

**CITY OF LANCASTER, OHIO**  
 Check your status as a taxpayer  
 Individual or Married Couple  
 Married Filing Separate Return  
 Retired with No Taxable Income  
 S Corporation  C Corporation  
 Other (explain) \_\_\_\_\_

**2007 INCOME TAX RETURN**  
 Due by April 15th, 2008



If Partial Year or Fiscal Period, give dates  
 \_\_\_\_\_, 2007 through \_\_\_\_\_  
**FILING REQUIRED EVEN IF NO TAX DUE**

Social Security No. (taxpayer) \_\_\_\_\_  
 Social Security No. (spouse) \_\_\_\_\_  
 Federal ID# (Business returns) \_\_\_\_\_  
 If You Moved During Year of This Return, Give Date  
 Into Lancaster \_\_\_\_\_ Out of Lancaster \_\_\_\_\_  
 Phone # \_\_\_\_\_  
 Should your account be deactivated?  No  Yes  
 (reason) \_\_\_\_\_

NAME AND ADDRESS: INDICATE ABOVE CHANGE(S) BY CHECKING  NAME  ADDRESS

		<b>1(A) ENTER TAXABLE QUALIFYING WAGES</b>			<b>W-2 Copies Must Be Attached (on reverse side)</b>	
		Print Employer's Name	City Where Employed	W-2 Wages (See Instruction 5)		
INCOME		_____	_____	_____		
		_____	_____	_____		
		_____	_____	_____		
		_____	_____	_____		
	1(B) LESS: Employee Business Expenses ( <b>attach form 2106, Schedule A, F1040 page 2</b> ) [ _____ ]					
	1(C) LESS: Wages earned while non-resident (part-year residents only) (See Instruction 6) [ _____ ]					
	1. TOTAL: (1A-1B-1C) .....	1	\$	_____		
	2. Profit from Income other than Wages (from Page 2, Line 21) <b>ATTACH FEDERAL SCHEDULES</b> .....	2	\$	_____		
	3. Total Taxable Income (Add Line 1 and Line 2).....	3	\$	_____		
TAX	4. <b>TAX</b> – Multiply Taxable Income by 1.75% (.0175).....	4	\$	_____		
TAX WITHHELD, PAYMENTS & CREDITS	5. Credits: (A) Lancaster Tax Withheld By Employer .....	5A	\$	_____		
	(B) Credit Allowed for earnings taxed by other cities ( <b>Limited to 1%, See Instruction 7</b> ) W-2 MUST SHOW TAX PAID TO OTHER CITY or attach other city return... 5B	5B	\$	_____		
	(C) Payments made on Declaration of Estimated Tax .....	5C	\$	_____		
	(D) Prior Year Overpayment That Was Not Refunded.....	5D	\$	_____		
	(E) _____ TOTAL PAYMENTS AND CREDITS (5A+5B+5C+5D).....	5E	\$	[ _____ ]		
BALANCE DUE, REFUND OR CREDIT	6. BALANCE DUE OR OVERPAYMENT (Line 4 minus Line 5E) (If plus or minus \$4.99 or less, enter zero) .....	6	\$	_____		
	7. If paying or filing after due date, ( <b>see Instruction 13</b> ) add Penalty _____; Interest _____; Late Fee _____ ..	7	\$	_____		
	8. Total Amount Due or Overpaid (Line 6 + Line 7) (If positive, carry to Line 15 below) .....	8	\$	_____		
	9. Overpayment (If Line 8 is negative) (Indicate amount to be refunded or credited) .....	9	\$	_____		
AMOUNT TO BE REFUNDED \$ _____, OR CREDITED \$ _____ TO NEXT YEAR'S ESTIMATE						

**DECLARATION OF ESTIMATED TAX FOR YEAR 2008. REQUIRED BY LAW ON ALL INCOME FROM WHICH LANCASTER TAX IS NOT WITHHELD. PENALTY FOR NON-COMPLIANCE. DUE APRIL 15, 2008. NO EXTENSION ALLOWED.**

MANDATORY ESTIMATE FOR NEXT YEAR	10. Estimated 2008 Income Subject To Lancaster Tax .....	10	\$	_____
	11. Estimated Tax Due: 1.75% (.0175) Times Line 10.....	11	\$	_____
	12. Credits: (a) Lancaster Tax to be Withheld..... 12A	12A	\$	_____
	(b) Credit Allowed for Tax Paid Other Cities ( <b>Limited to 1% - see Instruction 7</b> ) 12B	12B	\$	_____
(c) Total Credits (12a + 12b)..... 12C	12C	\$	_____	
13. Estimated Tax Due (Line 11 less Line 12c).....	13	\$	_____	
(a) Prior Year Overpayment Not Refunded (See Line 9 above) .....	13A	\$	_____	
14. Amount Paid with this Declaration (Not Less Than 25% of Line 13, Less Line 13A).....	14	\$	_____	
TAX DUE	15. Enter Balance Due from Line 8 above.....	15	\$	_____
	16. <b>TOTAL TAX DUE</b> (Add Lines 14 and 15) .....	16	\$	_____

MAKE CHECK PAYABLE TO "CITY OF LANCASTER – INCOME TAX"

**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.**

Signature of Person Preparing if Other Than Taxpayer \_\_\_\_\_ Date \_\_\_\_\_ Signature of Taxpayer \_\_\_\_\_ Date \_\_\_\_\_

