FORM FR 1335

INDIVIDUAL - 2015
INCOME TAX RETURN
NEW CONCORD

Due Date 04/30/2015

Federal Schedules MUST be attached to this return.

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF NEW CONCORD

2 West Main Street
P.O. Box 10
New Concord OH 43762

Voice 740-826-7671 Fax 740-826-7617
dkughn@newconcord-oh.gov

Taxpayer's Social Security No.	
HomeTelephone No.	BusinessTelephone No.
Spouse's Social Security No.	
Spouse's Name	
HomeTelephone No.	BusinessTelephone No.

Name

And

Address

Filing Status
- ☐ Single
- ☐ Married filing joint
- ☐ Married filing separate

☐ RESIDENT
☐ NON-RESIDENT

IF YOU HAVE MOVED DURING TAX YEAR - GIVE DATES
INTO / /
OUT OF / /

IF YOU RENT, PLEASE GIVE LANDLORDS INFORMATION
NAME
ADDRESS

Income

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

Tax and Credits

4 New Concord tax due before credits (1.500% of line 3)		4
5 Estimated tax payments made to New Concord	5	
6 Taxes withheld and paid to New Concord	6	
7 Overpayment from prior year(s)	7	
8 Taxes withheld and paid to other localities Credit cannot exceed 100% of tax withheld up to 1%.	8	
9 Total credits (add lines 5 through 8)		9

Refund (Issued if greater than 1.01)

10 If line 9 is greater than line 4, subtract line 4 from line 9. This is the amount you overpaid		10
11 Amount of line 10 to be credited to next years estimate	11	
12 Amount of line 10 to be refunded	12	

Tax Due (if greater than 1.01)

13 If line 4 is more than line 9, subtract line 9 from 4, this is the tax amount you owe		13
14 Penalties and interest **Late File** _____ **Late Pay** _____ **Late Estimate** _____ **Interest** _____		14

Declaration of Estimate For 2016

15 Estimated income	15	
16 Estimated tax due. Multiply line 15 by 1.500%	16	
17 Taxes to be withheld and paid to New Concord and other localities	17	
18 Prior credit applied to estimated tax payments (From line 11)	18	
19 Net estimated tax due (subtract line 17 and 18 from 16)	19	
20 Minimum amount due for first quarter (multiply line 19 by 25%)	20	

Amount You Owe

21 Total amount due (add lines 13, 14 and 20)		21

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

The undersigned declares that this return (and accompanying schedules) is a true, correct and complete return for the taxable period stated and that the figures used herein are the same as used for Federal Income Tax purposes.

Taxpayer's Signature Date

Spouse's Signature Date

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

CREDIT CARD INFORMATION FOR PAYMENT

☐ ☐ ☐

ACCOUNT NUMBER

SECURITY PIN

CARD EXPIRATION / /

AMOUNT

CARD HOLDER SIGNATURE - SIGN HERE

May VILLAGE OF NEW CONCORD discuss this return with the preparer shown above ___Yes ___No

VILLAGE OF NEW CONCORD INCOME TAX RETURN

SCHEDULE C - PROFIT OF LOSS FROM BUSINESS OR PROFESSION

NOTE: IF COLUMN A IS USED, DISREGARD COLUMN B

	COLUMN A AS SHOWN BY FED RETURN	COLUMN B ALLOCABLE TO NEW CONCORD
1. NET PROFIT OF LOSS PER YOUR FEDERAL INCOME TAX RETURN FORM	$	$
2. ADD ITEMS NOT DEDUCTIBLE OR DEDUCT ITEMS NOT TAXABLE UNDER NEW CONCORD INCOME TAX ORDINANCE (SCHEDULE X)		
3. ADJUSTED NET PROFIT	$	$
4. _____% (AS DETERMINED BY BUSINESS ALLOCATION FORMULA) OF LINE 4, COLUMN A		
5. NET PROFIT - LINE 6, COLUMN A; OR LINE 3, COLUMN B (ENTER ON LINE 3 OF PAGE 1)		
	$	$

SCHEDULE X - RECONCILIATION WITH FEDERAL INCOME TAX RETURN

ITEMS NOT DEDUCTIBLE	ADD	ITEMS NOT TAXABLE	DEDUCT
A. PAYMENTS TO PARTNERS.....	$	F. INTEREST RECEIVED.....	$
B. ALL INCOME TAXES PAID OR ACCRUED.....		G. DIVIDENDS RECEIVED.....	
C. NET OPERATING LOSS PER FED RETURN.....		H. CAPITAL GAINS.....	
D. CAPITAL LOSSES.....		I. OTHER (EXPLAIN).....	
E. OTHER EXPENSES NOT DEDUCTIBLE (EXPLAIN)..			
TOTAL ADDITIONS ENTER ON LINE 2, SCHEDULE C ABOVE.....	$	TOTAL DEDUCTIONS ENTER ON LINE 3, SCHEDULE C ABOVE.....	$

SCHEDULE Y - BUSINESS ALLOCATION FORMULA

	A. LOCATED EVERYWHERE	B. LOCATED IN NEW CONCORD	C. PERCENTAGE (B./A.)	
STEP 1. AVERAGE VALUE OF REAL & TANGIBLE PERSONAL PROPERTY	$	$	XXX.XXX	
GROSS ANNUAL RENTALS MULTIPLIED BY 8	$	$	XXX.XXX	
TOTAL STEP 1	$	$	%	
STEP 2. NET SALES	$	$	%	
STEP 3. WAGES, SALARIES PAID	$	$	%	
STEP 4. TOTAL PERCENTAGES	XXXXXXXXXX	XXXXXXXXXXXX	%	
STEP 5. AVERAGE PERCENTAGE (DIVIDE TOTAL % BY NUMBER OF % USED). CARRY TO LINE 5 - SCHEDULE C, ABOVE				%

SCHEDULE G - INCOME FROM RENTS NOT INCLUDED IN SCHEDULE C ABOVE (COPY FROM FED INCOME TAX SCHEDULE)

	AMOUNT OF RENT	DEPRECIATION	REPAIRS	OTHER EXPENSE	NET INCOME
	$	$	$	$	$
TOTAL	**$**	**$**	**$**	**$**	**$**