

☐ We, the taxpayers, elect to authorize a return preparer to communicate with the tax administrator about matters pertaining to this return.

By making this election, we, the taxpayers, authorize the tax administrator to contact the return preparer concerning questions that arise during the processing of the return and authorize the return preparer only to provide the administrator with information that is missing from the return, to contact the administrator for information about the processing of the return or the status of the taxpayer's refund or payments, and to respond to notices about mathematical errors, offsets, or return preparation that the taxpayer has received from the administrator and has shown to the return preparer.

CALENDAR YEAR TAXPAYERS FILE ON OR BEFORE APRIL 15TH.

FISCAL AND PARTIAL YEARS FILE BY THE 15TH DAY OF THE 4TH MONTH FOLLOWING THE END OF THE PERIOD.

FEDERAL IDENTIFICATION NUMBER: _____ SOCIAL SECURITY NO.: _____

NAME AND ADDRESS:

City of St. Marys
Department of Taxation
106 East Spring Street
St. Marys, Ohio 45885

BUSINESS RETURN

Attach copies of all Federal Forms and Schedules

Please mail to above address

1. Income other than wages from Schedule Z \$ _____
2. Adjustment from Schedule X line C..... \$ _____
3. a. Net amount subject to income tax: total of lines 1 and 2 \$ _____
b. Amount allocable if Schedule Y is used (_____ % of line 3a) \$ _____
4. Allowable loss from Schedule W \$ _____
5. Total taxable income \$ _____
6. Municipal Tax Due:
| Botkins, Covington, Ft. Loramie, Minster, New Bremen, New Knoxville, Russia, St. Marys - 1.5% | Cridersville, Osgood - 1% | North Star - .5% | \$ _____
7. Credits (A) Credit - carry forward from previous year \$ _____
(B) Payments on current declaration \$ _____
(C) Total Credits \$ _____
8. a. Balance of tax due (Line 6 minus Line 7C) \$ _____
b. Penalty Interest Late filing fee \$ _____
9. Amount payable with this return (payment must accompany this form) **PAY THIS AMOUNT** \$ _____
10. Overpayment _____ refund ☐ credit to next year Declaration ☐

DECLARATION OF ESTIMATED TAX FOR CALENDAR YEAR _____ to _____

Computations for Estimated Tax

11. Estimated taxable income for year \$ _____
12. Estimated tax due..... \$ _____
13. Less: Tax to be withheld and/or paid to another city \$ _____
14. Balance of estimated city income tax due..... \$ _____
15. Credits: Overpayments claimed on previous year's return (_____)
16. Net tax due (line 14 less line 15) \$ _____
17. Amount of tax payment enclosed with this return (Attach check for at least
22.5 percent of estimate and 100 percent of line 9) \$ _____

TAX OFFICE USE ONLY

Paid _____
Balance Due _____

The undersigned declares that this return (and accompanying schedules) is a true, correct and complete return for the taxable period stated.

Signature of Taxpayer or Agent

Date

Signature of Paid Preparer

Title

Street Address of Firm or Employer

Date

City

State

Telephone

SCHEDULE W – ALLOWABLE LOSS CARRY FORWARD

YEAR	Loss attributed to this municipality
.....	\$
.....	\$
.....	\$
.....	\$
.....	\$
Total	\$ carry to line 4, page 1

SCHEDULE X – RECONCILIATION WITH FEDERAL INCOME TAX RETURN

- A. ITEMS NOT DEDUCTIBLE (FROM LINE J SCHEDULE X BELOW)..... ADD
- B. ITEMS NOT TAXABLE (FROM LINE O SCHEDULE X BELOW)..... DEDUCT
- C. ENTER TOTAL OF LINE A AND B..... (enter on line #2, pg. 1) \$

ITEMS NOT DEDUCTIBLE	ADD	ITEMS NOT TAXABLE	DEDUCT
A. CAPITAL LOSSES DEDUCTED (EXCLUDING ORDINARY LOSS).....	\$	I. CAPITAL GAINS (EXCLUDING ORDINARY INCOME).....	\$
B. EXPENSES ATTRIBUTABLE TO NON-TAXABLE INCOME (5%).....	J. INTEREST EARNED OR ACCRUED.....
C. TAXES BASED ON INCOME	K. DIVIDENDS
D. NET OPERATING LOSS DEDUCTION PER FEDERAL RETURN	L. INCOME FROM PATENTS AND COPYRIGHTS
E. PAYMENTS TO PARTNERS.....	IF SUBJECT TO OHIO INTANGIBLE TAX.....
F. SPECIAL DEDUCTION	M. JOBS CREDIT.....
G. SHAREHOLDERS/PARTNERS' RETIREMENT PLANS	N. OTHER INCOME EXEMPT FROM CITY TAX (EXPLAIN).....
H. SHAREHOLDERS/PARTNERS' HEALTH AND/OR LIFE INSURANCE..	O. TOTAL DEDUCTIONS (ENTER AS LINE B ABOVE)
I. OTHER EXPENSES NOT DEDUCTIBLE (EXPLAIN)		
J. TOTAL ADDITIONS (ENTER AS LINE A ABOVE)		

SCHEDULE Y BUSINESS ALLOCATION FORMULA

	A. LOCATED EVERYWHERE	B. LOCATED IN THIS MUNICIPALITY	C. PERCENTAGE (B DIVIDED BY A)
STEP 1. AVERAGE ORIGINAL COST OF REAL & TANGIBLE PERSONAL PROPERTY	
GROSS ANNUAL RENTALS PAID MULTIPLIED BY 8	
TOTAL STEP 1 %
STEP 2. GROSS RECEIPTS FROM SALES MADE AND/OR WORK OR SERVICES PERFORMED %
STEP 3. WAGES, SALARIES, AND OTHER COMPENSATION PAID %
4. TOTAL PERCENTAGES %
5. AVERAGE PERCENTAGE (BY NUMBER OF PERCENTAGES USED)		ENTER ON LINE 3B, PAGE 1 %

BUSINESS ALLOCATION FORMULA

SCHEDULE Y A business allocation formula consisting of the average of property, gross receipts and wages paid, to be used by business entities not required to pay tax on entire net profits, by reason of doing business both inside and outside the Municipal city limits.

SPECIAL NOTE: Sales and gross receipts in the Municipality (Step 2) mean:

- All sales and tangible personal property which is shipped from the Municipality to purchasers outside of the Municipality regardless of where title passes if the taxpayer is not, through its own employees, regularly engaged in the solicitation or promotion of sales at the place where delivery is made.
- All sales of tangible personal property which is delivered within the Municipality regardless of where title passes, even though transported from a point outside the Municipality, if the taxpayer is regularly engaged through its own employees in the solicitation and the sales result from such solicitation or promotion.
- All sales of tangible personal property which is delivered within the Municipality, regardless of where title passes, if shipped or delivered from a stock of goods within the Municipality.

SCHEDULE Z**Income Other than Wages**

Schedule C	\$
Schedule E and Form 8825.....	\$
Schedule F and Form 4835.....	\$
Schedule K (1065 and 1120S).....	\$
Form 4835	\$
Form 1099 M	\$
Form 1120	\$
Form 1120S	\$
Form 1065	\$
TOTAL Carry to line 1, page 1	\$

Attach copies of all forms and schedules.