

2020 Leipsic EZ Individual Tax Return

Due on or before
April 15, 2021

FILING REQUIRED EVEN IF NO TAX IS DUE.

E-Mail: renee.spangler@leipsic.com

Residency Status ☐ Resident ☐ Non Resident ☐ Part Year Resident

Taxpayer's Name _____

Spouse's Name _____

Address _____

Taxpayer SSN: _____

Spouse SSN: _____

Phone Number: _____

E-mail Address: _____

If you moved during the year, you must

complete lines below

Date moved out of Leipsic _____ Into _____

Present Address _____

Previous Address _____

PART A

I AM NOT REQUIRED TO COMPLETE LINES 1-13 OF THIS TAX RETURN BECAUSE:

- ☐ ACTIVE DUTY MILITARY UNTIL DATE _____
- ☐ RETIRED PRIOR TO 2020
- ☐ UNDER 18 YEARS OF AGE
- DATE OF BIRTH (REQUIRED) _____
- ☐ ONLY INCOME IS FROM NON TAXABLE SOURCE, LIST SOURCE _____
- ☐ MOVED FROM LEIPSIC PRIOR TO 1/1/20, LIST DATE OF MOVE _____
- ☐ TAX PAYER DECEASED, LIST DATE OF DEATH _____
- ☐ NO EMPLOYMENT, EXPLAIN _____

PART B REQUIRED ATTACHMENTS: ALL W-2'S, 1099, FEDERAL FORM 1040 WITH SCHEDULES

Step 1.) Total Income as per attached W-2's & 1099 (Add up lines in box 5 or 18 whichever is greater) Step 1.) _____

Step 2.) Multiply Step 1 by Step 2.) _____

Step 3.) Leipsic Income Tax Withheld by employer: Enter as a negative, or zero _____

Step 4.) Income Tax withheld by employer for other city: Enter as a negative, or zero _____
(A maximum of 1.5% of this wage is allowed from each city)

Step 5.) Total Amount withheld _____

Step 6.) Total amount withheld Step 6.) _____

Step 7.) Estimated Taxes Paid: Enter as a negative, or zero Step 7.) _____

Step 8.) Credit Carryforward: Enter as a negative, or zero Step 8.) _____

Step 9.) Tax Due (Step 2 minus Step 6, 7 and 8) Step 9.) _____
Note: Refund or Tax Due of \$10.00 or less isn't payable

DECLARATION OF ESTIMATED TAX FOR YEAR 2021

MANDATORY IF YOU OWE \$200.00 OR MORE IN TAX THAT IS NOT WITHHELD, YOU MUST FILE AND PAY ESTIMATED TAX

Step 10. Total Estimated tax for 2021 (1.5% multiplied by Step 1)	10. \$	TAX OFFICE USE ONLY
Step 11. Less Credits (On Step 6) Enter amount from Step 6	11. \$	<input type="checkbox"/> Cash <input type="checkbox"/> CC
Step 12. Net Taxes Owed	12. \$	<input type="checkbox"/> Check
Step 13. Amount paid with this declaration (1/4 of line 12) Subsequent payments due 6/15, 9/15, 01/15	13. \$	Amount: _____

THE UNDERSIGNED DECLARES THAT THIS RETURN IS A TRUE, CORRECT AND COMPLETE RETURN FOR THE TAXABLE PERIOD STATED.

IF THIS RETURN WAS PREPARED BY A TAX PROFESSIONAL, MAY WE CONTACT THEM DIRECTLY? ☐ Yes ☐ No

Signature _____ Date _____

Tax Preparer _____ Date _____

Signature _____ Date _____

Telephone _____