

Name and Title

## CITY OF MIAMISBURG / AUSTIN CENTER JEDD / DAYTON MALL JEDD BUSINESS INCOME TAX RETURN

Calendar Year 2017 or Fiscal Period Due on or before April 17, 2018 or by the 15<sup>th</sup> day of the fourth month following the end of your fiscal year. Mail Completed Forms To: Income Tax – City of Miamisburg, 10 N 1st St., Miamisburg, OH 45342 Physical Location Address in City / JEDD: Federal Employer Identification Number: Check One: Corporation S Corp ☐ Partnership ☐ Other \_ Company Name & Address (include DBA): Tax District: City of Miamisburg Austin Center JEDD ☐ Dayton Mall JEDD Business Contact Name: Contact Phone Number: If your business moved during the year, please indicate: Date of move Previous Address 1. TOTAL INCOME PER ATTACHED FEDERAL RETURN 2. ITEMS NOT DEDUCTIBLE (From Schedule X, Line I, on page 2) 2. 3. ITEMS NOT TAXABLE (From Schedule X, Line P, on page 2) 4. ENTER SUM OF SCHEDULE X ITEMS (Deduct Line 3 from Line 2) 4. 5. ADJUSTED NET INCOME (Sum of Line 1 and Line 4) 5. 6. PERCENT ALLOCABLE TO CITY / JEDD (From Schedule Y, Step 5, on page 2) % 7. CITY / JEDD TAXABLE INCOME (Multiply Line 5 by Line 6) 8. NET LOSS CARRYFORWARD (NOL recording to start with tax year 2017. Application will be allowed on the 2018 tax filing) 8. N/A for 2017 9. INCOME SUBJECT TO CITY / JEDD INCOME TAX (Should match Line 7) 9. 10. 10. CITY / JEDD INCOME TAX (Multiply Line 9 by 2.25%) 11. A. ESTIMATES PAID ON THIS YEAR'S LIABILITY 11A. B. CREDITS APPLIED FROM 2016 TO THIS YEAR'S LIABILITY 11B. C. TOTAL CREDITS (Line 11A plus Line 11B) 11C 12. TAX AMOUNT DUE, IF Line 10 is greater than Line 11C, subtract Line 11C from Line 10 12. 13. Late Filing Late Pmt Late Pmt Underestimation Penalty Penalty Interest \$ 13. penalty 14. BALANCE DUE FOR 2017 (Add lines 12 and 13) (Do not stop here. Complete lines 16-20 below) Note: No payment due if line 14 (which includes both lines 12 & 13) is less than \$10.01. 14 15. OVERPAYMENT. IF Line 10 is less than Line 11C. subtract Line 10 from Line 11C Note: No refund or credit carry forward for amounts that are less than \$10.01. 15 REFUND \$ **CREDIT TO 2018 DECLARATION OF ESTIMATED TAX FOR 2018** 16. Total income subject to tax \$ \_ \_, multiply by 2.25% 16. 17. 17. LESS: CREDIT from line 15 above 18. Net Taxes Owed (Line 16 minus line 17) (Quarterly statements will not be mailed.) 18. 19. 19. AMOUNT PAID WITH THIS DECLARATION for 1st Quarter Estimated Tax (See Instructions) 20. TOTAL AMOUNT PAYABLE TO CITY OF MIAMISBURG (Add lines 14 and 19) The undersigned declares this return (& accompanying schedules) is a true, correct and complete return for the taxable period stated and that the figures used herein are the same as used for Federal Income Tax purposes, adjusted to the ordinance requirements for local tax purposes, and if an audit is made which affects tax liability shown on this return, an amended return will be filed within three months. If this return was prepared by a Tax Preparer, I am authorizing them to disclose information concerning this return to the City / JEDD Tax Office 🗌 YES 🔠 NO Signature of Taxpayer or Agent Date Signature of preparer, if other than taxpayer Date

Phone Number

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Calendar Year 2017 or Fiscal Period	to
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Due on or before April 17, 2018 or by the 15<sup>th</sup> day of the fourth month following the end of your fiscal year.

Mail Completed Forms To: Income Tax – City of Miamisburg, 10 N 1st St., Miamisburg, OH 45342

SCHEDULE X – RECONCILATION WITH FEDERAL INCOME TAX RETURN, AS REQUIRED BY ORC 718							
	ITEMS NOT DEDUCTIBLE ADD ITEMS NOT TAXABLE			DEDUCT			
A.	Capital losses excluding ordinary losses (IRC) 1221 or 1231 property dispositions. Do not include ordinary loss from Federal Form 4797		J.	Capital Gains, excluding ordinary gains (IRC) 1221 or 1231 property dispositions except to the extent the income and gains apply to those described in IRC 1245 or 1250			
B.	5% of intangible income reported in letter K, except that from IRC 1221 property dispositions		K.	Federally reported intangible income such as, but not limited to interest, dividends, and patent & copyright income. Excludes prizes, awards, lottery winnings, or other income associated with games of chance.			
C.	Taxes based on income (State or City)		L.	Not previously deducted IRC Sec 179 Expense			
D.	Federal deducted dividends, distributions, or amounts set aside for, credited to or distributed to REIT or RIC investors		M.	Not previously deducted Partnership, S Corp, LLC charitable contributions			
E.	Federally deducted amounts paid or accrued to or for qualified self-employed retirements plans, health insurance plans, and the insurance plans for owners or owner-employees of non-C corporation entities		N.	Domestic production activity deduction (See page 4 of instructions)			
F.	Partnership, S Corp, LLC charitable contributions, if limited to 10% of FTI		O.	Other			
G.	IRC Section 179 expenses, if limited, for partnerships, S Corps, LLCs						
H.	Other						
	I. TOTAL ADDITONS (enter on Page 1, Line 2)  P. TOTAL DEDUCTIONS (enter on Page 1, Line 3)						

## SCHEDULE Y - BUSINESS ALLOCATION FORMULA

The Business Allocation Formula is to be used by taxpayers who have a place or places of business outside City / JEDD to determine the portion of the net profits attributed to that part of the business within the boundaries of City / JEDD.

		A. LOCATED EVERYWHERE	B. LOCATED IN CITY / JEDD	C. PERCENTAGE (DIVIDE 'B' BY 'A')
Step 1	Average original cost of real & tangible personal property	\$	\$	
	Gross annual rentals multiplied by 8	\$	\$	
	Total Step 1	\$	\$	%
Step 2	Gross receipts from sales and work or services	\$	\$	%
Step 3	Total qualifying wages, salaries, commissions and other compensation for all employees	\$	\$	%
Step 4	TOTAL PERCENTAGE			%
Step 5	AVERAGE PERCENTAGE (Divide total percentages by Enter on page 1, Line 6	%		

SCHEDULE Y-1 - RECONCILIATION TO FORM W-3, WITHHOLDING RECONCILIATION

Total wages allocated to City / JEDD (from Federal Return or allocation formula)			\$
Total wages shown on Form W-3 (Withholding reconciliation)			\$
Please explain any difference:			
Are any employees leased in the year covered by this return?	Yes	□ No	
If yes, then provide name, address and FID number of the leasing company.	TC3	<u> </u>	
Were 1099-MISC forms issued for work completed in City / JEDD?	☐ Yes	□ No	
If yes, attach copies to this return.			