

File With
Village of Delta Income Tax
401 Main Street
Delta, Ohio 43515
(419)822-4500 x 102

2018

VILLAGE OF DELTA INCOME TAX RETURN

OFFICE USE ONLY

Fiscal Period _____ to _____
 Calendar year taxpayers file on or before April 15, 2019 or revised federal due date
 Fiscal and partial years file within 105 days period ending:

Primary Social Security No.	Date of Birth	Extension must be requested through our office prior to the due date.
Joint Social Security No.	Date of Birth	Extension requests must have a copy of the federal extension attached and be received prior to the due date.
Your name and address as they appear on our records. Make any necessary corrections.		IF RETIRED, give date IF YOU MOVED DURING THE TAX YEAR, COMPLETE THIS BLOCK Date moved into Delta _____ Previous Address _____ Date moved out Delta _____ Present Address _____ Work Status Change & Date _____

1. WAGES, SALARIES, TIPS, COMMISSIONS AND OTHER EMPLOYEE COMPENSATION BEFORE PAYROLL DEDUCTIONS, IF PARTIAL YEAR RESIDENT, SEE INSTRUCTIONS

For Individual Taxpayers	A. Names of Employers	B. City Where Employed	C. Tax Withheld In Other City Not to exceed 1%	D. Delta Tax Withheld	E. Gross Earnings Before Deductions
W-2 COPIES MUST BE ATTACHED					
Totals					1. \$ _____

2. Other income (loss) from schedules C,E,F,K-1, 1099 Misc, W2G (_____ % FROM SCHEDULE Y STEP 5) 2. \$ _____

3. TAXABLE INCOME (Total Col. E.+ line 2)..... 3. \$ _____

4. ADJUSTMENTS: A. Business Expense (Attach Federal Form 2106 and Schedule A)..... 4. \$ _____

5. TOTAL ADJUSTED TAXABLE INCOME SUBJECT TO DELTA INCOME TAX 5. \$ _____

6. Delta Income Tax 1.5% of line 5..... 6. \$ _____

7. CREDITS: (a) Credit for Taxes Withheld in Other cities (total col. 1C) (Not to exceed 1%..... \$ _____

(b) Tax Withheld in Delta (Total Col. 1D) \$ _____

(c) Payments to Delta on Estimates \$ _____

(d) Overpayments from Preceding Year \$ _____

(e) TOTAL CREDITS (Add Lines 7a, b, c, d)..... 7. \$ _____

8. (a) TAX DUE (Line 6 Less Line 7e) (NO AMT DUE LESS THAN \$10.01)..... 8. \$ _____

(b) Overpayment Claimed (If Line 7e exceeds Line 6 enter difference here)..... \$ _____

(c) Enter Amount of Line 8b you want Credited to your 2019 Estimated Tax (Not Less than \$10.01) \$ _____

(d) Amount to be refunded (Line 8b Less Line 8c) NO REFUND LESS THAN \$10.01)..... \$ _____

9. PENALTY _____ INTEREST _____ LATE PENALTY _____ TOTAL..... 9. \$ _____

10. TOTAL AMOUNT DUE FOR 2019 (PAYABLE WITH THIS RETURN ON OR BEFORE APRIL 15, 2019) or the revised Federal Due Date..... 10. \$ _____

DECLARATION OF ESTIMATED TAX FOR TAX YEAR 2019 -SEE INSTRUCTIONS

11. Total Estimated Income Subject to Tax \$ _____ x TAX RATE OF 1.5% FOR GROSS TAX OF 11. \$ _____

12. Delta Tax to be Withheld 1) \$ _____ 2) _____ Credit for Tax Withheld Other Cities Not to Exceed 1%

13. Total of Line 12 (Box 1 plus 2)..... 13. \$ _____

14. NET TAX DUE (Subtract Line 13 from Line 11)..... 14. \$ _____

15. AMOUNT DUE WITH THIS ESTIMATE 1/4 OF Line 14..... 15. \$ _____

16. Overpayment from previous year-Credit from (Line 8c) if applicable..... 16. \$ _____

17. Subtract Line 16 from Line 15..... 17. \$ _____

18. TOTAL AMOUNT DUE-ADD Line 10 & 17 (PAYABLE WITH THIS RETURN ON OR BEFORE APRIL 15, 2019 or the revised Federal Due Date..... 18. \$ _____

I certify I have examined this return including accompanying schedules and statements, and to the best of my knowledge and belief it is true and correct.

