

INDIVIDUAL
VILLAGE OF MALINTA, OHIO
INCOME TAX RETURN

Paid with this Return

Income Tax

\$ \_\_\_\_\_

Malinta, Ohio

January 1, 20\_\_\_\_ - December 31, 20\_\_\_\_ or fiscal period:

Processed by \_\_\_\_\_

20\_\_\_\_ to \_\_\_\_\_ 20\_\_\_\_

NAME:

Your name, or trade name under which you operate, and address are as they appear on our records. Make any necessary corrections.

Address:

City:

Social Security No. - Taxpayer .....

Spouse .....

SCHEDULE A

Enter TOTAL wages, salaries, commissions and other compensation received in the tax period from January 1, 20\_\_\_\_ to December 31, 20\_\_\_\_ BEFORE PAYROLL DEDUCTIONS. Also enter amount of City Income Tax withheld.

Table with 5 columns: (1) Name of Employer, (2) Where Employed (City and State), (3) Malinta Income Tax Withheld, (4) City Tax Paid in Other Cities, (5) Gross Earnings Before Deductions. Rows include Taxpayer's Earnings and Spouse's Earnings.

ATTACH W-2 OR FEDERAL FORMS HERE

- 1. Gross Compensation (Total of Col. 5, Schedule A)
2. Net Profit from Rentals - (from Federal Income Tax Return)
3. Net Profit from Business or Profession - (from Federal Income Tax Return)
4. Income from Partnership, etc. including farms - (from Federal Income Tax Return)
5. Total Income subject to Malinta Income Tax (Total Lines 1, 2, 3, 4)
6. Malinta Tax, 1% of Item 5
7. Payments of 20\_\_\_\_ Declaration of Estimated Malinta Income Tax
8. Malinta Income Tax withheld from my wages (Total Col. 3, Schedule A)
9. Income tax paid another City (Total Col. 4, Schedule A - Tax Credit cannot exceed 1% of individual gross earnings in other city. Tax credit cannot exceed tax liability shown on line 6)
10. Other credits allowed - Explain
Total credits claimed
11. Balance of Tax Due (make check to: Village of Malinta - Income Tax)
12. If your payments (Item 7) are larger than your tax (Item 6) enter Overpayment Here
13. Use X to indicate whether overpayment is to be refunded to you or applied against your 20\_\_\_\_ Declaration of Estimated Tax

CERTIFICATION

I declare that the information contained in this tax return has been examined by me and to the best of my knowledge and belief, is a true and complete return.

Signature of Firm or Person, other than Taxpayer, preparing return Date Signature of Taxpayer Date