

FILING REQUIRED EVEN IF NO TAX DUE

CITY OF WHITEHALL INCOME TAX DIVISION 360 SOUTH YEARLING ROAD WHITEHALL, OHIO 43213-1894 (614) 237-9803 FAX (614) 237-7902

2023 BUSINESS - FORM W-1120 CITY OF WHITEHALL INCOME TAX

DUE ON OR BEFORE APRIL 15 OR WITHIN 3 1/2 MONTHS FROM END OF FISCAL YEAR

FOR TAX OFFICE USE ONLY

AMOUNT PAID WITH									
THIS RETURN									
☐ Check ☐ Cash ☐ Money Order									
Check No									
Audited by									

NAME & ADD	RESS:		Principal Business Activity ☐ Corporation ☐ S Corporation ☐ Partnership ☐ Other Federal ID No Local Whitehall Address (if different from mailing address)						
			Fiscal Year Beginning 20 and ending 20 Should this account be inactive? □ Yes □ No If yes, attach explanation						
INCOME	1.	ADJUSTED FEDERAL TAXABLE INCOME (Form 1120, line 28; 1120S, Scheoline 20; Form 1065, Analysis of Net Income (Loss) Line 1; Form 1041, line 17							
ADJUST-	2.	a. Items not deductible (from line I Schedule X on page 2)	ADD \$						
MENTS		b. Items not taxable (from line 0 Schedule X on page 2)	EDUCT \$						
то		c. Allowable NOL deduction	EDUCT \$						
INCOME TAX		d. Difference between 2a, 2b and 2c to be added or subtracted from line	l \$						
	3.	a. ADJUSTED NET INCOME (line 1 plus or minus 2c if Schedule X is used) \$						
		b. Amount of line 3a allocable % (from step 5 Schedule Y)	\$						
	4.	AMOUNT SUBJECT TO WHITEHALL INCOME TAX (line 3b)	\$ <u></u>						
	5.	TAX DUE: 2.50% OF LINE 4	\$						
	6.	6. LESS CREDITS FOR ESTIMATED TAX PAYMENTS AND OVERPAYMENTS FROM PRIOR YEAR RETURN\$							
	7.	7. NET TAX DUE (Line 5 les Line 6). If Line 6 is greater than Line 5, enter amount (in brackets)							
	8.	8. PENALTY: 15% + INTEREST + LATE FILING PENALTY \$ \$							
	9.	TOTAL AMOUNT DUE (ADD LINES 3 AND 4). NOTE: NO PAYMENT IS DUE IF Make remittance payable to the City of Whitehall							
	10.	OVERPAYMENT CLAIMED (IF LINE 2 EXCEEDS LINE 1)	\$						
		A. Enter the amount from Line 10 you want CREDITED to your next year e	stimate\$						
		B. Enter the amount from Line 10 you want REFUNDED (MUST BE GREATER THAN \$10.00)	\$						
		DECLARATION OF ESTIMATE	D TAX						
	11.	TOTAL INCOME SUBJECT TO TAX	\$						
	12.	MULTIPLY LINE 9 BY 2.5%(.025) Whitehall tax declared	\$						
	13.	LESS OVERPAYMENT CREDIT FROM PRIOR YEAR	\$						
	14.	NET ESTIMATED TAX DUE (line 10 less line 11)	\$						
	15.	AMOUNT PAID WITH THIS DECLARATION (not less than 25%, of line 12)	\$						
	16.	TOTAL OF THIS PAYMENT (Line 7 Plus Line 13)	\$						
		MAKE CHECKS PAYABLE TO THE CITY OF	WHITEHALL						
-		examined this return (including accompanying schedules and statements) and red by a person other than taxpayer, the declaration is based on all information	•						
SIGNATURE O	F PERSO	IN PREPARING IF OTHER THAN TAXPAYER DATE SIGNATURE OF TAXP	AYER OR AGENT (REQUIRED) DATE						
ADDRESS		TELEPHONE NUMBER TITLE IF SIGNING FO	R A BUSINESS						

NET OPERATING LOSS CARRYFORWARD WORKSHEET - MUST COMPLETE IF CLAIMING CARRYFORWARD ON Page 1, Line2c											
	COLUMN (1)	COLUMN (2)	COLUMN (3)	COLUMN (4)	COLUMN (5)						
		Prior Ye	ars	Current Taxable Year	Future Taxable Year						
PRIOR TAXABLE YEAR	NOL	NOL Utilized (Income Offset)	Carryforward	Carryforward NOL Used	Carryforward						
2018											
2019											
2020											
2021											
2022											
TOTALS											
Column (1)	For each prior tax year	of which you incurred a net oper	rating loss (NOL), ente	r the dollar amount of NOL in	curred						
Column (2)	Enter the poriton of NOL	_ incurred (from column 1) which	has already been utilize	zed in taxable years prior to t	he current taxable year.						

Column (4) Enter carryforward utilized on current year's return.

Column (5) Carryforward available for future tax years. Equals Column (3) minus Column (4).

Carryforward available for current tax year. Equals Column (1) minus Column (2).

TOTALS Carry Column (4) Total to a Page 1, Line 2c.

Column (3)

SCHEDULE X – Reconciliation with Federal Tax Return Per O.R.C. 718

ITE	EMS NOT DEDUCTIBLE	ADD	ITI	EMS NOT TAXABLE	DEDUCT
A.	Federally deducted losses from IRC 1221 or 1231 property disposiitons	\$	J.	Capital gains (IRC 1221 or 1231 property dispositions except to the extent the income	
В.	Five percent of intangible income reported in letter K except that from IRC 1221			and gains apply to the those described IRC 1245 or 1250)	\$
	property dispositions	\$	K.	Federally reported intangible income such as,	
C.	Taxes based on Income	\$		but not limited to Interest, dividends, patent and copyright income	\$
D.	Guaranteed payments or accruals to or for current or former partners or members	\$	L.	Amount of Federal tax credit to the extent they have reduced corresponding	
E.	Federally deducted dividends distributions			operating expenses	\$
	to REIT or RIC Investors	\$	M.	Not previously deducted IAC seciton	
F.	Federally deducted amounts paid or accrued to			179 expense	\$
	or for qualfied self-employed retirement plans		N.	Partnership. S Corp, LLC, Charitable contributions	\$
	for owners or owner-employees of non-C Corp entities	¢	0	TOTAL (enter line 2b other side)	¢
	Corp entities	Φ	0.	TOTAL (enter line 25 other side)	Ψ
G.	Rental activities by Partnerships,S corps. LLCs, Trusts	\$			
Н.	Other	\$			
l.	TOTAL (enter line 2a otherside)	\$			

SCHEDULE Y – Business Apportionment Formula

☐ Che	ck this	s box, i	f you a	are electing	to use t	the alte	rnative n	et profit	s appor	tionment	for remo	ote emp	loyees	according	ງ to	OR	C 7	18.0)21
-------	---------	----------	---------	--------------	----------	----------	-----------	-----------	---------	----------	----------	---------	--------	-----------	------	----	-----	------	-----

		A. Located Everywhere	B. Located in Whitehall	C. Percentage (B ÷ A)
Step 1.	Original cost of real and 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			%
Step 4.	Total Percentages			%
Step 5.	Average percentage (Divide total percentages by number of percent	ntages used) Carry to Line	3b Page 1	%