

2019 CITY OF WOOSTER BUSINESS INCOME TAX RETURN

For calendar 2019 or tax year beginning _____, _____, ending _____, _____

Federal Identification Number	File Number	
Company Name and Address	MAIL TO : CITY OF WOOSTER INCOME TAX PO BOX 1088 WOOSTER OH 44691 Questions ? 330-263-5226	Do not write in this area
Wooster Business Location's Street Address :		

City Taxable Income - Attach Federal Return & Supporting Statements

1	Taxable income (loss) <i>per copy of complete federal return attached, see instructions</i>	1	
2	Adjustments complete schedule Z On back of return		
	A. Items not deductible Schedule Z Line F	2A	
	B. Items not taxable Schedule Z Line L	2B	()
3	Adjusted Net Income (Loss) Add lines 1 and 2A, then subtract Line 2B	3	
Wooster Taxable Income - Complete Schedule Y on back of return			
4	Amount allocable to Wooster income tax (multiply line 3 by schedule Y percentage of _____%)	4	
5	Net operating loss carry forward	5	()
6	Amount subject to Wooster income tax Subtract line 5 from line 4	6	
7	Enter amount from line 6, if greater than 0	7	
8	Wooster income tax Multiply line 7 by .015 (1.5%)	8	

Payments

9	A. 2018 Overpayment	9A		
	B. 2019 Estimated tax payments	9B		
	C. Amount paid with extension towards 2019 taxes	9C		
10	Total payments Add lines 9A, B, C	10		

Refund or Amount Due ***Amounts \$10.00 or Less Are Not Be Due and Will Not Be Refunded***

11	Amount overpaid <i>If line 10 is greater than line 8, enter overpayment</i>	11	
12	Amount due <i>If line 8 is greater than line 10, enter tax due if amount is \$10.00 or less enter 0</i>	12	
13	Amount of Line 11 to be refunded <i>No refund if amount on line 11 is \$10.00 or less</i>	13	
14	Amount of Line 11 to be applied towards 2020 estimated taxes	14	
Penalty & Interest	15	Late filing penalty \$25.00 (Per month or fraction thereof, not to exceed \$150.00)	15
	16	Penalty 15% of amount not paid timely	16
	17	Interest .58% per month of tax not paid timely	17

Declaration of Estimated Tax for 2020

18	2020 Tax estimate \$ _____ Amount from Line 14 \$ _____ Remaining estimate due	18	
19	AMOUNT DUE WITH RETURN (add lines 12, 15, 16, 17& 18 make check payable to "City of Wooster")	19	

I declare that I have examined this return and the accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Do you authorize your preparer to contact us regarding this return? Yes No

Signature of Officer Date

Title

Telephone Number

Paid Preparer's Signature Date

Firm (or individual)

Preparer's address

PLEASE SIGN ABOVE

Preparer's telephone number

SCHEDULE Y**BUSINESS ALLOCATION FORMULA**

	A. Located Everywhere	B. Located in Wooster	C. Percentage (B/A)
1 Average original cost of real & tangible personal property	_____	_____	
Gross annual rental paid multiplied by 8	_____	_____	
Total Step 1	_____	_____	_____ %
2 Gross receipts from sales and/or services provided	_____	_____	_____ %
3 Wages, salaries, paid employees, etc.	_____	_____	_____ %
4 Total percentages			_____ %
5 Average percentage (divide total percentages by number of percentages used)			_____ %

SCHEDULE Z**Reconciliation with Federal Income Tax Return**

ITEMS NOT DEDUCTIBLE		ITEMS NOT TAXABLE	
A Capital/ IRS Section 1231 losses	_____	G Capital/IRS Section 1231 gains	_____
B 5% of expenses applicable to non-taxable income	_____	H Dividends	_____
C Taxes based on income	_____	I Interest income	_____
D Amounts paid or accrued to qualified retirement, health and life insurance plans on behalf of	_____	J Royalties (intangible)	_____
E Other (please list): _____	_____	K Other (please list): _____	_____
F Total- Enter on line 2A	_____	L Total- Enter on line 2B	_____