

DECLARATION OF ESTIMATED 2016 BOWLING GREEN INCOME TAX

To be filed with Commissioner of Taxation, P.O. Box 189, Bowling Green, OH 43402 on or before April 18, or within 3½ months after the close of a fiscal year. Questions? Call (419) 354-6288 or visit our website at www.bgohio.org.

FOR CALENDAR YEAR FILERS: DUE DATE IS APRIL 18TH

ESTIMATED PAYMENTS ARE REQUIRED IF LINE 6, BELOW, EXCEEDS \$200.

For Calendar Year or _____ months ending _____

Corporate or Trade Name, name of responsible official, proprietor, or individual and address as they appear on our records. Make any necessary corrections.

NAME:
C/O:
ADDRESS:
CITY:

PENALTY & INTEREST
Understatement of estimated tax or payment of the tax installment later than the middle of the 4th, 6th, 9th, and 12th months causes the taxpayer to be liable for a penalty of 15% of the amount owed plus 0.42% interest per month or portion thereof.
Bowling Green Code Section 95A.07 and 95A.10

SOCIAL SECURITY NUMBERS
Yours _____
Spouse _____

A. City of Residence _____ Your Employer _____
NAME WORK CITY
Nature of Business _____ Spouse's Employer _____
NAME WORK CITY

B. 1. Total Estimated Income subject to Bowling Green Income Tax\$ _____
2. Bowling Green Income Tax, **2.00%** of amount shown on Line 1 \$ _____

TAX CREDITS

3. a. Tax to be withheld and remitted to Bowling Green.....\$ _____
b. Tax to be withheld for another city(s) TAX (50% times the lower rate).....\$ _____
4. a. Tax (not withheld) properly paid to another city (50% times the lower rate).....\$ _____
5. TOTAL CREDITS (total lines 3a, 3b, 4a)..... \$ _____
6. NET ESTIMATED TAX DUE (Line 2 minus Line 5)..... \$ _____
7. Taxes Due with Estimate (Ordinarily 25% of Line 6)\$ _____
8. Less last year's over payment or previous estimated payments.....\$ _____
9. Taxes Due on this Estimate (Line 7 less Line 8) \$ _____
10. Add late fees:
a. Interest (0.42% per month or portion thereof).....\$ _____
b. Penalty (15% of balance past due).....\$ _____
11. Taxes and late fees. Payment to the City of Bowling Green must accompany this form \$ _____

C. I/WE declare that this declaration has been examined by me / us and to the best of my / our knowledge and belief is a true, correct and complete declaration of estimated income and/or net profits subject to Bowling Green income tax for the period above stated.

(Signature of Taxpayer, Partner, Officer or Agent)

(Date)

(Signature of Taxpayer's wife or husband if this is a joint declaration)

(Date)

▲ DETACH TOP PORTION AND ENCLOSE WITH YOUR PAYMENT

TEAR
HERE

▼ RETAIN BOTTOM PORTION AS YOUR WORKSHEET

B. 1. Total Estimated Income subject to Bowling Green Income Tax\$ _____
2. Bowling Green Income Tax 2.00% of amount shown on Line 1 \$ _____

TAX CREDITS

3. a. Tax to be withheld and remitted to Bowling Green.....\$ _____
b. Tax to be withheld for another city(s) TAX (50% times the lower rate).....\$ _____
4. a. Tax (not withheld) properly paid to another city (50% times the lower rate).....\$ _____
5. TOTAL CREDITS (total lines 3a, 3b, 4a)..... \$ _____
6. NET ESTIMATED TAX DUE (Line 2 less Line 5)..... \$ _____
7. Taxes Due with Estimate (Ordinarily 25% of Line 6)\$ _____
8. Less last year's over payment or previous estimated payment.....\$ _____
9. Taxes Due on this Estimate (Line 7 less Line 8) \$ _____
10. Add late fees:
a. Interest (0.42% per month or portion thereof)\$ _____
b. Penalty (15% of balance past due).....\$ _____
11. Taxes and late fees, paid with this estimate..... \$ _____