

File with
 City of Van Wert Income Tax Dept.
 515 E. Main Street
 Van Wert, Ohio 45891-1870

2011

**MANDATORY FILING
 FOR ALL VAN WERT CITY
 RESIDENTS REGARDLESS
 OF WHERE YOU WORK
 AND WHETHER OR NOT
 YOUR TAXES ARE WITHHELD
 BY YOUR EMPLOYER.
 YOU MUST FILE EVEN IF
 YOU DID NOT WORK**

VAN WERT INCOME TAX RETURN OR

Fiscal Period _____ to _____
 CALENDAR YEAR TAXPAYERS FILE ON OR BEFORE APRIL 15 7

Make Checks and Money Orders
 Payable to
 Treasurer, City of Van Wert

Name _____

Name _____

Address _____

City _____ State _____ Zip _____ - _____

WERE YOU A VAN WERT RESIDENT FOR THE ENTIRE YEAR?

YES NO

IF NO, ENTER PERIOD OF VAN WERT RESIDENCE

FROM

MONTH	DAY	YEAR
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 TO

MONTH	DAY	YEAR
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IF YOU RENT, PLEASE GIVE NAME AND ADDRESS OF LANDLORD

NAME _____

SOCIAL SECURITY NUMBER (TAXPAYER) _____

(TAXPAYER) _____

ADDRESS _____

CURRENT EMPLOYER (TAXPAYER) _____

(TAXPAYER) _____

CITY _____

1. WAGES SALARIES, TIPS & OTHER COMPENSATION (ENCLOSE W-2 FORMS) TOTAL COMPENSATION	_____	\$
2. OTHER: LOSSES CAFETERIA (SEC 125) PLANS CAN BE DEDUCTED FROM W-2 WAGES	_____	
A. BUSINESS AND/OR RENTAL INCOME (ATTACH FEDERAL FORMS)	_____	\$
B. MISC. (SEE INSTRUCTIONS)	_____	\$
C. TOTAL OTHER INCOME	_____	
3. TAXABLE INCOME (LINE 1 PLUS LINE 2C)	_____	\$
4. TAX DUE 1.72% OF LINE 3	_____	\$
5. CREDITS		
A-TAXES WITHHELD BY EMPLOYERS (NOT TO EXCEED 1.72% UNLESS WITHHELD FOR VW PER W-2)	_____	\$
B- ESTIMATED TAXES PAID THIS CITY	_____	\$
C-TAXES PAID TO OTHER CITY AND/OR VILLAGE (ATTACH PROOF) 25% CREDIT	_____	\$
D-PREVIOUS YEAR OVER PAYMENT / CREDIT	_____	\$
6. BALANCE OF TAX DUE IF LINE 4 IS GREATER THAN LINE 5D	_____	\$
6A. PENALTY & INTEREST	_____	\$
7. AMOUNT PAYABLE TO VAN WERT INCOME TAX	_____	\$
8. OVERPAYMENT CLAIMED <input type="checkbox"/> REFUND <input type="checkbox"/> CREDIT TO NEXT YEAR DECLARATION <input type="checkbox"/>		
NO TAXES OR REFUNDS OF LESS THAN \$1.01		

DECLARATION OF ESTIMATED VAN WERT TAX

FOR CALENDAR YEAR OR OTHER TAXABLE BEGINNING _____ AND ENDING _____

1. TOTAL INCOME SUBJECT TO VAN WERT TAX	_____	\$
2. LESS VAN WERT TAX TO BE WITHHELD, OR CITY OF (NOT TO EXCEED 25% FOR ANOTHER CITY)	_____	\$
3. BALANCE ESTIMATED VAN WERT TAX (AT 1.72%)	_____	\$
4. LESS CREDITS: A. OVERPAYMENT ON PREVIOUS YEARS RETURN	_____	\$
5. TAX DUE	_____	\$
6. AMOUNT PAID WITH THIS ESTIMATE	_____	\$
7. BALANCE OF ESTIMATED TAX DUE	_____	\$

TOTAL AMOUNT PAID \$ _____	FINAL (LINE 7) + \$ _____	ESTIMATE (LINE 8) = _____
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I CERTIFY THAT I HAVE EXAMINED THIS RETURN (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE. IF PREPARED BY A PERSON OTHER THAN TAXPAYER, THE DECLARATION IS BASED ON ALL INFORMATION OF WHICH PREPARER HAS ANY KNOWLEDGE.

SIGNATURE OF TAXPAYER OR AGENT _____ DATE _____

SIGNATURE OF PERSON PREPARING IF OTHER THAN TAXPAYER DATE _____

ADDRESS _____ PHONE _____

ADDRESS _____ PHONE _____

ATTACH COPIES OF FEDERAL SCHEDULES AND/OR W-2'S