

**INDIVIDUAL - 2016
INCOME TAX RETURN
BATAVIA**

Due Date 04/18/2017

**Filing is required even if no tax is due
Include copies of all W-2 forms
Federal Schedules are requested
Web address: villageofbatavia.org**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF BATAVIA

389 E Main St
Batavia OH 45103

Voice 513-732-2740 Fax 513-732-5696
taxes@bataviavillage.org

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 Batavia tax due before credits (1.000% of line 3) 4

5 Estimated tax payments made to Batavia 5

6 Taxes withheld and paid to Batavia 6

7 Overpayment from prior year(s) 7

No credit for taxes paid to another city.

8 Total credits (add lines 5 through 7) 8

Refund (Issued if greater than 10.00)

9 If line 8 is greater than line 4, subtract line 4 from line 8. This is the amount you overpaid 9

10 Amount of line 9 to be credited to next years estimate 10

11 Amount of line 9 to be refunded 11

Tax Due (if greater than 10.00)

12 If line 4 is more than line 8, subtract line 8 from 4, this is the tax amount you owe 12

13 Penalties and interest **Late File** _____ **Late Pay** _____ **Late Estimate** _____ **Interest** _____ 13

Declaration of Estimate For 2017

14 Estimated income 14

15 Estimated tax due. Multiply line 14 by 1.000% 15

16 Taxes to be withheld and paid to Batavia 16

17 Prior credit applied to estimated tax payments (From line 10) 17

18 Net estimated tax due (subtract line 16 and 17 from 15) 18

19 Minimum amount due for first quarter (multiply line 18 by 25%) 19

Amount You Owe

20 Total amount due (add lines 12, 13 and 19) 20

The undersigned certifies that they have examined this return and any accompanying schedules and to the best of their knowledge it is correct and complete.

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 BATAVIA discuss this return with the preparer shown above ___Yes ___No