	

If more lines are needed to report all of your W-2s, attach an additional sheet.

WORKSHEET B **OTHER INCOME**

	Schedules	Column A Profit (Loss) from Federal Schedules	Column B W2-G Withholding Not to Exceed 2.5%	Column C Toledo Taxable Income
1.	Schedule C - Business Income (Combine the net profit and loss from Line 31 of all Schedule C's)			
2.	Schedule E - Rental Income (Residents enter profit(loss) from ALL properties (Line 21 of Schedule E).			
3.	Partnership/Shareholder K-1 Income – Schedule E page 2 (Enter profit(loss) Schedule E from all <u>NON-TOLEDO</u> partnerships (see instructions)			
4.	Miscellaneous Income (Gambling income, 1099-MISC, 1099-NEC, Schedule F)		4B) \$	
5.	Total Other Income (Loss) (Combine Lines 1 through 4 and enter this amount on Page 1, Line 2)			5C) \$

Attach a copy of your W-2's, W2-G's, Schedule(s): C, E, F, and any 1099-MISC, 1099-NEC or 1099-K, along with a copy of your FEDERAL FORM 1040 to include Schedule 1. **Note:** Your return is not considered filed until these documents are received.

SCHEDULE NOL

NET OPERATING LOSS CARRY-FORWARD – (5 YEAR LIMIT)

(See Instructions)	2020	2021	2022	2023	2024	2025	TOTAL
Unused Loss Carryforward							
Percentage	100%	100%	100%	100%	100%		
Loss Used THIS YEAR (Enter TOTAL on Line 3, Page 1)							
Loss Carried Forward to NEXT TAX YEAR							

2025 TOLEDO INDIVIDUAL TAX RETURN FORM INSTRUCTIONS

DUE DATE: APRIL 15, 2026

(PLEASE PRINT USING BLACK INK OR USE THE FILLABLE FORM.)

PLEASE NOTE THAT THIS FORM IS TO BE USED BY INDIVIDUAL TOLEDO RESIDENTS.

INSTRUCTIONS FOR COMPLETING THE RETURN:

Full-year residents: You may file your return electronically through our website listed below. Click on **File or Pay Individual** which will take you to **TaxConnect** to register and file.

<https://toledo.oh.gov/pay-taxes>

Enter your Toledo account number – if known. If you do not know your account number, please leave this box blank. In January, we mail a post card to each taxpayer with an active city of Toledo account. This postcard includes a peel-off sticker containing your name, address and Toledo income tax account number. When you receive this postcard, please make sure the name and address information is correct. If not, cross off the incorrect portion and complete the form with the correct information. Apply the sticker over the Account # and Social Security # boxes on page 1 of this form. If you did not receive a postcard and know your account number, please write it here.

Fill in your First Name, Middle Initial, Last Name and your Social Security Number. ****Your complete social security number is required.** If a joint return—Enter Spouse’s Account Number (if they have one) their First Name, Middle Initial, Last Name and Social Security Number.

Enter your Home Address Number, Street, City, State and Zip Code.

Enter your phone number and email address. This will assist us in reaching you should any questions arise during daytime hours (There is a box to check if we may leave a detailed message).

Answer the questions on the upper right side of the form regarding filing and residency during the tax year. If you filed a Toledo tax return in 2024 and your account should be made inactive, mark the appropriate box and give us the reason (for example, no longer working). List dates moved in or out of Toledo.

Part-Year Residents: *If you moved in or out of the city of Toledo during the tax year and you did not work in the city of Toledo, your wages or net profit from Schedule C can be allocated. W-2 wages can be calculated by taking the greater of Box 5 or Box 18, and dividing by 12 months then multiplying that calculation by the number of months you lived in Toledo. This will give you your Toledo taxable wage income. Do this for each W-2 and enter the total number in Box 1 of the return. If there was other city withholding in Box 19, you must multiply that city’s tax rate by the Toledo taxable income to give you the correct tax credit for paying another city. Enter this number in Box 8 of the return.*

If you had a net profit/loss from a Schedule C, divide the net profit (Line 31) by 12 months and multiply that calculation by the number of months you lived in Toledo and place this calculation in Line 1, Column C of Worksheet B. If you had rental properties, and file a Schedule E, do the same calculations (Line 21) excluding the rental properties located in Toledo. The entire profit (Line 21) of rental properties located in Toledo is taxable regardless of your residency. Add the calculation of Non-Toledo rentals and Toledo rentals together and place in Line 2, Column C of Worksheet B. Do the same calculation for Non-Toledo Partnership K-1 income and place in Line 3, Column C of Worksheet B.

NOTE: Your Federal tax return should be completed prior to filing your Toledo tax return.

FILING STATUS

Please check applicable box for Single, Married Filing Joint or Married Filing Separate

If Married Filing Separately enter the Spouse's Name, Social Security Number and the Spouse's Toledo Account number.

