

File with
INCOME TAX
DEPARTMENT
27 East Jefferson Street
 Jefferson, Ohio 44047
 Phone (440) 576-3947
 Fax (440) 576-5548
 Make checks and Money Orders
 Payable to
 Village of Jefferson

Village of Jefferson
WWW.JEFFERSONOHIO.US
2015 INCOME TAX RETURN

Fiscal Period _____ to _____
CALENDAR YEAR TAXPAYERS FILE ON OR BEFORE APRIL 15
FISCAL YEARS FILE
ON THE 15TH DAY OF THE FOURTH MONTH

Check your status as a taxpayer
 Employee Partner
 Proprietor Corporation
 Other-Explain _____ Retired
 Resident Non-Resident
 Did you file a return last year?
 Yes No
 Under 18-DOB _____
 Attach proof _____

TAXPAYERS NAME AND ADDRESS

ACCOUNT NUMBER

YOUR SOCIAL SECURITY NO.: _____

SPOUSE'S SOCIAL SECURITY NO.: _____

FEDERAL ID NO.: _____

TELEPHONE HOME: _____

BUSINESS: _____

THIS SPACE FOR TAX OFFICE USE ONLY

F

D

P & I

Check

Cash

Refund Requested

YOUR NAME, ADDRESS AND SOCIAL SECURITY NUMBER, IF PRINTED ABOVE, ARE AS THEY APPEAR ON OUR RECORDS. MAKE CORRECTIONS WHERE NECESSARY. IF YOU ARE FILING A JOINT RETURN, INCLUDE YOUR SPOUSE'S SOCIAL SECURITY NUMBER.

IF MOVED SINCE THE PREVIOUS FINAL RETURN WAS DUE, GIVE IN DATE: _____ OUT DATE: _____
RENTING: ___ Y ___ N Name of Landlord: _____

1. MEDICARE WAGES AND TIPS (ATTACH ALL W-2's)
 1A _____ 1B _____ \$ _____
2. OTHER TAXABLE INCOME FROM PAGE 2 \$ _____
3. TAXABLE INCOME: LINE 1 PLUS LINE 2 \$ _____
4. MUNICIPAL TAX, 1.50% OF LINE 3 FOR CALENDAR YEAR 2015 \$ _____
5. CREDITS:
 A. TAX WITHHELD BY EMPLOYER FOR JEFFERSON \$ _____
 B. ESTIMATED TAX PAID TO JEFFERSON \$ _____
 C. CREDIT FOR TAXES PAID TO OTHER CITIES FROM SCHEDULE A \$ _____
 D. PRIOR YEAR OVERPAYMENTS \$ _____
 E. TOTAL CREDITS \$ _____
6. TAX DUE (IF LINE 4 IS GREATER THAN LINE 5E, PAYMENT OF BALANCE MUST ACCOMPANY THIS RETURN) \$ _____
7. PENALTY \$ _____ LATE PAYMENT PENALTY \$ _____ TOTAL \$ _____
8. AMOUNT DUE BEFORE ESTIMATED TAXES \$ _____
9. OVERPAYMENT: REFUNDED \$ _____ OR CREDITED TO EST. TAXES \$ _____

DECLARATION OF ESTIMATED TAXES

10. INCOME SUBJECT TO TAX \$ _____ (A) \$ TIMES TAX RATE OF 1.5% FOR GROSS TAX OF \$ _____ (B)
11. LESS EXPECTED TAX CREDITS:
 A. TAX WITHHELD BY EMPLOYER FOR JEFFERSON \$ _____
 B. TAX WITHHELD BY EMPLOYER FOR OTHER CITIES \$ _____
 C. TOTAL CREDITS \$ _____
12. NET TAX DUE (LINE 10B LESS LINE 11C) \$ _____
 A. OVERPAYMENT FROM PRIOR YEAR(S) \$ _____
13. AMOUNT PAID WITH THIS DECLARATION (1/4 LINE 12, LESS LINE 12A) \$ _____
14. BALANCE OF ESTIMATED TAX \$ _____
15. **TOTAL AMOUNT DUE \$ _____ (LINE 8) + \$ _____ (LINE 13) =** _____

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 & COMPLETE. IF PREPARED BY PERSON OTHER THAN TAXPAYER, THE DECLARATION IS BASED ON ALL INFORMATION OF WHICH PREPARER HAS ANY KNOWLEDGE.

Signature of Preparer _____ Date _____

Signature of Taxpayer _____ Date _____

Telephone No. _____

Signature of Taxpayer _____ Date _____

PENALTIES WILL BE ASSESSED FOR FAILURE TO PAY ON AN ESTIMATE, FAILURE TO FILE A RETURN, OR AN EXTENSION OR PAY TAX DUE BY APRIL 15TH.

