

# GENERAL INFORMATION

## WHO MUST FILE

All corporations, businesses or other type of entities deriving income (or loss) from work done, services rendered and/or on sales made in Defiance.

Income of a pass-through entity such as s-corporations, partnerships, LLC's, etc., owned by two or more persons are taxed at the owner, member or partner level. Such pass-through entities with business activity in Defiance may choose (if all partners, members or owners agree) to have the entity file on their behalf; if one partner, member or owner wants to file and report the income at the individual level, all members, partners or owners must do so.

NOTE: A single member LLC, who reports said income on Federal Schedule C, as a sole-proprietor must use the Individual Tax Return.

## WHEN AND WHERE TO FILE

Returns must be filed on or before April 15, or by the 15th day of the fourth month after the fiscal year end. File with: **Defiance City Income Tax, 324 Perry St., P.O. Box 669, Defiance, OH 43512.** A return is considered received by the City on the date it is postmarked by the U.S. Postal Service. In the absence of the official Postmark, the date received in the Office is considered the "receipt" date. Business meter date is not a valid postmark.

## EXTENSIONS

An extension of time may be granted provided a copy of your Federal extension has been filed with the Tax office by 4/15/2010 or by the 15th day of the fourth month after the year-end. The extended filing date does not apply to the payment of tax due, nor, does it apply to your current year declaration of estimated tax and applicable quarterly payments. The Tax Office may deny your extension request if it is not filed timely and/or you owe a delinquent prior year debt and/or have not filed a prior year return.

## ATTACHMENTS REQUIRED

**Corporations** must attach copies of pages 1 through 4 of their Federal Form 1120. Corporations who file their Federal return using Form 1120A should attach copies of pages 1 and 2 of their 1120A.

**S-Corporations** must attach copies of pages 1 through 4 of their Federal Form 1120S and copies of all K-1's. NOTE: Preparers should note each member's share of city income tax paid on each member's behalf on their respective K-1's.

**Partnerships/Associations** must attach pages 1 through 5 of their Federal Form 1065 and copies of all K-1's. NOTE: Preparers should note each partner's share of city income tax paid on each partner's behalf on their respective K-1's.

**Fiduciaries/Trusts/Estates** must attach a copy of page 1 of their Federal Form 1041.

**All taxpayers** must attach copies of all 1099-MISC. forms issued (if not already filed with the Tax Office) and copies of the following items (if applicable): Schedule of Other Income; Schedule of Other Deductions; Schedule A-Other Costs; Form 8825; Form 4797 (Pages 1&2); K-1's, etc.

## NET PROFITS

For taxable years beginning on or after 1/1/04, "net profits" for a taxpayer other than an individual means adjusted federal taxable income, as defined in Section 718.01(A) of the O.R.C.

## ADJUSTED FEDERAL TAXABLE INCOME

NOTE: This is a new regulation under Chapter 718.01 of the Ohio Revised Code and applies to all tax years beginning on or after 1/1/04.

Adjusted federal taxable income means a C corporation's federal taxable income before net operating losses and special deductions as determined under the Internal Revenue Code, adjusted as follows:

- Deduct intangible income to the extent included in federal taxable income (allowed regardless of whether the intangible income relates to assets used in a trade or business or assets held for the production of income).
- Add an amount equal to 5% of intangible income deducted, excluding that portion of intangible income directly related to the sale, exchange, or other disposition of property described in section 1221 of the I.R.C.
- Add any losses allowed as a deduction in the computation of federal taxable income if the losses directly relate to the sale, exchange, or other disposition of an asset described in section 1221 or 1231 of the I.R.C.
- Deduct income and gain included in federal taxable income to the extent the income and gain directly relate to the sale, exchange, or other disposition of an asset described in section 1221 or 1231 of the I.R.C., except, this section does not apply to the extent the income or gain is income or gain described in section 1245 or 1250 of the I.R.C.
- Add taxes on or measured by net income allowed as a deduction in the computation of federal taxable income.
- In the case of a R.E.I.T. or R.I.C., add all amounts with respect to dividends to, distributions to, or amounts set aside for or credited to the benefit of investors and allowed as a deduction in the computation of federal taxable income.
- If the taxpayer is not a C corporation and is not an individual, the taxpayer shall compute adjusted federal taxable income as if the taxpayer were a C corporation, except: (i) guaranteed payments and other similar amounts paid or accrued to a partner, former partner, member, or former member shall

