Whitehall Income Tax Division 360 S Yearling Rd Whitehall OH 43213-1894 (614) 237-9803 Fax (614) 237-7902

Website: www.whitehall-oh.us

PROVIDE NAME AND CURRENT ADDRESS:

## **2014 INDIVIDUAL W-1040** WHITEHALL CITY INCOME TAX RETURN

**DUE ON OR BEFORE: APRIL 15, 2015** 

FILING REQUIRED EVEN IF NO TAX DUE

SOCIAL SECURITY #

FOR OFF	FICE	US	ΕO	NLY	
DATE REC'D			INITI	IALS	
PMT \$ W/FORM		CHEC	K#		
CASH FAX MAIL			C⊦ DB		
DATE	INIT.	ВА	TCH #		
TO PAY BY CREDIT CARD ONLINE OR BY PHONE					
DISCOVER Mastercard VISA					
www.white (87	ehall-0 7) 360			/htm	
Paymentus, the service provider, charges a nominal fee for this service					

(LIST BOTH NAMES AND S	OCIAL SECURITY NUMBER IF FILING JOINTLY)		FAX MAIL OFC CDB U/DR
Account Number		SPOUSE SOCIAL SECURITY #	DATE INIT. BATCH #
Name			TO PAY BY CREDIT CARD
Spouse		Resident   Date moved in	
Address		Non Resident ☐ ☐ Date moved out  Sole Proprietor ☐ ☐	moster viral
		Provide Old Address:	www.whitehall-oh.us.tax/htm (877) 360-3472
City/State/Zip		City of Residence	Paymentus, the service provider charges a
Email		City of Employment	nominal fee for this service
FILING STATUS	☐ Single☐ Married filing joint return (even if only one☐ Married filing separate return. Enter spous		•
INCOME	<ol> <li>2. 2106 Expenses. Complete worksheet A of the state of th</li></ol>	nplete worksheet A on reverse	1 \$
TAX	8. WHITEHALL INCOME TAX. MULTIPLY LI	NE 7 BY 2.5%	8 \$
TAX WITHHELD, PAYMENTS AND CREDITS	***CREDITS MUST BE SUBSTANTIATED V 9. Whitehall income tax withheld. From W-2 10. Prior year credits	2 and worksheet A on reverse	9 \$ 10 \$ 11 \$ 12 \$
BALANCE DUE, REFUND OR CREDIT	17. Interest: '14 F (%) \$; '14	pymt. pen.  payment penalty (10% of line 15) \$ C.  Est. Pmts (%) \$  ance due if less than \$5.00)	'14 Decl. (\$10) 16 \$ 17 \$ 18 \$ 20 \$
ESTIMATE FOR 2015 * * * * DUE 4-15-2015 NO EXTENSION ALLOWED	23. Subtract any estimated income tax to be 24. Balance of city income tax declared. Sub 25. Tax due before credits. Enter at least 22. 26. Less credits. Enter line 21 from above 27. Penalty (\$10): \$ Interest	Multiply by tax rate withheld or paid to other cities	TAX, NO ESTIMATE REQUIRED. 20 of 2.5% (.025)
TAX DUE	29. Enter balance due from line 18 above (No 30. <b>TOTAL TAX DUE. ADD LINES 28 &amp; 29.</b>	o tax due if less than \$5.00)	
☐ If this return was p	te should be paid with this return. Use enclose prepared by a tax practitioner, check here if we AVE EXAMINED THIS RETURN INCLUDING A ND BELIEF, IT IS TRUE, CORRECT AND COMF	may contact him/her directly with question CCOMPANYING W-2S, SCHEDULES ANI	ons regarding the preparation of this return.
SIGNATURE OF PREPARER	, IF OTHER THAN TAXPAYER DATE	SIGNATURE OF TAXPAYER	DATE

