(Individual)

City of Whitehall, Income Tax Division

## **Declaration of Estimated City Income Tax**

(also serves as Voucher 1)

| FOR THE YEAR |   |
|--------------|---|
| BEGINNING    | _ |
| ENDING       |   |

|   |   |  |                                     |             |           | Check th  | is box if  | f 🗆 🗗  | MENDED   |  |
|---|---|--|-------------------------------------|-------------|-----------|---|--|--|--|--|
| Name  |   | Social   | Security No.                        |             |           | Tax ye  | ar   |  |  |  |
|   |   |  | ·                                   |             |           | 1 437, 75   | <u> </u>   |  | <u>-                                      </u> |  |
| If a joint return, s  | pouse's name  | Spouse's Social Security No.   |                                     |             |           | City of Residence   |  |  |  |  |
| Address   |   |  |                                     |             |           | Current Employer's Name   |  |  |  |  |
| City  | State Zip Code  |  |                                     |             |           | Current E   | Current Employer's Address   |  |  |  |
|   |   |  |                                     |             |           | List Oth  | or Emn   | olovor(s) or P   | usinoss(os), and                               |  |
| Trade Name:   |   | Nature of Business:  |                                     |             |           | List Other Employer(s) or Business(es) and Address(es)          |  |  |  |  |
| 1.  | OF INCOME:  | 5.   |                                     |             |           | □ Did you file a City return last year? □ Yes □ No              |  |  |  |  |
| 2.  |   | 6.   |                                     |             |           | _ u res u No  |  |  |  |  |
| 3.  | 7.  |  |                                     |             |           | If YES, from what address?                                      |  |  |  |  |
| 4.  | 8.  |  |                                     |             |           |   |  |  |  |  |
|   |   |  |                                     |             |           |   |  |  |  |  |
| Column<br>A   | Column B Estimated Income From Wages, Salaries, Commission Etc. | Column C Estimated Income From Net Profits, Rents and Other Taxable Income | Column D Total Net Estimated Income | Tax<br>Rate |           | btimated Tax Due  (W-2) Paid partnership directly to Cit        |  | olumn F<br>s tax withheld<br>-2) Paid by a<br>hership or paid<br>y to City where<br>ome Earned | Column G Estimated Tax Due                     |  |
| Whitehall   |   |  |                                     | 2.5%        |           |   |  |  |  |  |
| 1. TOTAL NE   | ET ESTIMATED TAX DUE  | (must equal the total  | of Column G)                        |             |           |   |  | 1.   |  |  |
| 2. LESS: ove  | erpayment credits from pr                                       | evious year returns  |                                     | 2           |           |   |  |  |  |  |
| ·   | revious declaration payme                                       | ,  | eclaration)                         | 3.          |           |   |  |  |  |  |
| 3A. TOTAL CREDITS (add Lines 2 and 3)   |   |  |                                     |             |           |   |  |  |  |  |
| 4. UNPAID BALANCE DUE (subtract Line 3A from Line 1 Due on or before APRIL 15 <sup>TH</sup> – (a minimum 25% of Line 1 due) |   |  |                                     |             |           |   |  |  |  |  |
|   |   |  |                                     |             |           | $\rightarrow \rightarrow \rightarrow \rightarrow \rightarrow -$ | $\rightarrow \rightarrow$  | 5.   |  |  |
| 6. ESTIMATED TAX BALANCE PAYABLE (payable in equal installments for each quarter) use Payment Voucher  6.                   |   |  |                                     |             |           | (June, September, December)                                     |  |  |  |  |
| SIGNAT  | ΓURE  |  |                                     | •           |           |   |  |  |  |  |
|   | declaration has been examicity income tax for the period        |  | est of my knowledge                 | e and beli  | ef is a t | rue, correct  | and com  | nplete declarati   | on of estimated                                |  |
| Sign  | Signature   | Da   |                                     |             |           | This Form is Vo   |  |  |  |  |
| Here  | Spouse's<br>Signature   |  |                                     |             | Date      |   | tax payments, you are required to file this form. Make a copy of this form for your records. |  |  |  |
| MAILING<br>INFORMAT   | ION   |  |                                     |             |           |   |  |  |  |  |