

VILLAGE OF BUTLER
2014 Income Tax Return

SSN/FID# _____

ACCOUNT # _____

AUDITED BY: _____

CALENDAR YEAR TAXPAYERS FILE ON OR BEFORE APRIL 15, 2015

FISCAL PERIOD _____ TO _____

(If different than calendar year)

Moved Into Butler: / / Moved Out of Butler: / /

Income Tax Office is located at 33 W. Elm St., Butler

Phone # 419-883-2481; Fax # 419-883-3360

Mail returns to P.O. Box 394, Butler, OH 44822

A Drop Box is located beside the Village Hall

TAXPAYER NAME AND ADDRESS

TAX OFFICE USE ONLY

Date Received

cash check money order partial pmt. no pmt.

1. WAGES, SALARIES, TIPS & OTHER COMPENSATION (Enclose W-2's, 1099's or appropriate forms) \$ _____

**Butler taxable wages are in box 18, if blank use box 5 of W-2

(A) (SEE INSTRUCTIONS) ***Partial year resident: _____ (÷) 12 mo. (x) _____ mo. in Village (=)

BUSINESS SECTION

2. A. BUSINESS PROFIT (Federal Forms must be attached) See PAGE 2 SECTION A & C ... \$ _____

B. RENTAL INCOME (Attach Federal Forms) PAGE 2 SECTION B \$ _____

C. TOTAL OTHER TAXABLE INCOME (Line A plus Line B) Not less than zero \$ _____

3. TOTAL BUSINESS TAXABLE INCOME \$ _____

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4. TAXABLE INCOME (Line 1 plus Line 3) ... \$ \_\_\_\_\_

5. VILLAGE INCOME TAX DUE 1% OF LINE 4 . . . . . \$ \_\_\_\_\_

**6. CREDITS**

A. VILLAGE OF BUTLER INCOME TAX WITHHELD - (box 19) (attach W-2's) ..... \$ \_\_\_\_\_

B. INCOME TAX PAID OTHER MUNICIPALITIES-attach W-2's (work sheet on Page 2 - Section E) \$ \_\_\_\_\_

C. PARTIAL YEAR CREDIT - (work sheet on Page 2 - Section E) ..... \$ \_\_\_\_\_

D. OVERPAYMENT FROM PRIOR YEAR ..... \$ \_\_\_\_\_

E. ESTIMATED TAX PAYMENTS ..... \$ \_\_\_\_\_

F. TOTAL CREDITS (add lines A, B, C, D & E) ..... \$ \_\_\_\_\_

7. BALANCE TAX DUE, IF LINE 5 IS GREATER THAN LINE 6 (Payment in full must accompany return) ..... \$ \_\_\_\_\_

8. LATE FILING FEE \$ \_\_\_\_\_ PENALTY \$ \_\_\_\_\_ INTEREST \$ \_\_\_\_\_ PAGE 2 SEC. D ..... \$ \_\_\_\_\_

9. AMOUNT DUE PAYABLE TO VILLAGE OF BUTLER (Line 7 Plus 8) ..... \$ \_\_\_\_\_

10. OVERPAYMENT TO BE REFUNDED \$ \_\_\_\_\_ OR CREDITED TO NEXT YEAR \$ \_\_\_\_\_

**NOTE: No taxes or refunds of less than \$1.00 shall be collected or refunded. Refunds cannot be made of taxes paid to other municipalities.**

**DECLARATION OF ESTIMATED TAX FOR YEAR 2015**

11. TOTAL INCOME TAX SUBJECT TO BUTLER TAX \$ \_\_\_\_\_ MULTIPLY BY TAX RATE OF 1% FOR GROSS TAX OF \$ \_\_\_\_\_

12. LESS EXPECTED TAX CREDITS

A. OVERPAYMENT FROM PRIOR YEAR ..... \$ \_\_\_\_\_

B. PAYMENTS ON TAXABLE INCOME TO ANOTHER MUNICIPALITY (Multiply by .005) ..... \$ \_\_\_\_\_

C. TOTAL CREDITS ..... \$ \_\_\_\_\_

13. NET TAX DUE (line 11 minus 12C) ..... \$ \_\_\_\_\_

14. AMOUNT PAID WITH THIS DECLARATION (NOT LESS THAN 1/4 OF LINE 13) ..... \$ \_\_\_\_\_

15. BALANCE OF TAX ..... \$ \_\_\_\_\_

16. TOTAL AMOUNT DUE (Line 9 plus 14) ..... \$ \_\_\_\_\_

**MAKE REMITTANCE PAYABLE TO: VILLAGE OF BUTLER INCOME TAX BUREAU**

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

\_\_\_\_\_  
SIGNATURE OF TAXPAYER                      DATE

\_\_\_\_\_  
SIGNATURE OF PERSON PREPARING                      DATE

\_\_\_\_\_  
SIGNATURE OF JOINT FILER                      DATE

IF OTHER THAN TAXPAYER

attach forms here