

FILE WITH AND MAKE CHECK PAYABLE TO:

Village of Rockford
Income Tax Department
P.O. Box 282
Rockford, OH 45882
(419) 363-3032

ON OR BEFORE APRIL 15TH

VILLAGE OF ROCKFORD
INCOME TAX RETURN

FOR THE CALENDAR YEAR _____

*** TAX FILING CHECKLIST ***

- 1. We do not accept tax returns online
2. Attach all W2's / 1099 and Page 1 of Federal 1040
3. 18 years + = mandatory filing
4. Use box 5 to figure taxable wages
5. Returns must be signed
6. If you need assistance, please make an appointment with the tax office.
7. Filing required even if no tax due

IF MOVED SINCE THE PREVIOUS FINAL RETURN WAS DUE, GIVE DATE:
INTO VILLAGE _____ OR OUT OF _____

TAXPAYER'S NAME AND ADDRESS

Empty box for taxpayer name and address.

NOTE: PAGE 2 MUST BE COMPLETED IF YOU HAVE TAXABLE RENTAL PROPERTY OR BUSINESS INCOME.

IF YOU HAVE RETIREMENT OR UNEMPLOYMENT INCOME ONLY, PLEASE CHECK HERE [] , THEN SIGN, DATE AND RETURN.

- 1. GROSS WAGES, SALARIES, LOTTERY / GAMBLING WINNINGS (MUST ATTACH FEDERAL 1040 PG1 AND W-2 AND/OR 1099 FORMS) - USE BOX 5 OF W2
2. OTHER TAXABLE INCOME (LOSSES CANNOT BE DEDUCTED FROM W-2 WAGES)
3. TAXABLE INCOME: LINE 1 PLUS LINE 2
4. MUNICIPAL TAX: 1.000% OF LINE 3
5. CREDITS - (Parkway School District taxes are NOT Credits)
6. TAX DUE (PAYMENT OF BALANCE MUST ACCOMPANY THIS RETURN)
7. PENALTY AND INTEREST LATE FEE \$ 25.00
8. AMOUNT OF \$10.00 OR LESS IS NOT PAYABLE. REFUNDABLE OR CONSIDERED CREDIT TO NEXT YEAR.
9. OVERPAYMENT REFUNDED ...\$ OR CREDITED TO EST. TAXES... \$

DECLARATION OF ESTIMATED TAX (REQUIRED IF TAX DUE IS OVER \$200)

- 10. INCOME SUBJECT TO TAX ...\$ TIMES TAX RATE OF 1.000% FOR GROSS TAX OF ...\$
11. LESS EXPECTED TAX CREDITS:
12. NET TAX DUE (LINE 10 LESS LINE 11C)
13. AMOUNT PAID WITH THIS DECLARATION (1/4 LINE 12, LESS LINE 12A)
14. BALANCE OF ESTIMATED TAX

TOTAL AMOUNT DUE \$ _____ (LINE 8) + \$ _____ (LINE 13) =

I CERTIFY THAT I HAVE EXAMINED THE RETURN (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT & COMPLETE. IF PREPARED BY PERSON OTHER THAN TAXPAYER, THE DECLARATION IS BASED ON ALL INFORMATION OF WHICH PREPARER HAS AN KNOWLEDGE.

SIGNATURE OF PREPARER _____ DATE _____

SIGNATURE OF TAXPAYER _____ DATE _____

ADDRESS _____

SIGNATURE OF TAXPAYER _____ DATE _____

MUST RETURN ORIGINAL DOCUMENT WITH SIGNATURE AND DATE TO THE TAX OFFICE

SEPARATE BEFORE COMPLETING

DO NOT USE THIS PAGE IF YOUR ONLY SOURCE OF INCOME IS FROM WAGES, DIVIDENDS OR INTEREST
AND YOU ARE ENTITLED TO DEDUCT BUSINESS EXPENSES FROM SUCH WAGES

