

20

PORTSMOUTH INCOME TAX RETURN
PORTSMOUTH CITY INCOME TAX DIVISION
P.O. BOX 1323
PORTSMOUTH, OHIO 45662, PHONE (740) 353-3111
FOR THE CALENDAR YEAR OR OTHER

20

PROCESSED BY

AUDITED BY

IF THE ADDRESS CAPTION IS NOT CORRECT
PLEASE MAKE NECESSARY CHANGES.

IF YOU DO NOT ANTICIPATE HAVING TAXABLE INCOME IN THE FUTURE, INDICATE
REASON ON YOUR DECLARATION AND WE WILL CLOSE YOUR ACCOUNT.

THIS RETURN IS FOR BOTH BUSINESS AND INDIVIDUALS

TAXABLE PERIOD BEGINNING 20
AND ENDING 20
CALENDAR YEAR TAXPAYER'S FILE ON OR BEFORE APRIL 15.
FISCAL AND PARTIAL YEARS, FILE WITHIN 4 MONTHS FROM END OF PERIOD.

S.S./I.D.#
ACCT.#
NAME
ADDRESS
CITY

DATE RECEIVED
CASH CHECK MONEY ORDER

TAX OFFICE USE ONLY
PAID WITH THIS RETURN
FINAL RETURN \$
DECLARATION \$
TOTAL REMITTANCE \$

PORTSMOUTH INCOME TAX RETURN

1. Gross wages, salaries, tips and other compensation...
2. Profit or loss from business...
3. Adjustments: a. Reconciliation with Federal Return...
4. Total income...
5. Tax computation...
6. Credits...
7. ADJUSTED PORTSMOUTH INCOME TAX...
8. Payments and Credits...
9. Balance...
10. Penalty...
11. Amount due or overpayment...
12. Distribution of overpayment...

ATTACH W-2'S ON BACK

TAX DUE
11
12

CALENDAR YEAR DECLARATION OF ESTIMATED PORTSMOUTH, OHIO CITY INCOME TAX

For the period from January 1, through December 31, File on or before April 15, Fiscal Period from through File within 4 months.

DECLARATION REQUIRED ONLY IF ESTIMATED TAX EXCEEDS \$200.00

13. Total income subject to tax...
14. Less expected tax credits...
15. Net Estimated Tax...
16. Less overpayment from line 12...
17. Balance...
18. Amount paid with this declaration...
19. AMOUNT ENCLOSED: TAX DUE...
1st. Qtr. TAX DUE

1st QUARTER TAX DUE 18

TOTAL AMOUNT DUE 19

NOTE: 22.5% of declaration payment is due April 15,
MAKE CHECKS PAYABLE TO CITY OF PORTSMOUTH, INCOME TAX DIVISION.

Under penalties of perjury, I declare 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.
Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

CHECK BOX TO ALLOW DISCUSSION DIRECTLY WITH YOUR PREPARER

DATE SIGNATURE OF TAXPAYER Phone No. Taxpayer Social Security No. F.I.D. No. (Business Only) Signature of Tax Preparer

FORM R SIGNATURE OF SPOUSE (IF JOINT RETURN BOTH MUST SIGN) TAX DEPARTMENT COPY Phone No. DATE

SCHEDULE X - RECONCILIATION WITH FEDERAL INCOME TAX RETURN

ITEMS NOT DEDUCTIBLE	ADD	ITEMS NOT TAXABLE	DEDUCT
A. Net loss from sale, exchange or other disposition of capital or other assets	_____	H. Net gain from sale, exchange or other disposition of capital or other assets	_____
B. Interest and/or Other Expense incurred in the production of non-taxable income	_____	I. Interest Income	_____
C. all income taxes Paid or Accrued	_____	J. Dividends (less Federal Exclusion)	_____
D. Withdrawals by Owners or Payment to partners	_____	K. Income from Patents and copyrights	_____
E. Other Deductions Not Allowable (explain)	_____	L. Other income exempt from Portsmouth Tax (explain)	_____
F. Net operating loss carry-forward from Federal return	_____		_____

G. Total Additions		M. Total Deductions	

SCHEDULE Y - BUSINESS ALLOCATION FORMULA

	A. LOCATED EVERYWHERE	B. LOCATED IN PORTSMOUTH	C. (b+a) Percentage
STEP 1. Average Value of Real and Tangible Personal Property	_____	_____	_____
Gross Annual rentals Multiplied by 8	_____	_____	_____
TOTAL STEP 1	_____	_____	%
STEP 2. Gross receipts from Sales made and/or Work or Services performed	_____	_____	%
STEP 3. WAGES, SALARIES, ETC. PAID	_____	_____	%
4. Total Percentages	_____	_____	%
5. Average Percentage (divide Total Percentage by Number of Percentages used CARRY TO LINE 4b.)	_____	_____	%

Has INTERNAL REVENUE SERVICE increased your income tax liability for any prior year?

