

**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.

1. <b>FEDERAL TAXABLE INCOME</b> (CAUTION: May be different than the amount reported for Federal purposes. See instructions.) .....	\$	
2. ITEMS NOT DEDUCTIBLE (From Line M, Schedule X below).....	ADD	
3. ITEMS NOT TAXABLE (From Line Z, Schedule X below).....	DEDUCT	
4. ENTER EXCESS OF LINE 2 or 3 .....	\$	
5. ADJUSTED FEDERAL TAXABLE INCOME (Line 1 plus or minus Line 4) .....	\$	
6. AMOUNT APPORTIONED TO BUCYRUS (If Schedule Y is used, _____ % from Line 5) .....	\$	
7. <b>AMOUNT SUBJECT TO MUNICIPAL INCOME TAX</b> .....	\$	
8. <b>BUCYRUS TAX DUE - 2.0%</b> .....	\$	
9. ESTIMATED PAYMENTS .....	\$	
10. PRIOR YEAR OVERPAYMENTS .....	\$	
11. TOTAL CREDITS (Add Lines 9 AND 10) .....	\$	
12. <b>BALANCE OF TAX DUE</b> - (Subtract Line 11 from Line 8) (must exceed \$10.00) .....	\$	
13. OVERPAYMENT (If Line 11 exceeds Line 8) (must exceed \$10.00) .....	\$	
14. _____ REFUND _____ CREDIT TO _____ .....		
<b>ESTIMATED TAX</b> (See Instructions)		
15. TOTAL _____ ESTIMATED TAX DUE .....	\$	
16. QUARTERLY AMOUNT DUE (1/4 of Line 15) .....	\$	
17. PRIOR YEAR CREDIT (Line 14) APPLIED TO FIRST QUARTERLY PAYMENT .....	\$	
18. BALANCE OF QUARTERLY PAYMENT DUE (Line 16 minus Line 17) .....	\$	
19. PENALTY _____ AND INTEREST _____ LATE FILING FEE _____ .....	\$	
20. <b>TOTAL DUE</b> (Add Lines 12 and 18) Make check or money order payable to <b>BUCYRUS INCOME TAX DEPT.</b> .....	\$	

<b>SCHEDULE X ITEMS NOT DEDUCTIBLE</b>	<b>ADD</b>	<b>ITEMS NOT TAXABLE</b>	<b>DEDUCT</b>
A. 5% OF INTANGIBLE INCOME (LINE N-Q) .....	\$	N. CAPITAL GAINS.....	\$
B. LOSSES FROM THE SALE, EXCHANGE OR OTHER DISPOSITION OF SECTION 1221 OR 1231 PROPERTY .....	\$	O. INTEREST .....	\$
C. TAXES ON OR MEASURED BY NET INCOME .....	\$	P. DIVIDENDS .....	\$
D. DIVIDENDS PAID TO INVESTORS OF A REIT OR RIC .....	\$	Q. LOSS CARY FORWARD (EXPLAIN) .....	\$
E. GUARANTEED PAYMENTS TO PARTNERS/MEMBERS .....	\$	R. GAIN FROM THE SALE, EXCHANGE OR OTHER DISPOSITION OF SECTION 1221 OR 1231 PROPERTY .....	\$
F. PAYMENTS TO/FOR RETIREMENT PLAN, HEALTH OR LIFE INSURANCE FOR OWNER OR OWNER-EMPLOYEE .....	\$	Z. TOTAL DEDUCTIONS (ENTER AS LINE 3 ABOVE) .....	\$
M. TOTAL ADDITIONS (ENTER AS LINE 2 ABOVE) .....	\$		

**SCHEDULE Y - BUSINESS APPORTIONMENT FORMULA** (See Instructions)

	A. Located Everywhere	B. Located in Bucyrus	C. Percentage (B ÷ A)
Step 1. Average original cost of real and tangible personal property .....	\$	\$	
Gross annual rentals multiplied by 8 .....	\$	\$	
Total step 1 .....	\$	\$	_____ %
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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_