

ASHLAND CITY INCOME  
TAX RETURN

TAX OFFICE USE ONLY	
TOTAL PAID	\$ _____
CHECK #	_____

CALENDAR YEAR \_\_\_\_\_

FILING IS REQUIRED, EVEN IF NO TAX IS DUE

FISCAL YEAR \_\_\_\_\_

DUE APRIL 15TH OR THE 15TH DAY OF THE 4TH MONTH AFTER FISCAL YEAR END

NAME: BUSINESS / FEDERAL ID # \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_

- 1. ALL INCOME FROM FEDERAL RETURN 1065, 1120, 1120S & 1041 AND/OR FEDERAL RETURN SCHEDULE C, E & K (PLEASE ATTACH ALL RETURNS & SCHEDULES) 1. \$ \_\_\_\_\_
  - 2. ADJUSTMENTS (PLUS OR MINUS LINE 19 SCHEDULE X) 2. \$ \_\_\_\_\_
  - 3. SUBTOTAL (LINE 1 PLUS OR MINUS LINE 2) 3. \$ \_\_\_\_\_
  - 4. NET OPERATING LOSS (SEE WORKSHEET A)(CANNOT BE MORE THAN LINE 3) 4. \$ \_\_\_\_\_
  - 5. ADJUSTED BUSINESS INCOME (LINE 3 MINUS LINE 4) 5. \$ \_\_\_\_\_
  - 6. PERCENTAGE ALLOCATION TO ASHLAND (SEE SCHEDULE Y STEP 5) 6. \_\_\_\_\_%
  - 7. ASHLAND TAXABLE INCOME (MULTUPLY LINE 5 BY LINE 6) 7. \$ \_\_\_\_\_
  - 8. ASHLAND INCOME TAX (2% OF LINE 7) 8. \$ \_\_\_\_\_
  - 9. ESTIMATED TAX PAID / PRIOR YEAR CREDIT 9. \$ \_\_\_\_\_
  - 10. TAX DUE (LINE 7 MINUS LINE 8) 10. \$ \_\_\_\_\_
  - 11. A. OVERPAYMENT IF LINE 10 IS MINUS 11A. \$ \_\_\_\_\_
  - B. ENTER AMT OF LINE 10 YOU WANT APPLIED TO NEXT YEAR 11B. \$ \_\_\_\_\_
  - C. ENTER AMT OF LINE 10 YOU WANT TO BE REFUNDED 11C. \$ \_\_\_\_\_
  - 12. INSUFFICIENT ESTIMATED TAXES PAID PENALTY (15% OF ESTIMATES UNPAID FOR 2018) 12. \$ \_\_\_\_\_
  - 13. INTEREST (.58% OF TAX PER MONTH ON LINE 10) 13. \$ \_\_\_\_\_
  - 14. LATE FILING PENALTY (\$25.00 PER MONTH UP TO A MAXIMUM OF \$150) 14. \$ \_\_\_\_\_
  - 15. TOTAL INTEREST AND PENALTIES (ADD LINES 12-14) 15. \$ \_\_\_\_\_
- No payment or refund for amount under \$10.00

16. AMOUNT DUE FOR 2018 16. \$ \_\_\_\_\_

**DECLARATION OF ESTIMATED TAX FOR 2019 TAX YEAR**

**THIS SECTION MUST BE COMPLETED IF AMOUNT FOR TAX YEAR 2018 IS AT LEAST \$200.00**

- 17. ESTIMATED TAXABLE INCOME 17. \$ \_\_\_\_\_
- 18. ESTIMATED TAX DUE (MULTIPLY LINE 17 BY 2%) 18. \$ \_\_\_\_\_
- 19. FIRST QUARTERS ESTIMATE (MULTIPLY LINE 18 BY 22.5%) 19. \$ \_\_\_\_\_
- 20. LESS OVERPAYMENT FROM 11B 20. \$ \_\_\_\_\_
- 21. AMOUNT DUE FOR FIRST QUARTER (LINE 19 MINUS LINE 20) 21. \$ \_\_\_\_\_

**22. TOTAL AMOUNT DUE ( ADD LINES 16 & 21) - PAY IN FULL WITH RETURN 22. \$ \_\_\_\_\_**

I CERTIFY, TO THE BEST OF MY KNOWLEDGE, THAT THIS RETURN, SCHEDULES & STATEMENTS ARE TRUE & CORRECT. (Signature Required)

Taxpayer's/ Statutory Agent Signature \_\_\_\_\_ Date \_\_\_\_\_

Preparer's Signature \_\_\_\_\_ Date \_\_\_\_\_

Company Name \_\_\_\_\_ Phone No \_\_\_\_\_

I (WE) AUTHORIZE THE INCOME TAX DEPT TO DISCUSS THIS RETURN & ENCLOSURES WITH THE PREPARER ABOVE  Check Here

MAKE CHECKS OR MONEY ORDERS PAYABLE TO:

