

File with and make checks payable to: CITY OF READING INCOME TAX BUREAU 1000 Market Street Reading, Ohio 45215-3283 Phone: (513) 733-0300 Fax: (513) 842-1016 Website: www.readingohio.org	<h2 style="margin:0;">Business Tax Return</h2> <h3 style="margin:0;">20__</h3> FISCAL PERIOD _____ TO _____ Due on or before 4/15/____ or 15 th day of the 4 th month following the end of the fiscal year	THIS SPACE FOR TAX OFFICE USE ONLY
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<input type="checkbox"/> C Corp <input type="checkbox"/> S Corp <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor	Should your account be inactivated? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, please explain:
TAXPAYER'S BUSINESS NAME & ADDRESS:	FEDERAL ID # _____ TELEPHONE: _____ IF MOVED DURING CURRENT YEAR, PLEASE GIVE DATE: MOVED IN: _____ MOVED OUT: _____
<i>If the information above is incorrect, please make corrections</i>	Part year activity: Start date _____ End Date _____

PART A | 20__ TAX CALCULATION

1.	Adjusted Federal Taxable Income (attach copy of Federal return) from Form _____ Line _____	\$ _____
2.	Adjustments (from Line L, Schedule X).....	\$ _____
3.	Taxable income before apportionment (Line 1 plus / minus Line 2).....	\$ _____
4.	Apportionment percentage (from Step 5, Schedule Y) _____ %.....	
5.	Reading taxable income (multiply Line 3 by Line 4).....	\$ _____
6.	Less allocable loss per previous income tax return(s) limited to three years (attach schedule)....	\$ _____
7.	Amount subject to Reading income tax (Line 5 less Line 6).....	\$ _____
8.	Reading income tax (multiply Line 7 by 2.0% [.020]).....	\$ _____
9a.	Estimates paid on this year's liability.....	\$ _____
9b.	Credits applied to this year's liability.....	\$ _____
10.	Total Payments and credits (Lines 9a + 9b).....	\$ _____
11.	Tax due (subtract Line 10 from Line 8).....	\$ _____
12.	Overpayment (Line 10 greater than Line 8).....	\$ _____
13.	Amount to be refunded (amounts less than \$5 will not be refunded).....	\$ _____
14.	Amount to be credited to next year.....	\$ _____

PART B | DECLARATION OF ESTIMATED TAX FOR 20__

15.	Total estimated income subject to tax.....	\$ _____
16.	Reading income tax declared (multiply Line 15 by 2.0% [.020]).....	\$ _____
17.	Tax due before credits (at least 25% of Line 16).....	\$ _____
18.	Less credits (from Line 14 above).....	\$ _____
19.	Net estimated tax due if Line 17 minus Line 18 is greater than zero.....	\$ _____
20.	TOTAL AMOUNT DUE – Combine Line 11 with Line 19	\$ _____

FOR TAX OFFICE USE ONLY					
Tax \$ _____	Penalty \$ _____	Interest \$ _____	Late _____	Months _____	Total Due \$ _____

Check to give us permission to contact your tax practitioner directly if there are questions regarding the preparation of this return.

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 those used for Federal Income Tax purposes.

Signature of Person Preparing Return _____	Date _____	Signature of Officer or Agent _____	Date _____
Printed Name of Person Preparing Return _____	Date _____	Name and Title _____	Phone Number _____

SCHEDULE X – RECONCILIATION WITH FEDERAL INCOME TAX RETURN

ITEMS NOT DEDUCTIBLE	ADD	ITEMS NOT TAXABLE	DEDUCT
A. Capital Losses (Sec 1221 or 1231 included)	\$ _____	H. Capital Gains.....	\$ _____
B. Taxes on or measured by Net Income	_____	I. Intangible Income.....	_____
C. Guaranteed Payments to Partners, retired partners, members or other owners	_____	J. Other Income exempt (Explain)...	_____
D. Expenses attributable to non-Taxable income (5% of Line I.)	_____	_____
E. Real Estate Investment Trust Distributions.....	_____	_____
F. Other.....	_____	_____
.....	_____	_____
.....	_____	_____
G. Total additions.....	\$ _____	K. Total deductions.....	\$ _____
L. Combine Lines G and K and enter net on Part A, Line 2 _____			

SCHEDULE Y – BUSINESS APPORTIONMENT FORMULA

	a. Located Everywhere	b. Located in Reading	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. Wages, salaries, and other compensation paid See Schedule Y-1*.....	_____	_____	_____ %
STEP 3. Gross receipts from sales made and services performed.....	_____	_____	_____ %
STEP 4. Total percentages (add percentages from Steps 1-3)			_____ %
STEP 5. Average percentage (divide total percentage by number of percentages used—carry to Part A, Line 4)			_____ %

***SCHEDULE Y-1 RECONCILIATION TO FORM W-3 (WITHHOLDING RECONCILIATION)**

Total wages allocated to Reading (from Federal Return or apportionment formula Schedule Y step 2)..... \$ _____

Total wages shown on Form W-3 (Withholding Reconciliation)..... \$ _____

Please explain any difference:

Are there any employees leased in the year covered by this return? _____ Yes _____ No

If YES, please provide the name, address and FID number of the leasing company.

Name: _____ Address: _____

FID Number: _____

NOTICE: Unless accompanied by copies of appropriate federal forms/schedules and by payment of the balance of tax Declared Due (Line 11) and at least 25% of the estimated tax due (Line 17), this form is not a legal final return or declaration.

NOTICE: Failure to file a required return and / or to pay taxes due by due date will result in imposition of penalty and interest.