

File with:
INCOME TAX DEPARTMENT
P.O. BOX 42
LISBON, OHIO 44432

LISBON INCOME TAX YEAR _____

Paid with Return _____
 Declaration _____
 Check _____
 Cash _____

Make Checks and Money Orders
 Payable To:
LISBON INCOME TAX
 Resident Non-Resident
 _____ Check here if name or address
 has been changed

or
 Fiscal Period _____ to _____
CALENDAR YEAR TAXPAYERS FILE
ON OR BEFORE APRIL 15
FISCAL and PARTIAL YEARS FILE
WITHIN 105 DAYS of end of period

FILE TAX RETURNS AND PAY TAXES
PROMPTLY TO AVOID PENALTIES

Soc. Sec. No. (H) Single M _____
 Soc. Sec. No. (S) Single F _____
 Fed I.D. No. _____

Tax Office Copy

IF MOVED SINCE THE PREVIOUS FINAL RETURN WAS DUE GIVE DATE OF MOVE. _____

INTO CITY _____
 OUT OF CITY _____

Check your status as a taxpayer: Employee Professional Proprietor Partner Corporation Other

Larger Figure On W-2 Used For Local Tax

ATTACH ALL W-2 COPIES HERE

1. Gross Compensation (Attach All W-2's)	_____	\$ _____
2. Net Profit from Rentals - (Schedule G, Page 2)	_____	\$ _____
3. Net Profit from Business or Profession - (Schedule C, Page 2)	_____	\$ _____
4. Income from Partnerships, etc., including Farms - (Schedule H, Page 2)	_____	\$ _____
5. Total income subject to Lisbon Income Tax (Total Lines 1, 2, 3, 4)	_____	\$ _____
6. Lisbon Tax, 1 1/2% of Item 5	_____	\$ _____
7. Payments on Declaration of Estimated Lisbon Income Tax	\$ _____	\$ _____
8. Lisbon Tax withheld from my wages	\$ _____	\$ _____
9. Income Tax paid another City - (Tax Credit cannot exceed 1 1/2% of gross earnings in other city.)	\$ _____	\$ _____
10. Other credits allowed - Explain _____	\$ _____	\$ _____
Total Credits Claimed		_____
11. Balance of Tax Due (Make check to: Lisbon Income Tax)	_____	\$ _____
12. If your payments (item 7) are larger than your tax (item 6) enter Overpayment here	_____	\$ _____
13. Penalty \$ _____, interest \$ _____ (Enter amount of penalty and interest here)	_____	\$ _____
14. Total Amount Due	_____	\$ _____
15. Use X to indicate whether overpayment is to be refunded to you <input type="checkbox"/>		
or applied against your Declaration of Estimated Tax <input type="checkbox"/>		

DECLARATION OF ESTIMATED TAX FOR YEAR _____

1. Total estimated income subject to tax \$ _____ Multiply by tax rate 1.5% for gross tax	_____	\$ _____
2. Less any city tax to be withheld	_____	\$ _____
3. Balance of Lisbon Income Tax declared	_____	\$ _____
4. Less credits: A. Overpayment on previous year's return	_____	\$ _____
B. Previous payment, if this is an amended estimated	_____	\$ _____
5. Unpaid balance of net tax due	_____	\$ _____
6. Attach check or M.O. for amount due (At least 25% of Line 5)	_____	\$ _____

ESTIMATE - PAY THIS AMOUNT

The undersigned declares that this return (and accompanying schedules) is a true, correct and complete return for the taxable period stated and that the figures used herein are the same as used for Federal Income Tax purposes.

