

MAIL RETURN AND PAYMENT TO:

City of Greenville

Income Tax Department
100 Public Square, Greenville, OH 45331
Phone: (937) 548-5747 • Fax: (937) 548-3035
www.cityofgreenville.org

2010 CITY OF GREENVILLE
INCOME TAX RETURN

DUE ON OR BEFORE APRIL 18, 2011
(FILING REQUIRED EVEN IF NO TAX DUE)

Fiscal year taxpayers shall file on or before the 15th day
of the fourth month following the close of their fiscal year
FISCAL PERIOD TO

FORM R

MAKE CHECK OR MONEY
ORDER PAYABLE TO:
City of Greenville

OFFICE USE ONLY

Table with 2 columns: Label (AUD., P.M., EXT., M.L.) and Input field.

ACCOUNT NO.

NAME AND CURRENT ADDRESS:

- Check Here if You want the Tax Preparer Contacted for Any Questions on Your Return
Resident - Greenville Non-Resident Part Year Resident (check one)
RETIRED AND/OR RESIDENTS WITH NO TAXABLE INCOME: REASON (CHECK APPROPRIATE BOX)
Under 18 Years of Age for Entire Year, Date of Birth
Active Duty Military for Entire Year
All Income was from a Federally Qualified Retirement Plan, Date Retired
All Income was from a Non-Taxable Source, List Source

Telephone No.
Your SSN or FIN
Spouse SSN
Complete if Moved Since Last Return or Part Year Resident
Date Moved Into Greenville City Limits
Date Moved Out Of Greenville City Limits
Previous Address
Did You File A 2009 Greenville City Return
Will You Have Taxable Income in 2011

2010 CITY OF GREENVILLE INCOME TAX RETURN

NOTE: Reverse side must be completed if you have taxable rental property or business income.

- 1. WAGES, SALARIES, TIPS, LOTTERY/GAMBLING WINNINGS TO BE REPORTED ON LINE 1
(ATTACH ALL W-2'S AND/OR OTHER DOCUMENTATION TO BACK OF RETURN)
2. OTHER TAXABLE INCOME FROM REVERSE SIDE
3. TAXABLE INCOME LINE 1 PLUS LINE 2
4. MUNICIPAL TAX 1.5% OF LINE 3
5. CREDITS:
A. GREENVILLE CITY TAX WITHHELD
B. CITY TAX PAID TO ANOTHER MUNICIPALITY (NOT TO EXCEED 1.5% OF EACH WAGE)
C. ESTIMATED TAX PAID AND CREDIT FROM PRIOR YEAR
D. TOTAL CREDITS
6. TAX DUE (IF LINE 4 IS GREATER THAN 5D, PAYMENT OF BALANCE MUST ACCOMPANY THIS RETURN)
7. PENALTY (10% LINE 6) PLUS INTEREST (1% LINE 6 TIMES NUMBER OF MONTHS LATE)
8. LATE FILING FEE \$25 IF FILED 4/19 to 5/18, \$50 AFTER 5/18
9. AMOUNT DUE BEFORE ESTIMATED TAXES (MAKE CHECK OR MONEY ORDER PAYABLE TO: CITY OF GREENVILLE)
10. OVERPAYMENT: REFUNDED \$ OR CREDITED TO EST. TAXES \$

NOTE: IF THE BALANCE DUE IS LESS THAN \$5.00, PAYMENT NEED NOT BE MADE, AND IF THE OVERPAYMENT IS LESS THAN \$5.00 NO REFUND WILL BE ISSUED.

2011 DECLARATION OF ESTIMATED TAX

- 11. INCOME SUBJECT TO TAX \$ TIMES TAX RATE OF 1.5% FOR GROSS TAX OF
12. GREENVILLE CITY TAX WITHHELD
13. OTHER CITY TAX CREDIT (NOT TO EXCEED 1.5% OF THAT PORTION TAXED)
14. NET TAX DUE (LINE 11 LESS LINES 12 and 13)
15. LINE 14 TIMES .25
16. LESS OVERPAYMENT CREDIT FROM 2010 RETURN
17. AMOUNT PAID WITH THIS DECLARATION (LINE 15 MINUS LINE 16)
18. BALANCE OF ESTIMATED TAX

AMOUNT DUE (LINE 9) \$ + (LINE 17) \$ = TOTAL

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 & COMPLETE. IF PREPARED BY PERSON OTHER THAN TAXPAYER, THE DECLARATION IS BASED ON ALL INFORMATION OF WHICH PREPARER HAS ANY KNOWLEDGE.

