

CITY OF LOGAN, OHIO

(740) 385-2222

MAKE CHECK OR MONEY ORDER PAYABLE TO

CITY OF LOGAN

NOTICE: By law, all refunds and credits, in excess of \$10.00 are being reported to IRS.

THIS SPACE FOR TAX OFFICE ONLY

FORM IR  
FILE WITH  
LOGAN INCOME TAX DEPT.  
P.O. Box 343  
Logan, Ohio 43138  
ON OR BEFORE APRIL 15.

FILING REQUIRED EVEN IF NO TAX DUE.  
MAY BE USED IN ANY CITY IN BUTLER, CLERMONT, HAMILTON,  
HIGHLAND, HOCKING, MONTGOMERY OR WARREN COUNTIES BY  
INSERTING PROPER NAME AND CHANGING TAX RATE.

TELEPHONE: Home \_\_\_\_\_  
Business \_\_\_\_\_  
TAXPAYERS NAME AND ADDRESS \_\_\_\_\_  
NAME OF EMPLOYER \_\_\_\_\_  
ADDRESS: Street \_\_\_\_\_  
City \_\_\_\_\_  
ACCOUNT NO. \_\_\_\_\_  
SOCIAL SECURITY NUMBERS:  
TAXPAYER \_\_\_\_\_  
SPOUSE \_\_\_\_\_

Mandatory filing every year for all residents 18 and over with earned income, retirement MAY be an exception.  
IF MOVED SINCE THE PREVIOUS FINAL RETURN WAS DUE GIVE DATE:  
INTO CITY \_\_\_\_\_ OR OUT OF \_\_\_\_\_

ATTACH COPIES OF ALL FEDERAL SCHEDULES PERTAINING TO LINE 2. W-2 - USE HIGHEST FIGURE

1. WAGES, SALARIES, TIPS AND OTHER EMPLOYEE COMPENSATION (Attach all W-2's)..... \$ \_\_\_\_\_  
(Operating loss cannot offset wages)  
(Deferred Compensation payments are taxable)  
2. OTHER TAXABLE INCOME FROM PAGE 2 (Loss can't be deducted from withheld tax) attach copy of Federal Sch..... \$ \_\_\_\_\_  
3. TAXABLE INCOME: LINE 1 PLUS LINE 2..... \$ \_\_\_\_\_  
4. MUNICIPAL TAX 1 1/2% OF LINE 3..... \$ \_\_\_\_\_  
5. CREDITS  
A. TAX WITHHELD BY EMPLOYER FOR LOGAN..... \$ \_\_\_\_\_  
B. ESTIMATED TAX PAID THIS MUNICIPALITY..... \$ \_\_\_\_\_  
C. TAX PAID CITY OR VILLAGE OF \_\_\_\_\_ (NOT TO EXCEED 1 1/2%)..... \$ \_\_\_\_\_  
D. PRIOR YEAR CREDITS..... \$ \_\_\_\_\_  
E. TOTAL CREDITS..... \$ \_\_\_\_\_  
IF LINE 4 IS GREATER THAN LINE 5E PAYMENT OF BALANCE MUST ACCOMPANY THIS RETURN:  
TAX DUE..... \$ \_\_\_\_\_  
A. PENALTY \$ \_\_\_\_\_ INTEREST \$ \_\_\_\_\_ \$ \_\_\_\_\_  
B. TOTAL AMOUNT DUE (Payment must accompany return if \$1.00 or more)..... \$ \_\_\_\_\_  
6. OVERPAYMENT TO BE REFUNDED \$ \_\_\_\_\_ OR CREDITED \$ \_\_\_\_\_ TO NEXT YEAR ESTIMATE.