SCHEDULE C -- BUSINESS INCOME	
1. ATTACH COPIES OF FEDERAL SCHEDULES (ENTER TOTAL INCOME FROM SCHEDULES)	\$ _____
2. A. ITEMS NOT DEDUCTIBLE (FROM LINE M SCHEDULE X)	\$ _____
B. ITEMS NOT TAXABLE (FROM LINE Z SCHEDULE X)	\$ _____
C. DIFFERENCE BETWEEN LINES 2A AND 2B TO BE ADDED TO OR SUBSTITUTED FROM LINE 1	\$ _____
3. A. ADJUSTED INCOME (LINE 1 PLUS OR MINUS 2C IF SCHEDULE X IS USED)	\$ _____
B. AMOUNT OF LINE ABOVE ALLOCABLE % FROM STEP 5 SCHEDULE Y	\$ _____
4. NET OPERATING LOSS FROM PRIOR YEARS, IF ALLOWED	\$ _____
5. NET BUSINESS INCOME	\$ _____

SCHEDULE E -- INCOME FROM RENTS (ATTACH STATEMENT EXPLAINING COLUMNS 3, 4, AND 5)					
1. KIND & ADDRESS OF PROPERTY	2. RENT AMOUNT	3. DEPRECIATION	4. REPAIRS	5. OTHER EXPENSES	6. NET INCOME (LOSS)
NET INCOME (OR LOSS) SCHEDULE					\$ _____

SCHEDULE H -- OTHER INCOME NOT INCLUDED IN SCHEDULE E FROM PARTNERSHIPS, S CORPS., ESTATES TRUSTS, FEES ETC.		
RECEIVED FROM	FOR (DESCRIBE)	AMOUNT
TOTAL INCOME SCHEDULE H		\$ _____

ADD TOTAL OF SCHEDULES C, E, & H. ENTER HERE AND ON LINE 2, PAGE 1

SCHEDULE X -- RECONCILIATION WITH FEDERAL INCOME TAX RETURN	
ITEMS NOT DEDUCTIBLE	ITEMS NOT TAXABLE
A. NET LOSS FROM CAP. OR OTHER ASSETS	N. CAPITAL GAINS (FROM FED. SCH.)
B. EXPENSES APPLICABLE TO NON-TAXABLE INCOME	O. INTEREST
C. INCOME TAXES	P. DIVIDENDS
D. LOSS CARRIED BACK	Q. ROYALTY INCOME (INTANGIBLE)
E. LOSS CARRIED FORWARD PER. FED. RTRN.	R. OTHER (EXPLAIN)
F. PYMTS TO PARTNERS/COMP. OF S. CORP. OFFICERS	_____ \$ _____
G. SICK PAY NOT INCLUDED ON PAGE 1	_____ \$ _____
H. CONTRIBUTIONS	_____ \$ _____
L. OTHER (EXPLAIN)	_____ \$ _____
M. TOTAL ADDITIONS	Z. TOTAL DEDUCTIONS
_____ \$ _____	_____ \$ _____

SCHEDULE Y -- BUSINESS ALLOCATION FORMULA			
	A. LOCATED EVERYWHERE	B. LOCATED IN CITY	C. PERCENTAGE (B÷A)
STEP 1. AVERAGE VALUE REAL & TANGIBLE PERSONAL PROPERTY	\$ _____	\$ _____	
GROSS ANNUAL RENTALS MULTIPLIED BY 8	\$ _____	\$ _____	_____ %
TOTAL OF STEP 1	\$ _____	\$ _____	_____ %
STEP 2. TOTAL WAGES, SALARIES, COMMISSIONS AND OTHER COMPENSATION PAID TO ALL EMPLOYEES	\$ _____	\$ _____	_____ %
STEP 3. GROSS RECEIPTS FROM SALES AND WORK/SERVICES PERFORMED	\$ _____	\$ _____	_____ %
STEP 4. TOTAL PERCENTAGES			_____ %
STEP 6. AVERAGE PERCENTAGE (DIVIDE TOTAL PERCENTAGES BY NUMBER OF PERCENTAGES USED)			
..... ENTER HERE AND ON LINE 3B			_____ %