Line 1. W-2 Income (Box 1 from Worksheet A)

Instructions for Worksheet A on page 2 of this return: For each W2 received list the name of each employer and the locality where you physically worked. Indicate whether you worked remotely at any point during the year, your gross wages from the greater of Box 5 or Box 18 of the W2, the amount of Toledo Tax withheld from Box 19 of the W2, the amount of any other cities or JEDDs tax withheld for the time frame you worked outside Toledo from Box 19 of the W2 or amount paid directly to another municipality (attach other municipal return(s)). *Please attach an additional sheet if needed.*

Line 2. Other Income (Line 5C from Worksheet B) – If a LOSS enter zero here.

Instructions for Worksheet B on page 2 of this return: Column A; list appropriate income/loss for each line. Enter Column A in Column C. If there is local withholding on your 1099-MISC, 1099-NEC or more commonly your W-2G enter in line 4B. **Line 3, Worksheet B, Partnership/Shareholder K-1 Income – Schedule E page 2:** Toledo residents should not include their K-1 income unless the partnership is not located in Toledo. If the partnership is located outside of Toledo, the K-1 income/loss should be included on Line 3 of Worksheet B. A copy of the K-1 should be attached to the return to include any attachments to the K-1. Toledo residents may take credit for income taxes paid by the non-Toledo partnership to other municipalities. Put this amount paid by the non-Toledo partnership on Page 1, Line 9. Calculate Total Business and Other Income and place in Column C, Line 5C and also on Line 2 on Page 1 of this return.

Line 3. Net Loss Carry Forward from Schedule NOL (Figure cannot exceed the amount on Line 2)

SCHEDULE NOL: Unused Loss Carry Forward (LCF). Fill in the unused LCF for 2020 thru 2024 and the current year if applicable. Total this line.

Loss Used THIS Year. List LCF's used under the appropriate year of usage. Total this Line and place on Line 3, Page 1 of the return.

Loss Carried Forward to NEXT TAX YEAR. Subtract the Loss Used this Year from the Unused LCF in each column.

For the 2025 tax year, any remaining 2020 LCF will not be allowed since we have a 5-year LCF.

Line 4. Adjusted Other Income - Subtract Line 3 from Line 2. CANNOT BE A NEGATIVE.

Line 5. Adjusted net income subject to Toledo income tax. - Add Line 1 and Line 4.

Line 6. Toledo Income Tax. - Multiply Line 5 by .025 or 2.5% and enter here.

Line 7. Toledo Income Tax withheld by employers. Add Box 2 from Worksheet A and Box 4B from Worksheet B and enter here.

Line 8. Tax WITHHELD to other municipalities or JEDDs. Enter Box 3 from Worksheet A. CANNOT EXCEED 2.5%.

Line 9. Tax PAID to other municipalities or JEDDs. You must include a copy of the Municipal/JEDD tax return filed in order to take credit for these taxes paid. CANNOT EXCEED 2.5%.

If you worked remotely, attach a copy of tax returns for each municipalities for which you are claiming a credit.

If you did not work remotely sign declaring that you did not work remotely during 2025.

Line 10. Estimated payments.

Line 10a. Enter estimated payments made directly to the city of Toledo.

Line 10b. Enter credit from the tax year 2024.

Line 10c. Enter the total of Line 10a and Line 10b.

Line 11. Total allowable credits. Enter the total of Lines 7, 8, 9 and 10c.

Line 12. Balance Due. If Line 11 is less than Line 6, enter the difference here. PAYMENT IS REQUIRED WITH YOUR RETURN. (If amount is \$10.00 or less, no payment is due, but the return is required to be filed). Make check or money order payable to the "COMMISSIONER OF TAXATION".

Line 13. If Line 12 is less than \$200; skip to Line 14. If Line 12 is \$200 and greater, complete the 2025 Form 2210 (Underpayment of Estimate Penalty) located on our website. Place the Total column on Line 10 of the 2025 Form 2210 here.

NOTE: Quarterly estimated payments are required if you owe more than \$200 after credit for tax withheld. If 90% of the tax liability due for the current tax year, or 100% of the tax liability for the preceding tax year, is not paid in estimate form by January 15th following the current tax year (for individuals) you are subject to penalties and interest even if the tax is paid in full by the due date. Note that 100% of the preceding tax year must have been for a full 12 month period and that the tax return was filed).

Line 14. Penalty: Late Payments on Returns--The penalty is 15% of the amount not timely paid at the time that this tax return is due. **Interest** at 9% per annum for calendar year 2026 will be assessed on each month that the payment was unpaid. Monthly rate for 2026 is .0075.

Late filing fee. Failure to timely file a return by the due date (except for estimate payments) will incur a \$25 fee in addition to the Late Payment Penalty. Filers who file late and have no balance due or a refund will also be assessed the Late Filing Fee.

