

MAIL RETURN AND PAYMENT TO:
ARCANUM TAX DEPARTMENT
PO BOX 157
ARCANUM, OH 45304
(937) 692-8500
FILING REQUIRED EVEN IF NO TAX IS DUE
ON OR BEFORE APRIL 15TH OR 4 MONTH
AFTER THE END OF THE FISCAL PERIOD

ARCANUM
INCOME TAX RETURN
FOR THE CALENDAR YEAR
OR FISCAL PERIOD
_____ TO _____

MAKE CHECK OR MONEY ORDER
PAYABLE TO
VILLAGE OF ARCANUM

TAX YEAR
2019

TAXPAYER'S NAME AND ADDRESS

[Redacted Taxpayer Name and Address]

TELEPHONE:
HOME: _____
CELL: _____
BUSINESS FIN: _____
YOUR SS#: _____
SPOUSE SS#: _____

CHANGE OF ADDRESS: _____

ARE YOU RETIRED? YES NO
DATE RETIRED _____

IF MOVED SINCE THE PREVIOUS FINAL RETURN WAS DUE GIVE DATE:
DATE INTO VILLAGE _____ DATE OUT OF VILLAGE _____

NOTE: Page 2 must be completed if you have taxable rental property or business income. (ON BACK OF THIS FORM) - ATTACH FEDERAL SCHEDULES.

- 1. WAGES, SALARIES, TIPS LOTTERY/GAMBLING WINNINGS (USE BOX 5 OF W2 FORM)..... \$ _____
ATTACH ALL W-2s, FEDERAL 1040 & FEDERAL SCHEDULES TO BACK OF TAX RETURN
- 2. OTHER TAXABLE INCOME FROM PAGE 2 (CANNOT DEDUCT LOSS FROM WAGES) \$ _____
- 3. TOTAL TAXABLE INCOME: LINE 1 PLUS LINE 2 \$ _____
- 4. MUNICIPAL TAX 1% (.01) OF LINE 3 (ROUND AMOUNTS TO NEAREST DOLLAR) \$ _____
- 5. CREDITS:
 - A. ARCANUM TAX WITHHELD BY EMPLOYER(S) \$ _____
 - B. ESTIMATED TAX PAID \$ _____
 - C. PRIOR YEAR OVERPAYMENTS \$ _____
 - D. TOTAL CREDITS(ROUND AMOUNTS TO NEAREST DOLLAR) \$ _____
- 6. TAX DUE (IF LINE 4 IS GREATER THAN LINE 5D, PAYMENT OF BALANCE MUST ACCOMPANY THIS RETURN) \$ _____
 - A. LATE FILING FEE-\$25 PER MONTH AFTER APRIL 15TH. (UP TO \$150 MAXIMUM)..... \$ _____
 - B. LATE PAYMENT PENALTY (15% OF LINE 6) \$ _____
 - C. INTEREST (7% PER ANNUM, .58% PER MONTH LATE)..... \$ _____
 - D. TOTAL PENALTIES AND INTEREST DUE \$ _____
- 7. TAX DUE INCLUDING PENALTIES AND INTEREST BEFORE ESTIMATED TAXES (ADD LINE 6. TO 6D.) \$
- 8. OVERPAYMENT: REFUNDED \$ _____ OR CREDITED TO EST. TAXES \$ _____

NOTE: IF TAX DUE OR OVERPAYMENT IS LESS THAN \$10.00 - NO TAX, REFUND OR CREDIT CARRY-OVER IS DUE.

DECLARATION OF ESTIMATED TAX (IF TAX DUE IS OVER \$200.00)

- 9. INCOME SUBJECT TO TAX\$ _____ TIMES TAX RATE OF 1% (.01) FOR GROSS TAX OF \$ _____
- 10. LESS EXPECTED TAX CREDITS:
 - A. TAX WITHHELD BY EMPLOYER \$ _____
 - B. OVERPAYMENT FROM PRIOR YEAR(S) \$ _____
 - C. TOTAL CREDITS(ROUND AMOUNTS TO NEAREST DOLLAR) \$ _____
- 11. NET TAX DUE (LINE 9 LESS LINE 10C)\$ _____
- 12. AMOUNT DUE WITH THIS DECLARATION \$
- 13. BALANCE OF ESTIMATED TAX\$ _____

TOTAL AMOUNT DUE \$ _____ (BOX 7) + \$ _____ (BOX 12) = \$

I CERTIFY THAT I HAVE EXAMINED THIS RETURN (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT & COMPLETE. IF PREPARED BY PERSON OTHER THAN TAXPAYER, THE DECLARATION IS BASED ON ALL INFORMATION OF WHICH PREPARER HAS ANY KNOWLEDGE.

