



SPRINGBORO NON-RESIDENT REFUND REQUEST

TAX YEAR _____

Name	
SSN	
Current address/city/state/zip	
Employer address/city/state/zip	
Address where your work is performed, including city/state/zip	
Phone Number	
E-mail	

EMPLOYEE CERTIFICATION

I am requesting a refund of Springboro tax withholding based on the circumstances cited on page 2. **The amount of refund I am requesting is \$_____.** I am confirming that the refund I am requesting is based on an accurate statement of my circumstances and (if applicable) an accurate accounting of days/hours worked in Springboro as reported on the accompanying work log and/or refund worksheet.

Signature

Date

Your employer must sign this form if you are claiming a refund for Reasons 1 or 2 described on page 2.

EMPLOYER CERTIFICATION

During the above-referenced tax year, income tax in the amount of \$_____ was withheld from the above-named employee's wages in excess of his/her liability due to the circumstances described on page 2. I have reviewed the work log on page ____ (if applicable) and the refund worksheet on page ____; I agree with the employee's statement of work days spent in Springboro and his/her calculation of Springboro taxable wages. No portion of these taxes has been, or will be, refunded directly to the employee and no related adjustments to our withholding have been or will be made.

Name of Employer Representative

Signature

Title

Date

Phone

REASON FOR REQUEST

I am requesting a non-resident refund of taxes withheld because (**check one**):

<input type="checkbox"/>	Reason	Instructions
<input type="checkbox"/>	1 My employer withheld Springboro taxes on all of my wages, but some days I worked at locations outside the City.	<ul style="list-style-type: none"><input type="radio"/> Complete the work log on page 3.<input type="radio"/> Calculate your refund amount on page 4.<input type="radio"/> Enter the amount of the refund you are requesting on page 1, and sign the employee statement.<input type="radio"/> Have your employer sign the certification statement on page 1.<input type="radio"/> Attach your W-2.
<input type="checkbox"/>	2 I am an over-the-road trucker. Per agreement between my employer and the City, only 25% of my wages are taxable to Springboro.	<ul style="list-style-type: none"><input type="radio"/> Calculate your refund amount on page 5.<input type="radio"/> Enter the amount of the refund you are requesting on page 1, and sign the employee statement.<input type="radio"/> Have your employer sign the certification statement on page 1.<input type="radio"/> Attach your W-2.
<input type="checkbox"/>	3 I moved out of Springboro on _____ but my company continued to withhold courtesy tax from my work wages for all or a portion of the year following my move date. The amount of tax withheld in error, as reported in Box 19 of my W-2, is _____.	<ul style="list-style-type: none"><input type="radio"/> Complete the statement in the column at left with your move-out date and your box 19 withholding amount.<input type="radio"/> Your refund will be the amount reported in box 19 of your W-2. Enter that amount on page 1, and sign the employee statement.<input type="radio"/> Attach your W-2.
<input type="checkbox"/>	4 My employer mistakenly withheld Springboro tax from my wages even though I was not a Springboro resident and did not work in Springboro. The amount of tax withheld in error, as reported in Box 19 of my W-2 is _____.	<ul style="list-style-type: none"><input type="radio"/> Complete the statement in the column at left with your box 19 withholding amount; this is your refund.<input type="radio"/> Enter your refund amount on page 1, and sign the employee statement.<input type="radio"/> Attach your W-2.
<input type="checkbox"/>	5 My employer mistakenly withheld Springboro tax from my wages even though I was actually working in the City of _____. The amount of tax withheld in error, as reported in Box 19 of my W-2 is _____.	<ul style="list-style-type: none"><input type="radio"/> Complete the statement in the column at left with the name of your work city and your box 19 withholding amount.<input type="radio"/> Your refund will be the amount reported in box 19 of your W-2. Enter that amount on page 1, and sign the employee statement.<input type="radio"/> Attach your W-2.
<input type="checkbox"/>	6 Other	Please contact us at 937-748-9701 to discuss your situation so that we can better assist you in making your claim.

WORK LOG

Please complete the work log below, documenting the dates you worked outside the City and the address of the work location. **Total the number of days worked outside the City and enter this number on page 4, Step 1, part (b).**

NON-RESIDENT REFUND WORKSHEET

(Reason 1: Work Days Outside the City)

STEP 1: Please tell us about the number of days you worked in Springboro vs. in other locations

- a. Enter the ***total number of days you worked*** during the year: _____
* Do not include weekends, holidays, vacation days, or sick days

b. Complete the work log on page 3 to determine the ***number of days you worked outside of Springboro***.
Enter the result here: _____

c. Subtract the number of days you worked outside of Springboro from the total number of days you worked during the year to determine ***how many days you worked in Springboro***.
Enter the result here: _____

STEP 2: Calculate the percentage of wages you earned in Springboro

Complete the formula below, using the figures from Step 1, lines c and a, above.

Line c _____ \div Line a _____ = _____ %

STEP 3: Calculate your Springboro taxable wages

Look at your W-2 and identify the amount listed in Box 5 as Medicare wages. Then complete this formula:

$$\underline{\hspace{2cm}} \times \underline{\hspace{2cm}} = \underline{\hspace{2cm}}$$

STEP 4: Calculate your refund

Follow the instructions below to calculate your refund.

A	B	C	D	E
Springboro taxable wages	Tax Rate	Total Tax Due	Tax Withheld	Refund
	1.5%			

Column A: Enter the amount of Springboro taxable wages you calculated in Step 3.

Column C: Multiply Column A by 1.5% and enter the result.

Column D: Enter the amount of Springboro tax withheld from your wages, as listed in Box 19 of your W-2.

Column E: Calculate your refund by subtracting the amount in Column C from Column D. Enter this amount in Column E and on page 1 as part of your Employee Certification statement.

**NON-RESIDENT REFUND
WORKSHEET**

STEP 1: Calculate your Springboro taxable wages

Look at your W-2 and identify the amount listed in Box 5 as Medicare wages. Then complete this formula:

$$\underline{\hspace{2cm}} \times 25\% (0.25) = \underline{\hspace{2cm}}$$

Medicare Wages
(Box 5 of W-2) Springboro taxable wages

STEP 2: Calculate your refund

Follow the instructions below to calculate your refund.

A	B	C	D	E
Springboro taxable wages	Tax Rate	Total Tax Due	Tax Withheld	Refund
	1.5%			

Column A: Enter the amount of Springboro taxable wages you calculated in Step 1.

Column C: Multiply Column A by 1.5% and enter the result

Column D: Enter the amount of Springboro tax withheld from your wages, as listed in Box 19 of your W-2.

Column E: Calculate your refund by subtracting the amount in Column C from Column D. Enter this amount in Column E and on page 1 of your refund request form as part of your Employee Certification statement.