

VILLAGE OF GRANVILLE  
**2014 INDIVIDUAL INCOME TAX RETURN**  
 DUE ON OR BEFORE APRIL 15, 2015

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

City of Residence:	_____
City of Employment:	_____
Part Year Resident: Date Moved In:	_____
Date Moved Out:	_____
Telephone: Home	_____
Work	_____

**NOTE:** UNLESS SIGNED, ACCOMPANIED BY ALL FEDERAL W-2'S AND/OR ACCOMPANYING FEDERAL SCHEDULE, AND PAYMENT OF THE BALANCE OF TAX DECLARED DUE (LINE 8) AND AT LEAST 1/4 OF THE ESTIMATED TAX (LINE 15), THIS FORM IS NOT A LEGAL FINAL RETURN OR DECLARATION 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) \$ \_\_\_\_\_
2. Adjustments (Complete Worksheet A on Page 2) ..... \$ \_\_\_\_\_
3. Taxable wages & misc. income (Sum of lines 1 & 2)..... \$ \_\_\_\_\_
4. Other taxable income (from Page 2, line 3D. If net loss enter as -0-) (ATTACH ALL FEDERAL FORMS)..... \$ \_\_\_\_\_
5. Total income subject to tax (Line 3, Plus Line 4)..... \$ \_\_\_\_\_
6. Granville tax: 1.5% (.015), of Line 5..... \$ \_\_\_\_\_
7. Credits
  - A. Tax withheld by employer for Village Of Granville per W-2 ..... \$ \_\_\_\_\_
  - B. Estimated tax paid to Village Of Granville..... \$ \_\_\_\_\_
  - C. Credit allowed for income taxable to other cities (See line instructions) ..... \$ \_\_\_\_\_
  - (Attach copies of Municipal Tax Return or W-2 documenting this tax)**
  - D. Prior year overpayments (Not included in Line 7B)..... \$ \_\_\_\_\_
  - E. TOTAL CREDITS..... \$ \_\_\_\_\_
8. TAX BALANCE DUE (LINE 6 less Line 7E) ..... \$ \_\_\_\_\_
9. A. Late Payment Penalty (See Instructions) \$ \_\_\_\_\_ Interest (1% per month) \$ \_\_\_\_\_ Total Late Payment P&I \$ \_\_\_\_\_
- B. Late Filing Penalty (See Below) ..... \$ \_\_\_\_\_
- (Not more than 30 days - \$25.00, More than 30 days, but not more than 120 days - \$50.00, More than 120 days - \$100.00)
10. TOTAL TAX DUE INCLUDING PENALTY & INTEREST (Sum of Lines 8, 9A and 9B)..... \$ \_\_\_\_\_
11. Overpayment to be refunded \$ \_\_\_\_\_ OR Credit to next year estimate \$ \_\_\_\_\_

**If tax due/refund amount is under \$5.00, no payment is required; no refund/credit carry forward will be issued.**

**DECLARATION OF ESTIMATED TAX FOR YEAR 2015**

12. Total income subject to tax \$ \_\_\_\_\_ (Multiply by tax rate of 1.5% for gross tax)..... \$ \_\_\_\_\_
13. Less expected credits:
  - A. Granville tax to be withheld by employer ..... \$ \_\_\_\_\_
  - B. Credit for income taxable to other municipalities (Limited to .75%)..... \$ \_\_\_\_\_
  - C. TOTAL CREDITS (Sum of Line 13A and 13B)..... \$ \_\_\_\_\_
14. Net tax due (Line 12 Less Line 13C - if \$50.00 or more, estimated payments required) ..... \$ \_\_\_\_\_
15. Amount of quarterly payments due (Line 14 ÷ 4) ..... \$ \_\_\_\_\_
16. Overpayments from prior year (Line 11 if Credited) ..... \$ \_\_\_\_\_
17. Amount paid with this declaration (Line 15 Less Line 16) ..... \$ \_\_\_\_\_
18. Balance of estimated tax due (Line 14 Less Line 16 & 17) ..... \$ \_\_\_\_\_

<b>TOTAL PAYMENT DUE:</b> LINE 10 \$ _____ + LINE 17 \$ _____ = .....AMOUNT DUE WITH TAX FILING \$ _____
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**I certify that I have examined this return (including accompanying schedules and statements) and to the best of my knowledge and belief it is true, correct, and complete. If prepared by a person other than taxpayer, the declaration is based on all information of which preparer has any knowledge.**

