



ACCOUNT NUMBER
(not social security number)

TAX OFFICE USE
Processed by:

Paymt \$

No. #

MAIL TO:
City of Orrville
Income Tax Dept.
PO Box 61
Orrville, OH 44667

Complete Name & Address (include spouse's name if joint return)

IMPORTANT: Orrville taxes 'gross earnings', which are the largest amounts shown in box #5 or box #18 of all W2 forms. Enter gross earnings on Line #1. Enter on Line #2 all other taxable income reported to you on forms 1099, net profit from business or rental activity, partnership or other pass through entity income. See schedule X on reverse side of this return.

Attach copies of all W2's, 1099 forms, Schedules C, E, H or K1, as applicable.

Return Type: Joint _____ Single _____
Status: Resident _____ Non-Resident _____
Part Year Resident: From _____ To _____
Your SSN _____
Spouse SSN _____

IF YOUR ONLY SOURCE OF INCOME IS FROM W-2 WAGES, YOU NEED ONLY COMPLETE PAGE 1 OF THE RETURN.

INDIVIDUAL INCOME TAX RETURN FORM

INCOME	1	Total wages, salaries, tips, etc.	1	
	2	Other income from Schedule X on reverse.	2	
	3	Adjustments	3	
	4	Total Orrville Income (add lines 1, 2, and 3)	4	
	5	Orrville income tax (multiply line 4 by 1% (.010))	5	\$ _____
PAYMENTS & CREDITS	6	Income tax withheld for Orrville from W2's.	6	
	7	Prior year credits carried forward.	7	
	8	Estimated tax payments.	8	
	9	Credit for tax paid to other cities. (limit of 1.%)	9	
	10	Total payments and credits (add lines 6 thru 9)	10	\$ _____
BALANCE DUE	11	Balance Due (If line 5 is more than 10 - enter balance due)	11	\$ _____
	12	Late filing penalty, if applicable	12	\$ _____
	13	Interest (.5% per month) if applicable	13	\$ _____
	14	Total due (add lines 11 thru 13)	14	\$ _____
	15	Overpayment (if line 5 is less than line 10, enter overpayment)	15	\$ _____
	16	Amount of line 15 to be refunded (must be more than \$5.00)	16	\$ _____
	17	Amount of line 15 to be credited to next year	17	\$ _____
ESTIMATE FOR NEXT YEAR	DECLARATION OF ESTIMATED TAX FOR 2015			
	18	Estimated income subject to tax \$ _____ x 1.0% (.010)	18	\$ _____
	19	Less estimated tax to be withheld or paid to other cities.	19	\$ _____
	20	Subtract line 19 from line 18. This is your 2015 estimated tax.	20	\$ _____
	21	Enter 25% of line 20. This amount is due with 2014 return.	21	\$ _____
	22	Less credits. Enter line 17 from above.	22	\$ _____
TAX DUE	23	Net estimated tax due. Subtract line 22 from line 21.	23	\$ _____
	24	Enter balance due from line 14 above. (no tax due if less than \$1.00)	24	\$ _____
	25	Total Tax Due (add lines 23 and 24)	25	\$ _____

The undersigned declares that this return (and accompanying schedules) is a true, correct and complete return for the taxable period and that the figures used herein are the same as used for Federal Income Tax purposes.

Signature of preparer, other than taxpayer _____ Date _____ Signature of taxpayer _____ Date _____
 Name and address of preparer _____ telephone _____ Signature of spouse (if joint) _____ telephone _____

SCHEDULE X BUSINESS, RENTAL, PARTNERSHIP AND OTHER INCOME

	A SELF EMPLOYMENT INCOME - Describe business type	Net Profit or (loss)
A1	_____	_____
A2	_____	_____
A3	BUSINESS TOTAL.....	_____
	* RESIDENT BUSINESS PROFITS ARE ALL SUBJECT TO ORRVILLE TAX.	
	* NON-RESIDENTS MAY ALLOCATE PROFITS TO ORRVILLE - SEE SCHEDULE Y.	
A4	NON-RESIDENT BUSINESS TOTAL A3 TOTAL MULTIPLIED BY SCH Y % SHOWN ON LINE 7.....	_____
Attach copies of forms 1099 and Federal Schedules C		
	B RENTAL ACTIVITY INCOME - List rental property address	Net Profit or (loss)
B1	_____	_____
B2	_____	_____
B3	_____	_____
B4	_____	_____
B5	_____	_____
B6	RENTALS TOTAL.....	_____
	* Orrville residents report on all properties.	
	* Non-residents report on all properties located in Orrville.	
Attach copies of Federal Schedules E		
	C PARTNERSHIPS, LLC, S-CORP AND OTHER - List entity name	Net Profit or (loss)
C1	_____	_____
C2	_____	_____
C3	_____	_____
C4	OTHER TOTAL.....	_____
	*Describe other types of income. Refer to the listing of taxable and non-taxable income provided on the general information sheet.	
D1	TOTAL SCHEDULE X INCOME	_____
(ADD LINES A3 OR A4, B6 AND C4) ENTER ON LINE 2 OF TAX RETURN		

SCHEDULE Y NON-RESIDENT BUSINESS ALLOCATION FORMULA

This schedule is for use by non-resident taxpayers to calculate the amount of business profit/loss that is to be allocated to Orrville.	A. LOCATED EVERYWHERE	B. LOCATED IN ORRVILLE	C. PERCENTAGE (B ÷ A)
1 Average original cost of real and tangible personal property	_____	_____	_____
2 Gross annual rental paid, multiplied by 8	_____	_____	_____
3 Total Step 1	_____	_____	_____ %
4 Wages, salaries and other compensation paid	_____	_____	_____ %
5 Gross receipts from sales made or work performed	_____	_____	_____ %
6 Total of Percentages (add percentages in column C)			_____ %
7 Average Percentage			_____ %
* Use the average % on line 7, times the amount on line A3 of Schedule X to get the amount to enter on line A4.			