

Declaration of Estimated Income Tax
(also serves as Voucher 1)**2018**

FOR THE YEAR _____

BEGINNING _____

ENDING _____

Check this box if:

☐**AMENDED**

tax year _____

Name _____ EIN/FID No. _____

Address _____

City _____ State _____ Zip Code _____

Trade Name _____

Nature of Business _____

CITY OR CITIES OF INCOME:

1 - _____

2 - _____

3 - _____

4 - _____

Filing Status - check only one

☐ C-Corporation☐ S-Corporation☐ Fiduciary (Trust and Estates)☐ Partnership/Association
(do not use this form for Schedule C filers)

Annualize Installment Method Not Permitted. The Columbus City Codes do not allow for calculating estimated tax payments based on an "annualized income installment method". The Columbus City Codes [§362.07] requires that each estimated tax payment "be accompanied by a payment of at least one-fourth (1/4) of the estimated annual tax" and that a declaration of estimated tax which is less than **90%** of the tax shown on the final return shall not be considered filed in good faith. Thus, even if your business is seasonal, City estimated tax payments must be based on estimated annual taxable income.

Column A	C O D E	Column B Estimated Taxable Income	TAX RATE	Column C Estimated Tax Due
North Pickaway County JEDD	20		2.5%	
Prairie-Obetz JEDD	21		2.5%	
Prairie Township JEDD	22		2.5%	

1. TOTAL NET ESTIMATED TAX DUE (must equal the total of Column C)

1

2. LESS: overpayment credits from previous year return

2

3. CREDIT previous declaration payments (if an amended declaration)

3

3A. TOTAL CREDITS (add Lines 2 and 3).....

3A

4. UNPAID BALANCE DUE (subtract Line 3A from Line 1).....
due on or before APRIL 15TH - (a minimum 25% of Line 1 due)

4

5. LESS: amount paid with this declaration (attach check or money order)

5

6. ESTIMATED TAX BALANCE PAYABLE.....
(payable in equal installments for each quarter) use Form BR-18

6

(June, September & December)

SIGNATURE

I declare that this declaration has been examined by me and to the best of my knowledge and belief is a true, correct and complete declaration of estimated income subject to city income tax for the period stated above.

**Sign
Here**
Signature
of Officer

Title

Date

This Form is Voucher 1If you are required to make estimated tax payments, you
are required to file this form.

Make a copy of this form for your records.

MAILING INFORMATION**NO Payment Enclosed:**Mail to: Columbus Income Tax Division
PO Box 182437
Columbus, Ohio 43218-2437

Rev. 6/16/17

Payment Enclosed:Make payable to: CITY TREASURER
Mail to: Columbus Income Tax Division
PO Box 182158
Columbus, Ohio 43218-2158