not be allowed as a deductible expense; and (ii) amounts paid or accrued to a qualified self-employed retirement plan with respect to an owner or owner-employee of the taxpayer, amounts paid or accrued to or for health insurance for an owner or owner-employee, and amounts paid or accrued to or for life insurance for an owner or owner-employee shall not be allowed as a deduction. NOTE: Nothing in this section shall be construed as allowing the taxpayer to add or deduct any amount more than once or shall be construed as allowing the taxpayer to deduct any amount paid to or accrued for purposes of federal self-employment tax.

## APPORTIONMENT FORMULA (SCHEDULE Y)

Any business and/or profession conducted both within and without the Defiance Corporation boundaries shall be considered as having a taxable situs in Defiance and must complete the 3-factor apportionment formula to arrive at the net profit taxable to Defiance. Determine the average ratio of the following:

- (Step 1) Average original cost of the real and tangible property owned or used by the taxpayer in the business or profession in Defiance during the taxable period to the average original cost of all of the real and tangible personal property owned or used by the taxpayer in the business or profession during the same period, wherever situated. NOTE: Real property shall include property rented or leased by the taxpayer and the value of such property shall be determined by multiplying the annual rental thereon by eight.
- (Step 2) Gross receipts of the business or profession from sales made and services performed in Defiance during the taxable period to gross receipts of the business or profession during the same period from sales made and services performed, wherever made or performed.
- (Step 3) Wages, salaries and other compensation paid during the taxable period to persons employed in the business or profession for services performed in Defiance to the wages, salaries and other compensation paid during the taxable period to persons employed in the business or profession wherever their services are performed, excluding compensation exempt from taxation under section 718.011 of the Ohio Revised Code.

## NET OPERATING LOSSES

Under the provision of the city income tax ordinance, losses may be carried forward, not to exceed three (3) years.

## CONSOLIDATED RETURNS

Effective 1/1/03 Defiance shall accept a consolidated income tax return from any affiliated group of corporations subject to Defiance tax if that affiliated group filed for the same tax reporting period a consolidated return for federal income tax purposes pursuant to section 1501 of the Internal Revenue Code.

## AMENDED RETURNS

An amended return is necessary for any year in which an amended Federal return is filed or in which your Federal tax liability has changed. An amended return must be filed within 3 months of the filing date of any amended Federal return and must include a copy of the amended Federal return. Filing must include payment of any additional tax owed.

## DECLARATION OF ESTIMATED TAX

The Declaration is located at the bottom of the income tax return. The first quarter payment equal to 22.5% of estimated tax due must be paid with the filing of the declaration. Remaining payments of at least the same amount are due: June 15, September 15 and December 15 for calendar year entities, or the 15th day of the 6th month, 15th day of the 9th month and 15th day of the 12th month of the taxpayer's taxable year. We will bill remaining quarters. A declaration and payment which is less than 90% of the previous year's tax, shall not be considered in good faith and the difference shall be subject to penalty and interest charges.

## PENALTY INTEREST AND LATE FILING

Late payment is subject to penalty of 1.5% + interest. 5% per month or fraction thereof. Late filing \$25.00.

## CONFIDENTIALITY AND TAXPAYER ACCESS

The laws of the State of Ohio and the City of Defiance require information about taxpayer accounts, such as amounts of income, amounts of tax liability and payment of taxes, to be held in strict confidence. Therefore, to safeguard this confidentiality, the taxpayer must provide written authorization to the Tax Division granting permission to release or discuss any taxpayer-specific information. We may require the taxpayer to request the information in person. To assist both the taxpayer and the tax practitioner, we have provided a place on the Business Tax Return, in the signature area, for the taxpayer to authorize discussions or the release of information to the tax practitioner.

## DISCLAIMER:

Definitions and instructions are illustrative only. The Tax Ordinance supersedes any interpretation presented.