May we contact the tax preparer directly with questions regarding this tax return? YES NO

Both Signatures Required for joint return

Signature of Person Preparing , If Other than Taxpayer	Date	Signature of Taxpayer or Agent	Date
Address or Name of Firm or Employer -Phone No.		Signature of Taxpayer or Agent	Date

Not considered Filed Unless Signed

ATTACH PAGE 1 OF 1040

Federal Returns 1065, 1120, 1120 S.....ATTACH FEDERAL SCHEDULE.....\$ _____

COPIES OF K-1'S ARE REQUIRED

Schedule C.....ATTACH FEDERAL SCHEDULE.....\$ _____

Schedule E Rental.....ATTACH FEDERAL SCHEDULE.....\$ _____

Federal Schedule K-1 from Partnership Income (Schedule 1065).....ATTACH FEDERAL SCHEDULE.....\$ _____

Federal Schedule K-1 from S Corporation (Schedule 1120S).....ATTACH FEDERAL SCHEDULE.....\$ _____

Schedule F.....ATTACH FEDERAL SCHEDULE.....\$ _____

Schedule 4797, Part II.....ATTACH FEDERAL SCHEDULE.....\$ _____

Gross income from gaming, wagering, lotteries or schemes of chance.....\$ _____

Miscellaneous Income-income not reported elsewhere. **ATTACH DOCUMENTATION**

Do not include interest, dividends, unemployment or retirement income.

_____ \$ _____

SCHEDULE H-ALL OTHER INCOME

Individual's distributive share of income from partnerships, estates, trusts, director's and other fees, farm,

Received From	For (Describe)	Amount

Total Income-Enter on line 2, page 1 \$ _____

SCHEDULE X-USE THIS RECONCILIATION WITH FEDERAL INCOME TAX RETURN

ITEMS NOT DEDUCTIBLE-ADD

ITEMS NOT TAXABLE-DEDUCT

A. Capital Gains (Excluding Ordinary Losses)	\$ _____	G. Capital Gains (excluding ordinary gain)	\$ _____
B. Expenses incurred in the production of non-taxable Income (atleast 5% of line K)	\$ _____	H. Interest Income	\$ _____
C. Taxes based on Income	\$ _____	I. Dividends	\$ _____
D. Net Operating Loss deduction per Federal Return	\$ _____	J. Other (explain) _____	\$ _____
E. Contributions	\$ _____	K. TOTAL DEDUCTIONS (enter from line 3 Schedule C)	\$ _____
F. TOTAL ADDITIONS	\$ _____	L. Net of line F & Line K (to be entered line 2 Sc C)	\$ _____

SCHEDULE Y-BUSINESS ALLOCATION FORMULA

	a. located everywhere	b. located in Delta	percentage
Step 1. Avg. value of real & tang Personal Property	\$ _____	\$ _____	
Gross annual rentals paid multiplied by 8	\$ _____	\$ _____	
Total step 1	\$ _____	\$ _____	_____ %
Step 2. Gross receipts from sales made and/or work or services performed (see instructions)	\$ _____	\$ _____	_____ %
Step 3. Wages, salaries and other compensation paid	\$ _____	\$ _____	_____ %
4. Total Percentages	\$ _____	\$ _____	_____ %
5. Average Percentage (divide total percentages by number of pertanges used)			

CARRY TO LINE 2 page 1 OF YOUR RETURN _____ %