Signature of Preparer Date

Signature of Taxpayer Date

Address of Preparer

Signature of Taxpayer Date

Phone # Fax #

**DO NOT USE THIS PAGE IF YOUR ONLY SOURCE OF INCOME IS FROM WAGES.  
 ALL APPROPRIATE FEDERAL SCHEDULES MUST BE ATTACHED.  
 ANY DEDUCTIONS NOT SUPPORTED BY SCHEDULES WILL BE DISALLOWED.**

ATTACH W-2(S) HERE

**SCHEDULE C – BUSINESS INCOME**

- 1. ATTACH COPIES OF FEDERAL SCHEDULES (ENTER TOTAL INCOME FROM SCHEDULES) ..... 1 \_\_\_\_\_
- 2. A. ITEMS NOT DEDUCTIBLE (FROM LINE M SCHEDULE X) ..... 2.A \_\_\_\_\_
- B. ITEMS NOT TAXABLE (FROM LINE Z SCHEDULE X) ..... 2.B \_\_\_\_\_
- C. DIFFERENCE BETWEEN LINES 2A AND 2B TO BE ADDED TO OR SUBTRACTED FROM LINE 1 ..... 2C \_\_\_\_\_
- 3. A. ADJUSTED INCOME (LINE 1 PLUS OR MINUS 2C IF SCHEDULE X IS USED) ..... 3A \_\_\_\_\_
- B. AMOUNT OF LINE 3A ABOVE ALLOCABLE \_\_\_\_\_% FROM STEP 5 SCHEDULE Y ..... 3B \_\_\_\_\_
- 4. NET OPERATING LOSS FROM PRIOR YEARS 2009 \$ \_\_\_\_\_, 2008 \$ \_\_\_\_\_, 2007 \$ \_\_\_\_\_ ..... 4 \_\_\_\_\_
- 5. NET BUSINESS INCOME ..... 5 \_\_\_\_\_

**SCHEDULE E – INCOME FROM RENTS**

1. ADDRESS OF PROPERTY	2. AMOUNT OF RENT	3. DEPRECIATION	4. REPAIRS	5. OTHER EXPENSES	6. NET INCOME (OR LOSS)
NET INCOME (or Loss) SCHEDULE E..... \$					

**SCHEDULE H – OTHER INCOME (PARTNERSHIPS, ESTATES, TRUSTS, PRIZES, DIRECTOR FEES, MISCELLANEOUS, COMMISSIONS, ETC.)**

RECEIVED FROM	FOR (DESCRIBE)	AMOUNT
TOTAL INCOME SCHEDULE H..... \$		

ADD TOTALS OF SCHEDULES C, E & H. ENTER HERE AND ON LINE 2, PAGE 1 ..... \$ \_\_\_\_\_

**SCHEDULE X – RECONCILIATION WITH FEDERAL INCOME TAX RETURN (ATTACH SUPPORTING SCHEDULES)**

ITEMS NOT DEDUCTIBLE	ADD	ITEMS NOT TAXABLE	DEDUCT
A. Federally deducted losses from IRC 1221 or 1231 property dispositions .....	\$ _____	N. Federally reported income and gains from IRC 1221 or 1231 property dispositions except to the extent the income and gains apply to those described in IRC 1245 or 1250.....	\$ _____
B. Five percent of intangible income except that from IRC 1221 property dispositions .....	\$ _____	O. Interest earned or accrued .....	\$ _____
C. City or State income taxes .....	\$ _____	P. Dividends .....	\$ _____
D. Net operating loss deduction per Federal Return.....	\$ _____	Q. Other Intangible Income .....	\$ _____
E. Federally deducted dividends, distributions, or amounts set aside for, credited to, or distributed to REIT or RIC investors .....	\$ _____	R. Amount of Federal Tax Credits to the extent they have reduced corresponding operating expenses .....	\$ _____
F. Federally deducted amounts paid or accrued to or for qualified self-employed retirement plans, health insurance plans, and life insurance plans for owners or owner-employees of non-C corporation entities .....	\$ _____	S. Not previously deducted IRC Section 179 Expense .....	\$ _____
G. Rental activities by partnership, S corp, LLC .....	\$ _____	T. Partnership, S corp, LLC charitable contributions .....	\$ _____
H. Payments to partners (form 1065).....	\$ _____	U. Other income exempt from Greenville tax .....	\$ _____
I. Other expenses not deductible (explain).....	\$ _____	Z. Total (enter on line 2.B at top) .....	\$ _____
M. Total (enter on line 2.A at top) .....	\$ _____		

**SCHEDULE Y – BUSINESS APPORTIONMENT FORMULA**

	A. LOCATED EVERYWHERE	B. LOCATED IN THIS CITY	C. PERCENTAGE (B ÷ A)
STEP 1. ORIGINAL COST OF REAL AND TANGIBLE PERSONAL PROPERTY .....	\$ _____	\$ _____	
GROSS ANNUAL RENTALS MULTIPLIED BY 8.....	\$ _____	\$ _____	
TOTAL OF STEP 1.....	\$ _____	\$ _____	_____ %
STEP 2. TOTAL WAGES, SALARIES, COMMISSIONS AND OTHER COMPENSATION PAID TO ALL EMPLOYEES.....	\$ _____	\$ _____	_____ %
STEP 3. GROSS RECEIPTS FROM SALES AND WORK/SERVICES PERFORMED....	\$ _____	\$ _____	_____ %
STEP 4. TOTAL OF PERCENTAGES.....			_____ %
STEP 5. AVERAGE PERCENTAGE (DIVIDE TOTAL PERCENTAGES BY NUMBER OF PERCENTAGES USED) ENTER HERE AND ON LINE 3B, SCHEDULE C ABOVE.....			_____ %