SIGNATURE OF PREPARER _____ DATE _____

SIGNATURE OF TAXPAYER _____ DATE _____

PHONE # OF PREPARER _____ Check here to give us permission to contact preparer

SIGNATURE OF TAXPAYER _____ DATE _____

SCHEDULE C BUSINESS INCOME

1. ATTACH COPIES OF FEDERAL SCHEDULES (ENTER TOTAL INCOME FROM SCHEDULES) \$ _____
2. A. ITEMS NOT DEDUCTIBLE (FROM LINE M SCHEDULE X) 2.A _____
 B. ITEMS NOT TAXABLE (FROM LINE Z SCHEDULE X) 2.B _____
 C. DIFFERENCE BETWEEN LINES 2A AND 2B TO BE ADDED TO OR SUBTRACTED FROM LINE 1 2.C _____
3. A. ADJUSTED INCOME (LINE 1 PLUS OR MINUS 2C IF SCHEDULE X IS USED) 3.A _____
 B. AMOUNT OF LINE 3A ABOVE ALLOCABLE _____ % FROM STEP 5 SCHEDULE Y 3.B _____
4. NET OPERATING LOSS FROM PRIOR YEARS 4. _____
 2014 2015 2016 2017 2018
5. NET BUSINESS INCOME 5. _____

SCHEDULE E INCOME FROM RENTS

1. ADDRESS OF PROPERTY	2. AMOUNT OF RENT	3. DEPRECIATION	4. REPAIRS	5. OTHER EXPENSES	6. NET INCOME (OR LOSS)
NET INCOME (OR LOSS) SCHEDULE E					\$ _____

SCHEDULE H OTHER INCOME (PARTNERSHIPS, ESTATES, TRUSTS, PRIZES, DIRECTOR FEES, MISCELLANEOUS, COMMISSIONS, ETC.)

RECEIVED FROM	FOR (DESCRIBE)	AMOUNT
TOTAL INCOME SCHEDULE H		\$ _____

ADD TOTAL OF SCHEDULES C, E & H. ENTER HERE AND ON LNE 2, PAGE 1 \$ _____

SCHEDULE X RECONCILIATION WITH FEDERAL INCOME TAX RETURN (ATTACH SUPPORTING SCHEDULES)

ITEMS NOT DEDUCTIBLE	ADD	ITEMS NOT TAXABLE	DEDUCT
a. Federally deducted losses from IRC 1221 or 1231 property dispositions \$ _____		n. Federally reported income and gains from IFC 1221 or 1231 property dispositions except to the extent the income and gains apply to those described in IRC 1245 or 1250 \$ _____	
b. Five percent of intangible income except that from IRC 1221 property dispositions \$ _____		o. Interest earned or accrued \$ _____	
c. City or State income taxes \$ _____		p. Dividends \$ _____	
d. Net operating loss deduction per Federal Return \$ _____		q. Other Intangbe Income (explain) \$ _____	
e. Federally deducted dividends, distributions, or amounts set aside for, credited to, or distributed to REIT or RIC investors \$ _____		r. Amount of Federal Tax Credits to the extent they they have reduced corresponding operating expenses \$ _____	
f. Federally deducted amounts paid or accrued to or for qualified self-employed retirement plans, health insurance plans, and life insurance plans for owners or owner-employees of non-C corp entities \$ _____		s. Not previously deducted IRC Section 179 Expense \$ _____	
g. Rental activities by partnership, S corp or LLC \$ _____		t. Partnership, S corp, LLC charitable contributions \$ _____	
h. Payments to partners (form 1065) \$ _____		u. Other income exempt from Arcanum tax (explain) \$ _____	
i. Other expenses not deductible (explain) \$ _____		z. Total (enter on line 2B at top) \$ _____	
m. Total (enter on line 2A at top) \$ _____			

SCHEDULE Y BUSINESS APPORTIONMENT FORMULA

	A. LOCATED EVERYWHERE	B. LOCATED IN THIS CITY	C. PERCENTAGE (B divided by A)
STEP 1. ORIGINAL COST OF REAL & TANGIBLE PERSONAL PROPERTY	\$ _____	\$ _____	
GROSS ANNUAL RENTALS PAID MULTIPLIED BY 8	\$ _____	\$ _____	
TOTAL OF STEP 1.	\$ _____	\$ _____	_____ %
STEP 2. WAGES, SALARIES, COMMISSIONS AND OTHER			
COMPENSATION PAID TO ALL EMPLOYEES	\$ _____	\$ _____	_____ %
STEP 3. GROSS RECEIPTS FROM SALES AND WORK/SERVICES PERFORMED	\$ _____	\$ _____	_____ %
STEP 4. TOTAL PERCENTAGES			_____ %
STEP 5. AVERAGE PERCENTAGE (Divide Total Percentages by Number of Percentages Used)			
ENTER HERE AND ON LINE 3B, SCHEDULE C ABOVE			_____ %