

File With
BYESVILLE INCOME TAX
DEPARTMENT
P. O. BOX 8
BYESVILLE, OHIO 43723
(740) 685-3337

2015 BYESVILLE INCOME TAX RETURN
FOR USE BY ALL TAXPAYERS ON A CALENDAR YEAR BASIS OR OTHER
TAXABLE PERIOD BEGINNING 20 AND ENDING 20
Calendar Year Taxpayers FILE and PAY on or before April 15, 2015.
Fiscal and Partial Year Taxpayers FILE and PAY within 4 months after end of period.
FILING REQUIRED EVEN IF NO TAX IS DUE

TAX OFFICE USE ONLY
AMOUNT PAID WITH RETURN
\$
 CASH CHECK MO
Processed By:

Soc. Sec. No. (M)

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Soc. Sec. No. (F)

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Fed. I.D. No.

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Landlords name and address _____

2013 Residency Status (check one)
 Resident Partial Year Resident
 Non-Resident from _____ to _____

Name & Address imprinted above are as shown by our records.
(If incorrect, or if space is blank, please print your name and address as you wish them to show)

SCHEDULE A

Enter TOTAL wages, salaries, commissions and other compensation received in the tax period from January 1, 2014 to December 31, 2014, BEFORE PAYROLL DEDUCTIONS. Also enter amount of Village Income Tax withheld. **ATTACH ALL W-2'S, 1099'S, AND FEDERAL 1040.**

INCOME

- 1. Wages, salaries, tips, and other compensation - BOX 5 on W2 (Attach all W-2 forms) \$ _____
- 2. Net Profit from Business or Profession (Schedule C, page 2) \$ _____
- 3. Net Profit from Rentals (Schedule E, page 2) \$ _____
- 4. Income from Partnerships, Etc. including farms (Schedule H, page 2) \$ _____
- 5. Total income subject to Byesville Income Tax (Total Lines 1, 2, 3, 4) \$ _____
- 6. Byesville Tax, 1% of Item 5 \$ _____

CREDITS

ATTACH W-2 FORMS HERE

- 7. Tax credits:
 - A. Byesville tax withheld \$ _____
 - B. Tax paid the City or Village of _____ (Credit not to exceed amount of line 6) .. \$ _____
 - C. Estimated tax paid Byesville \$ _____
 - D. Prior years overpayment \$ _____
 - E. Total tax credits \$ _____
- 8. BALANCE DUE: (If line 6 is greater than line 7E) \$ _____
- 9. Penalty & Interest Charges \$ _____
- MAKE REMITTANCE TO: BYESVILLE INCOME TAX DEPT. - Disregard any amount under \$1.00 TOTAL \$ _____
- 10. Overpayment to be refunded \$ _____ or credited \$ _____ to next year's estimate.

DECLARATION OF ESTIMATED TAX FOR YEAR 2015 (1st QTR DUE WITH FILING THIS RETURN)

- 1. Total Income Subject to Tax \$ _____: Multiply by Rate of 1.0% For Gross Tax of \$ _____
- 2. Less Expected Tax Credits
 - A. Withheld by an Employer (Not to Exceed 1.0%) \$ _____
 - B. Overpayment From Prior Year \$ _____
 - C. Payments to Another Municipality (Not to Exceed 1.0%) \$ _____
 - D. Total Credits \$ _____
- 3. Net Tax Due (Line 1 Less Line 2D) \$ _____
- 4. Amount Paid With This Declaration \$ _____

CERTIFICATION

I declare that the information contained in this tax return has been examined by me and to the best of my knowledge and belief, is a true and complete return.

