

VILLAGE OF SOUTH LEBANON
INCOME TAX RETURN

FILE ON OR BEFORE APRIL 16, 2007
OR 4 MONTHS AFTER FISCAL YEAR END

FISCAL YEAR DATE _____ TO _____

FILE WITH
SOUTH LEBANON INCOME TAX
99 North High Street
P.O. Box 40
South Lebanon, OH 45065
(513) 494-2296
www.southlebanonohio.org

MAKE CHECK OR MONEY ORDER
PAYABLE TO
South Lebanon
Income Tax

PRINCIPAL BUSINESS ACTIVITY _____

TAXPAYERS NAME AND ADDRESS

CORPORATION PARTNERSHIP SOLE PROPRIETOR

IF OTHER, EXPLAIN: _____

BUSINESS TELEPHONE: _____

FEDERAL ID # _____

[Empty box for taxpayer name and address]

ARE YOU A RESIDENT OF SOUTH LEBANON? YES NO
DID YOU FILE A PREVIOUS YEAR RETURN? YES NO
IF MOVED SINCE THE PREVIOUS FINAL RETURN WAS DUE
HAS IRS INCREASED YOUR INCOME TAX LIABILITY FOR ANY PRIOR YEAR? YES NO
IF SO HAS AN AMENDED VILLAGE OF SO. LEBANON INCOME TAX RETURN BEEN FILED? YES NO
GIVE DATE INTO CITY _____ OR OUT OF _____

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

THIS SPACE FOR TAX OFFICE ONLY

Table with columns for INCOME, ADJUSTMENTS TO INCOME, and TAX. Rows include: 1. ADJUSTED FEDERAL TAXABLE INCOME, 2a. ITEMS NOT DEDUCTIBLE, b. ITEMS NOT TAXABLE, 3a. ADJUSTED NET PROFIT/LOSS, 4. NET PROFIT/LOSS SUBJECT TO MUNICIPAL INCOME TAX, 5. SOUTH LEBANON INCOME TAX IS 1% OF LINE 4, 6. CREDITS, 7. IF LINE 5 GREATER THAN LINE 6c, PAYMENT OF 2005 TAX BALANCE IS DUE WITH THIS RETURN, 8. OVERPAYMENT TO BE REFUNDED \$ _____ OR CREDITED \$ _____ TO NEXT YEAR'S ESTIMATE (ENTER ON LINE 10b)

OFFICE USE ONLY
a. INTEREST CHARGE \$ _____ PLUS PENALTY CHARGE \$ _____ = TOTAL ASSESSMENT \$ _____
b. UNPAID TAX BALANCE (LINE 6) \$ _____ + TOTAL ASSESSMENT (LINE 7a) \$ _____ = TOTAL AMOUNT DUE \$ _____

DECLARATION OF ESTIMATED TAX FOR YEAR 2007

Table with columns for line numbers and dollar amounts. Rows include: 9. TOTAL INCOME SUBJECT TO TAX \$ _____ MULTIPLY BY RATE OF 1 % FOR GROSS TAX OF \$ _____, 10. LESS EXPECTED CREDITS: a. OPERATING LOSS CARRYFORWARD (ATTACH SCHEDULE) \$ _____, b. OVERPAYMENT FROM PRIOR YEAR \$ _____, c. TOTAL CREDITS \$ _____, 11. NET TAX DUE (LINE 9 LESS LINE 10c) \$ _____, 12. AMOUNT DUE WITH THIS DECLARATION (NOT LESS THAN 1/4 OF LINE 11) \$ _____, 13. BALANCE OF 2006 TAX (LINE 7) \$ _____, 14. AMOUNT ENCLOSED FOR 2006 TAX (LINE 7) \$ _____ PLUS 2007 DECLARATION (LINE 12) \$ _____ = \$ _____

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 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 the preparer shown to the left? () YES () NO

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

Table with 2 columns: Description and Amount. Rows include Ordinary Income for 1120, Add Income/Losses reported to shareholders (Net Income from Rental, Interest, Dividends, etc.), Less Deductions reported to shareholders (Charitable Contributions, Section 179 Depreciation, etc.), and Adjusted Federal Taxable Income.

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

Table with 4 columns: ITEMS NOT DEDUCTIBLE, ADD, ITEMS NOT TAXABLE, and DEDUCT. Rows list various tax items such as Federally deducted losses, taxes based on income, and capital gains.

SCHEDULE Y Business Apportionment Formula

Table with 4 columns: Description, A. LOCATED EVERYWHERE, B. LOCATED IN THIS CITY, and C. PERCENTAGE (B + A). Rows include ORIGINAL COST OF REAL & TANGIBLE PERSONAL PROPERTY, GROSS RECEIPTS FROM SALES, and WAGES, SALARIES AND OTHER COMPENSATION PAID.

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

EXTENSION POLICY: Extensions may, upon request, be granted for filing of the annual return, provided and IRS extension has been secured. EXTENSION REQUESTS MUST BE MADE IN WRITING AND RECEIVED BY THIS TAX OFFICE BEFORE THE ORIGINAL DUE DATE OF THE RETURN.