



2008
VILLAGE OF WOODLAWN
INCOME TAX RETURN

INCOME TAX DEPARTMENT
 10141 WOODLAWN BLVD.
 WOODLAWN, OHIO 45215-1324
TAX OFFICE PHONE: (513) 771-4008
 www.beautifulwoodlawn.us

TAX OFFICE USE ONLY

FISCAL YEAR END _____

FILING REQUIRED EVEN IF NO TAX DUE

FILE ON OR BEFORE APRIL 15, 2009

IF TAXPAYER AND SPOUSE ARE FULLY RETIRED AND WITHOUT TAXABLE INCOME, PLACE AN X IN THIS BOX. SIGN, DATE AND RETURN THIS FORM BY THE DUE DATE.

TAXPAYERS NAME(S) AND ADDRESS (CORRECT IF NECESSARY)

BUSINESS ACTIVITY _____ Name & Address _____

INDICATE WHETHER:
 CORP'N SOLE PROP.
 PTNRSHP EMPLOYEE
 IF OTHER, EXPLAIN _____

Taxpayer Social Security No. _____
 Spouse S.S. # _____
 Home Phone No. _____
 Work Phone No. _____
 Business Fed. I.D. No. _____
 Employer _____
 Occupation _____

Check your status as a taxpayer:
 Resident:
 Full Yr.
 Part Yr.
 Non-Resident

LIST PERSONS 18 YEARS OF AGE & OLDER RESIDING IN YOUR HOUSEHOLD

NAME _____ AGE _____ SOCIAL SECURITY NO. _____

IF YOU MOVED DURING CURRENT YEAR PLEASE GIVE DATE:

Moved In _____ Moved Out _____

ATTACH W2's TO BACK OF FORM

OFFICE USE ONLY

1. QUALIFYING WAGES (USUALLY MEDICARE WAGE BOX 5 OF W-2). TIPS AND OTHER EMPLOYEE COMPENSATION- ATTACH W-2 FORM(S) **AND PAGE ONE OF APPLICABLE FEDERAL FORM 1040.** \$ _____
2. PROFIT OR LOSS FROM INCOME OTHER THAN WAGES FROM PAGE 2, LINE 28 & OTHER ADJ. \$ _____
3. TOTAL TAXABLE INCOME (LINES 1 and 2) \$ _____
4. MULTIPLY TAXABLE INCOME BY 2% TAX AMOUNT BEFORE CREDITS \$ _____
5. CREDITS:
 - A. WOODLAWN TAX WITHHELD BY EMPLOYER(S) \$ _____
 - B. PAYMENTS MADE 2008 DECLARATION OF ESTIMATED TAX INCLUDING PRIOR YEAR OVERPAYMENT \$ _____
 - C. CREDIT ALLOWED FOR TAX PAID TO OTHER MUNICIPALITY & COUNTIES (RESIDENTS ONLY) (NOT TO EXCEED 2% OF THAT PORTION TAXED PER W-2 \$ _____
 - X. TOTAL CREDITS \$ _____
6. IF LINE 4 IS GREATER THAN LINE 5X, PAYMENT OF BALANCE MUST ACCOMPANY THIS RETURN **2008 TAX DUE** \$ _____
No taxes or refunds of less than \$1.01 shall be collected or refunded.
7. OVERPAYMENT CLAIMED (IF LINE 5X EXCEEDS LINE 4) \$ _____
 ENTER AMOUNT OF LINE 7 YOU WANT CREDITED TO NEXT YEAR'S TAX \$ _____ OR REFUNDED \$ _____

NOTICE: By law, all refunds and credits, in excess of \$10.00 are being reported to IRS.

DECLARATION OF ESTIMATED TAX FOR YEAR 2009 (MANDATORY IF ESTIMATED LIABILITY IS \$100.00 OR MORE)

8. TOTAL INCOME SUBJECT TO TAX \$ _____ MULTIPLY BY TAX RATE OF 2% FOR GROSS TAX OF ... \$ _____
9. LESS EXPECTED TAX CREDIT FROM EMPLOYER WITHHOLDING AND/OR PAYMENTS TO OTHER MUNICIPALITY (NOT TO EXCEED 2% OF THAT PORTION TAXED) \$ _____
10. NET TAX DUE FOR 2009 (LINE 8 LESS LINE 9) \$ _____
 - a. OVERPAYMENT FROM PRIOR YEAR (FROM LINE 7 ABOVE) \$ _____
11. AMOUNT PAID WITH THIS DECLARATION (NOT LESS THAN 1/4 OF LINE 10, LESS LINE 10a) \$
12. TOTAL OF THIS PAYMENT (LINE 6 PLUS LINE 11) (MAKE CHECKS PAYABLE TO VILLAGE OF WOODLAWN) \$

FOR TAX OFFICE USE ONLY
 Tax \$ _____ Penalty \$ _____ Interest \$ _____ Late _____ Months TOTAL DUE (Tax & Assessments) \$ _____

I CERTIFY THAT I HAVE EXAMINED THIS RETURN (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE. IF PREPARED BY A PERSON OTHER THAN TAXPAYER, THE DECLARATION IS BASED ON ALL INFORMATION OF WHICH PREPARER HAS ANY KNOWLEDGE.

Signature of Taxpayer _____ Date _____
 Signature of Taxpayer _____ Date _____
 Signature of Person Preparing if Other Than Taxpayer _____ Date _____
 Address _____ Telephone Number _____

May we discuss this return with the preparer shown to the left?
 Yes No

TO PAY BY CREDIT CARD: Enter number and expiration date fully and accurately

MasterCard No. _____
 VISA No. _____

EXP. DATE: _____ / _____ AMOUNT AUTHORIZED: \$ _____
 PHONE NUMBER: (H) _____ (W) _____
 CARDHOLDER SIGNATURE: _____