

File with  
INCOME TAX DEPARTMENT  
371 N. Linn Street  
P.O. Box 410  
ST. Henry, OH 45883-0410

Make Checks and Money Orders  
Payable To  
St. Henry - Income Tax

Fiscal Period \_\_\_\_\_ to \_\_\_\_\_  
CALENDAR YEAR TAXPAYERS FILE ON OR BEFORE APRIL 15  
FISCAL and PARTIAL YEARS WITHIN 105 DAYS of end of period

IF ADDRESS IS INCORRECT, PLEASE MAKE CORRECTION

# INCOME TAX RETURN VILLAGE OF ST. HENRY

Residency Status (check one)

- Resident
- Non-Resident
- Partial Year Resident  
From \_\_\_\_\_ To \_\_\_\_\_

Soc. Sec. # H. \_\_\_\_\_  
 Soc. Sec. # W. \_\_\_\_\_  
 Fed. I.D. # \_\_\_\_\_

## DUE APRIL 15TH

1. Gross Income, Wages, Salaries and other employee compensation **(Attach all W-2's and 1099's)** . . . \$ \_\_\_\_\_
2. Income Other Than Wages (Attach Appropriate Schedules) (see back of sheet) . . . . . \$ \_\_\_\_\_
3. Adjustments From Schedule "X" (Back of Sheet) . . . . . \$ \_\_\_\_\_
4. Net Operating Loss Deduction (Back of Sheet) . . . . . \$ \_\_\_\_\_
5. TOTAL INCOME (Total 1,2,3 and 4) . . . . . \$ \_\_\_\_\_
6. Amount Allocable to Municipality - If Schedule "Y" Is Used (Back of Sheet) . . . . . %
7. Total Taxable Income (Line 1, 5 or 6) . . . . . \$ \_\_\_\_\_
8. Municipal Tax Due **(Tax Rate - 1.5%)** . . . . . \$ \_\_\_\_\_
9. Credits
  - A. Local City Tax Withheld . . . . . \$ \_\_\_\_\_
  - B. Estimated Tax Paid and/or Credit . . . . . \$ \_\_\_\_\_
  - C. Other City Tax Withheld (see paragraph 6 of Gen. Instructions) \$ \_\_\_\_\_
  - D. Total Credits Allowable (Total 9A, 9B, 9C) . . . . . \$ \_\_\_\_\_
10. Tax Due (Line 8 Less 9D) . . . . . \$ \_\_\_\_\_
11. A. Penalty \$ \_\_\_\_\_
- B. Interest \$ \_\_\_\_\_
12. Total Amount Due (Make Check Payable to Village of St. Henry) . . . . . \$ \_\_\_\_\_
13. AMOUNT PAID WITH THIS RETURN . . . . . \$
14. Overpayment (Line 9D Less 8) . . . . . \$ \_\_\_\_\_
  - A. Credited to Next Year's Tax . . . . . \$ \_\_\_\_\_
  - B. Refunded . . . . . \$ \_\_\_\_\_

PAY THIS AMOUNT ▲

**NO TAXES OR REFUNDS OF LESS THAN \$10.00 WILL BE COLLECTED OR REFUNDED.**

### DECLARATION OF ESTIMATED TAX FOR YEAR 20 \_\_\_\_\_

1. Total estimated income subject to tax \$ \_\_\_\_\_ . Multiply by tax rate 1.5% for gross tax . . . . . \$ \_\_\_\_\_
2. Less credits:
  - A. Overpayment . . . . . \$ \_\_\_\_\_
  - B. Estimated income to be withheld . . . . . \$ \_\_\_\_\_
  - C. Previous payment, if this is an amended estimate . . . . . \$ \_\_\_\_\_
  - D. Total Credits . . . . . \$ \_\_\_\_\_
3. Net tax due (Line 1 Less Line 2D) . . . . . \$ \_\_\_\_\_
4. Attach check or M.O. for AMOUNT DUE . . . . . \$ \_\_\_\_\_  
(At least 22.5 percent of Line 3)

IF PAYING AN ESTIMATE - PAY THIS AMOUNT ▲

The undersigned declares that this return (and accompanying schedules) is 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.