## **LINE-BY-LINE INSTRUCTIONS FOR DEFIANCE BUSINESS INCOME TAX RETURN**

**HEADING:** If this return is made for a period other than the calendar year, insert the beginning and ending date of the period. Enter the business or company name, address and account number, if not already pre-printed on the form. If you do not have an account number, one will be assigned upon receipt of the return.

**LINE 1.** Enter Federal taxable income before net operating losses or special deductions from Form 1120 (line 28), Form 1120S (Sch. K, Pg. 3, line 18), Form 1065 (Sch. K, Pg. 5, line 1), Form 1041 (line 17), or Form 990-T (line 30).

**LINE 2.** Complete Schedule X (page 2) to reconcile federal taxable income to city taxable income, if necessary. Items not taxable must be included in income reported to be deductible. Carry line P (Sch. X) amount to page 1, line 2.

**LINE 3.** Compute taxable income, before apportionment, by subtracting or adding line 2 to line 1. If net loss is realized, enter zero.

**LINE 4.** Enter 100% if income is fully taxable to Defiance. Complete Schedule Y (page 2) to determine percentage of net profits allocable to Defiance when business is conducted both inside and outside of the city. Carry line 5 percentage to page 1, line 4.

**LINE 4A.** Enter loss carried forward, not to exceed (3) three years.

**LINE 5.** Defiance taxable income is computed by subtracting line 4A from line 4.

**LINE 6.** Defiance Income Tax due: multiply line 5 by 1.5% (.015).

**LINE 7.** Enter estimated tax payments plus any prior year overpayment (not refunded).

**LINE 8.** Enter other allowable credit and explain.  
NOTE: Credit will be disallowed if supporting documents are not provided.

**LINE 9.** Total credit, add lines 7 and 8.

**LINE 10.** If line 6 is greater than line 9, enter balance of tax due. Penalty and interest is applicable if tax return is filed after due date and/or estimated tax payments were required and not paid. If penalty and/or interest do not apply, go to line 12. If amount due is less than \$3.00, enter zero.

**Line 11A.** Add penalty if applicable.

**Line 11B.** Add interest, if applicable.

**Line 11C.** If filing late add \$25.00.

**Line 12.** Total due. Pay this amount and any estimated tax amount on line 19 below, if applicable.

**Line 13.** Indicate amount of overpayment if line 9 is greater than line 6.

Indicate choice of disposition of overpayment.

### **INSTRUCTIONS FOR DECLARATION OF ESTIMATED TAX**

**LINE 14.** Enter estimated amount of income subject to tax.

**LINE 15.** Multiply line 17 by 1.5% (.015).

**LINE 16.** Enter at least 22.5% of line 15.

**LINE 17.** Enter amount of overpayment from above or amounts previously paid.

**LINE 18.** Subtract line 16 from line 17.

**LINE 19.** Add amounts on line 12 and line 18. Make check payable to the City of Defiance Income Tax.

### **INSTRUCTIONS FOR SCHEDULE X**

This schedule is used to adjust your federal net income to your Defiance taxable income. The left hand column is for items deductible on the federal return, but not deductible under the Defiance ordinance. The right hand column is for items taxable on the federal return, but not taxable by Defiance.

### **INSTRUCTIONS FOR SCHEDULE Y**

(This schedule is used to determine the amount of income subject to Defiance income tax. **See ALLOCATION OF NET PROFITS ON REVERSE SIDE.**)

### **INSTRUCTIONS FOR SCHEDULE Z**

List each partner and their distributive shares. Include copies of all K-1's.

### **BUSINESS QUESTIONNAIRE**

Answer questions in this section to complete your return.

