CITY TAX DEPT. 50 TOWN SQUARE, P.O. BOX 155 LIMA, OHIO 45802

PHONE: (419) 221-5245 FAX: (419) 998-5527

ITEMS NOT DEDUCTIBLE

a. Federally deductible losses from IRC 1221 or 1231

Five percent of intangible income reported in letter O,

Guaranteed payments or accruals to or for current

or former partners or members .....

Federally deducted dividends, distributions, or amounts set aside for, credited to, or distributed to REIT or RIC investors ......

Federally deducted amounts paid or accrued to or for qualified self-employed retirement plans, health insurance plans, and life insurance plans for owners or

## **2019 LIMA INCOME TAX RETURN**

FOR USE BY ALL TAXPAYERS ON A CALENDAR YEAR BASIS
OR OTHER TAXABLE PERIOD BEGINNING

IF YOU MOVED DURING TAX YEAR
STATE DATE
INTO LIMA 
OUT OF LIMA

## ATTACH VERIFICATION

LOCAL PHON	E
SSAN	
JOINT SSAN .	

**DEDUCT** 

1.	ENTER GROSS WAGES, SALARIES, BONUSES, COMMISSIONS AND OTHER COMPENSATION RECEIVED BEFORE ANY PAYROLL DEDUCTIONS. Attach copies of W-2 Forms ON BACK WITHHELD	WAGES ETC.	
		\$ \$	
	a. TOTAL: IF NO OTHER TAXABLE INCOME ENTER TOTAL WAGES HERE AND ON LINE 6 \$	XXXXXXXXXXX	\$
2.	OTHER INCOME - FROM PAGE 2 (Attach Federal Schedules) (schedule losses cannot offset qualifying wages)		
3.	TOTAL INCOME (total lines 1 and 2)		
4a.	ITEMS NOT DEDUCTIBLE (from line m Schedule X below)	\$	
	b. ITEMS NOT TAXABLE (from line z Schedule X below)		
	c. ADD EXCESS OF 4a OVER 4b TO LINE 3. DEDUCT EXCESS OF 4b OVER 4a FROM LINE 3		·
5a.	ADJUSTED NET INCOME (line 3 plus or minus line 4c)		
	b. AMOUNT ALLOCABLE TO <b>LIMA</b> IF SCHEDULE Y PAGE 2 IS USED OF LINE 5a		-
	c. LESS ALLOCABLE NET LOSS PER PREVIOUS <b>LIMA</b> INCOME TAX RETURN		
6.	AMOUNT SUBJECT TO LIMA INCOME TAX (line 5a or 5b less line 5c)		
7.	LIMA INCOME TAX (1.5% or .015 of amount shown on line 6)		
8.	CREDITS: (a) LIMA tax withheld by employer(s)	\$	
	(b) Payments and credits on Declaration of Estimated Tax		
	(c) Earned income, taxes paid City of (By Individuals Only)		
	(x) TOTAL CREDITS ALLOWABLE		
9.	BALANCE OF TAX DUE (line 7 less line 8x) PAYMENTS MUST ACCOMPANY THIS FORM (No payment is due for amount under \$10.00	)	
10.	OVERPAYMENT CLAIMED (If line 8x exceeds line 7 enter difference here (No overpayment is to be claimed on amount under \$10.00) \$	INTEREST	
	Enter amount of line 10 you want: CREDITED to your Estimated Tax \$ REFUNDED \$	PENALTY	\$
		TOTAL ······	\$

ADD

ITEMS NOT TAXABLE

s. Other

n. Capital gains (IRC 1221 or 1231 property dispositions

except to the extent the income and gains apply to

o. Federally reported intangible income such as, but not limited

Amount of Federal Tax Credit to the extent they have

property dispositions ......\$

except that from IRC 1221 property dispositions .....

Taxes based on income (State)

Taxes based on income (City)

and the i.iv.o.		
Sign Here	Your Signature →	Date
If a joint return, both must sign	Spouse Signature →	Date

☐ CHECK BOX IF CITY MAY DISCUSS YOUR RETURN WITH TAX PREPARER.

## IF YOU OWE MORE THAN \$200 QUARTERLY ESTIMATE PAYMENTS ARE REQUIRED

z. Total (enter as line 4b above) ......\$

those described in IRC 1245 or 1250) ......\$ \_

to interest, dividends, and patent and copyright income ......\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Partnership, S corp, LLC charitable contributions .....

and you may be subject to penalties and interest due to lack of estimated payments. Further, you may need to make estimate payments for 2019 if you expect to owe the same or greater amount next year.

Paid Preparer's	Your Signature →	Date
Use Only	Print	
	Name →	PTIN

SCHEDULE C - PROFIT	(OR LOSS) FROM	BUSINESS OR	PROFESSION - AT	TACH FEDER	RAL SCHEDU	JLES		P	PAGE 2
1. TOTAL RECEIPTS, LESS ALLOWANCES, REBATES AND RETURNS							<u> </u>	AGE	
6. OTHER BUSINESS INCOME (Specify) \$									
7. TOTAL BUSINESS INC		EDUCTIONS				\$			
BUSINESS DEDUCTIONS  8. COMPENSATION OF OFFICERS			15. INSURANCE		PROMOTION ID TRAVEL	. \$		\$	
SCHEDULE G - INCOME	FROM RENTS (II	F NOT INCLUDE	D IN SCHEDULE C	.) - ATTACH	FEDERAL SO	CHEDULE	S		
Kind and Location of Prope	erty Amount o	of Rent Depi	reciation Re	epairs	Other Exper	ises Ne	t Income (or loss)		
TOTAL INCOME (or loss) S	SCHEDULE G							\$	
SCHEDULE H - OTHER I	NCOME NOT INC	CLUDED IN SCH	EDULE C OR G - A	TTACH FEDE	RAL SCHED	ULES			
INCOME FROM PARTNER	*	AND TRUSTS, FE	EES, etc			1			
RECEIVED FROM			FOR (DESCRIBE)			AMOUNT			
TOTAL INCOME SCHEDU TOTAL SCHEDULES C, G								* -	
SCHEDULE Y - BUSINES	S ALLOCATION I	FORMULA							
STEP 1. Average Value of Real and Tangible Personal Property						B ÷ A) ENTAGE			
STEP 4. Gross Receipts STEP 4. TOTAL PERCE	s from Sales made	and/or Work or	Services Performed by Number of Perce						
SCHEDULE NOL - NET (	PERATING LOSS	S CARRY-FORW	ARD - (5 Year Limi	t)					
(See Instructions)	2014	2015	2016	2017		2018	2019	TOTAL	
Unused Loss Carryforward				15.7			-5		
Percentage Loss Used THIS YEAR	100%	100%	100%	50%		50%			

(Enter **TOTAL** Line 5c, Page 1) Loss Carried Forward to NEXT TAX YEAR