

File with
INCOME TAX DEPARTMENT
 14860 N. State Ave.
 P.O. Box 1019
 Middlefield, OH 44062
 Phone (440) 632-5248

Make checks and Money Orders
 Payable to
 Village of Middlefield

Village of Middlefield
 WWW.MIDDLEFIELDOHIO.COM
20__ INCOME TAX RETURN

Fiscal Period _____ to _____
 CALENDAR YEAR TAXPAYERS FILE ON OR BEFORE APRIL 15
 FISCAL YEARS FILE
 WITHIN 105 DAYS OF END OF PERIOD

Check your status as a taxpayer
 Employee Partner
 Proprietor Corporation
 Other-Explain _____ Retired

Resident Non-Resident

Did you file a return last year?
 Yes No

Under 18-DOB _____
 Attach proof _____

TAXPAYERS NAME AND ADDRESS

ACCOUNT NUMBER

YOUR NAME, ADDRESS AND SOCIAL SECURITY NUMBER, IF PRINTED ABOVE, ARE AS THEY APPEAR ON OUR RECORDS. MAKE CORRECTIONS WHERE NECESSARY. IF YOU ARE FILING A JOINT RETURN, INCLUDE YOUR SPOUSE'S SOCIAL SECURITY NUMBER.

IF MOVED SINCE THE PREVIOUS FINAL RETURN WAS DUE, GIVE IN DATE: _____ OUT DATE: _____
RENTING: ___ Y ___ N Name of Landlord: _____

YOUR SOCIAL SECURITY NO.: _____
 SPOUSE'S SOCIAL SECURITY NO.: _____
 FEDERAL ID NO.: _____
 TELEPHONE HOME: _____
 BUSINESS: _____

THIS SPACE FOR TAX OFFICE USE ONLY

F
 D
 P & I
 Check
 Cash
 Refund Requested

1. WAGES, SALARIES, TIPS AND OTHER EMPLOYEE COMPENSATION (ATTACH ALL W-2's)
 1A _____ 1B _____ \$ _____
2. OTHER TAXABLE INCOME FROM PAGE 2 \$ _____
3. TAXABLE INCOME: LINE 1 PLUS LINE 2 \$ _____
4. MUNICIPAL TAX, 1% OF LINE 3 FOR CALENDAR YEAR 2009 \$ _____
5. CREDITS:
 A. TAX WITHHELD BY EMPLOYER FOR MIDDLEFIELD..... \$ _____
 B. ESTIMATED TAX PAID TO MIDDLEFIELD..... \$ _____
 C. PRIOR YEAR OVERPAYMENTS..... \$ _____
 D. TOTAL CREDITS..... \$ _____
6. TAX DUE (IF LINE 4 IS GREATER THAN LINE 5D, PAYMENT OF BALANCE MUST ACCOMPANY THIS RETURN) \$ _____
7. PENALTY \$ _____ LATE PAYMENT PENALTY \$ _____ TOTAL \$ _____
8. **AMOUNT DUE BEFORE ESTIMATED TAXES** \$ _____
9. OVERPAYMENT: REFUNDED \$ _____ OR CREDITED TO EST. TAXES \$ _____

DECLARATION OF ESTIMATED TAXES

10. INCOME SUBJECT TO TAX \$ _____ (A) \$ TIMES TAX RATE OF 1% FOR GROSS TAX OF..... \$ _____ (B)
11. LESS EXPECTED TAX CREDITS:
 A. TAX WITHHELD BY EMPLOYER FOR MIDDLEFIELD \$ _____
 B. TOTAL CREDITS \$ _____
12. NET TAX DUE (LINE 10B LESS LINE 11C)..... \$ _____
 A. OVERPAYMENT FROM PRIOR YEAR(S)..... \$ _____
13. **AMOUNT PAID WITH THIS DECLARATION (1/4 LINE 12, LESS LINE 12A)** \$ _____
14. BALANCE OF ESTIMATED TAX \$ _____
15. **TOTAL AMOUNT DUE \$ _____ (LINE 8) + \$ _____ (LINE 13) =** _____

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 & COMPLETE. IF PREPARED BY PERSON OTHER THAN TAXPAYER, THE DECLARATION IS BASED ON ALL INFORMATION OF WHICH PREPARER HAS ANY KNOWLEDGE.