CITY OF ASHLAND INCOME TAX  
218 LUTHER ST, ASHLAND, OH 44805  
PH: (419) 289-0386 FAX: (419) 289-9225

**SCHEDULE X - RECONCILIATION WITH FEDERAL INCOME TAX RETURN**

**ITEMS NOT DEDUCTIBLE**

- 19 A. Capital Losses (Excluding Ordinary Losses)
- B. Expenses incurred in the production of non-taxable income
- C. Taxes based on income
- D. SUBTOTAL LINES A THROUGH C

**ADD**  
\$ \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ITEMS NOT TAXABLE**

- E. Other Expenses Not Deductible (Federally Deferred)
- F. Capital Gains (Excluding Ordinary Gains)
- G. Interest Income
- H. Dividends
- I. Other
- J. SUBTOTAL LINES E THROUGH I
- K. TOTAL LINE D MINUS LINE J (Carry Forward to Line 2)

**DEDUCT**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SCHEDULE Y - BUSINESS ALLOCATION FORMULA**

	a. Located Everywhere	b. Located in Ashland	c. Percentage (b÷a)
STEP 1A. Average Value of Real & Tang. Personal Property	_____	_____	
1B. Gross Annual Rentals Paid Multiplied By 8	_____	_____	
Total of Steps 1A & 1B	_____	_____	%
STEP 2. Gross Receipts from Sales Made and/or Services Performed	_____	_____	%
3. Wages, Salaries and Other Compensation Paid	_____	_____	%
4. Total Percentages			%
5. Average Percentages (Carry over to Line 6)			%

**WORKSHEET A**

	2017	2018	2019	2020	2021	2022
NOL Carryforward						
50% of NOL						
Loss Used This Year (Limit 50%)						
Not Available for Next Year						

**INSTRUCTIONS**

**OPERATING YEAR:** You must complete the operating year information.

**NAME, ADDRESS and PHONE NUMBER:** Please make any changes on the form.

**IDENTIFICATION NUMBERS:** Enter the Federal Identification Number.

**LINE 1 - ALL INCOME** - Federal Schedules and/or Federal Returns C, E, K-1, 1120, 1120S, 1041 and 1065.

**LINE 2 - ADJUSTMENTS** - Combine the total of "Not Deductible" items and "Not Taxable" items from Schedule X.

**LINE 3 - SUBTOTAL** - Line 1 minus Line 2.

**LINE 4 - NET OPERATING LOSS** - See Worksheet A. This line can not exceed the amount on Line 3.

**LINE 5 - ADJUSTED BUSINESS INCOME** - Line 3 minus Line 4.

**LINE 6 - PERCENTAGE ALLOCATION** - Per Schedule Y Step 5.

**LINE 7 - ASHLAND TAXABLE INCOME** - Multiply Line 5 by Line 6.

**LINE 8 - ASHLAND INCOME TAX** - Multiply Line 7 by 2%.

**LINE 9 - ESTIMATED TAX PAID / PRIOR YEAR CREDITS** - Estimated tax payment made and credits from prior year.

**LINE 10 - TAX DUE** - If Line 8 is more than Line 9, enter the difference. This is the amount of tax due. Amounts under \$10.00 are **not** payable.

**LINE 11 - OVERPAYMENT**

- A. If Line 8 is less than Line 9, enter the difference. This is the amount of the overpayment.
- B. Enter the portion of 11A that you would like applied to next year's return.
- C. Enter the portion of 11A that you would like refunded. Amounts under \$10.00 will **not** be refunded.

**LINE 12 - INSUFFICIENT ESTIMATED TAXES PAID PENALTY** - If Line 10 is more than \$200.00 and is less than 90% of the previous year's tax due, you are subject to a penalty of 15% of taxes unpaid on the Declaration of Estimated Taxes.

**LINE 13 - INTEREST** - Interest will be added on any unpaid tax balance after April 15th. The interest rate is .58% per month or portion of a month.

**LINE 14 - LATE FILING PENALTY** - If your return is filed after the filing deadline, you are subject to a penalty of \$25.00 per month or portion of a month. The maximum penalty is \$150.00.

**LINE 15 - TOTAL INTEREST AND PENALTIES** - Add Lines 12-14.

**LINE 16 - AMOUNT DUE** - Add Line 10 and Line 15 and this will be the amount due for 2018.

**DECLARATION OF ESTIMATED TAX**

This section must be completed if amount due for tax year 2018 is at least \$200.00

**LINE 17 - 21 - SELF EXPLANATORY** - Complete this section if the amount due is over \$200.00.

**LINE 22 - TOTAL AMOUNT OF TAXES DUE (Add Lines 16 & 21) BY APRIL 15TH OR THE 15TH DAY OF THE 4TH MONTH AFTER FISCAL YEAR END.**