

**2023 Pataskala JEDD Business Tax Return**

Calendar Year Taxpayers File by: April 15, 2024

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. Pataskala JEDD Tax Due (Line 5 times 1.75%) 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 2024**

*Required if estimated tax is \$200.00 or more.*

- 14. Estimated Income subject to Pataskala JEDD 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 Pataskala JEDD 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<br>for, credited, or distributed to REIT or RIC investors      | E _____ |
| F. Federal deducted amount for qualified self-employed retirement<br>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<br>except to the extent the income/gains apply to those described<br>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<br>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**

|                                                                                                          |            |                |   |
|----------------------------------------------------------------------------------------------------------|------------|----------------|---|
| 1. Avg cost of real & tangible personal property<br>Gross annual rentals multiplied by 8<br>Total Step 1 | Everywhere | Pataskala JEDD | % |
| 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:**

Pataskala JEDD Income Tax  
PO Box 327  
Newark, OH 43058-0327



**Questions?**

740-670-7580 phone  
740-670-7581 fax  
citytax@newarkohio.net



