

**INDIVIDUAL - 2010
INCOME TAX RETURN
SPENCERVILLE**
Due Date 04/15/2011
Instructions On Reverse Side of Form

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF SPENCERVILLE INCOME TAX
DEPARTMENT
PO BOX 57
Spencerville OH 45887

Voice 419-647-4171 Fax 419-647-2024
www.spencervilleoh.com

Taxpayer's Social Security No.	
HomeTelephone No.	BusinessTelephone No.
Spouse's Social Security No.	
Spouse's Name	
HomeTelephone No.	BusinessTelephone No.
Filing Status <input type="checkbox"/> Single <input type="checkbox"/> Married filing joint <input type="checkbox"/> Married filing separate	
<input type="checkbox"/> RESIDENT <input type="checkbox"/> NON-RESIDENT	
IF YOU HAVE MOVED DURING TAX YEAR - GIVE DATES INTO / / OUT OF / /	
IF YOU RENT, PLEASE GIVE LANDLORDS INFORMATION NAME _____ ADDRESS _____	

Name _____

And _____

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 Spencerville tax due before credits (1.250% of line 3) 4

5 Estimated tax payments made to Spencerville 5

6 Taxes withheld and paid to Spencerville 6

7 Overpayment from prior year(s) 7

8 Taxes withheld and paid to other localities 8

Credit cannot exceed 100.0% of tax withheld up to 1.25% of income earned in each location.

9 Total credits (add lines 5 through 8) 9

Refund (Issued if greater than 1.00)

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 1.00)

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 2011

15 Estimated income 15

16 Estimated tax due. Multiply line 15 by 1.250% 16

17 Taxes to be withheld and paid to Spencerville 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

Taxpayer's Signature Date

Spouse's Signature Date

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