ETR-21 City of Columbus, Income Tax Division Joint Economic Development District (JEDD) Declaration of Estimated Income Tax

(also serves as Voucher #1)

2020

ACCOUNT INF	OKI	WATION								
First name and Middle 1	initial		Last Name		Social Se	curity No	·	Check this box if:	AMENDED tax year	
If a joint return, spouse's first name Last Name				Spouse's Social Security No.				City of Residence		
Address								Current Employer's Na	me	
City State Zip Code										
		Current Employer's Ac	Idress							
Trade Name Nature of Business								1:101 5 1 ()		
CITY OR CITIES OF INCOME:							List Other Employer(s)	or Business(es) and Address(es)		
1 5								List Other Employer(s)	List Other Employer(s) or Business(es) and Address(es)	
2 -		6 -	·				Did you file a City return last year? YES NO			
3								Did you lile a City retur	mast year?NO	
4 8								If YES, from what addr	ress?	
TAX CALCULA	TIO	N								
		l	ımn B	Column C	Column D		Column E	Column F	Column G	
Column A JEDD		ESTIMATE FROM WAGE	D INCOME S, SALARIES, ONS, ETC	ESTIMATED INCOME FROM NET PROFITS, RENTS, & OTHER TAXABLE INCOME	TOTAL NET ESTIMATED INCOME	TAX RATE	ESTIMATED TAX DUE	LESS TAX WITHHELD (W-2) PAID I PARTNERSHIP OR PAID DIRECTL WHERE INCOME WAS EARNED	ESTIMATED NET TAX DUE	
North Pickaway County JEDD	20					2.5%				
Prairie Township JEDD	22					2.5%				
Madison Township JEDD	24					2.5%				
1. TOTAL NET ESTIMATED TAX DUE (MUST EQUAL THE TOTAL OF COLUMN G)										
LESS: OVERPAYMENT CREDITS FROM PREVIOUS YEAR RETURN										
CREDIT PREVIOUS DECLARATION PAYMENTS (IF AN AMENDED DI					RATION)		3			
BA. TOTAL CREDITS (ADD LINES 2 AND 3)							34			
4. UNPAID BALANCE DUE (SUBTRACT LINE 3A FROM LINE 1)										
5. LESS: AMOUNT PAID WITH THIS DECLARATION (ATTACH CHECK OR MONEY ORDER)										
S. ESTIMATED TAX BALANCE PAYABLE (USE FORM IR-18 TO PAY IN EQUAL										
SIGNATURE	2, 101		·/							
I declare that this declarate city income tax for the periods.			nined by me	and to the best of my kn	owledge and belief	is a true,	correct and con	nplete declaration of estin	nated income subject to	
Sign				ı				This Esum is	Vauchard	
lere -									his Form is Voucher 1	
Signature				Da I	Date I				you are required to make estimated tax payments,	
Spouse's Si	Spouse's Signature					Date			you are required to file this form. Make a copy of this form for your records.	
								iviane a copy of this	ominor your records.	
MAILING INFO	RM	ATION								

NO Payment Enclosed:

Mail to: Columbus Income Tax Division

PO Box 182437

Columbus, OH 43218-2437

Payment Enclosed:

Make payable to: CITY TREASURER

Mail to: Columbus Income Tax Division

PO Box 182158

Columbus, Ohio 43218-2158