

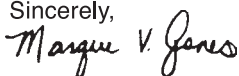
Dear Business Owner,

You will find your 2013 Wilmington Income Tax Return (Form BR). The due date for filing your 2013 tax return is **April 15, 2014**, or 3 1/2 months from the end of your fiscal year. Any balance from 2013 plus the first quarterly payment for 2014 are due at that time. Your check or money order should be made payable to **"City of Wilmington"**. Your tax return must be accompanied by supporting federal schedules.

If for some reason you do not have any taxable income for either 2013 or 2014, please return the form with an explanation. If you do not respond, your account will be considered delinquent. To avoid penalties and interest your 2013 tax return and payment must be **postmarked** or **hand delivered** no later than **April 15, 2014** or 3 1/2 months from the end of your fiscal year.

Extensions request for filing **must** be made in **writing** by the due date. No verbal extensions will be honored. No extension requests received after the due date will be granted. A federal extension does not automatically apply to Wilmington.

Sincerely,



Tax Commissioner

---

**WILMINGTON INCOME TAX RETURN  
GENERAL INFORMATION  
FORM BR**

1. **Who Must File:** A return must be filed by partnerships, corporations and any other entity having income taxable by the City of Wilmington.
2. **When and Where to File Return:** Taxpayers who end their taxable year on December 31 must file on or before the following April 15th. Taxpayers on a fiscal or partial year basis must file within 3 1/2 months following the end of such period.

**Extension request for filing must be made in writing** by the due date. No verbal extensions will be honored. No extension request received after the due date will be granted.

The Return is to be filed (including all applicable federal schedules) with the Wilmington Income Tax Bureau, 69 N. South Street, Wilmington, Ohio 45177. Total amount due must be paid when the Return is filed. Checks or money orders should be made payable to "City of Wilmington."

3. **Taxable Income:** Wilmington income tax is levied on the following:
  - (A) On the net profit of all unincorporated businesses, professions, rentals or other activities conducted by residents of the City of Wilmington.
  - (B) On the net profit of all unincorporated businesses, professions, rentals or other activities conducted by non-residents within the City of Wilmington.
  - (C) On the net profits of all corporations derived from work done or services performed or rendered, from business and other activities conducted within the City of Wilmington.
4. **What Constitutes Net Profits:** Net profit is the income from the operation of a business, profession or enterprise and from the use of property, after the provision for all ordinary and necessary expense, except contributions, either paid or accrued, in accordance with the accounting system used by the taxpayer for Federal Income Tax purposes, adjusted to the requirements of the Wilmington Income Tax Ordinance, and in the case of an association, without deduction of salaries paid to partners or other owners. Note that city, federal or state taxes, based on income, are not deductible in determining net profit.
5. **Allocation of Profits:** The business allocation percentage formula is to be used by corporations or non-resident business entities doing business within and outside of Wilmington if actual records of their Wilmington profits are not maintained.

Determine the ratio of Wilmington portion of:

- (1) Average Value of real and tangible property;
- (2) Total sales regardless of where made;
- (3) Total compensation paid to all employees.

Add the ratios obtained and divide by the number of ratios to obtain business allocation percentage. A ratio shall not be excluded from the computation because it is allocable entirely within or outside of Wilmington. This computation is to be reported on Schedule Y, page 2 Form BR.

6. **Change in Tax Liability:** An amended Wilmington Return is required within three months of the final determination of any changed tax liability resulting from audit, judicial decision, or other circumstances.
7. **Penalties and Interest:** Penalty and Interest for late filing and failure to file shall be imposed as provided by the Wilmington Tax Ordinance.

## INCOME TAX RETURN FOR 2013

FILE WITH

**City of Wilmington**  
**Income Tax Department**  
P.O. Box 786  
Wilmington, Ohio 45177  
www.ci.wilmington.oh.us  
ON OR BEFORE 4-15-2014

**CITY OF WILMINGTON**  
FILING REQUIRED EVEN IF NO TAX DUE

TAX OFFICE PHONE: (937) 382-1880

MAKE CHECK OR MONEY ORDER  
PAYABLE TO

**CITY OF  
WILMINGTON**

FISCAL YEAR DATE

TO

☐ CORPORATION☐ PARTNERSHIP☐ SOLE PROPRIETOR

PRINCIPAL BUSINESS ACTIVITY \_\_\_\_\_

TAXPAYER'S NAME AND ADDRESS

FEDERAL ID # \_\_\_\_\_

BUSINESS TELEPHONE \_\_\_\_\_

IF MOVED SINCE THE PREVIOUS FINAL RETURN WAS DUE GIVE DATE:

