



www.sidneyoh.com

CITY OF SIDNEY
BUSINESS INCOME TAX RETURN
Calendar Year 2022 or
Fiscal Period to

Mail completed form to:
City of Sidney
Revenue Collections - Tax
201 W. Poplar St.
Sidney, OH 45365

Due on or before April 18, 2023 or by the 15th day of the fourth month following the end of your fiscal year. Federal Employer Identification Number: Physical Location Address in Sidney:

Grid for Federal Employer Identification Number

Physical Location Address in Sidney

Company Name & Address (include DBA):

Company Name & Address (include DBA)

CHECK ONE: Corporation S Corporation Partnership Other

Business Contact Name:

Contact Phone Number:

If your business moved during the year, please indicate:

Date of move

Previous Address

Table with 2 columns: Description and Amount. Rows include: 1. TOTAL INCOME PER ATTACHED FEDERAL RETURN, 2. ITEMS NOT DEDUCTIBLE, 3. ITEMS NOT TAXABLE, 4. ENTER EXCESS OF LINE 2 OR 3, 5. ADJUSTED NET INCOME, 6. NET LOSS CARRYFORWARD, 7. MUNICIPAL TAXABLE INCOME, 8. PERCENT ALLOCABLE TO SIDNEY, 9. SIDNEY TAXABLE INCOME, 10. SIDNEY INCOME TAX, 11. A. ESTIMATES PAID ON THIS YEAR'S LIABILITY, 11B. CREDITS APPLIED FROM 2017 TO THIS YEAR'S LIABILITY, 11C. TOTAL CREDITS, 12. TAX AMOUNT DUE, 13. Late Filing Penalty, 13. Late Payment Penalty, 13. Underestimation penalty, 14. BALANCE DUE FOR 2022, 15. OVERPAYMENT, 16. Total income subject to tax, 17. LESS: CREDIT from line 15 above, 18. Net Taxes Owed, 19. AMOUNT PAID WITH THIS DECLARATION, 20. TOTAL AMOUNT PAYABLE TO CITY OF SIDNEY.

The undersigned declares this return (& 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, adjusted to the ordinance requirements for local tax purposes, and if an audit is made which affects tax liability shown on this return, an amended return will be filed within three months. If this return was prepared by a Tax Preparer, I am authorizing them to disclose information concerning this return to the Sidney Tax Office YES NO

Signature of Taxpayer or Agent Date Signature of preparer, if other than taxpayer Date

Name and Title Phone Number Name and Title Phone Number



www.sidneyoh.com

**CITY OF SIDNEY  
BUSINESS INCOME TAX RETURN**  
Calendar Year 2022 or  
Fiscal Period \_\_\_\_\_ to \_\_\_\_\_

**Mail completed form to:**  
City of Sidney  
Revenue Collections – Tax  
201 W. Poplar St.  
Sidney, OH 45365

**Due on or before April 18, 2023 or by the 15<sup>th</sup> day of the fourth month following the end of your fiscal year.**

**SCHEDULE X – RECONCILIATION WITH FEDERAL INCOME TAX RETURN, AS REQUIRED BY ORC 718**

ITEMS NOT DEDUCTIBLE		ADD	ITEMS NOT TAXABLE		DEDUCT
A.	Capital losses excluding ordinary losses (IRC) 1221 or 1231 property dispositions. Do not include ordinary loss from Federal Form 4797		J.	Capital Gains, excluding ordinary gains (IRC) 1221 or 1231 property dispositions except to the extent the income and gains apply to those described in IRC 1245 or 1250	
B.	5% of intangible income reported in letter K, except that from IRC 1221 property dispositions		K.	Federally reported intangible income such as, but not limited to interest, dividends, and patent & copyright income. Excludes prizes, awards, lottery winnings, or other income associated with games of chance.	
C.	Taxes based on income (State or City)		L.	Not previously deducted IRC Sec 179 Expense	
D.	Federal deducted dividends, distributions, or amounts set aside for, credited to or distributed to REIT or RIC investors		M.	Not previously deducted Partnership, S Corp, LLC charitable contributions	
E.	Federally deducted amounts paid or accrued to or for qualified self-employed retirements plans, health insurance plans, and the insurance plans for owners or owner-employees of non-C corporation entities		O.	Other	
F.	Partnership, S Corp, LLC charitable contributions, if limited to 10% of FTI				
G.	IRC Section 179 expenses, if limited, for partnerships, S Corps, LLCs				
H.	Other				
I. TOTAL ADDITONS (enter on Page 1, Line 2)			P. TOTAL DEDUCTIONS (enter on Page 1, Line 3)		

**SCHEDULE Y – BUSINESS ALLOCATION FORMULA**

The Business Allocation Formula is to be used by taxpayers who have a place or places of business outside Sidney to determine the portion of the net profits attributed to that part of the business within the boundaries of Sidney.

		A. LOCATED EVERYWHERE	B. LOCATED IN SIDNEY	C. PERCENTAGE (B/A)
Step 1	Average original cost of real & tangible personal property	\$	\$	
	Gross annual rentals multiplied by 8	\$	\$	
	Total Step 1	\$	\$	%
Step 2	Gross receipts from sales and work or services	\$	\$	%
Step 3	Total qualifying wages, salaries, commissions and other compensation for all employees	\$	\$	%
Step 4		TOTAL PERCENTAGE		%
Step 5	AVERAGE PERCENTAGE (Divide total percentages by the number of percentages used.) Enter on page 1, Line 6			%

**SCHEDULE Y-1 – RECONCILIATION TO FORM W-3, WITHHOLDING RECONCILIATION**

Total wages allocated to Sidney (from Federal Return or allocation formula)	\$
Total wages shown on Form W-3 (Withholding reconciliation)	\$
Please explain any difference:	
Are any employees leased in the year covered by this return? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, then provide name, address and FID number of the leasing company.	
Were 1099-MISC forms issued to area residents? If yes, attach copies to this return. <input type="checkbox"/> Yes <input type="checkbox"/> No	



www.sidneyoh.com

CITY OF SIDNEY  
BUSINESS INCOME TAX RETURN  
Calendar Year 202& or  
Fiscal Period \_\_\_\_\_ to \_\_\_\_\_

Mail completed form to:  
City of Sidney  
Revenue Collections – Tax  
201 W. Poplar St.  
Sidney, OH 45365

Due on or before April 18, 2021 or by the 15<sup>th</sup> day of the fourth month following the end of your fiscal year.

FORM NOL

POST -2017 NOL's (See instructions)

LOSS YEAR	2017	2018	2019	2020	2021
F. LOSS AMOUNT (2017)	_____	_____	_____	_____	_____
G Calculation of 50% of Post 2017 NOL's					
a. LOSS Divided by SCH. Y %	_____	_____	_____	_____	_____
b. Multiply by 50%	_____	_____	_____	_____	_____
H Calculation for 50% of Municipal Taxable Income					
a. (Adjusted Federal Taxable Income (PAGE 1 LINE 5)	_____	_____			
b. PRE-NOL Available (Line 3 Total)		_____	_____		
c. Subtract (Line 3a – Line 3(b) (If less than zero enter 0)		_____	_____		
d. Multiply by 50%		_____	_____		
I. POST-NOL : Lessor of Line 5b. or Line 6d. ABOVE			_____	_____	= POST-NOL AVAILABLE _____

TOTAL Current Year NOL Deduction

Í. LESSOR OF NOL AVAILABE LINE 8 OR ADJUSTED FEDERAL TAXABLE INCOME LINE 6a. NOL \_\_\_\_\_ To Page 1, Line 6