DECLARATION OF ESTIMATED TAX FOR YEAR

7. TOTAL INCOME SUBJECT TO TAX \$ \_\_\_\_\_ MULTIPLY BY TAX RATE OF 2 % FOR GROSS TAX OF..... \$ \_\_\_\_\_  
8. LESS EXPECTED TAX CREDITS  
A. OVERPAYMENT FROM PRIOR YEAR(S)..... \$ \_\_\_\_\_  
B. PAYMENTS ON TAXABLE INCOME TO ANOTHER MUNICIPALITY (NOT TO EXCEED 1 1/2%)..... \$ \_\_\_\_\_  
C. TOTAL CREDITS..... \$ \_\_\_\_\_  
9. NET TAX DUE (LINE 8 LESS LINE 9C)..... \$ \_\_\_\_\_  
10. AMOUNT PAID WITH THIS DECLARATION (NOT LESS THAN 1/4 OF LINE 10)..... \$ \_\_\_\_\_  
11. BALANCE OF TAX..... \$ \_\_\_\_\_

I CERTIFY THAT I HAVE EXAMINED THIS RETURN (INCLUDING ACCOMPANYING SCHEDULES AND 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 DECLARATION BASED ON ALL INFORMATION OF WHICH PREPARER HAS ANY KNOWLEDGE.

Signature of Person Preparing if Other Than Taxpayer

Signature of Taxpayer or Agent

IN LIEU OF COMPLETING YOU MAY ATTACH APPROPRIATE FEDERAL SCHEDULE(S)

SECTION A

Profit (or Loss) from Business or Profession

- 1. TOTAL RECEIPTS LESS ALLOWANCES, REBATES AND RETURNS
2. LESS Cost of Labor
3. GROSS PROFIT FROM SALES, ETC.
4. INTEREST \$ OTHER BUSINESS INCOME (Specity) \$
5. TOTAL BUSINESS INCOME BEFORE DEDUCTIONS
6. ADVERTISING AND PROMOTION
7. AUTO, TRUCK AND TRAVEL
8. INT. ON BUSINESS INDEBTEDNESS
9e. TAXES BASED ON INCOME
b. OTHER BUSINESS TAXES
10. SALARIES AND WAGES
11. DEPRECIATION, AMORTIZATION
12. RENTS (Paid to )
13. OTHER (List if over 10% of Line 14)
14. TOTAL BUSINESS DEDUCTIONS (Total of Lines 6 to 13)
15. NET PROFIT (OR LOSS) FROM BUSINESS OR PROFESSION (LINE 5 LESS LINE 14)

SECTION B

Total from Federal Schedule D, Form 4797.

SECTION C

Income from Rents — from Schedule E

Table with 6 columns: Kind & Location of Property, Amount of Rent, Depreciation, Repairs, Other Expenses, Net Income (Or Loss)

NET INCOME INCOME SECTION C . . . . . \$

SECTION D

All other Taxable Income.

INCOME FROM PARTNERSHIPS, ESTATES & TRUSTS, FEES, TIPS, COMMISSIONS, WAGES AND MISCELLANEOUS

Table with 3 columns: RECEIVED FROM, FOR (DESCRIBE), AMOUNT

NET INCOME INCOME SECTION D . . . . . \$

TOTAL

From Sections A, B, C & D. Enter on Page 1, Line 1

SCHEDULE X

Reconciliation with Federal Income Tax Return

Table with 4 columns: ITEMS NOT DEDUCTIBLE, ADD, ITEMS NOT TAXABLE, DEDUCT. Rows include Capital Losses, Expenses incurred in the production of non-taxable income, Taxes based on income, Net operating loss deduction, Payments to Partners, Contributions, Other expenses not deductible, Capital Gains, Interest Income, Dividends, Other (Explain).

SCHEDULE Y

Business Allocation Formula

Table with 3 columns: A. LOCATED EVERYWHERE, B. LOCATED IN THIS CITY, C. PERCENTAGE (b + a). Rows include AVG VALUE OF REAL & TANG. PERSONAL PROPERTY, GROSS ANNUAL RENTALS PAID MULTIPLIED BY 8, GROSS RECEIPTS FROM SALES MADE AND/OR WORK OR SERVICES PERFORMED, WAGES SALARIES AND OTHER COMPENSATION PAID, TOTAL PERCENTAGES.

5. AVERAGE PERCENTAGE (Divide Total Percentages by Number of Percentages Used)

SCHEDULE Z

PARTNER'S SHARE OF INCOME

Table with 6 columns: 1. NAME AND MUNICIPALITY OR TOWNSHIP OF EACH PARTNER, 2. President (Yes/No), 3. Dist. Shares of Partners (Percent/Amount), 4. Other Payments, 5. Taxable Percentage, 6. Amount Taxable. Includes a row for TOTALS from Section A and D Above.