Village of Navarre Income Tax Return

27 Canal St. W., Navarre, Ohio 44662
330-879-5508
www.navarreohio.net

For calendar year ending December 31
DUE DATE - April 15
FILING REQUIRED IF NO TAX DUE

TAXPAYER'S SOCIAL SECURITY #

SPOUSE'S SOCIAL SECURITY #

Indicate Filing Status: _____Individual _____Joint _____Other

BIRTHDATE _____

Home Phone ( ) Work Phone ( )

Are you or the business entity a resident? ( ) Yes ( ) No

Moved INTO NAVARRE on _____

PREV. ADDRESS _____

Moved OUT OF NAVARRE on _____

PRESENT ADDRESS _____

PRINT NAME and ADDRESS IF MISSING (indicate changes).

IF EXEMPT FROM FILING TAX RETURN, ENTER CODE # (See Reverse Side)

ALL W-2 & 1099 COPIES MUST BE ATTACHED

EMPLOYER'S NAME	WHERE EMPLOYED	Credit for tax paid to other cities (up to 1.5%)		NAVARRE TAX PAID		TOTAL W-2 & 1099 WAGES	
	TOTAL	$		$		$	

1. **Wages and Salaries** - Use highest dollar amounts on each W-2. 1. $ _____
2. Total Adjustments from back of form (if applicable) - Losses cannot reduce W-2 earnings 2. $ _____
3. Wages earned outside Navarre by part year non-resident or prior to 18th birthday DEDUCT 3. $ _____
4. Allowable Employee Business Expenses (DOCUMENTATION REQUIRED) DEDUCT 4. $ _____
5. Taxable Income (Add lines 1 and 2, subtract lines 3 and 4) 5. $ _____
6. Village of Navarre Tax (1.5% of line 5 for 1st half of 2019; 1.75% of line 5 for 2nd half of 2019) 6. $ _____
7. **CREDITS**
   - **a.** Navarre Income Tax withheld by employee 7a. $ _____
   - **b.** Municipal tax paid to other cities 7b. $ _____
   - **c.** (Cannot exceed 1.5% of line 5 for 1st half of 2019 and 1.75% of line 5 for 2nd half of 2019.) 7c. $ _____
   - **d.** Payment od Declaration od Estimated Tax DEDUCT 7d. $ _____
   - **e.** Total Credits (add a, b, c) 7e. $ _____
8. **BALANCE DUE** (If line 6 exceeds line 7d enter the difference here 8. $ _____
9. Overpayment claimed (If line 7d exceeds line 6) 9. $ _____
10. Credit next year's Estimate 10. $ _____
11. **TO BE REFUNDED** 11. $ _____
12. Late filing penalty is $25 per month per return (Capped at $150.00 per return) for failure to file a timely return 12. $ _____
13. Late payment penalty is a one-time 15% penalty of the unpaid balance at the time that the payment is due 13. $ _____
14. Interest will be calculated at the July Federal Short-Term interest rate plus 5% 14. $ _____
15. **TOTAL AMOUNT DUE MUST BE PAID IN FULL WITH THIS RETURN TO AVOID PENALTIES** 15. $ _____
16. **NO TAXES OF LESS THAN $10.00 SHALL BE COLLECTED OR REFUNDED**

OPTIONAL DECLARATION OF ESTIMATED TAX **FOR TAX YEAR** _____

1. Total income subject to Navarre tax $ _____ x 1.75% 1. $ _____
2. LESS TAX TO BE WITHHELD 2. $ _____
3. Balance estimated tax 3. $ _____
4. Less Credits: a. Overpayment on previous year's return 4a. $ _____
   b. Other (specify) 4b. $ _____ Total Credits 4. $ _____
5. Net tax due (line 3 less total of lines 4) 5. $ _____
6. Amount paid with this return (not less than 1/4 x line 3 minus line 4). Make remittance payable to **Village of Navarre** 6. $ _____

I CERTIFY I HAVE EXAMINED THIS RETURN (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) AND TO THE BEST OF MY KNOWLEDGE, I BELIEVE IT IS TRUE, CORRECT AND COMPLETE.

May the Village discuss this tax return with preparer? ☐ Yes ☐ No

Signature of Person Preparing, If Other Than Taxpayer Date

Signature of Taxpayer Required Date

Address or Name and Address of Firm Preparer's Phone

Spouse's Signature Date

File this return with Navarre Tax Department on or before **April 15**, or within 4 months after close of a fiscal year or period. Requests for extensions must be submitted in writing on or before the filing deadline.

FORM F16

PROFIT OR LOSS FROM SCHEDULE C & E OR K-1

(A COPY OF THE FEDERAL FORM 1040 AND APPLICABLE SCHEDULES MUST BE ATTACHED)

1. SCHEDULE C NET PROFIT OR LOSS . . . . . $ _____
2. SCHEDULE E NET PROFIT OR LOSS . . . . . $ _____
3. NET PROFIT OR LOSS (Add lines 1 and 2) . . . . . $ _____
4. ADD ITEMS NOT DEDUCTIBLE . . . . . $ _____
5. DEDUCT ITEMS NOT TAXABLE . . . . . $ _(_____)_
6. LESS ALLOCABLE NET LOSS CARRY FORWARD (Five year limit) . . . . . $ _____
7. NET PROFIT OR LOSS TAXABLE BY THE VILLAGE OF NAVARRE (Line 3 + Line 4 - Line 5 - Line 6) . . . $ _____

CODES AND REASONS FOR EXEMPTIONS OF INCOME

CODE #	REASON
001	Retired, receiving only pension, social security, interest or dividends.
002	Under 18 years of age all year _____ (Attach documentation of date of birth.)
003	Active Duty Military
004	Taxpayer is deceased. Give date of death: _____
005	Moved from Navarre prior to January 1. Give date of move and new address (Attach required documentation.) _____
006	On Government Assistance, received no other income.
007	Received only alimony and/or child support and no other income.
008	Unemployed all year, received only unemployment compensation and no other income.
009	Disabled, received only Worker's Compensation.
010	Other: Give reason _____

CODES AND REASONS FOR REFUND REQUESTS

CODE #	REASON
011	I was under the age of 18 and taxes were withheld. (Attach proof of age: Birth Certificate, Driver's License, State ID Card.)
012	Due to the 2106 expense guidelines there is an overpayment. (Attach Federal Forms 1040, 2106 and Schedule A.)
013	I was only a part-year resident. (Attach documents that prove the move out date.)
014	I was a non-resident that worked less than 100% in the Village. (Obtain required form from Income Tax Department.)
015	My employer erroneously withheld Navarre tax. (Attach documentation of non-residency and out of City employments.)
016	My employer over-withheld Village of Navarre tax.
017	I overpaid my estimate.
018	Other: Give reason _____ (Attach necessary documentation.)

TAX RETURN CHECKLIST

1. Did you sign your return?
2. Did you use the highest amount of gross wages on W-2's?
3. Did you enclose all supporting documentation?
4. If you moved during the year, did you indicate your new address and provide documentation?
5. Did you attach proof of age, if applicable?
6. Did you sign and enclose your check or money order if an amount is due? Please do not send cash.