

INDIVIDUAL - 2019
INCOME TAX RETURN
WEST SALEM

MAKE CHECK OR MONEY ORDER TO:
WEST SALEM VILLAGE
PO BOX 386
27 S. MAIN STREET
WEST SALEM OH 44287
Voice 419-853-4809 Ext Fax 419-853-4158

If name & address information is incorrect,
please make changes. We are requesting a
copy of W2 and Page 1 of Federal Return
be attached along with schedules C, E, F or
1120 if used to complete your return.

Taxpayer's Social Security No.
Home Telephone No. Business Telephone No.
Spouse's Social Security No.
Spouse's Name
Home Telephone No. Business Telephone No.
IF YOU HAVE MOVED DURING TAX YEAR - GIVE DATES
INTO / /
OUT OF / /
IF YOU RENT, PLEASE GIVE LANDLORDS INFORMATION
NAME
ADDRESS

Name
And
Address

Filing Status
[] Single
[] Married filing joint
[] Married filing separate
[] RESIDENT
[] NON-RESIDENT
IF YOU RENT, PLEASE GIVE LANDLORDS INFORMATION
NAME
ADDRESS

Income
1 Wages, salaries, tips, etc.
2 Other taxable income
3 Total taxable income (add lines 1 and 2)

Tax and Credits
4 West Salem tax due before credits (1.000% of line 3)
5 Estimated tax payments made to West Salem
6 Taxes withheld and paid to West Salem
7 Overpayment from prior year(s)

COPY OF W2's, SCHEDULES & PAGE 1 OF FEDERAL RETURN REQUESTED WITH
8 Total credits (add lines 5 through 7)

Refund (Issued if greater than \$10.00)
9 If line 8 is greater than line 4, subtract line 4 from line 8. This is the amount you overpaid
10 Amount of line 9 to be credited to next years estimate
11 Amount of line 9 to be refunded

Tax Due (if greater than \$10.00)
12 If line 4 is more than line 8, subtract line 8 from 4, this is the tax amount you owe
13 Penalties and interest Late File Late Pay Late Estimate Interest

Declaration of Estimate For 2020
14 Estimated income
15 Estimated tax due. Multiply line 14 by 1.000%
16 Taxes to be withheld and paid to West Salem
17 Prior credit applied to estimated tax payments (From line 10)
18 Net estimated tax due (subtract line 16 and 17 from 15)
19 Minimum amount due for first quarter (multiply line 18 by 25%)

Amount You Owe
20 Total amount due (add lines 12, 13 and 19)

DUE ON OR BEFORE 12/01/2019

Tax Office Use Only : Tax Office Use Only : Tax Office Use Only

Taxpayer's Signature Date
Spouse's Signature Date
Tax Preparer's Signature Date
(If other than taxpayer) Phone No.

May VILLAGE OF WEST SALEM discuss this return with the preparer shown above ___Yes ___No