

NOTE: A copy of appropriate Federal Schedule is requested for Schedules C and E, and required for Schedules D, F and Z.

SCHEDULE C - PROFIT OR LOSS FROM BUSINESS OR PROFESSION

Business Name _____ Owner's or Partner's Names _____

Date Business Commenced _____

Business Address _____

- 1. TOTAL RECEIPTS, LESS ALLOWANCES, REBATES AND RETURNS\$
2. LESS Cost of Labor \$..... Material, supplies and other costs \$.....
3. GROSS PROFIT FROM SALES, ETC., (Line 1 less Line 2)\$
4. INTEREST \$..... OTHER BUSINESS INCOME (Specify)\$
5. TOTAL BUSINESS INCOME BEFORE DEDUCTIONS\$

BUSINESS DEDUCTIONS

- 6. ADVERTISING AND PROMOTION\$
7. AUTO TRUCK AND TRAVEL\$
8. INTEREST ON BUSINESS INDEBTEDNESS\$
9a. TAXES BASED ON INCOME\$
b. OTHER BUSINESS TAXES\$
10. SALARIES AND WAGES\$
11. DEPRECIATION, AMORTIZATION\$
12. RENTS (Paid to.....) \$.....
13. OTHER (List if over 10% of Line 14)\$
14. TOTAL BUSINESS DEDUCTIONS (Total of Lines 6 to 13)\$
15. NET PROFIT (OR LOSS) FROM BUSINESS OR PROFESSION (LINE 5 LESS LINE 14)\$

SCHEDULE D - TOTAL FROM FEDERAL SCHEDULE D

Form 4797 (Attach copy) Ordinary Gains and Losses only \$.....

SCHEDULE E - RENTAL AND OTHER INCOME

From Partnerships, Commissions, Fees, Tips, Etc.

Table with 6 columns: Location of Property, Amount of Rent, Depreciation, Repairs, Other Expenses, Net Income. Includes a Totals row.

Other Income - Partnerships, Fees, Tips, Etc. (Do not include interest or dividends) Received From For (describe)

.....\$
.....\$

SCHEDULE F - FARM INCOME

Attach Copy of Federal Schedule F

Location of Farm _____ Net income (or loss) Schedule F \$.....

TOTALS Schedules C, D, E and F (Enter on page 1, Line 2)\$

SCHEDULE X - RECONCILIATION

For Use ONLY if income on Line 2, page 1, is from Federal Tax Return

Items Not Deductible

- a. Capital Loss (Excluding Ordinary Losses)\$
b. Expenses applicable to non-taxable income
c. All Income Taxes paid or accrued
Net operating loss deduction per Fed. Return
e. Payments to partners (from Federal Form 1065)
f. Sick pay not included in Line 1 above
h. Total additions (enter as Line 5a, page 1)\$

Items Not Taxable

- n. Capital Gain (Excluding Ordinary Gains)\$
o. Interest earned or accrued
p. Dividends (less Federal exclusion)
q. Income from Patents and Copyrights
r. Other Income exempt from Willard
Income Tax (attach explanation)
s. Unreimbursed travel expense (attach Federal Form 2106)
z. Total Deductions (enter as Line 5b, page 1)\$

SCHEDULE Y - BUSINESS ALLOCATION FORMULA

Table with 3 columns: a. Located Everywhere, b. Located in This Municipality, c. Percentage (b ÷ a). Includes steps 1 through 5 for calculating average value and percentages.

SCHEDULE Z - PARTNERSHIP ENTITY TAXABLE INCOME

Federal Form 1065 including Schedules must be provided\$