

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

**ATTACH ALL COPIES OF W-2'S, 1099'S,
FEDERAL SCHEDULES & FEDERAL TAX RETURNS**

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. _____

Filing Status

Single

Married filing joint

RESIDENT

NON-RESIDENT

IF YOU HAVE MOVED DURING TAX YEAR - GIVE DATES

INTO / /

OUT OF / /

IF YOU RENT, PLEASE GIVE LANDLORDS INFORMATION

NAME _____

ADDRESS _____

Name _____

And _____

Address _____

Income

- 1 Wages, salaries, etc.
- 2 Other taxable income from Worksheet B
- 3 Total taxable income (add lines 1 and 2)

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

1 _____

2 _____

Tax and Credits

- 4 Greenwich tax due
- 5 Estimated tax payments made to Greenwich
- 6 Taxes withheld and paid to Greenwich - (DO NOT INCLUDE SCHOOL TAX SD 3905)
- 7 Overpayment from prior year(s)
- 8 Total credits (add lines 5 through 7)

5 _____

6 _____

7 _____

Refund (Note: Refund or tax due of less than \$10.00 not payable)

- 9 If line 8 is greater than line 4, subtract line 4 from line 8. This is the amount you overpaid
- 10 Amount of line 9 to be credited to next years estimate
- 11 Amount of line 9 to be refunded (\$10.00 or greater)

10 _____

11 _____

Tax Due (Issued if tax due is greater than)

- 12 If line 4 is more than line 8, subtract line 8 from 4, this is the tax amount you owe
- 13 Penalties and interest **Late File / Pay** _____ **Interest** _____

12 _____

13 _____

Declaration of Estimate for 20____

- 14 Estimated taxable income
- 15 Estimated tax due. (multiply line 14 by **1%**)
- 16 Taxes withheld and paid to Greenwich from other localities
- 17 Prior credit applied to estimated tax payments (From line 10)
- 18 Net estimated tax due (subtract line 16 & 17 from 15)
- 19 Minimum amount due for first quarter (multiply line 18 by .25)

14 _____

15 _____

16 _____

17 _____

18 _____

19 _____

Amount You Owe

- 20 Total amount due (add lines 12, 13 and 19)

20 _____

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.

**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

Taxpayer's Signature Date

Spouse's Signature Date

Tax Preparer's Signature Date

(If other than taxpayer) Phone No. _____

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
Employer, City, State	Income From Each W-2	2106 Expenses, If Any Attach Schedule A	Greenwich Tax Withheld
A.			
B.			
C.			
D.			
E.			
F.			
G.			
H.			
Totals			

ENTER ON:

Line 1

Line 2

Line 6

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

I AM EXEMPT BECAUSE:

TAXPAYER _____ SPOUSE _____
If Applicable

I AM UNDER 18 YEARS OF AGE - BIRTH DATE _____ VERIFICATION IS NEEDED.

I HAD NO TAXABLE INCOME IN 20____

ACTIVE MILITARY* UNEMPLOYED DISABLED
 SOCIAL SECURITY PENSION* *VERIFICATION REQUIRED

NOTE: IF YOU ARE EXEMPT- STOP HERE, SIGN, DATE AND MAIL YOUR RETURN.

EXEMPTION