

GIBSONBURG 2019 INDIVIDUAL INCOME TAX RETURN

DUE ON OR BEFORE APRIL 15, 2020

ALL RESIDENTS MUST FILE A
 TAX RETURN, REGARDLESS OF
 AGE, UNLESS RETIRED WITH NO
 TAXABLE INCOME.

Social Security Number	Spouse's Social Security Number
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NAME AND ADDRESS

Part Year Resident: Date Moved In: _____	
Date Moved Out: _____	
Telephone:	Home _____
	Work _____
Email: _____	

A COPY OF YOUR FEDERAL FORM 1040, AND FEDERAL SCH 1 IS TO BE SUBMITTED ALONG WITH YOUR GIBSONBURG RETURN PER OHIO REVISED CODE 718.05(F)(2) AND GIBSONBURG CODIFIED ORDINANCE 191.09(F)(2)

NOTE: ATTACH ALL FEDERAL W-2'S AND/OR ACCOMPANYING FEDERAL SCHEDULES, AND PAYMENT OF THE BALANCE OF TAX DECLARED DUE (LINE 10) AND AT LEAST 1/4 OF THE ESTIMATED TAX (LINE 15). THIS FORM IS NOT A LEGAL FINAL RETURN OR DECLARATION, UNLESS SIGNED, AND MAY BE SUBJECT TO LATE FILING AND PAYMENT PENALTIES.

1. Qualifying wages, salaries, and other employee compensation (Generally the greater of Box 5 or Box 18 of W-2 Form) (ATTACH ALL W-2 FORMS).....1 \$ _____
2. Adjustments (Complete Worksheet A on Page 2) from Page 2 line A42 \$ _____
3. Taxable wages & misc. income (Sum of lines 1 & 2)3 \$ _____
4. Other taxable income (from Page 2, Sch B, Line 11. If net loss enter as -0-) (ATTACH ALL FEDERAL FORMS).....4 \$ _____
5. Total income subject to tax (Line 3, Plus Line 4).....5 \$ _____
6. Gibsonburg tax: 1.0%, of Line 5.....6 \$ _____
7. Credits
 - A. Tax withheld by employer for Village of Gibsonburg per W-2.....7a \$ _____
 - B. Estimated tax paid to Village of Gibsonburg7b \$ _____
 - C. Prior year Credit7c \$ _____
 - D. TOTAL CREDITS.....7d \$ _____
8. TAX BALANCE DUE (LINE 6 less Line 7d)8 \$ _____
9. A. Late Payment Penalty (15%) \$ _____ Interest (7% per annum) \$ _____ Total Late Payment P&I9a \$ _____
- B. Late Filing Penalty (\$25.00 per month , \$150.00 Maximum)9b \$ _____
10. TOTAL TAX DUE INCLUDING PENALTY & INTEREST (Sum of Lines 8, 9A and 9B).....10 \$ _____
11. Overpayment to be refunded \$ _____ OR Credit to next year estimate \$ _____

If tax due/refund amount is \$10.00 and under, no payment is required; no refund will be issued.

2020 DECLARATION OF ESTIMATED TAX – MANDATORY (SEE INSTRUCTIONS)

12. Total Estimated Income Subject to Tax \$ _____ Multiply by 1% for Tax of12 \$ _____
13. Less Expected Tax Credits
 - A. Gibsonburg Tax Withheld by Employer(s)13a \$ _____
 - B. Prior year credit carry forward13b \$ _____
 - C. TOTAL CREDITS13c \$ _____
14. NET TAX DUE: Line 12 less Line 13c. If less than \$200.00, enter \$0.00 on line 1514 \$ _____
15. AMOUNT PAID WITH THIS DECLARATION: Line 14 x 25%15 \$ _____
16. TOTAL DUE: Line 10 plus Line 15 (If Line 10 reflects overpayment, enter amount from Line 15 only)16 \$ _____

Check here if payment was made online

I certify that I have examined this return along with accompanying schedules and, to the best of my knowledge and belief, it is true, correct and complete.
 If this return was prepared by a tax practitioner, I have indicated whether or not you may contact my preparer regarding the preparation of this return. Yes No

Your Signature	Date	Signature of Person Preparing if other than Taxpayer	Date
Spouse's Signature (if joint return BOTH must sign)	Date	Address	Telephone Number

WORKSHEET A – ADJUSTMENTS TO LINE 1 INCOME

ATTACH VERIFICATION OF ADJUSTMENTS

(Provide calculations to determine credit)

DEDUCT OR ADD:

1. Partial year resident. Enter income earned as a non-resident (Do not include income earned working in Gibsonburg Village) (Please include the calculations used to determine the partial year credit). A1 \$ _____
2. Miscellaneous income not on W-2 form such as: tips, work related bonuses/prizes, commissions, back pay awards. A2 \$ _____
3. Gambling winnings, lottery, prizes etc..... A3 \$ _____
4. TOTAL ADJUSTMENTS (enter page 1, Line 2)TOTAL A4 \$ _____

