

## 2020 COVID-19 Nonresident Refund Request

Use this form to report days worked outside of Canton, at a location to which you were required to report for employment duties because of the Coronavirus pandemic and the governor's declaration of a state of emergency under Executive Order 2020-01D. Attach a copy of the federal Form W-2, and a Log of Days Out. The availability of a refund is dependent on the outcome of pending litigation. Your refund request will be held until this litigation is resolved.

THIS FORM SHOULD BE USED FOR COVID-19 REFUNDS ONLY. If the conclusion of the litigation determines that a refund is allowed, your claim will be processed at that time. Should the conclusion find that a refund is not allowed, you will receive a notice that the refund is not available to you.

SSN: _____	Phone: (____) _____
Name: _____	Email: _____
Address: _____	Employer: _____
_____	Fed. EIN: _____

## Refund Due

**Column A** Enter total comp from which tax was withheld  
*(Use Medicare Wage figure from W-2)*

**Column D** Enter the Canton tax withheld  
*(Use Box 19 from W-2)*

**Column B** Enter taxable income from Worksheet, page 2  
**Column C** Multiply Column B by 2.5% tax rate

**Column E** Subtract Column D from Column C

City	A	B	RATE	C	D	E
	SALARIES, WAGES, ETC.	TAXABLE INCOME	2.50%	TOTAL TAX	TAX WITHHELD	REFUND
<b>CANTON</b>						

I declare under penalty of perjury, that all information reported on this Covid-19 refund claim is true, correct, and complete to the best of my knowledge and belief, and a nonresident refund has not previously been claimed or received by me for the time and non-Canton earnings covered here-in. I understand that information regarding this refund claim may be shared with other taxing jurisdictions. Please sign, date, and provide a daytime phone number.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone No.

## Employer Certification

Under penalty of perjury, the undersigned employer representative certifies that the above named employee was employed during the period as referenced above; that the employee was either not working inside the city limits of Canton, or the tax was improperly withheld; and, that the employer has examined this claim for refund in its entirety including any accompanying schedules, worksheets, and statements; and, that the employer representative can attest that the information reported on this claim is true and accurate.

\_\_\_\_\_  
Representative Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone No.

\_\_\_\_\_  
Print Representative Name

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Email Address

# In-city Calculation Worksheet

	Example	Your Calculations
<b>1. TOTAL DAYS AVAILABLE</b> <i>* i.e., 366 minus weekends not worked</i>	<b>262*</b>	<b>1</b> <input style="width: 100px; height: 20px;" type="text"/>
a. VACATION	<b>10</b>	<b>a.</b> <input style="width: 100px; height: 20px;" type="text"/>
b. SICK LEAVE	<b>6</b>	<b>b.</b> <input style="width: 100px; height: 20px;" type="text"/>
c. HOLIDAYS	<b>10</b>	<b>c.</b> <input style="width: 100px; height: 20px;" type="text"/>
<b>2. LESS: TOTAL AVAILABLE DAYS NOT WORKED</b> <i>* i.e., (a. + b. + c.)</i>	<b>26*</b>	<b>2</b> <input style="width: 100px; height: 20px; background-color: #f8d7da;" type="text"/>
<b>3. SUBTRACT LINE 2 FROM LINE 1</b>	<b>236</b>	<b>3</b> <input style="width: 100px; height: 20px;" type="text"/>
<b>4. LESS: DAYS WORKED OUT OF CITY (due to Covid-19 only)</b> <i>* attach Log of Days Out</i>	<b>59*</b>	<b>4</b> <input style="width: 100px; height: 20px; background-color: #f8d7da;" type="text"/>
<b>5. DAYS PHYSICALLY WORKED IN CANTON</b>	<b>177</b>	<b>5</b> <input style="width: 100px; height: 20px;" type="text"/>

# Refund Computation

(Divide)	<b>5. DAYS ON THE JOB IN CANTON</b>	<b>X</b>	<b>TOTAL INCOME</b>	<b>=</b>	<b>TAXABLE INCOME</b>
	<b>3. TOTAL AVAILABLE WORKDAYS</b>		(Enter on Page 1, Column A)		(Enter on Page 1, Column B)

COMPUTATION: (Line 5. / Line 3.)  **X**  **\$**  **=**  **\$**

TAX RATE FOR CITY OF CANTON **X 2.5%**

TOTAL TAX DUE (Enter on Page 1, Column C) **\$**

LESS TAX WITHHELD (Enter on Page 1, Column D) **\$**

REFUND DUE (Enter on Page 1, Column E) **\$**

