



# City of St. Bernard

## Tax Department

110 Washington Avenue, St. Bernard, Ohio 45217

Phone: (513) 242-7710 Fax: (513) 242-5402

E-mail: [tax@cityofstbernard.org](mailto:tax@cityofstbernard.org) [www.cityofstbernard.org](http://www.cityofstbernard.org)

### **INFORMATION TO BUSINESSES - CONTRACTORS - SUBCONTRACTORS**

**RE: BUSINESS RETURNS - FORM BR**

#### **When Are Tax Forms Due?**

Tax forms are due on or before April 15, 2010 (for tax year 2009) and April 15, 2011 (for tax year 2010) or the 15<sup>th</sup> day following the fourth month following the close of your fiscal year end.

#### **Who Must File?**

All corporations, partnerships, trusts, estates or other entities conducting business in, performing services in, or deriving income (or loss) from activities in the City of St. Bernard. All Landlords who charge their tenant \$300.00 or more, must file a tax return whether there is a net profit or loss.

#### **Extensions**

Any taxpayer who has requested a federal extension may request an extension with the City of St. Bernard. The taxpayer shall make the request by filing a copy of the request for federal extension with the City prior to the tax return due date. A valid filed extension extends the due date for filing up to six months from the original due date. Your extension can be denied if you owe the City any tax, penalty, interest, assessment or other charge for late payment or non-payment, or if there is failure to file or failure to provide adequate documentation. **EXTENSIONS ONLY EXTEND THE PERIOD FOR FILING - NOT FOR PAYMENT. PENALTIES AND INTEREST WILL BE ASSESSED.**

#### **Estimates**

An estimate of 100% of the previous year's local tax liability or 90% of the current year liability must be paid in by the fourth quarterly estimated tax due date. Estimated payments are due on the 15<sup>th</sup> day of the fourth, sixth, ninth, and twelfth months of the taxpayer's taxable year.

#### **Operating Losses**

A net operating loss by a business or profession is not deductible from W-2 wages, but may be carried forward for five (5) years to offset business income.

#### **Required Documents**

Your return should be accompanied by a copy of the Federal Return and all pertinent federal schedules that relate to the municipal return. Examples include pages 1 and 2 of Schedule C; pages 1-4 of Schedule 1065 or 1120; pages 1-2 of Schedule E; pages 1-2 of Form 4797; Form 6252; Form 8825, etc. This is required to reconcile the return with that of the Federal Return thereby fulfilling your filing obligation.

Please note that you received this return because you are being carried on our records as an active taxpayer subject to filing a return. If for any reason you are not liable for filing a return, please fax us or mail the return to our office with a letter stating the reason why we should remove your name from our records.

Should you have any questions please contact the tax office at (513) 242-7710, fax (513) 242-5402, email at [tax@cityofstbernard.org](mailto:tax@cityofstbernard.org), or visit our office located at 110 Washington Avenue, St. Bernard, Ohio, between 9-5pm, Monday through Friday. Our tax forms will be available via our website at: <http://www.cityofstbernard.org/taxforms.htm>.

**CITY OF ST. BERNARD – TAX YEAR 2009**  
**BUSINESS INCOME TAX RETURN INSTRUCTIONS**

**Office Phone: (513) 242-7710      Fax Number: (513) 242-5402**  
**Email: [tax@cityofstbernard.org](mailto:tax@cityofstbernard.org)      Website: [www.cityofstbernard.org](http://www.cityofstbernard.org)**

**Mail to: City of St. Bernard, Tax Department, 110 Washington Avenue St. Bernard OH 45217**

This form is to be used by all entities other than sole proprietorships and single member LLCs. Single member LLCs and sole proprietors must file on the Individual Income Tax Return.

**General Instructions:**

If you are filing for any year other than 01/01/2009 through 12/31/2009, indicate the year of the tax return with beginning and ending dates. Fiscal year taxpayers should use the beginning year of the fiscal period as the year of the tax return.

Check the appropriate box that corresponds to the filing status of the business.

**Part A –TAX CALCULATION**

**LINE 1:** Enter the Adjusted Federal Taxable Income (AFTI). As defined by Ohio Revised Code (ORC) 718.01 AFTI means a C corporation's federal taxable income before net operating losses and special deductions. Other business entities must compute the AFTI as if they were a C Corporation. Generally this is the line titled "Income/(Loss) Reconciliation" on the Schedule K of the Form 1120S for Subchapter S Corporations or Line 1 page 4 of the Form 1065 Analysis of Net Income (Loss) for partnerships and Limited Liability Companies.

**LINE 2:** Enter the total adjustments from Schedule X.

**LINE 3:** Line 1 plus or minus Line 2.

**LINE 4:** Enter the apportionment percentage from Step 5 of Schedule Y. (See ORC 718.02)

**LINE 5:** Multiply Line 3 by Line 4.

**LINE 6:** Enter the amount of net operating losses apportioned to St. Bernard. Operating losses may be carried forward for a maximum period of five tax years. Deduct St. Bernard rental losses and loss carry-forwards from prior years. Add St. Bernard rental income. *An explanatory schedule is required to support any adjustments made on this line.*

**LINE 7:** Line 5 plus or minus Line 6.

**LINE 8:** Multiply Line 7 by 2.1% (.021) for calendar year 2009

**LINE 9:** Enter the amount of the overpayment from prior years credited to 2009.

**LINE 10:** Enter the amount of estimated tax payments including any amounts paid with an extension. Estimated payments may be subject to the underpayment of estimated tax penalty. Businesses must remit quarterly estimates equal to 100% of the prior year's tax or 90% of the current year's tax.

