

2022 Newark City Business Tax Return

Calendar Year Taxpayers File by: April 18, 2023

Fiscal Year Taxpayers File By: 15th Day of 4th Month After Year End

Enter Fiscal Year _____ to _____

Name: _____

Address: _____

CSZ _____

EIN: _____

- 1. Adjusted Federal Taxable Income per attached return 1 _____
- 2. Adjustments (Form Schedule X, Line Q) 2 _____
- 3. Taxable Income before Apportionment 3 _____
- 4. Apportionment Percentage (100% or Schedule Y, Step 5) 4 _____
- 5. Adjusted Net Taxable Income 5 _____
- 6. Newark City Tax Due 6 _____
- 7. Estimated Tax Payments plus prior year carryover 7 _____
- 8. Other Credits - provide explanation and documentation 8 _____
- 9. Total Credits 9 _____
- 10. Tax Due 10 _____
- 11. Overpayment 11 _____
- 12. Balance Due (if less than \$10.01 enter 0) 12 _____
- 13. Overpayment

Amt carried forward _____ Amt Refund _____
(If overpayment is less than \$10.01 enter 0)

Declaration of Estimated Tax for 2023

Required if estimated tax is \$200.00 or more.

- 14. Estimated Income subject to Newark City Tax 14 _____
- 15. Estimated Tax (line 14 times 1.75%) 15 _____
- 16. Quarterly Payment Due 16 _____
- 17. Credit carried forward from prior year 17 _____
- 18. Amount Due for 1st Quarter 18 _____
- 19. Balance due with Return (line 12 plus line 18) 19 _____

Make checks payable to Newark City Income Tax

I hereby declare that the above information is true, correct and complete.

Signature Title Date

Preparer signature Date

May we contact your preparer directly with any questions? Yes _____
No _____

Schedule X
Items not Deductible

- | | |
|--|---------|
| A. Capital Losses (IRC 1221 OR 1231 property) | A _____ |
| B. Expenses attributable to non-taxable income (5% non-taxable) | B _____ |
| C. Federally deducted taxes based on income | C _____ |
| D. Guaranteed payments or accruals to partners/members | D _____ |
| E. Federally deducted dividends, distributions or amounts set aside
for, credited, or distributed to REIT or RIC investors | E _____ |
| F. Federal deducted amount for qualified self-employed retirement
and health and life insurance plans for owners of non-C corps | F _____ |
| G. Rental activities by Ptshp, S corp, LLC, Trusts | G _____ |
| H. Other (explain and document) | H _____ |
| I. Total Deductions | I _____ |

Items not Taxable

- | | |
|---|---------|
| J. Federal reported income/gains from IRC1221 OR 1231 property dispositions
except to the extent the income/gains apply to those described
in IRC 1245 or 1250 - not ordinary gains | J _____ |
| K. Federally reported intangible income | K _____ |
| L. Federal tax credits to the extent they have reduced corresponding
operating expenses | L _____ |
| M. IRC Section 179 expenses | M _____ |
| N. Charitable contributions of Ptshp, S Corp, LLC | N _____ |
| O. Other (explain and document) | O _____ |
| P. Total Deductions | P _____ |
| Q. Total Adjustment (Line I minus P, enter on Page 1, Line 2) | Q _____ |

Schedule Y - Business Apportionment Formula

	Everywhere	Newark City	%
1. Avg cost of real & tangible personal property Gross annual rentals multiplied by 8 Total Step 1			
2. Gross receipts - sales/work/services performed			
3. Employee wages, salaries and compensation			
4. Total percentages			
5. Average percentage - carry to Page 1, Line 4			

Mail to:

Newark City Income Tax
PO Box 4577
Newark, OH 43058-4577



Questions?

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