

**2024 Newark City Business Tax Return**

Calendar Year Taxpayers File by: April 15, 2025

Fiscal Year Taxpayers File By: 15th Day of 4th Month After Year End

Enter Fiscal Year \_\_\_\_\_ to \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

CSZ \_\_\_\_\_

EIN: \_\_\_\_\_

- 1. Adjusted Federal Taxable Income per attached return 1 \_\_\_\_\_
- 2. Adjustments (Form Schedule X, Line Q) 2 \_\_\_\_\_
- 3. Taxable Income before Apportionment 3 \_\_\_\_\_
- 4. Apportionment Percentage (100% or Schedule Y, Step 5) 4 \_\_\_\_\_
- 5. Adjusted Net Taxable Income 5 \_\_\_\_\_
- 6. Newark City Tax Due (line 5 times 1.75%) 6 \_\_\_\_\_
- 7. Estimated Tax Payments plus prior year carryover 7 \_\_\_\_\_
- 8. Other Credits - provide explanation and documentation 8 \_\_\_\_\_
- 9. Total Credits 9 \_\_\_\_\_
- 10. Tax Due 10 \_\_\_\_\_
- 11. Overpayment 11 \_\_\_\_\_
- 12. Balance Due (if less than \$10.01 enter 0) 12 \_\_\_\_\_
- 13. Overpayment

Amt carried forward \_\_\_\_\_ Amt Refund \_\_\_\_\_  
*(If overpayment is less than \$10.01 enter 0)*

**Declaration of Estimated Tax for 2025**

*Required if estimated tax is \$200.00 or more.*

- 14. Estimated Income subject to Newark City Tax 14 \_\_\_\_\_
- 15. Estimated Tax (line 14 times 1.75%) 15 \_\_\_\_\_
- 16. Quarterly Payment Due 16 \_\_\_\_\_
- 17. Credit carried forward from prior year 17 \_\_\_\_\_
- 18. Amount Due for 1st Quarter 18 \_\_\_\_\_
- 19. Balance due with Return (line 12 plus line 18) 19 \_\_\_\_\_

*Make checks payable to Newark City Income Tax*

I hereby declare that the above information is true, correct and complete.

\_\_\_\_\_  
Signature Title Date

\_\_\_\_\_  
Preparer signature Date

May we contact your preparer directly with any questions? Yes \_\_\_\_\_  
No \_\_\_\_\_

**Schedule X**  
*Items not Deductible*

- |  |         |
|--|---------|
| A. Capital Losses (IRC 1221 OR 1231 property)  | A _____ |
| B. Expenses attributable to non-taxable income ( 5% non-taxable)   | B _____ |
| C. Federally deducted taxes based on income  | C _____ |
| D. Guaranteed payments or accruals to partners/members   | D _____ |
| E. Federally deducted dividends, distributions or amounts set aside<br>for, credited, or distributed to REIT or RIC investors      | E _____ |
| F. Federal deducted amount for qualified self-employed retirement<br>and health and life insurance plans for owners of non-C corps | F _____ |
| G. Rental activities by Ptshp, S corp, LLC, Trusts   | G _____ |
| H. Other (explain and document)  | H _____ |
| I. Total Deductions  | I _____ |

*Items not Taxable*

- |   |         |
|---|---------|
| J. Federal reported income/gains from IRC1221 OR 1231 property dispositions<br>except to the extent the income/gains apply to those described<br>in IRC 1245 or 1250 - not ordinary gains | J _____ |
| K. Federally reported intangible income   | K _____ |
| L. Federal tax credits to the extent they have reduced corresponding<br>operating expenses  | L _____ |
| M. IRC Section 179 expenses   | M _____ |
| N. Charitable contributions of Ptshp, S Corp, LLC   | N _____ |
| O. Other (explain and document)   | O _____ |
| P. Total Deductions   | P _____ |
| Q. Total Adjustment (Line I minus P, enter on Page 1, Line 2)   | Q _____ |

**Schedule Y - Business Apportionment Formula**

	Everywhere	Newark City	%
1. Avg cost of real & tangible personal property Gross annual rentals multiplied by 8 Total Step 1			
2. Gross receipts - sales/work/services performed			
3. Employee wages, salaries and compensation			
4. Total percentages			
5. Average percentage - carry to Page 1, Line 4			

**Mail to:**

Newark City Income Tax  
PO Box 4577  
Newark, OH 43058-4577



**Questions?**

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