

2019

# VILLAGE OF WHITEHOUSE

**INCOME TAX RETURN DUE ON OR BEFORE APRIL 15**  
OR WITHIN THREE MONTHS AND FIFTEEN DAYS AFTER THE CLOSE

OF A FISCAL YEAR OR PERIOD OR 105 DAYS AFTER END OF FISCAL PERIOD FOR CALENDAR  
YEAR ENDING DECEMBER 31 OR FOR THE \_\_\_\_\_ MONTHS ENDING \_\_\_\_\_  
FOR USE OF ALL TAXPAYERS SUBJECT TO WHITEHOUSE INCOME TAX



**COMMISSIONER OF TAXATION**  
6925 PROVIDENCE ST.  
PO BOX 2476  
WHITEHOUSE, OH 43571  
PHONE: (419) 877-5383  
FAX: (419) 877-5635

**OFFICE USE ONLY**

AMOUNT PAID \$ \_\_\_\_\_  
CHECK NO. \_\_\_\_\_  
CASH RECEIPT NO. \_\_\_\_\_  
 REFUND  
 CARRYOVER  
 FINAL RETURN  
AUDIT DATE \_\_\_\_\_

CHECK BOX IF ADDRESS CHANGE

Moved into JEDZ: \_\_\_\_\_ Moved out of JEDZ: \_\_\_\_\_

EMPLOYED BY WHOM AND WHERE (LIST W-2'S SEPARATELY)		A) WHITEHOUSE/SPENCER TWP JEDZ TAX WITHHELD	B) OTHER CITY TAX WITHHELD (3/4% Limitation)	QUALIFYING WAGES (Box 5 of W-2)
W-2 COPIES MUST BE ATTACHED	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____
<b>TOTALS:</b>		(TO LINE 13A)	(TO LINE 13B)	(TO LINE 1)

1. Total wages, etc. (If no other taxable income enter total wages here and line 11) ..... (1) \$ \_\_\_\_\_
2. Income from self-employment (Attach Federal Schedule 'C', 'E' & K-1s') ..... (2) \$ \_\_\_\_\_
3. Income from rents, leases, or farm income (Attach Federal Schedules 'E', & 'F') ..... (3) \$ \_\_\_\_\_
4. Partnership income (Attach Federal form 1065, K-1s, or 8825 where applicable) ..... (4) \$ \_\_\_\_\_
5. Corporation income (Attach Federal 1120, 1120s, 1120A, including Other Income & Deduction Schedules)..... (5) \$ \_\_\_\_\_
6. Misc. income (Attach 1099's or explain source) Do not include Dividends, Interest, Unemployment or Worker's Compensation ..... (6) \$ \_\_\_\_\_
7. Adjustments from Section A and B (Page 2) ADDITIONS \_\_\_\_\_ DEDUCTIONS ..... (7) \$ \_\_\_\_\_
8. Total Income (Lines 1-7)..... (8) \$ \_\_\_\_\_
9. Amount allocable to Whitehouse/Spencer Twp JEDZ, If Schedule Y is used 100.000000%..... (9) \$ \_\_\_\_\_
10. Less Allocable - Whitehouse/Spencer Twp JEDZ Net Loss from previous year (Limited to 5 years)..... (10) \$ \_\_\_\_\_
11. Total income subject to Whitehouse/Spencer Twp JEDZ income tax ..... (11) \$ \_\_\_\_\_
12. WHITEHOUSE/SPENCER TWP JEDZ INCOME TAX AT 1-1/2 % (.015) OF AMOUNT ON LINE 11 ..... (12) \$ \_\_\_\_\_
- 13 A. WHITEHOUSE/SPENCER TWP JEDZ TAX WITHHELD ..... (13A) \$ \_\_\_\_\_
- 13 B. Tax withheld to other municipalities (Not to exceed 3/4%)..... (13B) \$ \_\_\_\_\_
- 13 C. Tax paid or to be paid another municipality (Not withholding)(not to exceed 3/4%) ...(13C)\$ \_\_\_\_\_
- 13 D. Distributive Share of TAX PAID TO WHITEHOUSE (not to exceed 3/4%)..... (13D) \$ \_\_\_\_\_
- 13 E. Estimated tax paid to Whitehouse/Spencer Twp JEDZ and prioryear overpayment..... (13E) \$ \_\_\_\_\_
14. TOTAL CREDITS (Lines 13A+13B+13C+13D+13E) ..... (14) \$ \_\_\_\_\_
15. BALANCE OF TAX DUE (No refunds or billings for amounts under \$10.00)(Line 12 less Line 14) .....(15) \$ \_\_\_\_\_
16. OVERPAYMENT (If tax credits exceed tax due, enter difference)..... (16) \$ \_\_\_\_\_
17. Late Filing Penalty \$25 per month (maximum \$150) ..... (17) \$ \_\_\_\_\_
18. Late Pay Penalty 15% on unpaid tax balance. Interest .50% per month (6% per annum) ..... (18) \$ \_\_\_\_\_
19. Total Amount Due (Lines 15, 17 & 18) Make check payable to COMMISSIONER OF TAXATION ..... (19) \$ \_\_\_\_\_
20. If line 16 is an overpayment indicate the amount to be credited to the next tax year ( \_\_\_\_\_ ) or the amount to be refunded ( \_\_\_\_\_ )