FEDERAL EXTENSIONS MUST BE ATTACHED TO THE RETURN IF APPLICABLE

Line 15. Add Lines 12, 13 and 14. This is your total balance due.

Line 16. Refund/Credit. If Line 11 is greater than Line 6, enter the difference here, if more than \$10.

Line 17 and Line 18. Disburse Line 16 as follows. If the amount on Line 16 is more than \$10, complete these 2 Lines to let us know what to do with your overpayment and check the appropriate box(es) at the top of page 1.

Under age 18: If you are claiming a refund of taxes withheld while under the age of 18, include with your refund request, a copy of a valid state issued ID showing your name and birthdate or a photo ID and a copy of your birth certificate.

REMEMBER TO ATTACH YOUR PERSONAL W2'S to page 1 of this return. Attach all applicable W2G's and Schedules for income/losses shown in Worksheet B. You must include your Federal Form 1040 to include Schedule 1 and any 1099-MISC, 1099-NEC and 1099-K forms.

If this is an amended return please check the box in the upper right corner on page 1 and include a copy of the originally filed return.

REMEMBER TO SIGN YOUR RETURN (BOTH SPOUSES MUST SIGN JOINT RETURN). IF YOU WANT YOUR PREPARER TO BE ABLE TO DISCUSS THIS RETURN WITH US, CHECK THE BOX UNDER YOUR SIGNATURES AND MAKE SURE THE PREPARERS INFORMATION IS ON THE RETURN. FAILURE TO SEND YOUR RETURN TO THE CORRECT ADDRESS WILL CAUSE A DELAY IN PROCESSING.

MAIL YOUR RETURN TO:

REFUND DUE
City of Toledo Income Tax
PO Box 902
Toledo, OH 43697-0902

PAYMENT ENCLOSED
City of Toledo Income Tax
PO Box 632014
Cincinnati, OH 45263-2014

NO PAYMENT ENCLOSED
City of Toledo Income Tax
PO Box 929
Toledo, OH 43697-0929

THE FOLLOWING LISTS ARE FOR REFERENCE PURPOSES ONLY. THEY ARE NOT MEANT TO BE EXHAUSTIVE OR ALL INCLUSIVE. THEY CAN BE SUBJECT TO REVISION WITHOUT NOTICE. THIS LIST IS IN ADDITION TO WAGES, COMPENSATION, SELF-EMPLOYMENT, RENTAL & FARM INCOME.

EXAMPLES OF OTHER TAXABLE ITEMS ARE:

1. Bonuses
2. Civilians working for the Military
3. Contributions made by or on behalf of employees (including those through a cafeteria plan) to a qualified deferral plan (401k, 403B, 457 and similar plans) are taxed in the year earned and the deferral is not permitted. However, matching contributions by an employer through a cafeteria plan are not taxable.
4. Contributions made by employees or on their behalf to a tax-deferred annuity or stock purchase plan
5. Cost of group term life insurance over \$50,000.00 (unless part of a cafeteria plan)
6. Director Fees
7. Executor fees
8. Excess employee discounts
9. Excess moving expense reimbursements (amounts that are taxable for Medicare wages)
10. Income from golden parachute payments
11. Income from guaranteed annual wage contracts
12. Income received as a result of a covenant not to compete (except for specifically enumerated items that are otherwise not taxable)
13. Jury duty income
14. Lottery and Gambling winnings (cannot be offset by losses)
15. Prizes, awards and gifts as a result of employment
16. Prizes and winnings from sweepstakes where money was tendered to enter
17. Profit sharing
18. Severance pay
19. Sick and/or vacation pay
20. Stipends with a work requirement (vows of poverty are not recognized)
21. Short-term disability pay if received as a benefit from employment (a third-party payer is not required to withhold municipal tax)
22. Stock bonus incentive plans
23. Stock options
24. Supplemental unemployment benefits (SUB PAY not withheld upon by 3rd party payer)
25. Tips
26. Wage continuation plans (including retirement incentives and buy-outs)

EXAMPLES OF INCOME THAT IS NOT TAXABLE:

1. Active Duty Military pay including reserve pay
2. Alimony
3. Annuities (when they are being distributed)
4. Capital Gains
5. Clergy housing allowance (note that excess allowance is taxable)
6. Dividends
7. Government allotments
8. Income earned by persons aged 17 and under
9. Insurance benefits – unless your employer paid the premiums
10. Interest Income
11. Long-term disability payments (Social Security award letter required)
12. Meals and lodging required on premises
13. Non-resident Subchapter S corporation income to a resident member/shareholder
14. Patent and copyright income
15. Pension income
16. Religious, fraternal charitable, educational institutions that is derived from tax-exempt activities or tax exempt real property
17. Royalties
18. Social Security Benefits
19. State unemployment benefits (Not the same as SUB PAY which is taxable)
20. Welfare payments
21. Worker's compensation