FORM FR 1118

INDIVIDUAL - 2025
INCOME TAX RETURN
HICKSVILLE

Due Date 04/15/2026

PLEASE MAKE SURE TO INCLUDE A COPY OF YOUR FEDERAL 1040, ALL W2'S,1099'S & ALL SCHEDULES FILED

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF HICKSVILLE

111 S MAIN ST
HICKSVILLE OH 43526-1398

Voice 419-542-8621 Ext Fax 419-542-2018
hixtax@defnet.com

Taxpayer's Social Security No.	
HomeTelephone No.	BusinessTelephone No.
Spouse's Social Security No.	
Spouse's Name	
HomeTelephone No.	BusinessTelephone No.

Name

And

Address

Filing Status
- ☐ Single
- ☐ Married filing joint
- ☐ Married filing separate

☐ RESIDENT
☐ NON-RESIDENT

IF YOU HAVE MOVED DURING TAX YEAR - GIVE DATES
INTO / /
OUT OF / /

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 Hicksville tax due before credits (1.000% of line 3)			4
5 Estimated tax payments made to Hicksville	5		
6 Taxes withheld and paid to Hicksville	6		
7 Overpayment from prior year(s)	7		
8 Taxes withheld and paid to other localities			
Per work location - credit cannot exceed the lesser of tax withheld or 1% of income earned.	8		
9 Total credits (add lines 5 through 8)			9

Refund (Issued if greater than 10.01)

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 10.01)

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 2026

15 Estimated income	15	
16 Estimated tax due. Multiply line 15 by 1.000%	16	
17 Taxes to be withheld and paid to Hicksville 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

FILING INSTRUCTIONS CAN BE FOUND ON OUR WEBSITE-WWW.VILLAGEOFHICKSVILLE.COM

I certify that I have examined this return (including accompanying Schedules & 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 declatation is based on all information of which preparer has knowledge.

Taxpayer's Signature Date

Spouse's Signature Date

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

May VILLAGE OF HICKSVILLE discuss this return with the preparer shown above ___Yes ___No