

**INDIVIDUAL - 20____
INCOME TAX RETURN
GREENWICH**

**ATTACH ALL COPIES OF W-2'S, 1099'S,
FEDERAL SCHEDULES & FEDERAL TAX RETURNS
TAXES WITHHELD FROM OTHER CITIES
LIMITED TO 1.00% ONLY.**

Tax Office Use Only : Tax Office Use Only :
TOTAL TAX LIABILITY _____
TOTAL TAX PAID W/ RETURN _____
CHECK # _____

Taxpayer's Social Security No.	
Home Telephone No.	Business Telephone No.
Spouse's Social Security No.	
Spouse's Name	
Home Telephone No.	Business Telephone No.

Name _____
And _____
Address _____

Filing Status		IF YOU HAVE MOVED DURING TAX YEAR - GIVE DATES	
<input type="checkbox"/> Single	<input type="checkbox"/> RESIDENT	INTO	/ /
<input type="checkbox"/> Married filing joint	<input type="checkbox"/> NON-RESIDENT	OUT OF	/ /
IF YOU RENT, PLEASE GIVE LANDLORDS INFORMATION			
NAME _____			
ADDRESS _____			

Income	Use Box 5 or Largest Wage Amount on W2		
1 Wages, salaries, etc.		1	_____
2 Other taxable income from Worksheet B		2	_____
3 Total taxable income (add lines 1 and 2)			3 _____

Tax and Credits			
4 Greenwich tax due before credits (1% of line 3)		4	_____
5 Estimated tax payments made to Greenwich		5	_____
6 Taxes withheld and paid to Greenwich - (DO NOT INCLUDE SCHOOL TAX SD 3905)		6	_____
7 Overpayment from prior year(s)		7	_____
8 Taxes withheld and paid to other localities (Maximum Credit 1.00%)		8	_____
9 Total credits (add lines 5 through 8)			9 _____

Refund (Note: Refund or tax due of less than \$10.00 not payable)			
10 If line 9 is greater than line 4, subtract line 4 from line 9. This is the amount you overpaid		10	_____
11 Amount of line 10 to be credited to next years estimate		11	_____
12 Amount of line 10 to be refunded (\$10.00 or greater)		12	_____

Tax Due (Issued if tax due is greater than)			
13 If line 4 is more than line 9, subtract line 9 from 4, this is the tax amount you owe		13	_____
14 Penalties and interest Late File / Pay _____ Interest _____		14	_____

Declaration of Estimate for 2018			
15 Estimated taxable income		15	_____
16 Estimated tax due. (multiply line 15 by 1%)		16	_____
17 Taxes to be withheld and paid to Greenwich and other localities (Limit 1%)		17	_____
18 Prior credit applied to estimated tax payments (From line 11)		18	_____
19 Net estimated tax due (subtract line 17 & 18 from 16)		19	_____
20 Minimum amount due for first quarter (multiply line 19 by .25)		20	_____

Amount You Owe			
21 Total amount due (add lines 13 and 14)		21	_____

THE UNDERSIGNED DECLARES THAT THIS RETURN (AND ACCOMPANYING SCHEDULES) IS A TRUE, CORRECT AND COMPLETE RETURN FOR THE TAXABLE PERIOD STATED AND THAT THE FIGURES USED HEREIN ARE THE SAME AS USED FOR FEDERAL INCOME TAX PURPOSES.

_____ Taxpayer's Signature	_____ Date
_____ Spouse's Signature	_____ Date
_____ Tax Preparer's Signature	_____ Date
(If other than taxpayer) Phone No. _____	

**MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF GREENWICH TAX DEPT.**

45 MAIN STREET
GREENWICH OH 44837

Phone 419-752-2441 Fax 419-752-1903
Website www.villageofgreenwich.com

We, the taxpayer, elect to authorize a return preparer to communicate with the tax administrator about matters pertaining to this return. By making this election, we, the taxpayer, authorizes the tax administrator to contact the return preparer concerning questions that arise during the processing of the return and authorizes the return preparer only to provide the administrator with information that is missing from the return, to contact the administrator for information about the processing of the return or the status of the taxpayer's refund or payments, and to respond to notices about mathematical errors, offsets, or return preparation that the taxpayer has received from the administrator and has shown to the return preparer.

