## ATTACH W-2'S HERE

NAME AND ADDRESS OF PREPARER

Whitehall Income Tax Division 360 S Yearling Rd Whitehall OH 43213-1894 (614) 237-9803 Fax (614) 237-7902 Website: www.whitehall-oh.us

## **2015 INDIVIDUAL W-1040** WHITEHALL CITY INCOME TAX RETURN

FOR OFFICE USE ONLY

INITIALS

TELEPHONE NUMBER

**DUE ON OR BEFORE: APRIL 18, 2016** FILING REQUIRED EVEN IF NO TAX DUE

Website: www.white	hall-oh.us	REQUIRED EVEN IF NO TAX DUE	PMT \$ CHECK # W/FORM			
	CURRENT ADDRESS: COCIAL SECURITY NUMBER IF FILING JOINTLY)	SOCIAL SECURITY #	CASH CK MO CHG 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				
•		Non Resident ☐ Date moved out Sole Proprietor ☐	DISCOVER Mastercard VISA			
Address		Provide Old Address:				
City/State/Zip		City of Residence				
Email		City of Employment	Paymentus, the service provider, charges a nominal fee for this service			
FILING STATUS	• • • • • • • • • • • • • • • • • • • •	ne had income). Did you file a joint or separat use's social security number above and full r				
NCOME	<ol> <li>Total W-2 wages. For multiple W-2s, c</li> <li>2106 Expenses. Complete worksheet a</li> <li>TAXABLE WAGES. SUBTRACT LINE 2</li> <li>Other income. From schedule C, E or a</li> <li>TOTAL INCOME. ADD LINES 3 AND 4</li> <li>Adjustments. From schedule X on reverse.</li> </ol>	OF INCOME, PG. 1 OF 1040 MUST BE ATTOM properties on reverse.  A on reverse. See instructions				
TAX	8. WHITEHALL INCOME TAX. MULTIPLY	LINE 7 BY 2.5%	8 \$			
TAX MITHHELD, PAYMENTS AND CREDITS	9. Whitehall income tax withheld. From W. 10. Prior year credits	WITH W-2S OR OTHER CITY RETURNS.  /-2 and worksheet A on reverse	10 \$ 11 \$ 12 \$ 13 \$			
BALANCE DUE, REFUND DR CREDIT	PENALTY/INTEREST (see instructions 16. A. Late filing penalty (\$25) B. Late 17. Interest: '15 F (%) \$; '18. Total due. Carry to line 28 below (No b 19. OVERPAYMENT. (line 8 less line 14; if 20. AMOUNT FROM LINE 19 TO BE REFU	14, enter balance due here	15 Decl. (\$10) 16 \$ 			
	DECLARATION OF ESTI	MATED TAX FOR 2016 DUE APRIL 18	, 2016 VOUCHER 1			
ESTIMATE FOR 2016 * * DUE 4-18-2016 NO EXTENSION ALLOWED	22. Total income subject to tax \$23. Subtract any estimated income tax to be 24. Balance of city income tax declared. S 25. Tax due before credits. Enter 25% of li 26. Less credits. Enter line 21 from above. 27. Penalty (15%): \$ Interest.	Multiply by tax rate to withheld or paid to other cities	of 2.5% (.025)			
TAX DUE		No tax due if less than \$5.00)				
ן If this return was ן DECLARE THAT I H	te should be paid with this return. Use enclosorepared by a tax practitioner, check here if vIAVE EXAMINED THIS RETURN INCLUDING ND BELIEF, IT IS TRUE, CORRECT AND CO	ve may contact him/her directly with question ACCOMPANYING W-2S, SCHEDULES AND	ns regarding the preparation of this return.			

TELEPHONE NUMBER

SIGNATURE OF SPOUSE (IF JOINT RETURN)

WORKSHEET A	N SA	LARIES,V	VAGES, TI	PS AND C	OTHER EMPLOYEE CO	)MPEN	SATION	
COLUMN 1	COLUM	IN 2	COLU	JMN 3	COLUMN 4	CC	DLUMN 5	
CITY WHERE EMPLOYED	INCOME FRO			PENSES,	WHITEHALL TAX WITHHELD	*OTHER CITY TAX WITHHELD		
A.								
B.								
C.								
D.								
E. TOTALS								
ENTER ON:	PAGE 1 L	INE 1	PAGE 1	LINE 2	PAGE 1 LINE 9	PAGI	E 1 LINE 12	
*Income reduced by 2106 and	earned in another	city must also	reduce the tax	withheld for th	hat city by the same percentage.			
1. SCHEDULE C - SELF EM	IPLOYMENT INCO	OME (Must rep	ort net profit a	nd/or loss) (Atta	ach Federal Schedule C)			
Business Name				Business Ac	ddress			
Kind of Business				Date Started	d Date	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	Multiply A times E	3			Tot	tal (1) \$ .		
taxpayer is engaged in two or r	more taxable busi eparately reportab	ness activities	to be included	on the same re	iges, commissions or other compe eturn, the net loss of one unincorp ling entity) may be used to offset the	orated busi	ness activity	
2. SCHEDULE E - INCOME	FROM RENTS [	Attach Federa	al Schedule E(	s)]				
KIND AND EXACT LOC (LOSSES WITHOUT EXACT LOC		LOWED)	NET PROFIT OR (LOSS)		KIND AND EXACT LOCATION OF PROPERT 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, ZIP				
Please see unincorporated business activ	vity 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	returns to substan ved such as lottery.	tiate credit aga /gambling winni	ainst tax due W ings, tips (Not alı	hitehall on the eady included ir	(attach copies of all applicable so same income. n wages) prizes and cash awards resu Misc, Sub-contract income, etc., that	ulting from w	ork-related activities	
RECEIVED FROM NAME	:/I.D. NUMBER	(APPLICA			AND/OR LOCATION OCATIONS WILL BE DISALLOW	ED)	AMOUNT	
A.								
B.								
					Tot	tal (3) \$ .		
				TOTA	L OTHER INCOME (Add sections Enter on Page 1, sect			
SCHEDULE X - ADJUSTME	NT TO INCOME (	Part year residen	its and income no	t subject to tax)				
Part year residents (Wages earn Whitehall or actual earnings wit				ated income –	take total income divided by 12 x	# of months	s 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								