



# GENERAL INFORMATION FOR FILING

## 1. TAX RATES

- a. Convoy 1% effective 1/1/79
- b. Please notify the Tax Office on the tax return sent you or by letter if you have no gross income to report by April 15th.

## 2. WHO SHOULD FILE:

- a. On or before April 15th of each year, all residents 18 years or older are required to file a return with the Tax Office, whether or not tax is due.
- b. No refund is given or remittance is due, if it is less than \$1.01.

## 3. INCOME TAX IS LEVIED UPON THE FOLLOWING

- a. Tax is based on the Medicare wage base. There are no deferrals for retirement plans or 401K, etc.
- b. On all qualifying wages, salaries, commissions, bonus payments, net profits from lease or rental of real estate, or tangible personal property, and other compensation earned during the effective period of the ordinance by residents or non-residents for work done or services performed or rendered in Convoy.
- c. On all net profits of all unincorporated businesses, partnerships, professions, rentals, farm income or other activities conducted by residents or non-residents for activities within the Municipality.
- d. On the net profits of all corporations derived from work done or services performed or rendered and business or other activities conducted in the Municipality.
- e. On all income received as gambling winnings as reported to IRS Form W-2G, Form 5754 and or any other form required by the IRS that reports winnings from gambling, prizes, and lottery winnings.

## 4. WHAT CONSTITUTES NET PROFITS

Net profits shall be determined on the basis of the information used for Federal Income Tax purposes, adjusted to the requirements of the Income Tax Ordinance.

## 5. INCOME NOT TAXABLE

- a. Poor relief, unemployment insurance benefits from state, old age pensions or similar payments received from local, state or Federal Governments or charitable or religious organizations.
- b. Proceeds of insurance, annuities, workman's compensation insurance, social security benefits, pensions, compensation for damages for personal injuries and like reimbursements, not including damages for loss of profits.
- c. Compensation for damages to property by way of insurance or otherwise.
- d. Alimony

- e. Interest and dividends from intangible property.
- f. Military pay and allowances received as a member of the armed forces of the United States and their reserve components.
- g. Any Association, Organization, Corporation, club or trust which is exempt from Federal Taxes or income by reason of its charitable, religious, educational, literary, scientific, etc. purposes.
- h. High School students, age 18 or under in the taxable year.
- i. Ministers housing allowance.

## 6. MUNICIPAL CREDITS:

**Convoy:** allowed credit for taxes withheld and paid to another Ohio Municipality or City up to and including 100% of 1.0% and Indiana County tax is up to an including 100% of 1.0%

Taxes withheld at a rate greater than that of your Municipality may not be used as a credit against other taxable income.

7. Do not fail to sign and date your return before submitting it to the Income Tax Office. A return is not "filed" within the meaning of the law, until signed by the taxpayer or an agent legally authorized to sign tax returns or such taxpayer.
8. **Legible copies of each W-2 or 1099 and Schedules must be attached to your return. A return will not be considered "filed" unless the above mentioned are included.**
9. **INTEREST: 1% per month or fraction thereof.**

**PENALTY: At 1% per month or fraction thereof for the tax return and each required estimated payment not filed timely. Maximum 15% or minimum \$25.00 charged.**

10. The failure of any employer or person to receive or procure a return, declaration or other required form shall not excuse him from paying or withholding or remitting the tax.
11. **BUSINESS RETURNS ONLY:** Local independent contracts and non employee expenditures claimed on the Convoy Income Tax Return must have copies of 1099Mics returns attached or a fully written explanation submitted before the expense will be allowed.
12. Net losses, incurred in business or rental activities, or other taxable activity incurred in any taxable year beginning on or after January 1, 2007 apportioned to this village may not be used to offset wages, salaries, commissions or other compensation.

# DECLARATION INFORMATION

## 1. WHO MUST MAKE A DECLARATION - A declaration of estimated tax for the next year must be made by:

- a. Every Resident of the municipality who expects to receive any taxable income which will not be subject to withholding from wages, salaries, commissions and other personal service compensation, whether such income results from labor performed, or services rendered within or without the Municipality.
- b. Every non-resident of the Municipality whose entire income tax liability is not withheld from wages, salaries, commissions and other personal service compensation, whether such income results from labor performed, or services rendered within or without the Municipality.
- c. Every Business or Professional Entity, including individual proprietorships, members of partnerships and/or associations and other businesses and income producing enterprises, conducted in the Municipality by Non Residents.
- d. Every Corporations conduction activities in the Municipality
- e. Fiduciaries of Active Trusts or Estates the operation of which produces income within the Municipality.

## 2. WHEN AND WHERE TO FILE DECLARATION - The declaration for calendar year must be filed on or before April 15, with the Convoy Income Tax Department at 123 South Main Street, P.O. Box 310, Convoy OH 45832.

## 3. PAYMENTS OF ESTIMATED TAX – The estimated tax shall be paid in equal quarterly payments. Quarterly payments are due and shall be paid April 15, July 31, October 31, and January 31. The estimates may be amended at the time of making any quarterly payment. Checks or money orders should be made payable to the Village of Convoy.



