

CITY OF LOGAN, OHIO

FORM IR

(740) 385-2222

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.

MAKE CHECK OR MONEY ORDER PAYABLE TO

MAY BE USED IN ANY CITY IN BUTLER, CLERMONT, HAMILTON, HIGHLAND, HOCKING, MONTGOMERY OR WARREN COUNTIES BY INSERTING PROPER NAME AND CHANGING TAX RATE.

CITY OF LOGAN

TELEPHONE: Home Business

NAME OF EMPLOYER

TAXPAYERS NAME AND ADDRESS

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

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

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)
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 2% OF LINE 3
5. CREDITS
A. TAX WITHHELD BY EMPLOYER FOR LOGAN
B. ESTIMATED TAX PAID THIS MUNICIPALITY
C. OTHER TAX PAID CITY OR VILLAGE OF (NOT TO EXCEED 1 1/2 %)
D. PRIOR YEAR CREDITS
E. TOTAL CREDITS
6. IF LINE 4 IS GREATER THAN LINE 5E PAYMENT OF BALANCE MUST ACCOMPANY THIS RETURN:
A. PENALTY \$ INTEREST \$
B. TOTAL AMOUNT DUE (Payment must accompany return if \$10.01 or more)
No payment, Refund or Credit for amount of \$10.00 and under.
7. OVERPAYMENT TO BE REFUNDED \$ OR CREDITED \$ TO NEXT YEAR ESTIMATE.

DECLARATION OF ESTIMATED TAX FOR YEAR

You are required to estimate if prior year tax due (line 6 above) is \$200.00 or more.

- 8. TOTAL INCOME SUBJECT TO TAX \$ MULTIPLY BY TAX RATE OF 2% FOR GROSS TAX OF \$
9. 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
10. NET TAX DUE (LINE 8 LESS LINE 9C)
11. AMOUNT PAID WITH THIS DECLARATION (NOT LESS THAN 1/4 OF LINE 10)
12. 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 PREPAREE HAS ANY KNOWLEDGE.

Signature of Person Preparing if Other Than Taxpayer

Signature of Taxpayer or Agent

Check box to grant permission for tax office to discuss your tax form with preparer or other listed.

Address

Phone No.

<b>SECTION A</b>	<b>Profit (or Loss) from Business or Profession</b>	
1.	TOTAL RECEIPTS LESS ALLOWANCES, REBATES AND RETURNS .....	\$ _____
2.	LESS Cost of Labor \$ _____, Materials supplies and other costs \$ _____	\$ _____
3.	GROSS PROFIT FROM SALES, ETC. (Line 1 less line 2) .....	\$ _____
4.	INTEREST \$ _____ OTHER BUSINESS INCOME (Specify) \$ _____	\$ _____
5.	TOTAL BUSINESS INCOME BEFORE DEDUCTIONS .....	\$ _____
6.	ADVERTISING AND PROMOTION ... \$ _____	11. DEPRECIATION, AMORTIZATION .....
7.	AUTO, TRUCK AND TRAVEL .....	12. RENTS (Paid to _____) .....
8.	INT. ON BUSINESS INDEBTEDNESS ... \$ _____	13. OTHER (List if over 10% of Line 14) .....
9a.	TAXES BASED ON INCOME .....	14. TOTAL BUSINESS DEDUCTIONS (Total of Lines 6 to 13) ...
9b.	OTHER BUSINESS TAXES .....	15. NET PROFIT (OR LOSS) FROM BUSINESS
10.	SALARIES AND WAGES .....	OR PROFESSION (LINE 5 LESS LINE 14) .....

<b>SECTION B</b>	<b>Total from Federal Schedule D, Form 4797.</b>	\$ _____
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<b>SECTION C</b>	<b>Income from Rents – from Schedule E.</b>				
Kind & Location of Property	Amount of Rent	Depreciation	Repairs	Other Expenses	Net Income (Or Loss)
NET INCOME INCOME SECTION C .....					\$ _____

<b>SECTION D</b>	<b>All other Taxable Income.</b>	
INCOME FROM PARTNERSHIPS, ESTATES & TRUSTS, FEES, TIPS, COMMISSIONS, WAGE, GAMBLING AND MISCELLANEOUS		
RECEIVED FROM	FOR (DESCRIBE)	AMOUNT
NET INCOME INCOME SECTION D .....		\$ _____

<b>TOTAL</b>	<b>From Sections A, B, C &amp; D. Enter on Page 1, Line 1 .....</b>	\$ _____
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<b>SCHEDULE X</b>	<b>Reconciliation with Federal Income Tax Return</b>																																		
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<b>SCHEDULE Y</b>	<b>Business Allocation Formula</b>				
STEP 1. AVG. VALUE OF REAL & TANG. PERSONAL PROPERTY	a. LOCATED EVERYWHERE	b. LOCATED IN THIS CITY	c. PERCENTAGE (b + a)		
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	_____	_____	_____		
4. TOTAL PERCENTAGES	_____	_____	_____		
5. AVERAGE PERCENTAGE (Divide Total Percentages by Number of Percentages Used.)	_____				

<b>SCHEDULE Z</b>	<b>PARTNER'S SHARE OF INCOME</b>					
1. NAME AND MUNICIPALITY OR TOWNSHIP OF EACH PARTNER	2. Resident		3. Dist. Shares of Partners		4. Other Payments	5. Taxable Percentage
	Yes	No	Percent	Amount		
TOTALS from Section A and D Above			100	\$ _____		