**LINE 11:** Enter any other credits applicable.

**LINE 12:** Line 9 plus Line 10 and 11.

**LINE 13:** If Line 8 is greater than Line 12, subtract Line 12 from Line 8, enter the tax due. Amounts less than \$5.00 are not payable.

**LINE 14:** If late, penalty is assessed at the greater of \$50.00 or 1 and ½ % per month. Calculate and enter on this line.

**LINE 15:** If late, interest is assessed at a rate of 1% per month. Calculate and enter on this line.

**LINE 16:** If tax is due, add lines 13, 14, and 15. Enter here and remit payment in full or if making a declaration of estimate to line 20.

**LINE 17:** If line 8 is less than line 12, subtract line 8 from line 12 and enter amount on this line.

**LINE 18:** If amount is greater than \$5.00 and you want the amount refunded enter amount here.

**LINE 19:** If you have an overpayment you want credited to tax year 2010 estimated tax liability enter it here.

## Part B – DECLARATION OF ESTIMATED TAX FOR TAX YEAR 2010

*The taxpayer shall base the estimated tax on the preceding full year's tax liability, or on the preceding three-month period, annualized for the remainder of the year, and updating this estimate by amendment as necessary each succeeding three-month period so that at least 90 percent of the annual St. Bernard tax liability to be ultimately determined shall have been paid by the due date of each installment payment.*

**LINE 20:** Enter the amount of estimated income for 2010 using one of the two safe harbors above.

**LINE 21:** Enter the total tax due for 2010.

**LINE 24:** Divide Line 23 by 4 to determine the amount of estimated tax for the first quarter.

**LINE 22:** Enter the amount of credits from Line 19.

**LINE 23:** Subtract line 22 from line 21.

**LINE 25:** **TOTAL AMOUNT DUE WITH RETURN**      **Combine Line 16 and Line 24**

### Schedule X – Reconciliation with the Federal Return

- A. Enter the amount included in Line 1 of the Business Tax Return related to the sale, exchange, or other disposition of an asset described in section 1221 or 1231 of the Internal Revenue Code.
- B. Enter any taxes on or measured by net income included as a deduction in computing Line 1.
- C. Enter any guaranteed payments or similar payments made to partners, members or other owners that were deducted in arriving at the income amount on Line 1. This includes amounts related to self-employed retirement plans and health or life insurance for an owner or owner-employee.
- D. Enter 5% of the intangible income included in Line 1 of the Business tax return that is not directly related to the sale, exchange or other disposition of property described in Section 1221 or 1231 of the Internal Revenue Code.
- E. Add Real Estate Investment Trust distribution deductions allowed as a deduction in the computation of Federal Taxable Income.
- F. Other. Please provide a complete explanation. Examples: Losses from Flow-Thru Entities, Real Estate Rental Losses.
- G. Add Lines A through F.
- H. Enter the amount of the income that is included on Line 1 of the Business Tax Return that is directly related to the sale, exchange, or other disposition of an asset described in Section 1221 or 1231 or the Internal Revenue Code less the income and gain included in this amount that is described in Section 1245 or 1250 of the Internal Revenue Code.
- I. Enter the total amount of intangible income included in Line 1 of the Business tax return that is not directly related to the sale, exchange or other disposition of property described in Section 1221 or 1231 of the Internal Revenue Code.
- J. If Line 1 of the return includes other income exempt from municipal tax, enter on this Line and explain.
- K. Add Lines H-J.
- L. Deduct Line K from Line G. Insert the net amount as an addition (or deduction) on Part A, Line 2.

### Schedule Y – Apportionment to St. Bernard

- Step 1. The original average +cost of the real and tangible personal property owned or used by the taxpayer in the City of St. Bernard during the taxable period to the original cost of all of the real and tangible personal property owned or used by the taxpayer during the same period, wherever situated.  
Real property shall include property rented or leased by the taxpayer and the value of such property shall be determined by multiplying the annual rental thereon by eight.  
Sum the amounts Located Everywhere and the amounts located in St. Bernard. Divide the St. Bernard total by the Everywhere total.
- Step 2. Total compensation paid during the period to persons employed in the business for services performed in the City of St. Bernard to total compensation paid during the same period to persons employed in the business everywhere. Do not include amounts paid to contractors.
- Step 3. Gross receipts of the business or profession from sales made and services performed during the taxable period in the City of St. Bernard to gross receipts of the business or profession during the same period from sales and services, wherever made or performed.
- Step 4. Calculate the total of the percentage derived in steps 1 through 3.
- Step 5. Divide the total derived in Step 4 by the number of percentage used. Insert this percentage on Part A, Line 4 of the return.