2021 VILLAGE OF NEW LEBANON
INCOME TAX RETURN
OR FISCAL PERIOD ___________ TO
CALENDAR YEAR TAXPAYERS FILE ON OR BEFORE APRIL 15TH

FILING REQUIRED EVEN IF NO TAX DUE
LATE FILING OF THIS RETURN SUBJECTS YOU TO INTEREST AND PENALTY

NO TAXABLE INCOME: ☐ PENSION
☐ SOCIAL SECURITY ☐ DISABILITY ☐ NO INCOME

IF FULLY RETIRED AND AGE 72
CHECK HERE ☐

☐ RESIDENT ☐ NON-RESIDENT

IF YOU MOVED DURING THE YEAR
COMPLETE THE FOLLOWING:
MOVED IN: ________ MOVED OUT: ________
PRESENT ADDRESS: ________________
PREVIOUS ADDRESS: ________________

1. WAGES, SALARIES, TIPS & OTHER COMPENSATION (Attach ALL W-2 Forms) ........................................... (TYPICALLY BOX 5) $ 
2. OTHER TAXABLE INCOME:
   A. BUSINESS PROFIT (Attach Federal Forms) PAGE 2 SECTION A ........................................... $ 
   B. RENTAL INCOME (Attach Federal Forms) PAGE 2 SECTION B ........................................... $ 
   C. OTHER INCOME ........................................... $ 
   D. TOTAL OTHER TAXABLE INCOME ........................................... $ 
3. TAXABLE INCOME (Line 1 Plus Line 2D) ........................................... $ 
4. TAX DUE 1% OF LINE 3 ........................................... $ 
5. Credits
   (A) New Lebanon Tax withheld by employer(s) from Line 1 ........................................... $ 
   (B) Payments on Current Declaration (or Credit) ........................................... $ 
   (C) Total Credits Allowable ........................................... $ 
6. Amount of Tax Due If Line 4 is Greater than Line 5C ........................................... $ 
7. PENALTY & INTEREST
   (A) Underpayment penalty if 90% of tax not paid or withheld by Jan. 15, 2022 ... $ 
   (B) For delinquent returns: late payment penalty _____ interest _____ $ 
   (C) Late file penalty _____ ........................................... $ 
   (D) Total penalties and interest ........................................... $ 
8. Amount payable to Village of New Lebanon Income Tax (No tax due or refunded if under $10.00) ........................................... $ 
9. Overpayment claimed ________________ ☐ refund ☐ Credit to next year Declaration

ESTIMATED PAYMENTS ARE REQUIRED FOR ANNUAL TAX BALANCES $200.00 OR MORE

DECLARATION OF ESTIMATED TAX FOR YEAR 2022

1. Total income subject to New Lebanon tax ........................................... $ 
2. Village of New Lebanon tax 1% ........................................... $ 
3. Less New Lebanon Tax Withheld ........................................... $ 
4. Net tax Declared ........................................... $ 
5. Amount Due with this return (not less than ¼ of line 4) ........................................... $ 
6. Less overpayment of previous year may be credited to this first payment only ... $ 
7. Amount paid with this declaration ........................................... $ 
8. Balance of Estimated Tax ........................................... $ 

MAKE REMITTANCE PAYABLE TO VILLAGE OF NEW LEBANON INCOME TAX

I CERTIFY THAT I HAVE EXAMINED THIS RETURN (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE. IF PREPARED BY A PERSON OTHER THAN TAXPAYER, THE DECLARATION IS BASED ON ALL INFORMATION OF WHICH PREPARER HAS ANY KNOWLEDGE. Tax Return will not be processed without W-2s and Schedules attached.

Signature __________________________ Date ____________
Address __________________________ Phone ________
Signature __________________________ Date ____________
Email __________________________

MAKE CHECKS AND MONEY ORDERS PAYABLE TO VILLAGE OF NEW LEBANON INCOME TAX
**SECTION A**  
Attach appropriate federal schedule for income from partnerships, business, estates, trusts, fees and other.