WORKSHEET A - SALARIES AND WAGES (W-2 INCOME)

Column 1	Column 2	Column 3	Column 4	Column 5
Employer, City, State	Income From Each W-2	2106 Expenses, If Any Attach Schedule A	Greenwich Tax Withheld	Other City Tax Withheld* Limit 1%
A.				
B.				
C.				
D.				
E.				
F.				
G.				
H.				
Totals				

ENTER ON: Line 1 Line 2 Line 6 Line 8

* Other City Tax Withheld (Column 5) cannot exceed 1.00% of Income from Each W-2 (Column 2)
 Income Reduced by 2106 and earned in another city must also reduce the tax withheld for that city by the same percentage.
 If 2106 expenses, please include copy of federal forms 2106, 1040, and Schedule A
 You must have filed the 2106 with the IRS

WORKSHEET B - BUSINESS INCOME OR LOSS

ATTACH COPIES OF FEDERAL FORMS AND SCHEDULES USED TO COMPUTE RETURN

	Schedules	Column A Income/Loss from Federal Schedules	Column B Greenwich %	Greenwich Taxable Income Column A x Column B
1.	Schedule C - Business Income (Combine the net income or loss of all Schedules C's) (If taxes paid to other cities, attached other cities returns.)	\$	%	\$
2.	Schedule E - Rental Income (Residents enter profit/loss from ALL properties. Nonresidents enter only profit/loss from Greenwich properties.)	\$	100%	\$
3.	Schedule K-1 - Partnership Income (Residents enter profit/loss from entities that do not withhold Greenwich tax on entire distributive share)	\$	100%	\$
4.	Miscellaneous Income Gambling Income, 1099-MISC, W-2G, Schedules F, H and K, etc.	\$	%	\$
5.	NOL Carry Forward (Attach worksheet and enter as a loss)			\$
6.	Total Income/Loss (Combine Lines 1 through 5 and enter this amount on Pg. 1 Line 2)			\$

NOTE: The net loss from an unincorporated business activity may not be used to offset salaries, wages, commissions or other compensation. However, if a taxpayer is engaged in two or more taxable business activities to be included on the same return, the net loss of one unincorporated business activity may be used to offset the profits of another for purposes of arriving at overall net profits. **[Final Return Line 4 Cannot Be Less Than Zero, If You Have W-2 Income]**

*Losses resulting from business, rentals, and farming cannot be used to offset W2 Income

WORKSHEET C

EXEMPTION	I AM EXEMPT BECAUSE:	TAXPAYER _____	SPOUSE _____
	<input type="checkbox"/> I AM UNDER 18 YEARS OF AGE - BIRTH DATE _____ VERIFICATION IS NEEDED.	<small>If Applicable</small>	
	<input type="checkbox"/> I HAD NO TAXABLE INCOME IN 20__	<input type="checkbox"/> ACTIVE MILITARY* <input type="checkbox"/> UNEMPLOYED <input type="checkbox"/> DISABLED <input type="checkbox"/> SOCIAL SECURITY <input type="checkbox"/> PENSION* *VERIFICATION REQUIRED	
NOTE: IF YOU ARE EXEMPT- STOP HERE, SIGN, DATE AND MAIL YOUR RETURN.			

DECLARATION OF INDIVIDUAL ESTIMATED TAX FOR YEAR 20__
VOUCHER # 1 - DUE APRIL 15, 20__

NAME _____ SOC. SEC. # _____
ADDRESS _____

- 1) Total income subject to tax \$ _____ (Multiply by **1%**)\$ _____
- 2) Less income tax withheld by other city (Credit limited to **1%**)\$ _____
- 3) Total declaration (line 1 minus line 2)\$ _____
- 4) Payment amounts (line 3 times 0.25)\$ _____
- 5) Overpayment from previous year (if not refunded)\$ _____
- 6) 1st payment amount (line 4 minus line 5)\$ _____

CUT LINE

VOUCHER # 2 - DUE JUNE 15, 20__ - INDIVIDUAL ESTIMATED TAX

NAME _____ SOC. SEC. # _____
ADDRESS _____

- 1) Payment enclosed\$ _____
- 2) Check # _____
- 3) Prior amount paid\$ _____
- 4) Remaining Balance \$ _____
- Contact person _____ Phone # _____

**SEND PAYMENT TO: VILLAGE OF GREENWICH, INCOME TAX DEPT., 45 MAIN STREET
GREENWICH, OHIO 44837 PHONE# (419) 752-2441**

CUT LINE

VOUCHER # 3 - DUE SEPTEMBER 15, 20__ - INDIVIDUAL ESTIMATED TAX

NAME _____ SOC. SEC. # _____
ADDRESS _____

- 1) Payment enclosed\$ _____
- 2) Check # _____
- 3) Prior amount paid\$ _____
- 4) Remaining Balance \$ _____
- Contact person _____ Phone # _____