Signature of Person Preparing If Other Than Taxpayer _____ Date _____ Signature of Taxpayer or Agent _____ Date _____

SCHEDULE C - PROFIT (or loss) FROM BUSINESS OR PROFESSION

TO BE USED ONLY IF COPY OF FEDERAL RETURN IS NOT ATTACHED

(REQUIRED STATEMENTS MUST BE ATTACHED)

Business Name	Business Address
1. TOTAL RECEIPTS, LESS ALLOWANCES, REBATES AND RETURNS	\$ _____
2. LESS: (a) Cost of Goods Sold, or (b) Cost of Operations, whichever is applicable (indicate labor charges included \$ _____, if none, mark 0)	_____
3. GROSS PROFIT FROM SALES, ETC., (line 1 less line 2)	_____
4. DIVIDENDS \$ _____ INTEREST \$ _____ ROYALTIES \$ _____	_____
5. RENTS RECEIVED, IF CONNECTED WITH BUSINESS (See Schedule G below*)	_____
6. OTHER BUSINESS INCOME (SPECIFY)	_____
7. TOTAL BUSINESS INCOME BEFORE DEDUCTIONS	\$ _____
BUSINESS DEDUCTIONS	
8. Compensation of Officers	\$ _____
9. Salaries and Wages Not Deducted Elsewhere	_____
10. Commission Not included in 8 or 9	_____
11. Payments to Partners	_____
12. Rents (Paid to _____)	_____
13. Interest on Business Indebtedness	_____
14a. City and State Income Taxes	_____
14b. Other Business Taxes	\$ _____
15. Legal and Professional Fees	_____
16. Bad Debts	_____
17. Depreciat'n, Amortization, Deplet'n	_____
18. Repairs	_____
19. Advertising & Promotion	_____
20. Auto, Truck & Travel	_____
21. Other	_____
22. TOTAL BUSINESS DEDUCTIONS (total of 8 to 21)	\$ _____
23. NET PROFIT (or loss) FROM BUSINESS OR PROFESSION (line 7 less 22)	\$ _____
24. Add Items Not Deductible (Schedule X)	_____
25. Deduct Items Not Taxable (Schedule X)	_____
26. Adjusted Net Income	\$ _____
27. Amount allocable to Lisbon if Schedule Y is used _____ %	_____
28. Net Profit subject to Lisbon Income Tax (enter on line 3, page 1)	\$ _____

SCHEDULE G - INCOME FROM RENTS (If not included in Schedule C)

(Report only if total Gross Rental Income exceeds \$100.00 per month)

*If Included in Schedule C, Line 5, Kind and Location of Each Property Must Be Shown in Schedule G

1. Kind and Location of Property	2. Amount of Rent	3. Depreciation	4. Repairs	5. Other Expenses	6. Net Income (or Loss)
	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

TOTAL RENTAL INCOME - (Enter Total On Line 2, Page 1)

SCHEDULE H - OTHER INCOME NOT INCLUDED IN SCHEDULES C or G.

PARTNERSHIPS, ESTATES, TRUSTS, GAMING, WAGERING, LOTTERY, FEES, ETC. (Do not include interest, dividends, insurance and social security)

RECEIVED FROM	FOR (DESCRIBE)	AMOUNT
		\$ _____

Farm Income: From Federal Income Return Form 1040

TOTAL INCOME SCHEDULE H (Enter Total On Line 4, Page 1)

FOR BUSINESS ACCOUNTS SCHEDULE X - RECONCILIATION WITH FEDERAL INCOME TAX RETURN

ITEMS NOT DEDUCTIBLE	ADD	ITEMS NOT TAXABLE	DEDUCT
a. Net loss from sale, exchange or other disposition of capital or other assets	\$ _____	l. Net gain from sale, exchange or other disposition of capital or other assets	\$ _____
b. Interest and/or Other Expense incurred in the production of non-taxable income	_____	m. Interest earned or accrued	_____
c. Income Taxes	_____	n. Dividends (less Federal exclusion)	_____
d. Net operating loss deduction per Federal return	_____	o. Income from Patents and Copyrights	_____
e. Payment to partners	_____	p. Other Income exempt from Lisbon Tax (explain)	_____
f. Other expenses not deductible (explain)	_____		_____
g. Total Additions (enter on Line 24)	\$ _____	q. Total Deductions (enter on Line 25)	\$ _____

SCHEDULE Y - BUSINESS ALLOCATION FORMULA

	a. Located Everywhere	b. Located in Lisbon	c. Percentage (b - a)
STEP 1. Average Value of Real & Tangible Personal Property Gross Amount 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, Etc. Paid	_____	_____	_____ %
4. Total Percentages	_____	_____	_____ %
5. Average Percentage (Line 4 divided by number of percents)	_____	_____	_____ %