**SCHEDULE W**

ATTACH W-2  
HERE

**ALLOWABLE LOSS CARRY FORWARD**

YEAR	Loss attributed to this municipality
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
<b>TOTAL</b>	\$ _____ carry to line 5, page 1

**SCHEDULE X RECONCILIATION WITH FEDERAL INCOME TAX RETURN**

(SCHEDULE X PERTAINS ONLY TO INCOME REPORTED ON LINE 2)

- A. ITEMS NOT DEDUCTIBLE (FROM LINE J SCHEDULE X BELOW) .....ADD \_\_\_\_\_
- B. ITEMS NOT TAXABLE (FROM LINE O SCHEDULE X BELOW) .....DEDUCT \_\_\_\_\_
- C. ENTER TOTAL OF LINE A AND B .....(enter on line #3, pg. 1) ⇒ \$ \_\_\_\_\_

ITEMS NOT DEDUCTIBLE	ADD	ITEMS NOT TAXABLE	DEDUCT
A. Capital Losses Deducted (Excluding ordinary losses) .. \$ _____		I. Capital Gains (Excluding Ordinary Income)..... \$ _____	
B. Expenses Attributable to Non-taxable Income (5%) .. _____		J. Interest Earned or Accrued .....	_____
C. Taxes Based on Income .....	_____	K. Dividends .....	_____
D. Net Operating Loss Deduction per Federal Return ... _____		L. Income from Patents and Copyrights	
E. Payments to Partners .....	_____	If Subject to Ohio Intangible Tax .....	_____
F. Special Deduction .....	_____	M. Jobs Credit .....	_____
G. Shareholders'/Partners' Retirement Plans .....	_____	N. Other Income Exempt from City Tax (Explain) .....	_____
H. Shareholders'/Partners' Health and/or Life Insurance .. _____		O. Total Deductions (Enter as Line B above) .....	_____
I. Other Expenses Not Deductible (Explain) .....	_____		
J. Total Additions (Enter as Line A above) .....	_____		

**SCHEDULE Y BUSINESS ALLOCATION FORMULA**

	A. Located Everywhere	B. Located in this Municipality	C. Percentage (B divided by A)
Step 1. Average original cost of real and tangible personal property .....	\$ _____	\$ _____	
Gross Annual rentals paid multiplied by 8 .....	_____	_____	
Total Step 1 .....	_____	_____	_____ %
Step 2. Gross receipts from sales made and/or work or services performed .....	_____	_____	_____ %
Step 3. Wages, salaries, and other compensation paid .....	\$ _____	\$ _____	_____ %
4. Total percentages .....			_____ %
5. Average percentage (by number of percentages used) .....			Enter on Line 4b, Page 1 _____ %

**Business Allocation Formula**

**SCHEDULE Y** A business allocation formula consisting of the average of property, gross receipts and wages paid, to be used by business entities not required to pay tax on entire net profits, by reason of doing business both inside and outside the Municipal city limits.

**SPECIAL NOTE:** Sales and gross receipts in the Municipality (Step 2) mean:

1. All sales and tangible personal property which is shipped from the Municipality to purchasers outside of the Municipality regardless of where title passes if the taxpayer is not, through its own employees, regularly engaged in the solicitation or promotion of sales at the place where delivery is made.
2. All sales of tangible personal property which is delivered within the Municipality regardless of where titles passes, even though transported from a point outside the Municipality, if the taxpayer is regularly engaged through its own employees in the solicitation and the sales result from such solicitation or promotion.
3. All sales of tangible personal property which is delivered within the Municipality, regardless of where title passes, if shipped or delivered from a stock of goods within the Municipality.

**SCHEDULE Z**

**Income Other than Wages and Allowable Employee Business Expens**

Schedule C line 31 .....	\$ _____
Schedule E line 22 .....	\$ _____
Schedule F line 36 .....	\$ _____
Schedule K (1065 and 1120S) .....	\$ _____
Form 4835 line 32 .....	\$ _____
Form 1099 .....	\$ _____
Form 1120 line 30 .....	\$ _____
Form 1120S line 21 .....	\$ _____
Form 1065 line 22 .....	\$ _____
Form 2106 line 10 .....	_____ x
Schedule A line 23 .....	= _____ x
Schedule A line 26 .....	= _____ ( _____ )
<b>TOTAL Carry to Line 2, Page 1 .....</b>	<b>\$ _____</b>

Attach copies of all forms and schedules.



**SCHEDULE W**  
**ALLOWABLE LOSS CARRY FORWARD**

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C. Taxes Based on Income . . . . . _____		K. Dividends . . . . . _____	
D. Net Operating Loss Deduction per Federal Return . . . _____		L. Income from Patents and Copyrights	
E. Payments to Partners . . . . . _____		If Subject to Ohio Intangible Tax . . . . . _____	
F. Special Deduction . . . . . _____		M. Jobs Credit . . . . . _____	
G. Shareholders'/Partners' Retirement Plans . . . . . _____		N. Other Income Exempt from City Tax (Explain) . . . . . _____	
H. Shareholders'/Partners' Health and/or Life Insurance . . _____		O. Total Deductions (Enter as Line B above) . . . . . _____	
I. Other Expenses Not Deductible (Explain) . . . . . _____			
J. Total Additions (Enter as Line A above) . . . . . _____			

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Gross Annual rentals paid multiplied by 8 . . . . . _____	_____	_____	
Total Step 1 . . . . . _____	_____	_____	_____ %
Step 2. Gross receipts from sales made and/or work or services performed . . . . . _____	_____	_____	_____ %
Step 3. Wages, salaries, and other compensation paid . . . . . \$ _____	_____	\$ _____	_____ %
4. Total percentages . . . . . _____			_____ %
5. Average percentage (by number of percentages used) . . . . . Enter on Line 4b, Page 1 _____ %			

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Form 1120S line 21 . . . . .	\$ _____
Form 1065 line 22 . . . . .	\$ _____
Form 2106 line 10 . . . . .	_____ x
Schedule A line 23 _____ = _____ x	
Schedule A line 26 _____ = _____ ( _____ )	
<b>TOTAL</b> Carry to Line 2, Page 1 . . . . .	\$ _____

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