**SEND PAYMENT TO: VILLAGE OF GREENWICH, INCOME TAX DEPT., 45 MAIN STREET
GREENWICH, OHIO 44837 PHONE# (419) 752-2441**

CUT LINE

VOUCHER # 4 - DUE DECEMBER 15, 20__ - INDIVIDUAL ESTIMATED TAX

NAME _____ SOC. SEC. # _____
ADDRESS _____

- 1) Payment enclosed\$ _____
- 2) Check # _____
- 3) Prior amount paid\$ _____
- 4) Remaining Balance \$ _____
- Contact person _____ Phone # _____

**SEND PAYMENT TO: VILLAGE OF GREENWICH, INCOME TAX DEPT., 45 MAIN STREET
GREENWICH, OHIO 44837 PHONE# (419) 752-2441**

INDIVIDUAL GENERAL INSTRUCTIONS

WHO MUST FILE

- All residents of the Village of Greenwich, 18 years of age or older, are required to file.
- A non-resident having income in the Village of Greenwich from which city income tax has not been withheld and/or who is engaged in a business or profession in Greenwich or owns rental property located in Greenwich.
- All companies located in or doing business in Greenwich.

WHEN AND WHERE TO FILE

By April 18.

Mail completed return with all W-2s, 1099 misc. forms, and federal schedules applicable to:

GREENWICH VILLAGE INCOME TAX

45 MAIN STREET, GREENWICH, OHIO 44837

419-752-2441

FILING EXTENSIONS

Send a copy of your federal extension by April 18, and we will grant an extension of time not to exceed 6 weeks beyond the time granted by the IRS. If we do not receive a copy of the extension you will be considered delinquent and charged penalty and interest as shown on the return. Extensions will not be granted, if your account is in any way delinquent.

NET LOSSES

If a net loss has been incurred for the tax year a return must still be filed. Loss carry forwards are permitted.

REFUNDS

If any taxpayer has paid more tax than the Village is entitled to, a refund of the overpayment will be made, provided a proper claim for refund is filed. The net loss from an unincorporated business may not be used to offset salaries, wages, commissions and other compensation. Amount under \$10.00 will not be refunded within 3 years after the tax was paid or due.

MISCELLANEOUS

1. Payments to the Village of under \$10.00 do not have to be paid.
2. Double check your credit on line 5 of the return by calling 419-752-2441.
3. Contributions to 401Ks, IRAs or other deferred plans are not deductible.
4. SUB pay is village taxable.

EXEMPT INCOME (non inclusive)

Unemployment Compensation (not including SUB pay).

Social Security

Payouts from pensions

Military Pay (proof of military is required)

Alimony & Child Support

Interest

Dividends

Railroad Retirement

Disability

Sick Pay

EXEMPTION FOR TAXPAYERS

If your income is solely from a non-taxable source, please fill out worksheet C, sign, date, and mail the return.

INSTRUCTIONS FOR INCOME TAX RETURN

Married couples should file jointly. (Whether or not you do so for your Federal or State Returns)

Enter name and address and social security number(s) or Federal ID No.

Taxpayer status - indicate how you are filing by marking one of the boxes.

Residency - indicate if you live in the Village of Greenwich; also if you moved into or out of the village during the year.

Line 1 Total wages (include sub pay, sick pay & deferred income) (From Worksheet A)

Line 2 Other taxable income (From Worksheet B)

Line 3 Total Lines 1 & 2 - Losses on Line 2 - cannot offset losses on Line 1

Line 4 Greenwich Income Tax 1%

Line 5 Estimated tax payments made to Greenwich

Line 6 Taxes withheld and paid to Greenwich (**DO NOT INCLUDE SCHOOL TAX SD 3905**)

Line 7 Overpayment from prior years

Line 8 Taxes withheld and paid to other localities **maximum credit 1.00%**

Line 9 Total credits add lines 5 through 8

Line 10 Amount overpaid

Line 11 Amount of Line 10 credited to next year estimate

Line 12 Amount to be refunded (\$10.00 or greater)

Line 13 Amount of tax owed

Line 14 Late File/Pay Penalties \$25.00 per month, maximum \$150.00, 5% per annum and additional 15% on any unpaid balance.

DECLARATION OF ESTIMATE

(Line 16 - 20) self-explanatory

Line 21 Total amount due (add lines 13 and 14)

**NOTICE
TAX CREDIT
CHANGE**

**Use Box 5 or
Largest Wage
Amount on W2**

WORKSHEET C - EXEMPTION (Check correct boxes and return signed form)

SIGN FORM AND ATTACH ALL W2S, 1099 MISC AND FEDERAL SCHEDULES