



28 E Main Street
West Jefferson Ohio 43162
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www.westjeffersonohio.gov

VILLAGE OF WEST JEFFERSON
INCOME TAX RETURN
FOR THE CALENDAR YEAR 2021

PRINT NAME, ADDRESS AND PHONE NUMBER

PRIMARY SOCIAL SECURITY

JOINT SOCIAL SECURITY

DECLARING EXEMPTION

Exemption Certificate on Pg. 2 Must Be Completed

IF YOU MOVED DURING THE TAX YEAR, COMPLETE THIS BLOCK

Date moved into West Jefferson _____

Previous Address _____

Date moved out of West Jefferson _____

Present Address _____

FOR INCOME TAX DEPARTMENT USE ONLY

TOTAL _____ AUD _____

PAID W/RETURN: _____ CK NO. _____

DUE _____ OR TO 2022 _____ REFUND _____

PDF (tax return)

available at: www.westjeffersonohio.gov

W-2 COPIES MUST BE ATTACHED

PART YEAR RESIDENTS: You should complete this form using only information on income received and taxes withheld or paid while living or working in West Jefferson.

INCOME

1. TOTAL W-2 WAGES (USE W-2 BOX 5 OR BOX 18, WHICHEVER IS HIGHER) ATTACH ALL W-2S & W2GS.....1 \$ _____ (Worksheet 1/Column C)

2. NON-WAGE TAXABLE INCOME (FROM WORKSHEET II LINE 5 ON BACK OF FORM, WORKSHEET III, LINE 16.)... 2 \$ _____

3. TOTAL TAXABLE INCOME (ADD LINES 1 & 2.)3 \$ _____

TAX

4. WEST JEFFERSON TAX DUE BEFORE CREDITS (MULTIPLY LINE 3 BY 1%).....4 \$ _____

CREDITS

5. CREDIT FOR TAX WITHHELD FOR VILLAGE OF WEST JEFFERSON ONLY.....5 \$ _____

6. CREDIT FOR TAX PAID ON NON-WAGE INCOME (PAID TO WEST JEFFERSON ONLY)..... 6 \$ _____

7. 2020 ESTIMATED TAX PAYMENTS MADE TO THE CITY OF WEST JEFFERSON..... 7 \$ _____

INCLUDES ANY OVERPAYMENT CARRIED FROM 2020 TO 2021.

8. TOTAL CREDITS (ADD LINES 5, 6 & 7.).....8 \$ _____

9. SUBTRACT LINE 8 FROM LINE 4.9 \$ _____

OVERPAYMENT

NO TAXES OF \$10.00 OR LESS SHALL BE REFUNDED OR CREDITED

10. ENTER THE OVERPAYMENT AMOUNT YOU WANT APPLIED TO YOUR 2022 ESTIMATED TAX.10 \$ _____

11. ENTER THE OVERPAYMENT AMOUNT YOU WANT REFUNDED. (ALLOW 90 DAYS FOR YOUR REFUND).....11 \$ _____

BALANCE DUE

12. IF THE AMOUNT ON LINE 9 IS GREATER THAN \$10.00, ENTER THAT AMOUNT HERE. THIS IS YOUR 2021 BALANCE DUE.12 \$ _____

THIS AMOUNT MUST BE PAID WITH THIS FORM ON OR BEFORE APRIL 18, 2022 OR THE IRS DUE DATE.

13. PENALTY AND INTEREST (SEE INSTRUCTIONS. LATE FILING PENALTY \$25 PER MONTH NOT TO EXCEED \$150).....13 \$ _____

ESTIMATED INCOME TAX (LEAVE LINES 14-20 BLANK IF YOU WANT THE CITY TO CALCULATE YOUR ESTIMATED TAX FOR 2022 BASED ON YOUR 2021)

14. ESTIMATED TAXABLE INCOME FOR 2022 TAX YEAR..... 14 \$ _____

15. ESTIMATED TAX DUE (MULTIPLY LINE 14 BY 1%)15 \$ _____

16. TAXES TO BE WITHHELD AND PAID TO WEST JEFFERSON16 \$ _____

17. ESTIMATED TAX DUE FOR 2022 TAX YEAR (SUBTRACT LINE 16 FROM LINE 15.)17 \$ _____

18. FIRST QUARTER OF ESTIMATED TAX PAYABLE TO CITY OF WEST JEFFERSON (MULTIPLY LINE 17 BY 25%)....18 \$ _____

19. 2021 OVERPAYMENT (FROM LINE 10) APPLIED TO 2022 ESTIMATED TAXES.19 \$ _____

20. NET AMOUNT DUE FOR FIRST QUARTER 2022 (SUBTRACT LINE 19 FROM LINE 18.)20 \$ _____

TOTAL AMOUNT DUE WITH FORM

21. ADD LINES 12, 13 AND 20 AND ENTER THE SUM HERE. This is the total amount due with this form on or before April 18, 2022 or the IRS Due Date...21 \$ _____

