



City of Coshocton
Individual/ Joint Income Tax Return 2025
Due on or before April 15, 2026
DROP BOX AVAILABLE 8TH STREET PARKING LOT

760 Chestnut Street
 Coshocton, Ohio 43812
 Phone 740-622-9515
 Fax 740-622-9374
Jackie.cushman@cityofcoshocton.com
Gavenwilliams@cityofcoshocton.com

Division of Taxation
 Taxpayers filing Under SSN

NAME _____

SPOUSE _____

ADDRESS _____

CITY/STATE/ZIP _____

Taxpayer SSN# _____

Spouse SSN# _____

Phone # _____

Email Address _____

Status

Resident _____ Non Resident Tax Withheld _____ Part Year Resident _____ Date Moved In _____ Date Moved Out _____ Non Resident Tax Not Withheld _____ Retired No Taxable Income _____ \$5000 or under and tax was withheld _____ Under 18 years old _____ Exempt _____

- 1. Total Qualifying Wages (W-2 Box 5 or Box 18 whichever is higher (Attach all W-2 Forms) 1. \$ _____
- 2. Less Non-taxable Income (Part year or non-residents only) (provide calculations) 2. \$ _____
- 3. Taxable Qualified Wages (Line 2 minus Line 1)..... 3. \$ _____

4. Other Income or (Loss) ATTACH FEDERAL SCHEDULES

- a) Schedule C _____
- b) Schedule E _____
- c) All other Non-Wage Income _____

- 5. Total Other Income or Loss (Line 4a, 4b, 4c) 5. \$ _____
- 6. Total Taxable Income (Line 3 plus Line 5) Losses on Line 5 cannot offset W-2 income) 6. \$ _____
- 7. Tax Due (Multiply Line 6 by 2%) 7. \$ _____
- 8. a. City of Coshocton Tax Withheld (Per W-2's)..... a. \$ _____
- b. Estimated Tax Payments Paid (Including credit from previous year)..... b. \$ _____
- c. Other City Taxes Paid (Allowed up to 1% credit)..... c. \$ _____
- 9. Total Tax Paid, and Credits (Line 8a, 8b, 8c) 9. \$ _____
- 10. Net Tax Due (Subtract Line 9 from Line 7) (Amount \$10.00 or less not payable)..... 10. \$ _____**
- 11. Overpayment – Credit to 2021 _____ Refund _____ (\$10.00 or less nonrefundable)

2026 Estimated Tax Declaration

- 12. Total Estimated Income Subject to Tax (Employer does not withhold)..... 12. \$ _____
- 13. Tax Declared (Multiply Line 12 by 2%)..... 13. \$ _____
- 14. Declaration Due (25% of Line 13)..... 14. \$ _____
- 15. Less Credits (From Line 11 above)..... 15. \$ _____
- 16. Net Estimated Tax Due (Line 15 minus Line 14) 16. \$ _____
- 17. Late File Penalty 25.00 17. \$ _____
- 18. Interest rate 9% per annum (.750 per month) 18. \$ _____
- 19. Late pay penalty (15% of the amount not timely paid) 19. \$ _____
- 20. I would like to donate toward Coshocton City Services 20. \$ _____
- 21. TOTAL AMOUNT DUE (add lines 10,16,17,18 ,19) (minus line 20) 21. \$ _____**

***Make check payable to: Coshocton Income Tax, 760 Chestnut St Coshocton, Ohio 43812**

There is also a drop box outside in the 8th St. parking lot for your convenience as well as a drop box in the lobby
I certify that I have examined this return including accompanying schedules and statements and to the best of my knowledge and belief it is true, correct and complete.

_____ If return was prepared by a Tax Preparer, check here if we may contact him/her directly with questions regarding the preparation of this return.

SIGNATURE OF PREPARER

DATE

SIGNATURE OF TAXPAYER

DATE

SIGNATURE OF TAXPAYER

DATE