

INDIVIDUAL - 2021 INCOME TAX RETURN NEW BOSTON

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF NEW BOSTON, INCOME TAX
BUREAU
3980 RHODES AVENUE
NEW BOSTON OH 45662-4999

Voice 740-456-4103 Ext Fax 740-456-6473
nbltd@roadrunner.com

**W2'S & Federal Schedules MUST be
attached
to this return.**

Taxpayer's Social Security No.	
Home Telephone No.	Business Telephone No.
Spouse's Social Security No.	
Spouse's Name	
Home Telephone No.	Business Telephone No.

Name

And

Address

Filing Status		IF YOU HAVE MOVED DURING TAX YEAR - GIVE DATES INTO / / OUT OF / /
☐ Single	☐ RESIDENT	
☐ Married filing joint	☐ NON-RESIDENT	
☐ Married filing separate		
IF YOU RENT, PLEASE GIVE LANDLORDS INFORMATION		
NAME _____		
ADDRESS _____		

Income

1 Wages, salaries, tips, etc. 1

2 Other taxable income 2

3 Total taxable income (add lines 1 and 2) 3

Tax and Credits

4 New Boston tax due before credits (2.500% of line 3) 4

5 Estimated tax payments made to New Boston 5

6 Taxes withheld and paid to New Boston 6

7 Overpayment from prior year(s) 7

8 Taxes withheld and paid to other localities 8

Credit cannot exceed 100.0% of tax withheld up to 2.50% of income earned in each location.

9 Total credits (add lines 5 through 8) 9

Refund (Issued if greater than 10.00)

10 If line 9 is greater than line 4, subtract line 4 from line 9. This is the amount you overpaid 10

11 Amount of line 10 to be credited to next years estimate 11

12 Amount of line 10 to be refunded 12

Tax Due (If greater than 10.00)

13 If line 4 is more than line 9, subtract line 9 from 4, this is the tax amount you owe 13

14 Penalties and interest **Late File** _____ **Late Pay** _____ **Late Estimate** _____ **Interest** _____ 14

Declaration of Estimate For 2022

15 Estimated income 15

16 Estimated tax due. Multiply line 15 by 2.500% 16

17 Taxes to be withheld and paid to New Boston and other localities 17

18 Prior credit applied to estimated tax payments (From line 11) 18

19 Net estimated tax due (subtract line 17 and 18 from 16) 19

20 Minimum amount due for first quarter (multiply line 19 by .25) 20

Amount You Owe

21 Total amount due (add lines 13, 14 and 20) 21

Tax Office Use Only : Tax Office Use Only : Tax Office Use Only

I certify I have examined this return including accompanying schedules & statements and to the best of my knowledge and belief it is true, correct and complete and that the figures used herein are the same as for federal income tax purposes.

Taxpayer's Signature _____ Date _____

Spouse's Signature _____ Date _____

Tax Preparer's Signature _____ Date _____
(If other than taxpayer) Phone No. _____

May VILLAGE OF NEW BOSTON discuss this return with the preparer shown above Yes No