Signature of Preparer _____ Date _____ Signature of Taxpayer _____ Date _____
 Telephone No. _____ Signature of Taxpayer _____ Date _____

PENALTIES WILL BE ASSESSED FOR FAILURE TO PAY ON AN ESTIMATE, FAILURE TO FILE A RETURN, OR AN EXTENSION OR PAY TAX DUE BY APRIL 15TH.

May we discuss this return with the Tax Preparer? Yes No

DO NOT USE THE SCHEDULES BELOW IF YOUR ONLY SOURCE OF INCOME IS FROM W-2 WAGESYOU ARE NOT ENTITLED TO DEDUCT EXPENSES FROM SUCH WAGES

SCHEDULE C - BUSINESS INCOME

- 1. ATTACH COPIES OF FEDERAL SCHEDULES (ENTER TOTAL NET INCOME FROM SCHEDULES) \$ _____
- 2. A. ITEMS NOT DEDUCTIBLE (FROM LINE H SCHEDULE X) \$ _____
- B. ITEMS NOT TAXABLE (FROM LINE S, SCHEDULE X) \$ _____
- C. DIFFERENCE BETWEEN LINES 2A AND 2B TO BE ADDED TO OR SUBTRACTED FROM LINE 1 \$ _____
- 3. ADJUSTED INCOME (LINE 1 PLUS OR MINUS 2C IF SCHEDULE X IS USED) \$ _____
- 4. APPORTIONMENT PERCENTAGE FROM STEP 5 SCHEDULE Y _____ %
- 5. NET BUSINESS INCOME LESS CARRY FORWARD LOSS (\$ _____) \$ _____

SCHEDULE E - INCOME FROM RENTS (ATTACH STATEMENT EXPLAINING COLUMNS C, D, & E)

A. ADDRESS OF PROPERTY	B. RENT AMOUNT	C. DEPRECIATION	D. REPAIRS	E. OTHER EXPENSES	F. NET INCOME (LOSS)
6. NET INCOME (OR LOSS) SCHEDULE					\$

SCHEDULE H - OTHER INCOME FROM PARTNERSHIPS, FEES, LOTTERY, GAMBLING, ETC.

A. RECEIVED FROM	B. FOR (DESCRIBE)	C. AMOUNT
7. TOTAL INCOME SCHEDULE H		\$

8. ADD TOTALS OF SCHEDULES C, E, & H. ENTER HERE AND ON LINE 2, PAGE 1.

SCHEDULE X - RECONCILIATION WITH FEDERAL INCOME TAX RETURN

ITEMS NOT DEDUCTIBLE		ITEMS NOT TAXABLE	
A. NET LOSS FROM CAPITAL OR OTHER ASSETS	\$	N. CAPITAL GAIN	\$
B. EXPENSES APPLICABLE TO NON-TAXABLE INCOME	\$	O. INTEREST	\$
C. TAXES BASED ON INCOME	\$	P. DIVIDENDS	\$
D. CONTRIBUTIONS	\$	Q. ROYALTY INCOME (INTANGIBLE)	\$
E. NET OPERATING LOSS DEDUCTION	\$	R. OTHER (EXPLAIN)	\$
F. PYMTS. TO PARTNERS OR OWNERS	\$		
G. OTHER (EXPLAIN)	\$	S. TOTAL DEDUCTIONS	\$
H. TOTAL ADDITIONS	\$		

SCHEDULE Y - BUSINESS APPORTIONMENT FORMULA

	A. LOCATED EVERYWHERE	B. LOCATED IN VILLAGE	C. PERCENTAGE (B/A)
STEP 1. AVERAGE ORIGINAL COST OF PERSONAL PROPERTY	\$	\$	
GROSS ANNUAL RENTALS MULTIPLIED BY 8	\$	\$	
TOTAL OF STEP 1	\$	\$	%
STEP 2. TOTAL WAGES, SALARIES, COMMISSIONS AND OTHER COMPENSATION PAID TO ALL EMPLOYEES	\$	\$	%
STEP 3. GROSS RECEIPTS FROM SALES AND WORK SERVICES PERFORMED	\$	\$	%
STEP 4. TOTAL OF PERCENTAGES			%
STEP 5. AVERAGE PERCENTAGE (DIVIDE TOTAL PERCENTAGES BY NUMBER OF PERCENTAGES USED) Enter here and on line 4, schedule C			%