INTO CITY \_\_\_\_\_ OR OUT OF \_\_\_\_\_

THIS SPACE FOR TAX OFFICE ONLY

|                          |                                                                                                                                       |
|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| <b>INCOME</b>            | 1. ADJUSTED FEDERAL TAXABLE INCOME (SEE SECTION A, PAGE 2) OR ATTACHED COPIES OF FEDERAL RETURNS & SCHEDULES..... \$ _____            |
|                          | 2a. ITEMS NOT DEDUCTIBLE (FROM LINE M SCHEDULE X (FROM PAGE 2))..... ADD \$ _____                                                     |
| <b>ADJUST-<br/>MENTS</b> | b. ITEMS NOT TAXABLE (FROM LINE 2 SCHEDULE X (FROM PAGE 2))..... DEDUCT \$ _____                                                      |
|                          | c. DIFFERENCE BETWEEN LINES 2a AND b TO BE ADDED TO OR SUBTRACTED FROM LINE 1 (+ OR -)..... \$ _____                                  |
|                          | 3a. ADJUSTED NET INCOME (LINE 1 PLUS OR MINUS LINE 2c IF SCHEDULE X IS USED)..... \$ _____                                            |
| <b>TO</b>                | b. AMOUNT OF LINE 3a ALLOCABLE ( _____ %FROM LINE 5 SCHEDULE Y)..... \$ _____                                                         |
|                          | c. LESS ALLOCABLE LOSS PER PREVIOUS INCOME TAX RETURN (ATTACH SCHEDULE)..... \$ _____                                                 |
| <b>INCOME</b>            | 4. AMOUNT SUBJECT TO MUNICIPAL INCOME TAX (LINE 3 a OR 3b LESS LINE 3c)..... \$ _____                                                 |
|                          | 5. TAX CALCULATION: 1%X LINE 4..... \$ _____                                                                                          |
| <b>TAX</b>               | 6. CREDITS:                                                                                                                           |
|                          | (a) PAYMENTS AND CREDITS ON 2013 DECLARATION OF ESTIMATED TAX..... \$ _____<br>(THIS AMOUNT MAY NOT INCLUDE YOUR 4TH QUARTER PAYMENT) |
|                          | (b) PRIOR YEAR OVERPAYMENT..... \$ _____                                                                                              |
|                          | (x) TOTAL CREDITS ALLOWABLE..... \$ _____                                                                                             |

7. IF LINE 5 GREATER THAN LINE 6X PAYMENT OF BALANCE MUST ACCOMPANY THIS RETURN: TAX DUE..... \$ 

|                                                  |                |
|--------------------------------------------------|----------------|
| A. PENALTY \$ _____, INTEREST \$ _____           | TOTAL \$ _____ |
| B. TOTAL AMOUNT DUE (INCLUDING LINE 7A) \$ _____ |                |

8. OVERPAYMENT TO BE REFUNDED \$ \_\_\_\_\_ OR CREDITED \$ \_\_\_\_\_ TO NEXT YEAR'S ESTIMATE

NOTICE: By law, all refunds and credits in excess of \$10.00 are being reported to IRS.

## DECLARATION OF ESTIMATED TAX FOR THE YEAR 2014

|                                                                                      |                                                      |
|--------------------------------------------------------------------------------------|------------------------------------------------------|
| 9. TOTAL INCOME SUBJECT TO TAX \$ _____                                              | MULTIPLY BY TAX RATE OF 1% FOR GROSS TAX OF \$ _____ |
| 10. LESS EXPECTED TAX CREDITS                                                        |                                                      |
| A. OPERATING LOSS CARRY FORWARD (ATTACH SCHEDULE)..... \$ _____                      |                                                      |
| B. OVERPAYMENT FROM PRIOR YEAR..... \$ _____                                         |                                                      |
| C. TOTAL CREDITS..... \$ _____                                                       |                                                      |
| 11. NET TAX DUE (LINE 9 LESS LINE 10C)..... \$ _____                                 |                                                      |
| 12. AMOUNT PAID WITH THIS DECLARATION (NOT LESS THAN 22.5% OF LINE 11)..... \$ _____ |                                                      |
| 13. AMOUNT ENCLOSED _____ (LINE 7) \$ _____ (LINE 12) \$ _____ AMOUNT DUE \$ _____   |                                                      |

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.

Signature of Person Preparing if Other Than Taxpayer

Date

Signature of Taxpayer or Agent (Required)

Date

Address

and

Telephone Number

MAY WE DISCUSS THIS RETURN WITH PREPARER SHOWN TO  
THE LEFT? ☐ YES ☐ NO

**SECTION A****Adjusted Federal Taxable Income for S-Corporations and Partnerships**

Ordinary Income for 1120 (Line 21) ..... \$ \_\_\_\_\_

Ordinary Income for 1120S (Line 21) or 1065 (Line 22) ..... \$ \_\_\_\_\_

Add Income/Losses reported to shareholders on Schedule K:

Net Income from Rental (Real Estate or Other)..... \$ \_\_\_\_\_

Interest ..... \$ \_\_\_\_\_

Dividends..... \$ \_\_\_\_\_

Royalties..... \$ \_\_\_\_\_

Capital Gain/(Loss) ..... \$ \_\_\_\_\_

Other Income/(Loss)..... \$ \_\_\_\_\_

Total Additions..... \$ \_\_\_\_\_

Less Deductions reported to shareholders on Schedule K:

