

FORM CO. -91

Income Tax
Woodsfield, Ohio

THIS IS NOT A FEDERAL RETURN

File this Return with Woodsfield Income Tax Dept., Box 618, Woodsfield, Ohio on or before April 30, or within 4 months after the close of a fiscal year.

(Tax Office Use Only)

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Cashier's Stamp

**CORPORATION, PARTNERSHIP OR FIDUCIARY
INCOME TAX RETURN**

Woodsfield, Ohio, Income Tax

For Taxable Period from January 1 through December 31, or Fiscal

Period from , , through..... ,

Nature of Business

Processed by

Extended by

Cash M.O.

Check

Paid with this Return

\$

NAME:

Trade Name, or name of responsible official, and Address are as they appear on our records. Make any necessary corrections.

C/O:

ADDRESS:

CITY:

NET INCOME COMPUTATION

	COLUMN A As shown by Federal Return	COLUMN B Allocable to Woodsfield, Ohio (*See Note)
1. Net Income Per Federal Return	\$	\$
2. Add items not deductible under Woodsfield, Ohio, Income Tax Ord. (Schedule X)		
3. Deduct items not taxable under Woodsfield, Ohio, Income Tax Ord. (Schedule X)		
4. Adjusted Net Income	\$	\$
5. % (as determined by Schedule Y) of line 4, column A	\$	XXXXXXXXXXXX
6. Net Income subject to Woodsfield Income Tax (line 5, column A, or line 4, column B)	\$	\$
7. Woodsfield Income Tax 1% of Line 6	\$	\$
8. Less: Payments made on account of Declaration of Estimated Woodsfield Income Tax	\$	\$
9. Unpaid Balance of Woodsfield Income Tax, which amount must be paid with the filing of this return - Make check to Village of Woodsfield - Income Tax	\$	\$
10. Overpayment (line 7 subtracted from line 8)	\$	\$

11. Use X to indicate whether overpayment is to be refunded , applied against declaration .
No refund will be made until Declaration is filed.

*NOTE - If Business Allocation Formula (Schedule Y) is used, disregard column B.

AFFIDAVIT

The undersigned Officer or Partnert (or Chief Accounting Officer) of the Business for which this return is made, declares that this return has been examined by him and is to the best of his knowledge and belief, a true, correct and complete return.

Signature of Firm or person, other than taxpayer, preparing return)

Date

(Signature of Taxpayer)

Date

MAIL THIS COPY TO WOODSFIELD INCOME TAX DEPARTMENT, P.O. BOX 618, WOODSFIELD, OHIO 43793

SCHEDULE X

Adjustment of Book Profit for Income Not Taxable, and Items not Deductible, Under Woodsfield, Ohio, Income Tax Ordinance. (Schedule X entries are allowed ONLY to the extent directly included in determination of net profits as shown on line 1, Page 1.)

Items Not Deductible – ADD			Items Not Taxable – DEDUCT		
a. Capital Losses	\$		g. Capital Gains	\$	
b. All Income Taxes paid			h. Interest earned		
c. Net operating loss carry-forward deduction, from Federal return			i. Dividends received		
Total Additions (enter on line 2, Page 1)	\$		Total Deductions (enter on line 3, Page 1)	\$	

SCHEDULE Y

Business Allocation Percentage Formula

Tangible Property Value of Real and Tangible Personal Property: Use Dollars Only	Tangible Property Located Everywhere		Tangible Property Located in Woodsfield	
	Beginning of Year	End of Year	Beginning of Year	End of Year
1. Net depreciable assets	\$	\$	\$	\$
2. Net depletable assets				
3. Land				
4. Inventories				
5. Other tangible assets				
6. Total of above real and tangible property	\$	\$	\$	\$
7. Total of beginning and ending totals	\$		\$	
8. Line 7 divided by 2	\$		\$	
9. Gross annual rentals multiplied by 8	\$		\$	
10. AVERAGE VALUE (lines 8 and 9)	\$		\$	

CALCULATION OF TAXABLE PROPORTION

Divide (b) by (a) to obtain decimal.

Allocation Factors – Use Dollars Only	Grand Total Factor (a)	Woodsfield Factor (b)	Percentage
1. PROPERTY FACTOR: Average value of real and tangible personal property (line 10 above)	\$	\$	%
2. SALES FACTOR: Net sales	\$	\$	%
3. PAYROLL FACTOR: Wages, salaries paid	\$	\$	%
4. Total percents	X X X X X X X X X X X	X X X X X X X X X X X	%
5. Average Percentage (line 4 divided by number of percents) (carry average percentage to line 5, page 1 of return)			%