

**INDIVIDUAL - 2016
INCOME TAX RETURN
SPENCERVILLE
Due Date 04/17/2017**

**Instructions On Reverse Side of Form or
Separate page on website**

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.
IF YOU HAVE MOVED DURING TAX YEAR - GIVE DATES INTO / / OUT OF / /	
IF YOU RENT, PLEASE GIVE LANDLORDS INFORMATION	
NAME _____	
ADDRESS _____	

Name _____

And _____

Address _____

Filing Status

Single

Married filing joint

Married filing separate

RESIDENT

NON-RESIDENT

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 (1.500% 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 % of tax withheld up to 1.50% 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 2017

15 Estimated income 15 _____

16 Estimated tax due. Multiply line 15 by 1.500% 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. _____

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