<table>
<thead>
<tr>
<th>RECEIVED FROM</th>
<th>FOR (DESCRIBE)</th>
<th>FEDERAL FORM(S) ATTACHED</th>
<th>AMOUNT</th>
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</thead>
<tbody>
<tr>
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TOTAL BUSINESS INCOME (If Schedule X, Y, or Z is not applicable — Total to page 1, line 2A) .............................................. Enter Schedule Z line 1 $

**SECTION B**  
RENTAL INCOME FROM FEDERAL SCHEDULE E AND R

ATTACH COPY OF FEDERAL SCHEDULES

**SECTION C**  
OTHER INCOME

ATTACH COPY OF 1099 MISC OR GAMBLING WINNINGS

**PENALTIES AND INTEREST**

NOTE: LATE FILE FEE $25.00 PER MONTH UP TO $150.00. ONE TIME PENALTY OF 15% ON UNPAID TAX.  
ANNUAL INTEREST RATE FOR 2021 IS: 7% ANNUALLY OR 0.660% PER MONTH.

**SECTION X**  
RECONCILIATION WITH FEDERAL INCOME TAX RETURN

<table>
<thead>
<tr>
<th>ITEMS NOT DEDUCTIBLE</th>
<th>ADD</th>
<th>ITEMS NOT TAXABLE</th>
<th>DEDUCT</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Capital Losses (Excluding Ordinary Losses) .......................$</td>
<td></td>
<td>N. Capital gains (Excluding Ordinary Gains) ...........................$</td>
<td></td>
</tr>
<tr>
<td>B. Expenses incurred in the production of non-taxable income (at least 5% of Line 2) ..............................................$</td>
<td></td>
<td>O. Interest Income .........................................................$</td>
<td></td>
</tr>
<tr>
<td>C. Taxes paid to local municipalities ..................................$</td>
<td></td>
<td>P. Dividends ...............................................................$</td>
<td></td>
</tr>
<tr>
<td>D. Net Operating loss deduction per Federal Return .................$</td>
<td></td>
<td>Q. Other (explain) ..........................................................$</td>
<td></td>
</tr>
<tr>
<td>E. Payments to partners ..................................................$</td>
<td></td>
<td></td>
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<tr>
<td>F. Sick pay not included in Line 1 above ................................$</td>
<td></td>
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<tr>
<td>G. Contributions ...........................................................$</td>
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<tr>
<td>H. Other expenses not deductible (Explain) ................................$</td>
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<td></td>
</tr>
<tr>
<td>M. (Enter Schedule Z Line 2A) ..........................................$</td>
<td></td>
<td>Z. Total Deductions (enter as Line 2B below) ...........................$</td>
<td></td>
</tr>
</tbody>
</table>

**SECTION Y**  
BUSINESS ALLOCATION FORMULA – USE ONLY IF PROFIT FROM VILLAGE OF NEW LEBANON BRANCH IS NOT AVAILABLE

<table>
<thead>
<tr>
<th>A. LOCATED EVERYWHERE</th>
<th>B. LOCATED IN VILLAGE OF NEW LEBANON</th>
<th>C. PERCENTAGE (b + a)</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

**STEP 1.**  
AVG. VALUE OF REAL & TANG. PERSONAL PROPERTY ..................................

**STEP 2.**  
GROSS RECEIPTS FROM SALES MADE AND/OR WORK OR SERVICES PERFORMED ........................................

**STEP 3.**  
WAGES, SALARIES AND OTHER COMPENSATION PAID EMPLOYEES...........

**STEP 4.**  
TOTAL PERCENTAGES .................................................................

**STEP 5.**  
AVERAGE PERCENTAGE (Divide Total Percentages by Number of Percentages Used)  
Enter Schedule Z Line 3B ......................................................%  

**SECTION Z**

1.  
BUSINESS INCOME ........................................................................ $

2.  
A. ITEMS NOT DEDUCTIBLE (Schedule X, Line M)  
   ........................................................................................................ Add $ ......................................................
   B. ITEMS NOT TAXABLE (Schedule X, Line Z)  
   ........................................................................................................ Deduct $ ......................................................
   C. ENTER EXCESS LINE 2A OR 2B ......................................................$

3.  
A. ADJUST NET INCOME (Line 1 Plus/minus Line 2C) IF SCHEDULE X IS USED ......................................................$
   B. AMOUNT ALLOCABLE TO VILLAGE OF NEW LEBANON IF SCHEDULE Y STEP 5 IS USED ........................................ % OF LINE 3 ......$

4.  
TAXABLE BUSINESS INCOME: LINE 3A OR LINE 3B (Enter On Page 1 Line 2A) ......................................................$