May we discuss this return with the Tax Preparer? Yes No

SCHEDULE A - COMPUTATION OF CREDIT FOR TAXES PAID OTHER CITIES

A. OTHER CITY NAME	B. OTHER CITY EARNINGS	C. OTHER CITY TAX PAID	D. EARNING TIMES 1.5% TAX RATE	E. SMALLER
1. TOTAL				
2. TIMES ALLOWABLE CREDIT PERCENTAGE				100%
3. ALLOWABLE CREDIT FOR TAXES PAID OTHER CITIES: ENTER ON LINE 5C, PAGE 1				

***DO NOT USE THE SCHEDULES BELOW IF YOUR ONLY SOURCE OF INCOME IS FROM W-2 WAGES *** YOU ARE NOT ENTITLED TO DEDUCT EXPENSES FROM SUCH WAGES

SCHEDULE C - BUSINESS INCOME

1. ATTACH COPIES OF FEDERAL SCHEDULES (ENTER TOTAL NET INCOME FROM SCHEDULES) \$ _____

2. A. ITEMS NOT DEDUCTIBLE (FROM LINE H SCHEDULE X) \$ _____

B. ITEMS NOT TAXABLE (FROM LINE S, SCHEDULE X) \$ _____

C. DIFFERENCE BETWEEN LINES 2A AND 2B TO BE ADDED TO OR SUBTRACTED FROM LINE 1 \$ _____

3. ADJUSTED INCOME (LINE 1 PLUS OR MINUS 2C IF SCHEDULE X IS USED) \$ _____

4. APPORTIONMENT PERCENTAGE FROM STEP 5 SCHEDULE Y _____ %

5. NET BUSINESS INCOME LESS CARRY FORWARD LOSS (\$ _____) \$ _____

SCHEDULE E - INCOME FROM RENTS (ATTACH STATEMENT EXPLAINING COLUMNS C, D, & E)

A. ADDRESS OF PROPERTY	B. RENT AMOUNT	C. DEPRECIATION	D. REPAIRS	E. OTHER EXPENSES	F. NET INCOME (LOSS)
6. NET INCOME (OR LOSS) SCHEDULE					\$

SCHEDULE H - OTHER INCOME FROM PARTNERSHIPS, FEES, LOTTERY, GAMBLING, ETC.

A. RECEIVED FROM	B. FOR (DESCRIBE)	C. AMOUNT
7. TOTAL INCOME SCHEDULE H		\$

8. ADD TOTALS OF SCHEDULES C, E, & H. ENTER HERE AND ON LINE 2, PAGE 1.

SCHEDULE X - RECONCILIATION WITH FEDERAL INCOME TAX RETURN

ITEMS NOT DEDUCTIBLE		ITEMS NOT TAXABLE	
A. NET LOSS FROM CAPITAL OR OTHER ASSETS	\$	N. CAPITAL GAIN	\$
B. EXPENSES APPLICABLE TO NON-TAXABLE INCOME	\$	O. INTEREST	\$
C. TAXES BASED ON INCOME	\$	P. DIVIDENDS	\$
D. CONTRIBUTIONS	\$	Q. ROYALTY INCOME (INTANGIBLE)	\$
E. NET OPERATING LOSS DEDUCTION	\$	R. OTHER (EXPLAIN)	\$
F. PYMTS. TO PARTNERS OR OWNERS	\$		
G. OTHER (EXPLAIN)	\$	S. TOTAL DEDUCTIONS	\$
H. TOTAL ADDITIONS	\$		

SCHEDULE Y - BUSINESS APPORTIONMENT FORMULA

	A. LOCATED EVERYWHERE	B. LOCATED IN VILLAGE	C. PERCENTAGE (B/A)
STEP 1. AVERAGE ORIGINAL COST OF PERSONAL PROPERTY	\$	\$	
GROSS ANNUAL RENTALS MULTIPLIED BY 8	\$	\$	
TOTAL OF STEP 1	\$	\$	%
STEP 2. TOTAL WAGES, SALARIES, COMMISSIONS AND OTHER COMPENSATION PAID TO ALL EMPLOYEES	\$	\$	%
STEP 3. GROSS RECEIPTS FROM SALES AND WORK SERVICES PERFORMED	\$	\$	%
STEP 4. TOTAL OF PERCENTAGES			%
STEP 5. AVERAGE PERCENTAGE (DIVIDE TOTAL PERCENTAGES BY NUMBER OF PERCENTAGES USED) Enter here and on line 4, schedule C			%