**DATE AND SIGN THE RETURN AND ATTACH ALL APPLICABLE SCHEDULES AND STATEMENTS.**

**The Tax Ordinance, forms and instructions are available at [www.cityofdefiance.com](http://www.cityofdefiance.com)**

**DIVISION OF TAXATION**  
 324 PERRY ST.  
 DEFIANCE, OH 43512  
 TEL (419) 784-2117  
 FAX (419) 784-4858  
 www.cityofdefiance.com

**FORM BR**

**CITY OF DEFIANCE, OHIO**  
**BUSINESS INCOME TAX RETURN**

FOR THE CALENDAR YEAR 2009  
 FOR FISCAL YEAR BEGINNING \_\_\_\_\_ AND ENDING \_\_\_\_\_  
 DUE THE 15TH DAY OF THE 4TH MONTH AFTER YEAR END  
 FILING IS REQUIRED EVEN IF NO TAX IS DUE

TAX DEPARTMENT USE ONLY	
Total Paid.....	\$ _____
Return .....	\$ _____
Estimate .....	\$ _____
Refund.....	\$ _____
CASH CK MO CC FAX MAIL OPC	
Initials _____	

NAME AND ADDRESS

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**BUSINESS ENTITY:**

- CORPORATION     PROFESSIONAL     NON RESIDENT  
 OTHER             RESIDENT         PARTNERSHIP  
 PROPRIETOR

**SOCIAL SECURITY NUMBER:**

\_\_\_\_\_

**FEDERAL ID# (EIN)**

\_\_\_\_\_

PLEASE MAKE NECESSARY CHANGES TO NAME/ADDRESS

**Note: All filings require attachment of schedules to substantiate income, deductions and credits.**

1	Adjusted Federal Taxable Income per attached return (Form 1120, Line 28; Form 1120S, Schedule K, Line 17e; Form 1120A, Line 24; Form 1065 "Analysis of Net Income/Loss", Line 1; Form 1041, Line 17; Form 990 T, Line 30. Non-residents Schedule C.).....	1	\$ _____
2	Adjustment (From Page 2, Schedule X Line P) .....	2	\$ _____
3	Taxable Income before apportionment (Line 1 plus or minus Line 2; if net loss, enter 0. ....	3	\$ _____
4	Apportionment percentage (100% or % from Page 2, Schedule Y, Line 5).....%	4	\$ _____
4	a Loss carried forward up to 3 years, if applicable. ....	4a	\$ _____
5	Defiance Taxable Income (Subtract line 4 a from line 4).....	5	\$ _____
6	Defiance Tax Due (Multiply Line 5 by 1.5% or (.015)) .....	6	\$ _____
7	Estimated Tax payments and Prior Year Credit Carryforward .....	7	\$ _____
8	Other Credits ( Explain and document fully) .....	8	\$ _____
9	Total Credits (Add Lines 7 and 8).....	9	\$ _____
10	Tax Due (Subtract Line 9 from Line 6) .....	10	\$ _____
11	a Penalty for late payment (1.5% of Line 10) per month or fraction thereof .....	11a	\$ _____
11	b Interest (.5% per month or fraction thereof) of line 10.....	11b	\$ _____
11	c Failure to File by Due Date \$25.00 .....	11c	\$ _____
11	Total Penalty and Interest ( Line 11a plus Line 11b plus Line 11c).....	11	\$ _____
12	Total Due (Line 10 plus Line 11) (no tax due if less than \$3.00) .....	12	\$ _____
13	Overpayment (Line 9 greater than Line 6) Overpayments will be carried forward to next year unless otherwise indicated. ..	Refund 13	\$ _____
		Credit 13	\$ _____

**DECLARATION OF ESTIMATED TAX FOR YEAR 2010**

14	Total estimated income subject to tax .....	14	_____
15	Multiply Line 14 by 1.5% or (.015) Defiance Income Tax declared .....	15	_____
16	Tax due before credits ( enter at least 22.5% of Line 15).....	16	_____
17	Less credits (from Line 13 above) .....	17	_____
18	Net estimated tax due if Line 16 minus Line 17 is greater than zero .....	18	_____
19	Total Amount Due – Add Line 12 above with Line 18 ( Make checks payable to the City of Defiance).....	19	_____

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE EXAMINED THIS RETURN, INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS TRUE, CORRECT, AND COMPLETE. DECLARATION OF PREPARER (OTHER THAN TAXPAYER) IS BASED ON ALL INFORMATION OF WHICH PREPARER HAS ANY KNOWLEDGE.

CHECK BOX IF WE MAY DISCUSS THIS RETURN WITH YOUR PREPARER.