Make checks payable to: VILLAGE OF WEST JEFFERSON INCOME TAX DIVISION. MAIL TO: 28 EAST MAIN STREET, WEST JEFFERSON OH 43162

I AUTHORIZE THE INCOME TAX DIVISION TO DISCUSS MY ACCOUNT WITH THE PREPARER NAMED BELOW. CHECK HERE

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE EXAMINED THIS RETURN AND ACCOMPANYING SCHEDULES AND STATEMENTS, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THEY ARE TRUE, CORRECT AND COMPLETE.
DECLARATION OF PREPARER (OTHER THAN TAXPAYER) IS BASED ON ALL INFORMATION OF WHICH PREPARER HAS ANY KNOWLEDGE.

SIGNATURE OF TAXPAYER

DATE

SIGNATURE OF TAXPAYER'S SPOUSE (IF JOINT RETURN)

DATE

SIGNATURE OF PERSON (AND FIRM) PREPARING RETURN, ADDRESS & PHONE NO.

Cash Check Money Order

CHECK OR MONEY ORDERS PAYABLE TO:
WEST JEFFERSON INCOME TAX

TO PAY BY CHARGE CARD: VISA MC
Enter number and expiration date fully and accurately. DISCOVER

Acct no. _____

3Digit Code _____ (Back of Card)

EXP. DATE: _____ AMT. CHARGED: _____

SIGNATURE: _____

WORKSHEET I – WAGE AND SALARY

A COPY OF EACH FORM W-2, 1099-MISC, 1099-K, W-2G, PAGE 1 OF FEDERAL FORMS 1040/1040A/1040EZ FORM 2106 AND SCHEDULE A

SPECIAL INSTRUCTIONS

I. If the tax withheld was paid to the Village of West Jefferson, enter the actual amount of tax withheld for West Jefferson in Column D.

Column A Date wages were earned (month/day).	Column B Name of municipality in which income was earned.	Column C Income earned in Column B municipality.	Column D West Jefferson Withholding
		Total Column C	Total Column D

WORKSHEET II – NON-WAGE INCOME A COPY OF EACH FEDERAL FORM OR SCHEDULE USED MUST BE ATTACHED.

- 1. NET PROFIT (LOSS) FROM SCHEDULE C. \$ _____
- 2. RENTAL PROFIT (LOSS) FROM SCHEDULE E. \$ _____
- 3. OTHER NON-WAGE INCOME (ATTACH EXPLANATION). \$ _____
- 4. LOSS CARRY FORWARD FROM PRIOR YEAR(S). \$ _____
- 5. COLUMN TOTAL (IF LESS THAN ZERO, USE ZERO). \$ _____

CARRY TOTAL FROM LINE 5 TO FRONT OF RETURN LINE 2.

WORKSHEET III – BUSINESS ALLOCATION FORMULA FOR NON-RESIDENT BUSINESSES

	A. All Locations	B. West Jefferson Locations	C. Column B ÷ A
1. a) Avg. Original Cost of Real & Tangible Personal Property	\$ _____	\$ _____	
b) Gross Annual Rental Receipts Multiplied by 8.....	\$ _____	\$ _____	
c) Total of Line 1.....	\$ _____	\$ _____	_____ %
2. Gross Receipts from Sales.....	\$ _____	\$ _____	_____ %
3. Wages, Salaries Paid.....	\$ _____	\$ _____	_____ %
4. Total Percentages			_____ %
5. AVERAGE PERCENT (Divide Total Percent by # of Percentages Used).			_____ %
	Enter here and on Line 3 of Worksheet II		_____ %

EXEMPTION CERTIFICATE (Signature is required on front of this form)

NO TAXABLE INCOME BECAUSE OF THE REASON INDICATED BELOW:

TAXPAYER'S SIGNATURE

- UNDER 18 for the entire year of _____. My date of birth is ___/___/___ (Attach proof of DOB)
- RETIRED - I received only pension, Social Security and/or interest or dividend income.
- ACTIVE MEMBER OF THE U.S ARMED FORCES FOR THE ENTIRE YEAR OF _____.
(This exemption does not include civilians employed by the military or the National Guard)
- NON-RESIDENT OF WEST JEFFERSON FOR THE ENTIRE YEAR OF _____.
- NO EARNED INCOME FOR THE ENTIRE YEAR OF _____.
(Public Assistance, SSI, Unemployment, etc. is not considered earned income.)