WORKSHEET A	SA	LARIES,V	VAGES, TI	PS AND (	OTHER EMPLOYEE CO	<b>OMPEN</b>	ISATION	
COLUMN 1	COLUM	IN 2	COLU	JMN 3	COLUMN 4	С	OLUMN 5	
CITY WHERE EMPLOYED	INCOME FRO			XPENSES, WHITEHALL TAX *( ANY WITHHELD			OTHER CITY TAX WITHHELD	
A.								
В.								
C.								
D.								
E. TOTALS								
ENTER ON:	PAGE 1 L	INE 1	PAGE 1	LINE 2	PAGE 1 LINE 9	PAG	SE 1 LINE 12	
*Income reduced by 2106 and	earned in another	city must also	reduce the tax	withheld for t	hat city by the same percentage.			
1. SCHEDULE C - SELF EM	IPLOYMENT INCO	OME (Must rep	oort net profit a	nd/or loss) (Atta	ach Federal Schedule C)			
Business Name				Business Ac	ddress			
Kind of Business				Date Started	d Date	e Ended _		
					ng credit for tax paid to another hitehall tax.)	\$		
B. Percentage Amount Allow	able to the Munic	ipality (Attach	allocation calcu	ılation)		\$		
C. Amount subject to tax. N	/lultiply A times E	3			To	tal (1) \$		
taxpayer is engaged in two or r	nore taxable busi eparately reportab	ness activities	to be included	on the same re	ges, commissions or other competurn, the net loss of one unincorping entity) may be used to offset the	orated bus	siness activity	
2. SCHEDULE E - INCOME	FROM RENTS [	Attach Federa	al Schedule E(	s)]				
KIND AND EXACT LOCA (LOSSES WITHOUT EXACT LOCA		LOWED)	NET PROFIT OR (LOSS)		KIND AND EXACT LOCATION OF PROPER WITHOUT EXACT LOCATION WILL BE DIS		NET PROFIT OR (LOSS)	
TENANT NAME				TENANT NAME				
ADDRESS				ADDRESS				
CITY, STATE, ZIP				CITY, STATE, ZIF				
TENANT NAME				TENANT NAME				
ADDRESS				ADDRESS				
CITY, STATE, ZIP				CITY, STATE, ZIF				
Please see unincorporated business activ	rity in instructions.			List on a separate	e sheet if more than 4 properties			
3. SCHEDULE 0 - OTHER I	NCOME NOT INC	CLUDED IN SO	CHEDULES C	OR E (SUBSTA	ANTIATION MUST BE ATTACHED	)		
as well as copies of other city r MISCELLANEOUS INCOME recei	eturns to substan ved such as lottery.	tiate credit aga /gambling winni	ainst tax due W ings, tips (Not alı	hitehall on the eady included in	(attach copies of all applicable so same income. n wages) prizes and cash awards resi Misc, Sub-contract income, etc., that	ulting from	work-related activitie	
RECEIVED FROM NAME	/I.D. NUMBER	(APPLICA			AND/OR LOCATION OCATIONS WILL BE DISALLOW	ED)	AMOUNT	
A.								
В.								
					To	tol (2) &		
						tal (3) \$		
				ТОТА	L OTHER INCOME (Add sections Enter on Page 1, sec			
SCHEDULE X - ADJUSTME	NT TO INCOME (	Part year residen	nts and income no	t subject to tax)				
Part year residents (Wages earı Whitehall or actual earnings wit				ated income -	take total income divided by 12 x	# of month	ns not a resident of	
Under 18 for all or part of the y Employment dates://_ to					of age. Birth date: / /_ eyed for each W2 including month, o	day & year.	COLUMN 1	
	EXP	LANATION					DEDUCTIONS	
Total adjustment							·	

MAKE CHECK OR MONEY ORDER TO:

CITY OF WHITEHALL, INCOME TAX DIVISION 360 SOUTH YEARLING ROAD WHITEHALL, OHIO 43213-1894 (614) 237-9803, FAX (614) 237-7902

## CITY OF WHITEHALL, OHIO **QUARTERLY NOTICE OF INSTALLMENT DUE ON ESTIMATED TAX DECLARED**

PAID CHECK WILL BE YOUR RECEIPT - DO NOT REMIT CASH BY MAIL

**VOUCHER 4** 

INDIVIDUALS - DUE JANUARY 31 OTHERS - DUE 15TH DAY OF 12TH MONTH

NAME(S) AND ADDRESS:	SOCIAL SECURITY NUMBER OR FEDERAL TAX
Account Number	TOTAL ESTIMATED
Name	TAX DEGLARED: \$
Spouse	QUARTERLY PAYMENT ENCLOSED:
Address	<b>—</b>
City/State/Zip	TO PAY BY CREDIT CARD ONLI
Email	DISCOVER MasterCard MasterCard
	www.whitehall-oh.us.tax/htm
2.4 NOTICY INCOME TAY DIVISION DECAMPLY OF ANY CHANGE IN OWNERDUID OF MAME AND ADDRESS SHOWN ADDRESS	Paymentus, the service provider, charges a r
Q-1 NOTIFY INCOME TAX DIVISION PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS SHOWN ABOVE.	

X I.D. NUMBER:

**NE OR BY PHONE** 

• (877) 360-3472

nominal fee for this service

MAKE CHECK OR MONEY ORDER TO:

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**VOUCHER 3** 

INDIVIDUALS - DUE OCTOBER 31 OTHERS - DUE 15TH DAY OF

THE 9TH MONTH

NAME(S) AND ADDRESS:	
Account Number	
Name	
Spouse	
Address	
City/State/Zip	
Email	

Q-1 NOTIFY INCOME TAX DIVISION PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS SHOWN ABOVE.

SOCIAL SECURITY NUMBER OR FEDERAL TAX I.D. NUMBER:

TOTAL ESTIMATED TAX DECLARED:

\$

QUARTERLY PAYMENT FNCI OSFD:

\$

TO PAY BY CREDIT CARD ONLINE OR BY PHONE



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MAKE CHECK OR MONEY ORDER TO:

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**VOUCHER 2** 

**INDIVIDUALS - DUE JULY 31** OTHERS - DUE 15TH DAY OF

THE 6TH MONTH

•		
	NAME(S) AND ADDRESS:	
	Account Number	
	Name	
	Spouse	
	Address	
	City/State/Zip	
	Email	

SOCIAL SECURITY NUMBER OR FEDERAL TAX I.D. NUMBER:

TOTAL ESTIMATED TAX DECLARED:

\$

QUARTERLY PAYMENT

\$

TO PAY BY CREDIT CARD ONLINE OR BY PHONE





www.whitehall-oh.us.tax/htm • (877) 360-3472

Paymentus, the service provider, charges a nominal fee for this service

Q-1 NOTIFY INCOME TAX DIVISION PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS SHOWN ABOVE