_____ Signature of Person Preparing if Other Than Taxpayer	_____ Date	_____ Signature of Taxpayer	_____ Date
_____ Address	_____ Telephone #	_____ Signature of Taxpayer	_____ Date

**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 Granville Village) (Please include the calculations used to determine the partial year credit) ..... A1 \$ \_\_\_\_\_
- 2. Employee business expenses reported on Form 2106, Fed. Sch. A and on Federal 1040, Page 2. The deduction will not be permitted if Form 2106 is not provided ..... A2 \$ \_\_\_\_\_  
Only expenses incurred in earning Granville taxable income which are not otherwise deductible on Sch. A are allowed. Expenses incurred while working in another city must be applied to that city first, reducing the credit allowed on Pg. 1
- 3. Miscellaneous income not on W-2 form such as: tips, work related bonuses/prizes, commissions, back pay awards, income reported as misc. income on Fed. Form 1040 etc..... A4 \$ \_\_\_\_\_
- 4. Gambling winnings, lottery, prizes etc..... A5 \$ \_\_\_\_\_
- 5. TOTAL ADJUSTMENTS (enter page 1, Line 2 ) .....TOTAL A6 \$ \_\_\_\_\_

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

**1. SCHEDULE C – SELF EMPLOYMENT INCOME** (Profit or Loss must be reported)

**ATTACH FEDERAL SCHEDULE C (PAGES 1 & 2). IF TAXES WERE PAID TO OTHER CITY(S), ATTACH COPY(S) OF OTHER CITY RETURN TO VALIDATE THE .75% CREDIT AGAINST YOUR GRANVILLE TAX.**

- A. Enter net profit or loss from Federal Sch. C ..... 1A \$ \_\_\_\_\_  
(If you are a non-resident of Granville and Schedule C includes income earned within and outside Granville, complete Schedule Y below to determine income allocable to Granville and proceed to line 1B)
- B. Enter percentage from Schedule Y, Step 5..... 1B \$ \_\_\_\_\_
- C. Taxable income is line 1A, or, line 1A multiplied by % on line 1B (enter total on 3A below).....TOTAL 1C \$ \_\_\_\_\_  
Business Name: \_\_\_\_\_ Business Address \_\_\_\_\_  
Nature of Business: \_\_\_\_\_ Date Started \_\_\_\_\_ Date Ended \_\_\_\_\_

**2. SCHEDULE E – OTHER BUSINESS INCOME** (Profit or Loss must be reported)

**ATTACH FEDERAL SCHEDULES (Pages 1 & 2) E, F, K-1, ETC.**

- A. Rental income (gain/loss) ..... 2A \$ \_\_\_\_\_
- B. Farm income (gain/loss) ..... 2B \$ \_\_\_\_\_
- C. Partnership income ..... 2C \$ \_\_\_\_\_
- D. Other \_\_\_\_\_ ..... 2D \$ \_\_\_\_\_
- E. TOTAL (sum of 2A through 2D; enter total on line 3B below)..... 2E \$ \_\_\_\_\_

**3. SUMMARY OF ALL BUSINESS INCOME - ATTACH ALL APPLICABLE SCHEDULES & STATEMENTS**

- A. Enter amount of income (gain or loss) from line 1C of Schedule C above ..... 3A \$ \_\_\_\_\_
- B. Enter amount of income (gain or loss) from line 2E of Schedule E above..... 3B \$ \_\_\_\_\_
- C. Less net loss per previous Granville Tax Returns (see note below) .....3C - \$ \_\_\_\_\_
- D. TOTAL BUSINESS INCOME. Total of lines A, B, & C; Enter on Page 1, Line 4 (if net loss - enter zero)..... 3D \$ \_\_\_\_\_

NOTE: The net loss from any business activity may not be used to offset salaries, wages, commissions or other compensation or non-business income. Net operating losses may be carried forward five years.

**SCHEDULE Y – BUSINESS APPORTIONMENT FORMULA**

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

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

**2015 DECLARATION AND RETURN PAYMENT CALENDAR**

**APRIL 15, 2015**  
File Declaration  
with 1/4 payment

**JULY 15, 2015**  
Make 2nd  
quarterly payment

**OCTOBER 15, 2015**  
Make 3rd  
quarterly payment

**JANUARY 15, 2015**  
Make 4th  
quarterly payment

**APRIL 15, 2016**  
File Return. Pay  
quarterly payment