Yes No If so, what year? _____

Was an amended city or Portsmouth income tax return filed? Yes No

If you have moved since your previous return was filed give date moved into Portsmouth _____ or out of Portsmouth _____

If you have changed place of employment give current employer _____ and effective date _____

Show any change to the right of that pre-printed on the front of this form.

Thank you.

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S.S./I.D.#
ACCT.#

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PAID WITH THIS RETURN

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DECLARATION \$
TOTAL REMITTANCE \$

NAME

DATE RECEIVED

CASH CHECK MONEY ORDER

ADDRESS
CITY

PORTSMOUTH INCOME TAX RETURN

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1st QUARTER TAX DUE

TOTAL AMOUNT DUE

NOTE: 22.5% of declaration payment is due April 15,
MAKE CHECKS PAYABLE TO CITY OF PORTSMOUTH, INCOME TAX DIVISION.

Under penalties of perjury, I declare 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.

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DATE SIGNATURE OF TAXPAYER Phone No. Taxpayer Social Security No. Signature of Tax Preparer

FORM R SIGNATURE OF SPOUSE (IF JOINT RETURN BOTH MUST SIGN) TAXPAYER COPY Phone No. DATE

INSTRUCTIONS FOR COMPLETING FINAL RETURN.

- LINE 1 List W-2 income (attachment of forms required). (Individual Returns only. Corporations Start on Line 2). **List gross income before any deductions, tax shelters or annuities, (with the exception of Section 125 Cafeteria Plans).**
- LINE 2 **Business Income:** Attachment of all applicable Federal Schedules or Returns to substantiate your profit or loss claimed is required. Deductions for commissions, sub-contractors, etc. must be supported with copies of 1099's or a list with names, addresses, social security numbers and the amount paid to each.
- NOTE: Business losses cannot be applied to taxes on earned income shown on line 1.
- Exempt from City Tax: Military pay for service in the armed forces, welfare payments, disability payments, pensions, unemployment compensation and subpay. Interest, dividends and capital gains. Compensation to self-employed persons under 17 years of age.
- LINE 3 A. Reconciliation with Federal Return (Complete Schedule X).
B. Other: Partial year liability - Show dates and reason income is not taxable.
- LINE 4 A. Line 1 plus line 2, plus or minus line 3. NOTE: If line 2 is a loss it may not be deducted from line 1.
B. Business return only - complete schedule Y.
C. A net operating loss may be applied to the profit in succeeding years for a maximum of 5 years. When applicable use allocated loss carry forward.
- LINE 5 Carry taxable income to line 5, multiply by 2.0%, carry tax to line 5 at the right.
- LINE 6 A. Tax withheld by your employer and paid to Portsmouth.
B. 1.0% maximum deduction. If you are a Portsmouth resident and your income is earned in and taxed to another City - you may deduct up to 1.0% of the wages taxed to that City. W-2 must show other City tax withheld or a copy of that City return must be attached.
- LINE 7 Subtract line 6 credits from line 5 tax.
- LINE 8 Amount you have on your account to apply to the tax due.
- LINE 9 Tax due: Carry to line 11 if filed by due date.
- LINE 10 A. For a return filed after due date: Penalty of 10% with minimum of \$ 10.00 is assessed.
B. All monies unpaid after they become due shall bear interest at the rate of 1½% per month.
- LINE 11 Enter amount due: **PAYMENT MUST ACCOMPANY RETURN.** A return without payment is not filed. Tax due under \$5.00 - no payment required but return must still be filed.
- LINE 12 Overpayment: A. Can be credited to next year's tax liability, if Declaration is filed - apply to amount due.
B. Refund of overpayment (\$5.00 minimum). Proper attachments required.
- NOTE: **DECLARATION** is required if the estimated tax is expected to exceed \$200.00 and must be filed within 120 days of becoming liable.
- LINE 13 Estimated gross income before payroll deductions and/or estimated net profits multiplied at 2.0% Effective 1/1/12.
- LINE 14 See line 6 instructions.
- LINE 15 Estimated tax less applicable credits.
- LINE 16 Prior Year overpayment may be applied to estimated tax due.
- LINE 17 Balance.
- LINE 18 First quarter payment, plus any penalty if paid after due date. **WITHOUT PAYMENT:** the declaration is not filed.
- LINE 19 This is the amount you should pay with this return.

INCOME TAX DIVISION

Post Office Box 1323

Portsmouth, Ohio 45662-1323