

VILLAGE OF NORTH KINGSVILLE INCOME TAX DEPARTMENT
3541 East Center Street P. O. Box 253 North Kingsville, Ohio 44068
(440) 224-1924 FAX (440) 224-0331

Guidelines for 2013 Individual Tax Return. See www.northkingsvilleohio.org for Tax Forms, Tax Ordinance & Rules & Regulations.

NOTE: Notification of Extension (Copy of Federal Extension) must be filed by or Postmarked by April 15, 2014 to avoid penalty.

INTEREST WILL BE CHARGED FROM APRIL 15, 2014 TO THE FILING DATE IF PAYMENT WAS DUE UPON RETURN. **FILING AN EXTENSION ONLY EXTENDS TIME ON PAPERWORK NOT PAYMENT OF TAXES.**

1. **ENTER NAME & ADDRESS.** If using a post office box please make sure your correct house number and street address are on the Tax Return. This is used for Street Listings, which go to the Police Department and Fire Department.

For the year 2013, if you have moved in or out of the Village your tax return can be prorated accordingly. **DOCUMENTATION MUST BE PROVIDED FOR TIME SPENT IN THE VILLAGE IF NOT A FULL YEAR.**

2. CHECK APPROPRIATE BOX FOR REASON OF EXEMPTION, i.e. Under 18, Active Military Duty, Retired receiving **ONLY** Social Security and/or Pensions, Other with explanation
3. A-E - Enter information from W-2's 1099's etc. Copies of all W-2's or 1099's **MUST** be attached. Use BOX 5 Medicare or Box 18 Local wages (if nothing in Box 5) . **ALSO INCLUDE LOTTERY WINNINGS.** These are **TAXABLE INCOME**
4. Line 1 is the gross compensation, which includes Deferred Compensation from Column C.
5. Lines 2-4 - Net Profits/income from Partnership, Federal schedules must be attached. **TAXABLE INCOME**
6. Line 5 is the total of lines 1 thru 4. **NOTE: BUSINESS LOSSES MAY NOT BE USED TO OFFSET** Line 1, which is gross compensation (W-2 wages). **ATTACH A COPY OF YOUR FEDERAL SCHEDULES.** Rental losses may not be used to offset any other business profits or W-2 wages.
7. Line 6. Enter Tax Due. This is 1% of Line 5.
8. Line 7 - These are your credits
 - 7 A. Total amount of money paid from your declaration payments
 - 7 B. Total amount of North Kingsville Taxes deducted by employer on W-2's.
 - 7 C. Total amount of credit for Income Taxes paid in other cities/Villages. Credit is one half (1/2) of one percent per W-2 with other municipal taxes withheld. If a portion of the earnings are taxed, the portion taxed has the 1/2% credit and the remaining portion is taxed at the one percent (1%). **EXAMPLE: \$10,000 earned, \$5,000 taxed at 1.8%, the tax shown would be \$90. Your credit for North Kingsville would be \$25. (1/2 of \$5000 X 1%).** The untaxed amount of \$5,000 would be taxed at 1 %, which would be \$50. The total tax due to North Kingsville would be \$75. One W-2 cannot offset another W-2. **EXAMPLE: If you have a W-2's reflecting wages earned in Ashtabula of \$10,000 and a W-2 with wages earned to Ashtabula Township of \$8,000 your taxes due would be \$50 from the Ashtabula W-2 and \$80 from the Ashtabula Township W-2.**
9. Line 8 Enter Total Credit Here - Total amount of lines 7 A, B, & C.
10. Line 9. Balance due, subtract line 8 from line 6 -unless there is an overpayment- this is the amount due. If amount due is \$1.00 or more payment must be paid in full by April 15, 2014 to avoid a \$50 penalty and interest.
11. Line 10. This shows the overpayment, (line 8 is larger than line 6). No refund for \$1.00 or less.
12. Line 11. Enter the amount to be refunded. (Line 10) Declaration must be filed and paid before refund issued.
13. Line 12. Enter amount to be credited to your 2014 Taxes.
14. Line 13. Total income subject to tax of 1%. This is for 2013.
15. Line 14 a, b & c will let you enter your credits.
 - a. Taxes to be taken out of your pay and remitted to North Kingsville.
 - b. This is a carryover of taxes you paid in 2013.
 - c. This is % of 1% of taxes paid on wages in other taxing municipalities.
 - d. Total credits from a, b & c
16. Line 15- 1% tax minus the total credits
17. Line 16 - Declaration payment for 2014 must to be at least one quarter of Line 15.
18. Line 17- Amount you would like to donate to the Holiday Decoration Fund.
19. Line 18- Total amount due from lines 9, 16 and 17.
20. **SIGNATURE MUST BE ON TAX RETURN TO BE COMPLETE & put your Social Security Number under your signature.**
21. Your phone number.
22. Your Landlord name and address.