******* STOP HERE IF YOU HAVE NO OTHER INCOME TAXABLE TO GIBSONBURG – RETURN TO PAGE 1 *******

TAXABLE INCOME

Gross wages, salaries, commission and other compensation to include:

1. Sick pay and vacation pay (including annual leave).
2. Income from wage-continuation plans.
3. Stock options - taxed when exercised on amount indicated on W-2 form.
4. Cost of group term life insurance over \$50,000.00
5. Severance pay.
6. Compensation paid in property or the use thereof at fair market value to the same extent as taxable under the Federal Internal Revenue Act and so indicated on the W-2 from.
7. Tips.
8. Deferred Income Contribution Plans.
9. 401-K Contribution Plans.
10. Income from guaranteed annual wage contracts.
11. Bonuses/Prizes connected with employment.
12. Gambling/Lottery Winnings (Losses Not Deducted.)
13. Directors fees/Executor fees.

14. Union steward fees.
15. Ordinary income from Form 4797.
16. Profit Sharing - if from non-qualified plan.
17. Residents entire share, whether distributed or not, of the net profits of a subchapter S Corporation.
18. Jury duty

NET PROFITS FROM:

- Unincorporated businesses:
- a. Sole proprietorships - Schedule C
 - b. Rental properties - Schedule E
 - c. Partnerships - Schedule B
 - d. Farm Net Income - Schedule F
- Fiduciaries/Trusts and Estates (file and pay as entity)

NON-TAXABLE INCOME

- A. Military pay including reserve pay.
- B. 3rd party sick pay.
- C. Alimony and Child Support.

- D. Capital gains - unless filed on Form 4797.
- E. Interest.
- F. Dividends.
- G. Social Security benefits.
- H. Worker's Compensation.
- I. State unemployment benefits.
- J. Welfare payments.
- K. Income of religious, fraternal, charitable, scientific, literary or educational institutions to the extent that such income is derived from tax-exempt real estate, tax-exempt tangible or intangible property or tax-exempt activities.
- L. Housing for Clergy.
- M. Pension income - includes lump sum and deferred distributions. (includes 401-K)
- N. Annuities-at time of distribution.

SCHEDULE B – INCOME OTHER THAN WAGES

1. SCHEDULE C – PROFIT OR <LOSS> FROM BUSINESS – ATTACH SCHEDULE C
 - 1A. NET INCOME OR <LOSS> FROM SCHEDULE C 1A \$ _____
 - 1B. % ALLOCABLE TO GIBSONBURG. RESIDENTS USE 100%; NONRESIDENTS FROM SCHEDULE Y (BELOW)1B _____
 - 1C. GIBSONBURG INCOME OR <LOSS> (LINE 1A MULTIPLIED BY 1B) 1C \$ _____
2. SCHEDULE E – INCOME/<LOSS> FROM RENTS – ATTACH SCHEDULE E 2 \$ _____
3. SCHEDULE E – INCOME/<LOSS> FROM TAXABLE ROYALTIES – ATTACH SCHEDULE E 3 \$ _____
4. SCHEDULE E – INCOME/<LOSS> FROM PARTNERSHIPS – ATTACH SCHEDULE E 4 \$ _____
5. SCHEDULE F – INCOME/<LOSS> FROM FARMING – ATTACH SCHEDULE F 5 \$ _____
6. FORM 4797 – ORDINARY GAIN/<LOSS> – ATTACH FORM 4797 6 \$ _____
7. OTHER INCOME/<LOSS> – TRUST/ESTATE – ATTACH SCHEDULE E 7 \$ _____
8. SUBTOTAL – ADD LINES 1C THROUGH 7 8 \$ _____
9. LESS: NET OPERATING LOSS CARRYOVER – (ATTACH MNP NOL DW WORKSHEET) Worksheet found on Ohio Dept of Taxation website and Village of Gibsonburg's website 9 \$ _____
10. SUB-TOTAL – LINE 8 LESS LINE 9. IF LESS THAN ZERO, ENTER -0- 10 \$ _____
11. TOTAL – LINE 10 ABOVE. ENTER ON LINE 4, PAGE 1 11 \$ _____

SCHEDULE Y – BUSINESS APPORTIONMENT FORMULA

(applicable for non-resident individuals doing business both within and outside Gibsonburg Village limits; Gibsonburg residents must report 100% of income and take credit for tax paid to another city on Page 1)

	A. Located Everywhere	B. Located In Gibsonburg	C. Percentage (B ÷ A)
STEP 1 Avg. Value of Real & Tangible Personal Property.....	\$ _____	\$ _____	
STEP 2 Gross Receipts from Sales Made and/or Work or Services Performed.....	\$ _____	\$ _____	2 _____ %
STEP 3 Wages, Salaries and other Compensation Paid.....	\$ _____	\$ _____	3 _____ %
STEP 4 TOTAL PERCENTAGES			4 _____ %
STEP 5 AVERAGE PERCENTAGE (DIVIDE TOTAL PERCENTAGES BY NUMBER OF PERCENTAGES USED. ENTER HERE AND ON LINE 1B).....			5 _____ %