Address or Name & Address of Preparer if Other Than Taxpayer \_\_\_\_\_ Signature of Spouse (if joint return) \_\_\_\_\_ Date \_\_\_\_\_

THIS SECTION TO BE COMPLETED ONLY BY THOSE WITH PROFIT OR LOSS FROM INCOME OTHER THAN WAGES

ATTACH W-2S HERE

- 17. Profit or Loss from any Business Owned (from Sch X, line V below) ..... 17 \$ \_\_\_\_\_
- 18. Rental Income (Attach Federal Schedule E Part I) &/or Farm Income (Attach Federal Schedule F) ..... 18 \$ \_\_\_\_\_
- 19. Pass-through income from other than S Corps (Attach Federal Schedule E, Parts II to V) ..... 19 \$ \_\_\_\_\_
- 20. Other Income (Attach F1040 Pg 1) (1099-MISC, Form 4797 Ordinary Income, Lotteries & Prizes if total more than \$5,000) 20 \$ \_\_\_\_\_
- 21. Total Other Taxable Income (Add Lines 17 to 20). If positive, enter on line 2, page 1. **If negative, enter zero.** ..... 21 \$ \_\_\_\_\_

Attach any Adjusting Schedules or Worksheets including Pages 1 and 2 of Sch C & F; Pages 1 to 4 of 1120, 1120S, 1065, 1041

**SCHEDULE X BUSINESS INCOME SCHEDULE (including resident pass-through income)**

- I. Income per Federal Return (C Corp: Form 1120, Ln 28; S Corp: Sch K, Ln 18; Partnership: Form 1065, Pg 4, Ln 1; Trust: Form 1041, Ln 17; Self-employment: Sch C, Ln 31; Farm: Sch F, Ln 36) ..... I \$ \_\_\_\_\_
- II. (a) ITEMS NOT DEDUCTIBLE (From Line M Below) ..... Add \_\_\_\_\_
- (b) ITEMS NOT TAXABLE (From Line Z Below) ..... Deduct \_\_\_\_\_
- (c) ENTER LINE II(a) less LINE II(b) ..... IIc \$ \_\_\_\_\_
- III. ADJUSTED NET INCOME (Line I, Plus or Minus Line IIc) ..... III \$ \_\_\_\_\_
- IV. ALLOCATION PERCENTAGE (Line 5 of Schedule Y, if applicable; otherwise 100%) ..... IV \$ \_\_\_\_\_ %
- V. TAXABLE INCOME (Line III x Line IV) Enter on Line 18, 19, or 20 (above) as applicable ..... V \$ \_\_\_\_\_

ITEMS NOT DEDUCTIBLE	ADD	ITEMS NOT TAXABLE	DEDUCT
A. Losses from IRC 1221 or 1231 property dispositions.... \$ _____		N. Gains from IRC 1221 or 1231 property distributions except IRC 1245 or 1250..... \$ _____	
B. 5% of intangible income reported in line O. of this Sch X except that from IRC 1221 property dispositions \$ _____		O. Intangible income, including interest, dividends, patent & copyright income..... \$ _____	
C. Taxes based in income..... \$ _____		P. Federal tax credits to extent they reduced corresponding operating expenses ..... \$ _____	
D. Dividends, distributions to REIT investors ..... \$ _____		Q. Other (explain & provide documentation) _____ \$ _____	
E. Payments, accruals for qualified self-employed retirement plans, health insurance plans, and life insurance plans for owners or owner-employees of non-C corporation entities ..... \$ _____		_____ \$ _____	
F. Other (explain & provide documentation) ..... \$ _____		_____ \$ _____	
_____ \$ _____			
_____ \$ _____			
M. TOTAL ADDITIONS (lines A through F) ..... \$ _____		Z. TOTAL DEDUCTIONS (lines N through Q)..... \$ _____	
(Enter as Line II(a) above)		(Enter as Line II(b) above)	

**SCHEDULE Y BUSINESS ALLOCATION FORMULA**

NOTE: This schedule is applicable only to entities doing business both within and outside Lancaster city limits.

	a. LOCATED EVERYWHERE	b. LOCATED IN THIS MUNICIPALITY	c. PERCENTAGE (b ÷ a)
STEP 1. Average Original Cost of Real and Tangible Personal Property.....	_____	_____	
Gross Annual Rentals Paid Multiplied by 8 .....	_____	_____	
Total Step 1 .....	_____	_____	_____ %
STEP 2. Wages, Salaries, and Other Compensation Paid .....	_____	_____	_____ %
STEP 3. Gross Receipts from Sales Made and/or Work or Services Performed .....	_____	_____	_____ %
STEP 4. Total Percentages .....	_____	_____	_____ %
STEP 5. Average Percentage (Divide Total Percentages by Number of Percentages Used) .....	_____	_____	_____ %

**SCHEDULE Z NON-RESIDENT INDIVIDUALS**

Non-residents employed in Lancaster but occasionally working outside of Lancaster are permitted to pro-rate income to exclude time **worked** outside of Lancaster. You **must attach** a letter from your employer certifying the specific dates you were employed out of town **and** the location of such out-of-town employment. If working in a location with a city tax, you also **must attach** a copy of the city tax return that you filed reporting that income and paying tax to the other city.

Non-resident taxpayers proportioning annual income, use formula below, if appropriate:

$$\text{Income } \$ \frac{\text{X}}{260} \text{ (Days worked in Lancaster)} = \$ \text{ (Total work days) (Enter on Line 3, page 1)}$$