Office Hours are Monday through Friday, 8:00 AM to 5:00 PM. Voice mail is available 24 hours a day to leave a message for the Tax Department to get back with you. Make sure you leave a name, phone number and a short message so we can get back with you.

If you have a problem with your Tax Return, please call the Tax Office.
It is better to ask questions first to avoid problems later.

If using a 2106, you must attach a copy of your Federal Tax Return and your Schedule A, otherwise it will not be allowed.
2% AGI does apply when using a 2106 expense.

**EVERYONE MUST FILE -- \$50.00 PENALTY FOR LATE OR NON-FILING
EXTENSION MUST BE FILED BY APRIL 15
THIS IS NOT A FEDERAL RETURN**

<p>W-2'S & 1099'S</p> <p align="center">MUST BE ATTACHED OR</p> <p align="center">TAX CREDIT WILL BE DISALLOWED</p>	<p>File this Return with the North Kingsville Income Tax Dept. P.O. Box 253, North Kingsville, Ohio 44068 on or before April 15, 2014</p> <p align="center">INDIVIDUAL INCOME TAX RETURN</p> <p align="center">2013 North Kingsville, Ohio Income Tax 2013</p> <p align="center">For Taxable Calendar Period from January 1, 2013 through December 31, 2013</p>	<p>(Tax Office Only) Processed By _____</p> <p>Extended _____</p> <p>___ Cash ___ MO</p> <p>___ Check</p> <p>Paid with this return \$ _____</p> <p>Holiday Fund \$ _____</p>
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NAME:

C/O:

ADDRESS:

CITY/STATE:

I AM NOT REQUIRED TO PAY TAX BECAUSE:

- Under 18 for the entire tax year of 2013
- Retired, individuals receiving only pension, Social Security, Interest, or dividend income.
- An active member of the United States Armed Forces for the entire year. Doesn't include civilians employed by military or National Guard.
- Other (explain) _____

ENTER TOTAL wages, salaries, commissions and other compensation received in the tax period from January 1, 2013 to December 31, 2013 BEFORE PAYROLL DEDUCTIONS. Also enter amount of Village Income Tax withheld. Documentation needed for partial year residents.

A Name of Employer	B Where Employed (City & State)	C Total Gross Earnings Before Deductions	D N. Kingsville Tax Withheld	E Other Taxes Withheld

1. Gross Compensation (amount from column C)	
2. Net Profits from Rentals (Schedule B), including farms	
3. Net profits from Business or Professions (Schedule C), including farms	
4. Income from Partnership, etc. (Schedule D), including farms	
5. Total Income from all sources subject to North Kingsville Income Tax (Total lines 1,2,3,4) .. (Losses from lines 2,3, & 4 cannot be deducted from line 1)	
6. Enter Total Tax Due 1% of Line 5	
7. How much have you paid on your 2013 North Kingsville Tax:	
A. Estimated payments for 2013 for North Kingsville Income Tax	
B. North Kingsville Income Tax withheld from wages (amount column D)	
C. Credit for City Tax withheld in other cities (amount in column E; credit cannot exceed 1/2 of 1% of wages taxed by other municipalities per W2)	
8. Total of Lines 7A - 7C	
9. Balance of Tax due for 2013 (Subtract Line 8 from Line 6)	
10. If your credits (Line 8) are larger than your tax (Line 6) enter the difference	
11. Enter amount to be refunded (Declaration must be made before refund given)	
12. Enter amount to be credited to your 2014 Taxes	

NOTE - No refund will be made until 2014 Declaration is filed. If balance is less than \$1.00 payment need not be made, and if overpayment is less than \$1.00 no refund will be issued.

DECLARATION OF ESTIMATED TAX FOR YEAR 2014

13. Total income subject to tax \$ _____ times 1% \$ _____	
14. Loss Credits	
a. Withheld by employer for North Kingsville \$ _____	
b. Credits remaining from prior year \$ _____	
c. Payments to another municipality (not to exceed 0.50% of amount taxed) \$ _____	
d. Total Credits \$ _____	
15. Net estimated tax (Line 13 minus Line 14d) \$ _____	
16. Amount paid with this Declaration (at least 1/4 of Line 15)	
17. If you would like to donate to the Holiday Decoration Fund - please enter amount	
18. TOTAL AMOUNT PAID FROM LINES 9, 16 AND 17	

CERTIFICATION

I declare that the information contained in this return has been examined by me and to the best of my knowledge, believe it is a true & complete return.

(Signature of Firm or person, other than taxpayer, preparing return)	Date	(Signature of Taxpayer) (MUST BE SIGNED)	Date
Phone # _____		S.S. or Fed I.D. # _____	
<input type="checkbox"/> By checking this box we can discuss tax return with tax preparer.		Phone # _____	
Landlord Name & Address _____			

