EW1120 City of Whitehall, Income Tax Division City Income Tax Return For Businesses 2017

FOR THE YEAR	
BEGINNING	
ENDING	

Name				EIN/FID Number Check the appropriate box if: REFUND (An amount must be placed in Line 6I for this return to be considered a valid refund requ						
Address								AMENI	DED tax year	
City			7in Code		Filing Status - cl	tion tion	•ls	Did you file a City return last year? YES NC s this a consolidated corporation return? YES NO		NO
State _	tate Zip Code				Fiduciary (Trust and Estates) Partnership/Association (do not use this form for Schedule C filers) Partnership/Association (do not use this form for Schedule C filers)				NO	
REQUIRE	Ξ D :		IR FEDERAL RETURN INCLUDING AL ES TO THE BACK OF THIS RETURN	.L	City(ies) of income #1 #2					
Local business	s address if different from				Nature of Busin	Business				
					Trade Name -					
Part A	TAX CALCU	ILATIO	Complete Tax Calculation only t applicable, are completed.	to determin	ne your tax. Taxpayer	s should not c	omplete Tax Calcul	lation until after	Schedule X and Schedule Y	, if
Colur	mn A		Column B Total Net Taxable Income*	TAX RATE						
WHITEHA	ALL			2.5%						
Date of incorp Date City bus Check whether Has City incord Lace To Tall All A. Enter to you B. Enter to you B. Enter to you Check whether Has City incord Date Of yes - If	ET TAX DUE (T EDITS for estimate E DUE (Line 1 Less ': 15%_ MOUNT DUE (A YMENT CLAIME he amount from L next year tax estir he amount from L pe greater than \$1 THESE QU poration or inception iness commenced_ er this return was pre-	rotal of (ed tax pays s Line 2). + IN add line ED (if Linine 6 you nate ine 6 you now on the compared on d from an execution? N(s) #	u want REFUNDED DNS MUST BE ANSWE Cash or accrual basis d remitted for all taxable employees	r year reter amou TE FEE ent is d	eturn only int (in brackets) he E = ue if the amount A Declaration of I Are any empl If YES; please Gross city wa City tax in the	2 (see in: is \$10.00 6 5 5 6 8 5 6 8 5 6 8 6 8 6 8 6 8 6 8 6	to Line 6 structions) or less Tax (Form W-1121 d in the year cover name, address sued to central C	3 4 5	ber of the leasing compa	any
SIGNA Sign Here	The undersigned declares that this return (and accompanying the taxable period stated, and that the figures used are the understands that this information may be released to the tax understands that this information may be released to the tax understands. Title		same as used for Federal income tax purposes an		ax purposes and oce and the I.R.S. hitehall discuss preparer	Mailing Information:				
					NO		earling Rd all, Ohio 43213-9803			
Paid Preparer's Use				Da	PTIN			Phone:	hitehall Information: 614-237-9803	
Only	Signature				Phon	e No. ())	Fax:	614-237-7902 tehall-oh.us	

Busi	ness Name	N/FID Number:		
Sch	edule X RECONCILIATION WITH FEDERAL INCOME TAX	K RETURN F	PER WCC §184	
	come per attached Federal return (Form 1120, Line 28; Form 1120S, Schedule K, Line 18; come (Loss)", Line 1; Form 1041, Line 17; Form 990 T, Line 30, 1120 REIT, Line 20	2A 2B Schedule E, Colum	2C 2D 2E 2F	
	justed net income (Line 1 plus or minus Lines 2C, 2D, 2E, 2F and 2G). Enter in Part A or 9 rt A cannot be less than zero)			
	S NOT DEDUCTIBLE			
4. A.	Capital losses and IRS §1231 losses deducted	4A		
B.	Amount equal to 5% of intangible income not attributable to sale, exchange or other disposition of IRS §1221 property (5% of Lines 5B, 5C, and 5D)	4B		
C.	Taxes based on income			
D.	Guaranteed payment to partners (not included within net profits)			
E.	Charitable contributions deducted above corporate limitations WCC §184.03(A)(10)	4E		
F.	IRS §179 expense deducted above corporate limitations WCC §184.03(A)(10)	4F		
G	Qualified retirement, health insurance and life insurance plans on behalf of owners/owner employees of non C-Corporation businesses	4G		
H.	Add any deduction for pass-through entity not allowed as a deduction for a C-Corporation und Internal Revenue Code (see instructions) WCC §184.03(A)(10)	er the 4H		
I.	Other expenses not deductible (attach documentation or explanation)	41		
J.	TOTAL ADDITIONS (enter here and on Line 2A above)		4J	
ITEMS	S NOT TAXABLE	5A		
5. A.	Capital/IRS §1231 gains, etc. (do not deduct Section 1245 and 1250 gains)			
В.	Interest earned or accrued	5C		
C.	Dividends	5D		
D. E.	Income from patents, trademarks, copyrights and royalties from intangible sources Other exempt income (attach documentation or explanation)	5E		
F.	TOTAL DEDUCTIONS		5F	

1. 101/12 5250	701101101					
Schedule Y REQUIRED CALCULATION OF NET PROFIT FOR MULTI-CITY ALLOCATION						
Average original cost of all real and tangible personal property owned or used by the taxpayer in the business or profession wherever situated except leased or rented real property						1 2 3 4 5
City	<u>'</u>	Column A Property	Column B Gross Receipts	Column C Wages	Column D Average %	Column E Allocated Net Profits
Whitehall	a b	\$	\$	\$ %	%	\$

Business Name	EIN/FID Number:					
Schedule E PARTNERSHIP K-1 INCOME (OR LOSS)						
COLUMN 1 Partnership Name and Address (attach separate sheet, if necessary)	COLUMN 2 Federal I.D. No.	COLUMN 3 Partner's Percentage	COLUMN 4 Total Amount of K-1 Partnership Income (Loss) Everywhere			
		TOTAL				

Attach all K-1s, if more than twelve K-1s please attach schedule

NOTE: Remember to file your Declaration of Estimated Taxes (Form W-1121) for the current year. Phone (614) 237-9803.