City of Canton, Ohio Income Tax Return
For Calendar Year ending December 31, 2012, or
for the _______ months ending ________________

FOR USE OF ALL CORPORATE TAXPAYERS SUBJECT TO
CANTON INCOME TAX

MAKE NAME OR ADDRESS CORRECTION

ACCT. NUMBER      FEDERAL I.D. NUMBER      PHONE ( )

FILING REQUIRED EVEN IF NO TAX DUE OR NET OPERATING LOSS

1. Canton Taxable Income (Page 2 Line 6)  1. $______________
2. Canton City Tax (2% of Line 1)  2. $______________
3. CREDITS
   3(A) Municipal tax paid to other cities  3A. $______________
   3(B) Payment of Declaration of Estimated Tax  3B. $______________
   3(C) Credit Adjustment  3C. $______________
   3(D) TOTAL CREDITS (A plus B less C)  3D. $______________
4. BALANCE DUE (If Line 2 exceeds Line 3D enter difference here)  4. $______________
5. Overpayment claimed (If Line 3D exceeds Line 2)  5. $______________
6. Credit to 2013 Estimate (If no Estimate due use Line 7)  6. $______________
7. TO BE REFUNDED (If Estimate due, use Line 6)  7. $______________
8. Late filing fine - (returns filed after Filing Deadline) enter $25.00 fine  8. $______________
9. Interest Penalty 3% per month, effective the sixteenth of each month  9. $______________
10. Estimate less than 75% - Fine $25.00 _____________ Interest Penalty 9% per quarter _____________ 10. $______________
11. Total amount due - MUST BE PAID IN FULL WITH THIS RETURN  11. $______________

NO TAXES OF LESS THAN $1.00 SHALL BE COLLECTED OR REFUNDED

MANDATORY DECLARATION OF ESTIMATED TAX FOR 2013

1. TOTAL INCOME SUBJECT TO CANTON TAX $ _____________ CANTON TAX @ 2%  1. $______________
2. LESS CREDITS:
   A. OVERPAYMENT ON PREVIOUS YEAR’S RETURN  2A. $______________
   B. PREVIOUS PAYMENTS IF THIS IS AN AMENDED DECLARATION  2B. $______________
   C. OTHER (SPECIFY)  2C. $______________ TOTAL CREDITS $______________
3. NET TAX DUE (LINE 1 LESS TOTAL LINE 2)  3. $______________
4. AMOUNT PAID WITH THIS RETURN (NOT LESS THAN 1/4 x line 3) REMITTANCE PAYABLE TO “Robert C. Schirack, Canton City Treasurer”  4. $______________
5. BALANCE OF TAX (NOT MORE THAN 3/4 x line 3)  5. $______________

MAY WE DISCUSS THIS TAX RETURN WITH PREPARER  □ YES  □ NO

METHOD OF PAYMENT
☐ Check ☐ MasterCard ☐ VISA ☐ Other

$ (Amount Authorized) EXPIRATION DATE / / / 

I CERTIFY I HAVE EXAMINED THIS RETURN (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) AND TO THE BEST OF MY KNOWLEDGE, I BELIEVE IT IS TRUE, CORRECT, AND COMPLETE.

Signature of Person Preparing, If Other Than Taxpayer

Address or Name and Address of Firm

Signature of Taxpayer or Agent Required

Date

AUDITED BY
NEW ACCOUNT
SUSP
M/M
POSTED TO
BANKING DATE
REFUND CK. NO.
ATTACH COPIES OF ALL FEDERAL SCHEDULES AND SUPPORTING STATEMENTS

TY 2012

LINE 1. NET PROFIT/LOSS (FORM 1041, 1065, 1120 1120S, ETC.)

1. $ ________________

SCHEDULE X RECONCILIATION WITH FEDERAL INCOME TAX RETURN - Attach Schedules

ITEMS NOT DEDUCTIBLE
ADD
 ITEMS NOT TAXABLE
DEDUCT
a. Capital Losses ............................................................... $ ________________
b. Expenses incurred in the production of non-taxable income (At least 5% of Line t) ..........................................................
c. Taxes based on income ..............................................................
d. Payments to partners ..............................................................
e. Other (Explain) .................................................................
f. Total Additions ................................................................. $ ________________

LINE 2. EXCESS INCOME/DEDUCTIONS (SCHEDULE X LINE 1 MINUS LINE t)

2. $ ________________

LINE 3. RECONCILED NET PROFIT/LOSS (LINE 1 PLUS LINE 2)

3. $ ________________

SCHEDULE Y BUSINESS ALLOCATION FORMULA

a. LOCATED EVERYWHERE
b. LOCATED IN THIS MUNICIPALITY
c. PERCENTAGE (b ÷ a) %

STEP 1. AVG. ORIGINAL COST OF REAL & TANG. PERSONAL PROPERTY
GROSS ANNUAL RENTALS PAID MULTIPLIED BY 8
TOTAL STEP 1. %

STEP 2. GROSS RECEIPTS FROM SALES MADE AND/OR WORK OR SERVICES PERFORMED (SEE INSTRUCTIONS). %

STEP 3. WAGES, SALARIES, AND OTHER COMPENSATION PAID. %

4. TOTAL PERCENTAGES. %

5. AVERAGE PERCENTAGE (Divide Total Percentages By 3. A factor is applicable even though it may be allocable entirely in or outside THE CITY of CANTON). %

LINE 4. ALLOCATED NET PROFIT/LOSS (LINE 3 MULTIPLIED BY STEP 5 SCHEDULE Y)

4. $ ________________

LINE 5. NET OPERATING LOSS CARRY FORWARD
ATTACH SCHEDULE

5. $ (______________)

LINE 6. CANTON TAXABLE INCOME (LINE 4 PLUS LINE 5)

6. $ ________________

IF LOSS ENTER ZERO AND CARRY FORWARD TO NEXT YEAR

ENTER LINE 6 ON PAGE 1 LINE 1

SCHEDULE Z Partners Distributive Shares of Net Income - From Federal Schedules 1065 K-1 and 1120S K-1

1. NAME AND MUNICIPALITY OR TOWNSHIP OF EACH PARTNER

<table>
<thead>
<tr>
<th>Name and Municipality</th>
<th>Partner's Social Security No.</th>
<th>Yes</th>
<th>No.</th>
<th>Percent</th>
<th>Amount</th>
</tr>
</thead>
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2. Resident

3. Distributive Shares of Partners

4. Other Payments

5. Taxable Percentage

6. Amount Taxable

7. TOTALS

7. $ ________________