Signature of Officer \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_

Preparer's Signature \_\_\_\_\_ Date \_\_\_\_\_ Preparer name and address \_\_\_\_\_

FILE WITH THE CITY OF DEFIANCE  
 DIVISION OF TAXATION  
 P.O. BOX 669  
 DEFIANCE, OHIO 43512

## SCHEDULE X – RECONCILIATION WITH FEDERAL INCOME TAX RETURN

ITEMS NOT DEDUCTIBLE	ADD	ITEMS NOT TAXABLE	DEDUCT
<b>A</b> Federally deducted losses from IRC 1221 or 1231 property dispositions (excluding ordinary losses).....	\$ _____	<b>I</b> Federally reported income/gains from IRC 1221 or 1231 property dispositions, except to the extent the income/gains apply to those described in IRC 1245 of 1250 (excluding ordinary gains) .....	\$ _____
<b>B</b> All income taxes or excise taxes based on income, paid or accrued (City & State).....	\$ _____	<b>J</b> Interest, Dividends, Patents and Copyright Income..	\$ _____
<b>C</b> 5% of amount deducted as intangible income .....	\$ _____	<b>K</b> Amount of Federal tax credits to the extent they have reduced corresponding operating expenses....	\$ _____
<b>D</b> Guaranteed payments or accruals to, or for, current or former partners or members .....	\$ _____	<b>L</b> IRC Section 179 Expenses (not previously deducted)	\$ _____
<b>E</b> Amounts for Qualified Self-Employed Retirement, Health & Life Insurance Plans for Owners of Non-C Corporation Entities or Self Employment tax.....	\$ _____	<b>M</b> Charitable contributions of Partnerships, S Corps, LLC's. ....	\$ _____
<b>F</b> Federally deducted dividends, distributions, or amounts set aside for, credited to, or distributed to REIT or RIC investors .....	\$ _____	<b>N</b> Other (explain and document) .....	\$ _____
<b>G</b> Other (explain and document).....	\$ _____		
<b>H</b> TOTAL ADDITIONS (Lines A thru G) .....	\$ _____	<b>O</b> TOTAL DEDUCTIONS (Lines I thru N).....	\$ _____
<b>P</b> Calculate difference between Line H and Line O, carry to page 1, Line 2.....			\$ _____

## SCHEDULE Y – BUSINESS APPORTIONMENT FORMULA

	A. Located Everywhere	B. Located In Defiance	C. Percentage (B ÷ A)
<b>STEP 1</b> Average original cost of real & tangible personal property .....	\$ _____	\$ _____	
Gross annual rentals multiplied by 8 .....	\$ _____	\$ _____	
TOTAL STEP 1 .....	\$ _____	\$ _____	1 _____ %
<b>STEP 2</b> Gross receipts from sales made and/or work or services performed .....	\$ _____	\$ _____	2 _____ %
<b>STEP 3</b> Total wages, salaries, commissions & other compensation paid .....	\$ _____	\$ _____	3 _____ %
<b>STEP 4</b> Total Percentages .....			4 _____ %
<b>STEP 5</b> Average Percentage (divide total percentages by number of percentages used)			
Carry average percentage to page 1, Line 4.....			5 _____ %

## SCHEDULE Z – PARTNER'S DISTRIBUTIVE SHARES OF NET INCOME (INCLUDE COPIES OF ALL K-1'S)

Name and address of each partner	FID or SSN	Amount	EIN of Payor
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
This amount should be the same as that shown on Page 1, Line 1			

## BUSINESS QUESTIONNAIRE: (QUESTIONS MUST BE ANSWERED TO BE CONSIDERED A COMPLETED RETURN.)

- Date of Incorporation or inception .....
- Date City business commenced .....
- Has City income tax been withheld from and remitted for all taxable employees during the period covered by this return?  Yes  No  
If Yes, provide the EIN(s) # reported under .....
- Are 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.....
- Gross City wages paid were .....\$ \_\_\_\_\_  
City tax in the amount of .....\$ \_\_\_\_\_  
was withheld from wages and paid to .....
- Were 1099-Misc forms issued?  Yes  No  
If YES, attach copies to this return.