\*Interest, penalty and late filing fee must be included when past due. The rate of interest is .50% per month or fraction thereof based on unpaid taxes. This rate is based on the annual Federal Prime Interest Rate. The rate of late pay penalty is 15% on the unpaid tax balance. The late filing penalty is \$25.00 per month or fraction thereof with a maximum of up to \$150.00.

The undersigned declares that this return (and accompanying schedules) is a true, correct and complete return for the taxable period stated and the figures used herein are the same as used for Federal Income Tax purposes, and if an audit of Federal return is made which affects tax liability shown on this return, an amended return will be filed within 3 months.

**TAX PREPARER**

**MUST SIGN HERE**

Signature of Preparer \_\_\_\_\_ Date \_\_\_\_\_

(Print name) \_\_\_\_\_

(Firm & Phone No.) \_\_\_\_\_

(Address) \_\_\_\_\_

**TAXPAYER**

**MUST SIGN HERE**

Signature of Taxpayer **X** \_\_\_\_\_ Date \_\_\_\_\_

Signature of Taxpayer **X** \_\_\_\_\_ Date \_\_\_\_\_

Check the box next to your signature to authorize us to speak directly to your preparer regarding your return.

Taxpayer Phone Number \_\_\_\_\_

**SECTION A - ADDITIONS TO INCOME**

21. Capital Loss (Excluding Ordinary Losses) .....	(21) \$	_____
22. Interest and/or Other Expenses incurred in the production of non-taxable income at least 5% of Section B Line 34.....	(22) \$	_____
23. All Income Taxes paid or accrued.....	(23) \$	_____
24. Payments to Partners.....	(24) \$	_____
25. Contributions in excess of 10% of Net Profits.....	(25) \$	_____
26. Other.....	(26) \$	_____
27. Total Additions (Add Lines 21-26) - Transfer to Line 7, ADDITIONS .....	(27) \$	_____

**SECTION B - DEDUCTIONS FROM INCOME**

28. Capital gain (Excluding Ordinary Gains) .....	(28) \$	_____
29. Interest earned or accrued .....	(29) \$	_____
30. Dividends (less Federal exclusion).....	(30) \$	_____
31. Income from Patents and Copyrights .....	(31) \$	_____
32. Unreimbursed travel expenses (per Federal form 2106 reduced by 2% AGI on Federal Schedule A) .....	(32) \$	_____
33. Other income exempt from Whitehouse Income Tax .....	(33) \$	_____
Explain _____		
34. Total Deductions (Add Lines 28-34) Transfer to Line 7, DEDUCTIONS .....	(34) \$	_____

**SECTION C - PARTNERSHIP INCOME**

35. Name and address of Partnership and EID NO. (Attach K-1's and Schedule E).....	\$	_____
_____	\$	_____
_____	\$	_____
Total Partnership Income - Transfer to Line 2, Page .....	\$	_____

**SECTION D - PARTNER'S DISTRIBUTIVE SHARE OF PARTNERSHIP INCOME**

36. Name, Street Address and City or Township of Each Partner	Distributive Share of Each Partner Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total of Line 36 Transfer to Line 4 on Page 1	<b>Total</b> \$ _____

**SECTION Y - BUSINESS ALLOCATION**

37.	a. Located Everywhere	b. Located in Whitehouse/ Spencer Twp JEDZ	c. Percentage (b/a)
<b>STEP 1.</b> Average value of Real & Tangible Property .....	_____	_____	
Gross Annual Rentals Multiplied by 8 .....	_____	_____	
Total Step 1 .....	_____	_____	_____ %
<b>STEP 2.</b> Wages, Salaries, Etc., Paid .....	_____	_____	_____ %
<b>STEP 3.</b> Gross Receipts from Sales Made and/or Work or Services Performed .....	_____	_____	_____ %
<b>STEP 4.</b> Total Percentages .....	_____	_____	_____ %
<b>STEP 5.</b> Average Percentage (Divide Total Percentages by Number of Percentages Used: Carry to Line 9 - Page 1) ....	_____	_____	_____ %