Charitable Contributions (Limited to 10% of Adjusted Taxable Income) ..... \$ \_\_\_\_\_

Section 179 Depreciation ..... \$ \_\_\_\_\_

Other Deductions ..... \$ \_\_\_\_\_

Total Deductions..... \$ \_\_\_\_\_

Adjusted Federal Taxable Income (generally AFTI for S-Corps equal Line 23, Schedule K) ..... \$ \_\_\_\_\_

**SECTION B****Total from Federal Schedule D, Form 4797.**

\$ \_\_\_\_\_

**SECTION C****Income from Rents— from Schedule E.**

\$ \_\_\_\_\_

**SECTION D****All other Taxable Income**

\$ \_\_\_\_\_

**TOTAL****From Sections A, B, C & D, Enter on Page 1, Line 1**

\_\_\_\_\_

**SCHEDULE X****Reconciliation with Federal Income Tax Return as Required by ORC Section 718**

| ITEMS NOT DEDUCTIBLE |                                                                                                                                                 | ADD | ITEMS NOT TAXABLE |                                                                                                               | DEDUCT |
|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|-----|-------------------|---------------------------------------------------------------------------------------------------------------|--------|
| a.                   | Federally deducted losses from IRC 1221 or 1281 ..... \$ _____                                                                                  |     | n.                | Capital gains (IRC 1221 or 1231).....\$ _____                                                                 |        |
| b.                   | Five percent of intangible income reported in letter O except that from IRC 1221 property dispositions..... \$ _____                            |     |                   | property dispositions except to the extent the income and gains apply to those described in IRC 1248 or 1250) |        |
| c.                   | Taxes based on income (State)..... \$ _____                                                                                                     |     | o.                | Federally reported intangible income such as, but not .....\$ _____                                           |        |
| d.                   | Taxes based on income (City)..... \$ _____                                                                                                      |     |                   | limited to interest, dividends, and patent and copyright income.                                              |        |
| e.                   | Guaranteed payments or accruals to or for current or ..... \$ _____                                                                             |     | p.                | Amount of Federal Tax Credit to the extent they have.....\$ _____                                             |        |
|                      | former partners or members                                                                                                                      |     |                   | reduced corresponding operating expenses                                                                      |        |
| f.                   | Federally deducted dividends, distributions, or amounts .... \$ _____                                                                           |     | q.                | Not previously deducted IRC Section 179 Expense.....\$ _____                                                  |        |
|                      | set aside for, credited to, or distributed to REFT or RIC Investors                                                                             |     | r.                | Partnership, S corp, LLC charitable contributions                                                             |        |
| g.                   | Federally deducted amounts paid or accrued to or for ..... \$ _____                                                                             |     | s.                | Other.....\$ _____                                                                                            |        |
|                      | qualified self-employed retirement plans, health insurance plans, and life insurance plans for owners or owner-employees of non-C corp entities |     |                   |                                                                                                               |        |
| h.                   | Rental activities by partnership, S corp or LLC Trusts ..... \$ _____                                                                           |     |                   |                                                                                                               |        |
| i.                   | Other ..... \$ _____                                                                                                                            |     |                   |                                                                                                               |        |
| m.                   | Total (Enter Line 2a Other Side ..... \$ _____                                                                                                  |     | z.                | Total (Enter Line 2b Other Side).....\$ _____                                                                 |        |

**SCHEDULE Y****Business Apportionment Formula**

|                                                                                 | a. LOCATED EVERYWHERE | b. LOCATED IN THIS CITY | c. PERCENTAGE (b + a) |
|---------------------------------------------------------------------------------|-----------------------|-------------------------|-----------------------|
| <b>STEP 1.</b> ORIGINAL COST OF REAL & TANGIBLE PERSONAL PROPERTY               | _____                 | _____                   | _____ %               |
| GROSS ANNUAL RENTALS PAID MULTIPLIED BY 8                                       | _____                 | _____                   | _____ %               |
| TOTAL STEP 1.                                                                   | _____                 | _____                   | _____ %               |
| <b>STEP 2.</b> GROSS RECEIPTS FROM SALES MADE AND/OR WORK OR SERVICES PERFORMED | _____                 | _____                   | _____ %               |
| <b>STEP 3.</b> WAGES, SALARIES AND OTHER COMPENSATION PAID                      | _____                 | _____                   | _____ %               |
| <b>4.</b> TOTAL PERCENTAGES                                                     |                       |                         | _____ %               |
| <b>5.</b> AVERAGE PERCENTAGES                                                   |                       |                         |                       |

Divide Total Percentages by Number of Percentages Used Carry to line 3b, Page 1 \_\_\_\_\_ %

Are any employees leased in the year covered by this return? \_\_\_\_ YES \_\_\_\_ NO

If YES, please provide the name, address and FID number of the leasing company \_\_\_\_\_