Signature of Taxpayer or Agent \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
 Address of Above \_\_\_\_\_  
 Phone Number of Above \_\_\_\_\_

Signature of Person Preparing Return \_\_\_\_\_ Date \_\_\_\_\_  
 Address of Above \_\_\_\_\_  
 Phone Number of Above \_\_\_\_\_

**BUSINESS INCOME** ALL APPROPRIATE SCHEDULES MUST BE ATTACHED. A RETURN IS NOT COMPLETE UNLESS SUCH SCHEDULES OR FACIMILE OF ARE ATTACHED.

**LINE 2-INCOME OTHER THAN WAGES:**

**TOTAL**

Schedule C, E, and/or F	_____
Schedule 4797 (depreciation recapture)	_____
Schedule 1099 Misc, K-1	_____
Schedule 1041, 1065, 1120 or 1120S	_____
Schedule MISC (from line 21 on 1040)	_____
Schedule OTHER	_____

**NET TOTAL INCOME OTHER THAN WAGES TO PAGE 1, LINE 2**

**SCHEDULE X ADJUSTMENTS TO INCOME: USE ONLY IF THESE ITEMS WERE INCLUDED IN PAGE 1, ITEM 2.**

**Add: Items Not Deductible**

**Deduct: Items Not Taxable/Items Not Deductible on Federal Forms**

A. Federally deducted losses from IRC 1221 or 1231 property dispositions	_____	N. Federally reported income and gains from IRC 1221 or 1231 property dispositions except to the extent the income and gains apply to those described in IRC 1245 or 1250	_____
B. Five percent of intangible income reported in letter O, except that from IRC 1221 property dispositions	_____	O. Federally reported intangible income such as, but not limited to interest, dividends, and patent and copyright income	_____
C. Federally deducted taxes based on income	_____	P. Amount of Federal Tax Credits to the extent they have reduced corresponding operating expenses	_____
D. Guaranteed payments or accruals to or for current or former partners or members	_____	Q. IRC Section 179 Expense	_____
E. Federally deducted dividends, distributions, or amounts set aside for, credited to, or distributed to REIT or RIC investors	_____	R. Partnership, S corp, LLC charitable contributions	_____
F. Federally deducted amounts paid or accrued to or for qualified self-employed retirement plans, health insurance plans, and life insurance plans for owners or owner-employees of non-C corporation entities	_____	S. Other	_____
G. Rental activities by partnership, S corp, LLC	_____	T. Total Lines N through S. Deductions \$	_____
H. Other	_____	Total From Line I. Additions \$	_____
I. Total Lines A through H. \$	_____	Total Schedule X (Enter As Line 3 On Front) \$	_____

**LINE 4 - NET OPERATING LOSS DEDUCTION FROM PRIOR VILLAGE RETURNS**

Fifth Preceding Year	< _____ >
Forth Preceding Year	< _____ >
Third Preceding Year	< _____ >
Second Preceding Year	< _____ >
Preceding Year	< _____ >
<b>NET TOTAL OPERATING LOSS TO PAGE 1, LINE 6</b>	<b>TOTAL &lt; _____ &gt;</b>

**SCHEDULE Y BUSINESS ALLOCATION FORMULA (SEE INSTRUCTIONS)**

	A. Located Everywhere	B. Located in the Municipality	C. Percentage
Step 1. Average value of real and tangible personal property	\$ _____	\$ _____	_____ %
Gross annual rentals multiplied by 8	\$ _____	\$ _____	_____ %
Total step 1	\$ _____	\$ _____	_____ %
Step 2. Gross receipts from sales and work or services performed (See instr.)	\$ _____	\$ _____	_____ %
Step 3. Total wages salaries, commissions, and other compensation paid	\$ _____	\$ _____	_____ %
Step 4. Total percentages			_____ %
Step 5. Average percentage (Divide Total percentages by number of percentages used - enter on Line 5)			\$ _____ %