

Form BR File With
City Income Tax Bureau
1201 Steffens Avenue
Lincoln Heights, Oh 45215
 On or before April 15, 2015

LINCOLN HEIGHTS INCOME TAX RETURN

FILING REQUIRED EVEN IF NO TAX DUE
 MAY BE USED IN ANY CITY IN BUTLER, CLERMONT, HAMILTON, HIGHLAND
 OR WARREN COUNTY BY INSERTING PROPER NAME AND CHANGING TAX RATE

TAX OFFICE
 www.lincolnheightsohio.org
PHONE (513) 733-5900
FAX (513) 733-4190

DUE BY APRIL 15, 2015

TAXPAYER'S NAME, ADDRESS	ACCOUNT NO.	PRINCIPAL BUSINESS ACTIVITY _____ CORPORATION <input type="checkbox"/> S CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> SOLE PROPRIETOR <input type="checkbox"/> FEDERAL ID# _____ TELEPHONE : _____ IF YOU MOVED DURING CURRENT YEAR PLEASE GIVE DATE OF MOVE. INTO CITY _____ OUT OF CITY _____
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INCOME

1. ADJUSTED FEDERAL TAXABLE INCOME (ATTACH COPIES OF FEDERAL RETURNS & SCHEDULES, SECTION A, PAGE 2) \$ _____

ADJUSTMENTS TO INCOME

2a. ITEMS NOT DEDUCTIBLE (FROM LINE M SCHEDULE X FROM PAGE 2) ADD \$ _____

b. ITEMS NOT TAXABLE (FROM LINE Z SCHEDULE X FROM PAGE 2) DEDUCT \$ _____

c. DIFFERENCE BETWEEN LINES 2a AND 2b TO BE ADDED TO OR SUBTRACTED FROM LINE 1 . . . (+ OR -) \$ _____

3a. ADJUSTED NET PROFIT/LOSS (LINE 1 PLUS OR MINUS LINE 2c IF SCHEDULE X IS USED) \$ _____

b. AMOUNT OF LINE 3a ALLOCABLE _____% (FROM LINE 5 SCHEDULE Y, PAGE 2) \$ _____

c. LESS ALLOCABLE LOSS PER PREVIOUS FILED INCOME TAX RETURN (ATTACH SCHEDULE). \$ _____
 LOSS CARRY FORWARD LIMITED TO 3 YEARS.

4. NET PROFIT/LOSS SUBJECT TO MUNICIPAL INCOME TAX (LINE 3a OR 3b LESS LINE 3c) \$ _____

5. LINCOLN HEIGHTS INCOME TAX IS 2% OF LINE 4 \$ _____

TAX

6. CREDITS:

a. PAYMENT & CREDITS ON _____ DECLARATION OF ESTIMATED TAX . . . \$ _____

b. PRIOR YEAR OVERPAYMENT \$ _____

c. TOTAL CREDITS ALLOWABLE. \$ _____

7. BALANCE OF TAX DUE (LINE 5 LESS LINE 6c)
 MAKE REMITTANCE PAYABLE TO LINCOLN HEIGHTS INCOME TAX DIVISION AND ATTACH WHEN FILING. . . TAX DUE \$

8. OVERPAYMENT TO BE REFUNDED \$ _____ OR CREDITED \$ _____ TO NEXT YEARS ESTIMATE (ENTER IN LINE 10b)
 (If Line 6c is greater than line 5)

NO TAXES OR REFUNDS OF LESS THAN \$1.00 SHALL BE COLLECTED OR REFUNDED BY LAW, ALL REFUNDS & CREDITS IN EXCESS OF \$10.00 ARE BEING REPORTED TO THE I.R.S.

DECLARATION OF ESTIMATED TAX FOR YEAR 2015

9. TOTAL INCOME SUBJECT TO TAX \$ _____ MULTIPLY BY TAX RATE OF 2% FOR GROSS TAX OF \$ _____

10. LESS EXPECTED TAX CREDITS

A. OPERATING LOSS CARRY FORWARD (ATTACH SCHEDULE) \$ _____

B. OVERPAYMENT FROM PRIOR YEAR(S) \$ _____

C. TOTAL CREDITS \$ _____

11. NET ESTIMATED TAX DUE FOR _____ (LINE 9 LESS LINE 10C) \$ _____

12. AMOUNT PAID WITH THIS DECLARATION (NOT LESS THAN 1/4 OF LINE 11) \$

13. TOTAL OF THIS PAYMENT (LINE 7 PLUS LINE 12) \$
 MAKE CHECKS PAYABLE TO LINCOLN HEIGHTS TAX DIVISION

FOR TAX OFFICE USE ONLY			
Tax \$ _____	Penalty \$ _____	Interest \$ _____	
Late _____ Months	TOTAL DUE (Tax & Assessments) \$ _____		

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 AND COMPLETE. IF PREPARED BY A PERSON OTHER THAN TAXPAYER, THE DECLARATION IS BASED ON ALL INFORMATION OF WHICH PREPARER HAS ANY KNOWLEDGE. MAY WE DISCUSS THIS RETURN WITH THE PREPARER SHOWN TO THE LEFT? YES NO

Signature of Person Preparing if Other Than Taxpayer _____ Date _____ Signature of Taxpayer or Agent (Required) _____ Date _____

ADDRESS _____ PHONE NUMBER _____ Title, if signing for a Business _____ Date _____