

BUSINESS INCOME TAX RETURN
CALENDAR YEAR _____ DUE BY APRIL 15 OF FOLLOWING YEAR
FISCAL YEAR _____ TO _____ DUE 15TH DAY
OF THE 4TH MONTH FOLLOWING YEAR END

MAKE CHECKS PAYABLE TO
BUCYRUS INCOME TAX DEPT

TYPE OF BUSINESS: Corporation Partnership
 "S" Corporation Other

Federal Employer Identification No.

Table with 20 rows for tax calculations. Columns include description, amount, and dollar sign. Rows include: 1. FEDERAL TAXABLE INCOME, 2. ITEMS NOT DEDUCTIBLE, 3. ITEMS NOT TAXABLE, 4. ENTER EXCESS OF LINE 2 or 3, 5. ADJUSTED FEDERAL TAXABLE INCOME, 6. AMOUNT APPORTIONED TO BUCYRUS, 7. AMOUNT SUBJECT TO MUNICIPAL INCOME TAX, 8. BUCYRUS TAX DUE - 2.0%, 9. ESTIMATED PAYMENTS, 10. PRIOR YEAR OVERPAYMENTS, 11. TOTAL CREDITS, 12. BALANCE OF TAX DUE, 13. OVERPAYMENT, 14. REFUND CREDIT TO, 15. TOTAL ESTIMATED TAX DUE, 16. QUARTERLY AMOUNT DUE, 17. PRIOR YEAR CREDIT, 18. BALANCE OF QUARTERLY PAYMENT DUE, 19. PENALTY AND INTEREST, 20. TOTAL DUE.

Table for SCHEDULE X ITEMS NOT DEDUCTIBLE and ITEMS NOT TAXABLE. Columns: SCHEDULE X ITEMS NOT DEDUCTIBLE, ADD, ITEMS NOT TAXABLE, DEDUCT. Rows include: A. 5% OF INTANGIBLE INCOME, B. LOSSES FROM THE SALE, C. TAXES ON OR MEASURED BY NET INCOME, D. DIVIDENDS PAID TO INVESTORS, E. GUARANTEED PAYMENTS TO PARTNERS, F. PAYMENTS TO/ FOR RETIREMENT PLAN, G. INSURANCE FOR OWNER, H. TOTAL ADDITIONS, I. CAPITAL GAINS, J. INTEREST, K. DIVIDENDS, L. OTHER INTANGIBLE INCOME, M. GAIN FROM THE SALE, N. DISPOSITION OF SECTION 1221 OR 1231 PROPERTY, O. TOTAL DEDUCTIONS.

SCHEDULE Y - BUSINESS APPORTIONMENT FORMULA (See Instructions). Table with 5 steps and 3 columns: A. Located Everywhere, B. Located in Bucyrus, C. Percentage (B ÷ A). Rows include: Step 1. Average original cost of real and tangible personal property, Step 2. Gross receipts from sales and work or services performed, Step 3. Total wages, salaries, commissions, and other compensation of all employees, Step 4. Total percentages, Step 5. Average percentage (Divide total percentages by number of percentages used - enter on % Line 6 above.).

The undersigned declares that this return (and accompanying schedules) is a true, correct and complete return for the taxable period stated and that the figures used herein are the same as used for Federal Income Tax purposes, and if an audit of Federal return is made which affects tax liability shown on this return, an amended return will be filed within 3 months.

Signature (Title) (Date) Preparer's signature (other than taxpayer) (Date)

If this return was prepared by a tax practitioner, may we contact your practitioner directly with questions regarding the preparation of this return? YES NO

Address (and Zip Code)

ACCOUNT INFORMATION UPDATE

Complete all questions fully. The information below will be used to update information currently on file.

BUSINESS NAME _____

NATURE OF BUSINESS _____

BUCYRUS LOCATION _____

HOME OFFICE LOCATION _____

HOME OFFICE TELEPHONE _____ CONTACT _____

MAILING ADDRESS _____

FEDERAL IDENTIFICATION NUMBER _____

DATE BUSINESS BEGAN IN BUCYRUS _____

TYPE OF ENTITY (Corp, S Corp, Partnership, Assoc., etc.) _____

ACCOUNTING PERIOD _____ Calendar Year
_____ Fiscal Year (month ending _____)

NAME AND ADDRESS OF PARTY IN CHARGE OF BOOKS _____

DO YOU SUBCONTRACT LABOR TO PERFORM WORK IN BUCYRUS? YES NO

If YES, copies of 1099's or a statement containing the same information must be submitted no later than February 28 of each year. Failure to provide this information can result in a \$500.00 penalty.

DO YOU HAVE EMPLOYEES WORKING IN BUCYRUS? YES NO

If YES, copies of employee W-2 forms must be submitted no later than February 28 of each year.

IF YOU RENT PROPERTY IN BUCYRUS, NAME AND ADDRESS OF PERSON OR ENTITY THAT OWNS SAID PROPERTY

