

# Business Tax Return 2016

OR

FISCAL PERIOD \_\_\_\_\_ TO \_\_\_\_\_

Calendar Year Taxpayers file on or before April 18  
Fiscal Year Due on 15<sup>th</sup> Day of 4<sup>th</sup> Month After Year End

## City of Huber Heights

Division of Taxation

P.O. Box 24309

Huber Heights, OH 45424

Phone: (937) 237-2976

Fax: (937) 237-2983

Website: [www.hhoh.org](http://www.hhoh.org)

THIS SPACE IS FOR OFFICIAL USE ONLY

Did you file a City return last year? <input type="checkbox"/> YES <input type="checkbox"/> NO	Is this a combined corporate return? <input type="checkbox"/> YES <input type="checkbox"/> NO	Should your account be inactivated? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, please explain:
Name _____ Address _____ City/State/Zip _____ Account Number _____		Filing Status (Check one) <input type="checkbox"/> C-Corporation <input type="checkbox"/> S-Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership/Association <input type="checkbox"/> Fiduciary (Trusts and Estates) <input type="checkbox"/> Amended Return Tax Year: _____
If the information above is incorrect, please make corrections.		

Part A	2016 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.	Huber Heights taxable income (Multiply Line 3 by Line 4).....	\$ _____
6.	Other separately stated items. Huber Heights rental income/(loss).....	\$ _____
7.	Amount subject to Huber Heights income tax (Line 5 plus/minus Line 6).....	\$ _____
8.	Huber Heights income tax (Multiply Line 7 by 2.25% [.0225]).....	\$ _____
9 a.	Estimates paid on this year's liability.....	\$ _____
9 b.	Credits applied to this year's liability.....	\$ _____
10.	Total payments and credits (Lines 9a + 9b) .....	\$ _____
11.	Subtract Line 10 from Line 8. This is the amount of tax due before P & I.....	\$ _____
12.	Penalty \$ _____ Interest \$ _____ Under Pay Penalty \$ _____ Total Due \$ _____	\$ _____
13.	Overpayment (Line 10 is greater than Line 8) .....	\$ _____
14.	Amount to be refunded (Amounts less than \$10.00 will not be refunded).....	\$ _____
15.	Amount to be credit to next year (Amounts less than \$10.00 will not be credited).....	\$ _____

Part B	DECLARATION OF ESTIMATED TAX FOR 2017	
16.	Total estimated income subject to tax.....	\$ _____
17.	Huber Heights income tax declared (Multiply Line 15 by 2.25% [.0225]).....	\$ _____
18.	Tax due before credits (at least 25% of Line 16).....	\$ _____
19.	Less credits (from Line 14 above).....	\$ _____
20.	Net estimated tax due if Line 17 minus Line 18 is greater than zero*.....	\$ _____
21.	<b>TOTAL AMOUNT DUE</b> —Combine Line 11 above with Line 20 (Make checks payable to the City of Huber Hts.)	\$ _____

\*\*\*New Dates: Subsequent estimated payments are due by the 15<sup>th</sup> day of the 6<sup>th</sup>, 9<sup>th</sup> and 12<sup>th</sup> month\*\*\*

☐ Check here to give us permission to contact your paid tax practitioner directly if we have 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 used for Federal Income Tax purposes, and understands that this information may be released to the Internal Revenue Service.

Signature of Person Preparing Return

Date

Signature of Officer or Agent

Date

Name of Person Preparing Return

Phone Number

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 221 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. Deduct Lines K and G and enter net on Part A, Line 2 \_\_\_\_\_

**SCHEDULE Y—BUSINESS APPORTIONMENT FORMULA**

	a. Located Everywhere	b. Located in Huber Heights	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/or work or 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 Huber Heights (from Federal Return or apportionment formula).....	\$
Total wages shown on Form W-3 (Withholding Reconciliation).....	\$

Please explain any difference:

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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: \_\_\_\_\_