

VILLAGE OF BUTLER
2013 Income Tax Return

CALENDAR YEAR TAXPAYERS FILE ON OR BEFORE APRIL 15, 2014

FISCAL PERIOD _____ TO _____

SSN/FID# _____

ACCOUNT # _____

AUDITED BY: _____

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 Forms) \$ _____

--Partial year resident: _____

****Taxable wages for Butler are found in box 18, if blank use box 5; NOT Box 1 of W-2**

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 (attach W-2's) . . . . . \$ \_\_\_\_\_

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

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

D. ESTIMATED TAX PAYMENTS . . . . . \$ \_\_\_\_\_

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

7. BALANCE TAX DUE, IF LINE 5 IS GREATER THAN LINE 6E(**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 2014**

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 THAT 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

IF OTHER THAN TAXPAYER

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