2025 EZ

Carey Resident Individual Tax Return

2025 EZ

Post Office Box 862, Findlay, Ohio, 45839-0862
Phone:419-424-7133 • Fax:419-424-7410
findlayohio.gov/incometax

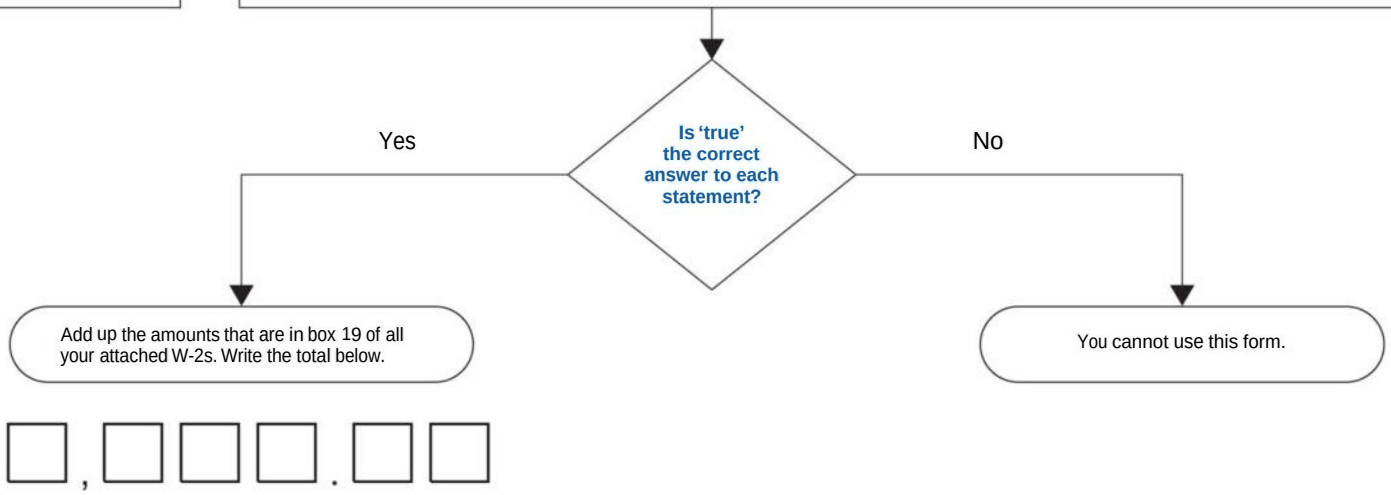
Read the Taxable Income and the Non-taxable Income sections of the filing instructions at the website above.

Then, circle True or False in response to each statement at the right about your 2025 income.

Please file a joint return, even if you filed separately with the IRS.

Attach all your W-2s and page 1 of your Federal 1040 and file by April 15, 2026.

1.	I lived in Carey for the entire period in 2025 for which I am filing.	True	False
2.	My only sources of taxable income are wages I earned while I worked in Carey.	True	False
3.	All of my 2025 wages were reported on W-2s.	True	False
4.	Carey is clearly shown on my W-2s as the tax that has been withheld (usually box 20).	True	False
5.	The amount reported in box 18 of each of my attached W-2s is equal to or higher than each of the amounts reported in boxes 1 and 5.	True	False
6.	Carey tax was withheld correctly at 1.5% on all of my wages.	True	False
7.	I did not work in or pay income tax to any other cities or villages.	True	False
8.	I did not own or operate a business and I did not have any partnership or business income.	True	False
9.	I did not claim a Federal deduction for unreimbursed employee business expenses (Form 2106).	True	False
10.	I did not fill out Schedules C, E, or SE for my Federal income taxes, nor was I required to.	True	False
11.	I did not rent land, farmland, buildings, houses, apartments, or other properties to others.	True	False
12.	I did not receive a Federal Form 1099-MISC.	True	False
13.	I did not receive any lottery or gambling winnings.	True	False



☐☐☐,☐☐☐.☐☐

If you moved in 2025 or 2026, show the dates below:

Date moved into the village ____ / ____ / ____

Date moved out of the village ____ / ____ / ____

Print your full name(s) and current address below.

By signing this form below, I am stating that the information shown on this document is true, correct, and complete.

Signature Phone Date

Spouse's signature (only if filing jointly) Date

Write your Social Security number below.

☐☐☐-☐☐-☐☐☐☐

Write your spouse's Social Security number, only if filing jointly.

☐☐☐-☐☐-☐☐☐☐