GRANVILLE INCOME TAX BUREAU 141 EAST BROADWAY, PO BOX 514 GRANVILLE, OHIO 43023 (740) 587-2764 Fax 587-0128 WEBSITE: www.granville.oh.us

VILLAGE OF GRANVILLE 2021 INDIVIDUAL INCOME TAX RETURN

DUE ON OR BEFORE APRIL 15, 2022

Social Security Number	Spouse's Social Security Number

NAME AND ADDRESS

City of Residence:				
Part Year Resident	t: Date Moved In:			
Telephone:	Home Work			
Email:				

A COPY OF YOUR FEDERAL FORM 1040, AND SCHEDULE 1
MUST BE SUBMITTED WITH YOUR GRANVILLE RETURN

				WITH TOOK GRANVILLE RETORN
	E: UNLESS SIGNED, ACCOMPANIED BY ALL FEDERAL W-2'S ANI AT LEAST 1/4 OF THE ESTIMATED TAX (LINE 15), THIS FORM IS N			
	Qualifying wages, salaries, and other employee compensation (G			
	Adjustments (Complete Worksheet A on Page 2) from P		, ,	· ·
3.	Taxable wages & misc. income (Sum of lines 1 & 2)	-		
4.	Other taxable income (from Page 2, line 3D. If net loss e			
5.	Total income subject to tax (Line 3, Plus Line 4)			
6.	Granville tax: 1.5% (.015), of Line 5			
	Credits			
	A. Tax withheld by employer for Village of Granville per	· W-2	\$ <u></u>	
	B. Estimated tax paid to Village of Granville			
	C. Credit allowed for income taxable to other cities (Se			
	(Attach copies of Municipal Tax Return or W-2 d			
	D. Prior year overpayments (Not included in Line 7B)			
	E. TOTAL CREDITS			
8.	TAX BALANCE DUE (LINE 6 less Line 7E)			\$
9.	A. Late Payment Penalty (15%) \$ Interes	t (5% per annum)	\$ Total Late Payment P&I	\$
	B. Late Filing Penalty (\$25.00 per month, \$150.00 Maxi			
10.	TOTAL TAX DUE INCLUDING PENALTY & INTEREST (S	um of Lines 8, 9A	and 9B)	\$
11.	Overpayment to be refunded \$ OR Credit	to next year esti	mate \$	
	If tax due/refund amount	is under \$10.00,	no payment is required; no refund will be is:	sued.
	DECLADATION	LOE ECTIM	ATED TAY FOR YEAR 0000	
	DECLARATION	OF ESTIM	ATED TAX FOR YEAR 2022	
12.	Total income subject to tax \$ (Multiply by	tax rate of 1.5%	for gross tax)	\$
	Less expected credits:		,	
	A. Granville tax to be withheld by employer		\$ <u></u>	
	B. Credit for income taxable to other municipalities (Lir	mited to .75%)	\$ <u></u>	
	C. TOTAL CREDITS (Sum of Lines 13A and 13B)			\$
14.	Net tax due (Line 12 Less Line 13C - if \$200.00 or more			
15.	Amount of quarterly payments due (Line 14 ÷ 4)			\$
16.	Overpayments from prior year (Line 11 if Credited)			\$
	Amount paid with this declaration (Line 15 Less Line 16			
	Balance of estimated tax due (Line 14 Less Line 16 & 1			
	·	<u>, </u>		
		IE 47 A		
	TOTAL PAYMENT DUE: LINE 10 \$ + LIN	NE 17 \$	=AMOUNT DUE WITH TAX F	ILING \$
	rtify that I have examined this return (including accom ect, and complete. If prepared by a person other than			
Sign	ture of Person Preparing if Other Than Taxpayer	Date	Signature of Taxpayer	Date
Addı	355	Telephone #	Signature of Taxpayer	Date

WORKSHEET A - ADJUSTMENTS TO LINE 1 INCOME

ATTACH VERIFICATION OF ADJUSTMENTS (Provide calculations to determine credit)

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Par (Pl e	tial year resident. Enter income earned as a non-resident (Do not include income earned working in Granville Village) ease include the calculations used to determine the partial year credit)	1 \$
Mis	cellaneous income not on W-2 form such as: tips, work related bonuses/prizes, commissions, back	
	awards, income reported as misc. income on Fed. Schedule 1 line B - etc	
	nbling winnings, lottery, prizes etc	
TO	TAL ADJUSTMENTS (enter page 1, Line 2)TOTAL A	
	***** STOP HERE IF YOU HAVE NO OTHER INCOME TAXABLE TO GRANVILLE - RETURN TO PAG	E 1 *****
SC	HEDULE C - SELF EMPLOYMENT INCOME (Profit or Loss must be reported)	
	TACH FEDERAL SCHEDULE C (PAGES 1 & 2). IF TAXES WERE PAID TO OTHER CITY(S), ATTACH COPY(S) OF HER CITY RETURN TO VALIDATE THE .75% CREDIT AGAINST YOUR GRANVILLE TAX.	
A.	Enter net profit or loss from Federal Sch. C	A \$
	(If you are a non-resident of Granville and Schedule C includes income earned within and outside Granville, complete	
	Schedule Y below to determine income allocable to Granville and proceed to line 1B)	
В.	Enter percentage from Schedule Y, Step 5	3
C.	Taxable income is line 1A, or, line 1A multiplied by % on line 1B (enter total on 3A below)TOTAL 10	C \$
	Business Name: Business Address	_
	Nature of Business: Date Started Date Ended	_
SC	HEDULE E - OTHER BUSINESS INCOME (Profit or Loss must be reported)	
AT	TACH FEDERAL SCHEDULES (Pages 1 & 2) E, F, K-1, FORM 4797.	
A.	Rental, Royalty income (gain/loss)	A \$
В.	Farm income (gain/loss)	3 \$
C.	Partnership, Trust income	C \$
D.	Other 20) \$
E.	TOTAL (sum of 2A through 2D; enter total on line 3B below)	= \$
SU	MMARY OF ALL BUSINESS INCOME - ATTACH ALL APPLICABLE SCHEDULES & STATEMENTS	
A.	Enter amount of income (gain or loss) from line 1C of Schedule C above	A \$
В.	Enter amount of income (gain or loss) from line 2E of Schedule E above	
C.	Less net loss per previous Granville Tax Returns (see note below)	
D.	TOTAL BUSINESS INCOME. Total of lines A, B, & C; Enter on Page 1, Line 4 (if net loss - enter zero)	
	TE: The net loss from any business activity may not be used to offset salaries, wages, commissions or other compensome generally reported on line A4 above. Net operating losses may be carried forward five years.	

(applicable for non-resident individuals doing business both within and outside Granville Village limits; Granville residents must report 100% of income and take credit for tax paid to another city on Page 1)

tane cret	in for tax paid to another city on Page 1)	A. Located Everywhere	B. Located In Granville	C. Percent (B ÷ A)	-
STEP 1	Avg. Value of Real & Tangible Personal Property	\$	\$	1	%
STEP 2	Gross Receipts from Sales Made and/or Work or Services Performed	\$	\$	2	%
STEP 3	Wages, Salaries and other Compensation Paid	\$	\$	3	%
STEP 4	TOTAL PERCENTAGES			4	%
STEP 5	AVERAGE PERCENTAGE (DIVIDE TOTAL PERCENTAGES BY NUMBER OF PERCENTAGES	S USED. ENTER HERE	AND ON LINE 1B)	5	%

2022 DECLARATION AND RETURN PAYMENT CALENDAR