(Signature of firm or person, other than taxpayer preparing return) (Date) (Signature of Taxpayer) (Date)

THIS SECTION TO BE COMPLETED ONLY BY THOSE WITH PROFIT OR LOSS FROM INCOME OTHER THAN WAGES
 FEDERAL SCHEDULES K, C & E CAN NOT OFFSET EACH OTHER

SCHEDULE C – BUSINESS INCOME (FROM FEDERAL RETURN)

ATTACH W-2S HERE

1. ENTER TOTAL INCOME FROM SCHEDULES	\$	_____
2. A. ITEMS NOT DEDUCTIBLE (FROM LINE M SCHEDULE X)	\$	_____
B. ITEMS NOT TAXABLE (FROM LINE Z SCHEDULE X)	\$	_____
C. DIFFERENCE BETWEEN LINES 2A AND 2B TO BE ADDED OR SUBTRACTED FROM LINE 1	\$	_____
3. A. ADJUSTED INCOME (LINE 1 PLUS OR MINUS 2C IF SCHEDULE X IS USED)	\$	_____
B. AMOUNT ALLOCABLE TO THIS CITY (LINE 5 OF SCHEDULE Y)	\$	_____
4. NET BUSINESS INCOME (LINE 3A MULTIPLIED BY LINE 3B)	\$	_____
(IF POSITIVE, ENTER ON LINE 2A, PAGE 1 OR IF NEGATIVE, ENTER ZERO ON LINE 2A, PAGE 1)	\$	_____

SCHEDULE E – RENTAL INCOME (ATTACH FEDERAL RETURN)

1. ENTER TOTAL RENTAL INCOME	\$	_____
2. ENTER TOTAL RENTAL EXPENSES	\$	_____
3. ENTER NET INCOME (DIFFERENCE BETWEEN LINES 1 AND 2)	\$	_____
(IF POSITIVE, ENTER ON LINE 2B, PAGE 1 OR IF NEGATIVE, ENTER ZERO ON LINE 2B, PAGE 1)		

SCHEDULE H – ALL OTHER NON WAGE INCOME (ATTACH FEDERAL RETURN)

1. ENTER TOTAL INCOME	\$	_____
2. ENTER TOTAL EXPENSES	\$	_____
3. ENTER NET INCOME (DIFFERENCE BETWEEN LINES 1 AND 2)	\$	_____
(IF POSITIVE, ENTER ON LINE 2C, PAGE 1 OR IF NEGATIVE, ENTER ZERO ON LINE 2C, PAGE 1)		

SCHEDULE X – BUSINESS INCOME SCHEDULE (including resident pass-through income)

ITEMS NOT DEDUCTIBLE		ADD	ITEMS NOT TAXABLE		DEDUCT
A. Losses from IRC 1221 or 1231 property dispositions	\$	_____	N. Gains from IRC 1221 or 1231 property distributions except IRC 1245 or 1250	\$	_____
B. 5% of intangible income reported in line O, of this Sch X except that from IRC 1221 property dispositions	\$	_____	O. Intangible income, including interest, dividends, patent & copyright income	\$	_____
C. Taxes based on income	\$	_____	P. Federal tax credits to extent they reduced corresponding operating expenses	\$	_____
D. Dividends, distributions to REIT investors	\$	_____	Q. Other (explain & provide documentation)	\$	_____
E. Payments, accruals for qualified self-employed retirement plans, health insurance plans, and life insurance plans for owners or owner-employees of non-C corporation entities	\$	_____		\$	_____
F. Other (explain & provide documentation)	\$	_____		\$	_____
	\$	_____		\$	_____
	\$	_____		\$	_____
M. TOTAL ADDITIONS (lines A through F)	\$	_____	Z. TOTAL DEDUCTIONS (lines N through Q)	\$	_____
		(Enter as Line II(a) above)			(Enter as Line II(b) above)

SCHEDULE Y – BUSINESS ALLOCATION FORMULA

NOTE: This schedule is applicable only to entities doing business both within and outside Byesville city limits.

	A. LOCATED EVERYWHERE	B. LOCATED IN THIS MUNICIPALITY	C. PERCENTAGE (b ÷ a)
STEP 1. Average 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	_____	_____	_____ %
STEP 3. Gross Receipts from Sales Made and/or Work or Services Performed	_____	_____	_____ %
STEP 4. Total Percentages	_____	_____	_____ %
STEP 5. Average Percentage (Divide Total Percentages by Number of Percentages Used - Zero cannot be used as a percentage)	_____	_____	_____ %