

<b>TAX YEAR</b>

**Village of Westfield Center**  
P.O. Box 750 , Westfield Center, OH 44251  
**INCOME TAX RETURN**

**DUE ON OR BEFORE** \_\_\_\_\_

Or within four months and fifteen days after the close of a fiscal year or period

FOR CALENDAR YEAR ENDING DECEMBER 31 \_\_\_\_\_

OR FOR THE MONTH ENDING \_\_\_\_\_

**MAIL TO:**

Account #

Federal EIN:

Business Type:

- C-Corporation     S-Corporation  
 Partnership     LLC

Federal Business Activity Code

Business Activity: \_\_\_\_\_

Check If:

- Initial Return     Final Return \_\_\_\_\_  
 Amended Return

Village of Westfield Center Resident     YES     NO

Date Moved In/Out of (city) \_\_\_\_\_

IN  Date \_\_\_\_\_  
OUT  Date \_\_\_\_\_

Previous Address \_\_\_\_\_

Will You Have Taxable Income Next Year?     YES     NO

If No, Explain \_\_\_\_\_

1. Income Per Federal Tax Return (Form 1120, line 28; Form 1120S, Sch. K, line 18;  
Form 1065, Analysis of Net Income(Loss), Line 1) . . . . . 1. \_\_\_\_\_
2. Net Adjustments from Page 2 . . . . . 2. \_\_\_\_\_
3. Adjusted Federal Taxable Income (Line 1 plus or minus line 2) . . . . . 3. \_\_\_\_\_
4. Amount Allocable to Village of Westfield Center from Schedule Y.    0.00 % of line 3 . . . . . 4. \_\_\_\_\_
5. Prior Year Loss Carryforward . . . . . 5. \_\_\_\_\_
6. Village of Westfield Center Taxable Income (Line 3 or 4 minus line 5) . . . . . 6. \_\_\_\_\_
7. Tax on Line 6 @ 1.0000% . . . . . 7. \_\_\_\_\_
8. Estimated Taxes Paid/Prior Year Credit . . . . . 8. \_\_\_\_\_
9. Other Credits . . . . . 9. \_\_\_\_\_
10. Total Payments and Credits (Add lines 8 and 9) . . . . . 10. \_\_\_\_\_
11. Tax Due/(Overpayment) (Line 7 minus line 10) . . . . . 11. \_\_\_\_\_
12. Penalty for Underpayment of Estimated Tax . . . . . 12. \_\_\_\_\_
13. Other Penalties and Interest . . . . . 13. \_\_\_\_\_
14. Total Tax, Penalties and Interest Due (Add lines 11, 12, and 13) . . . . . 14. \_\_\_\_\_
15. Overpayment . . . . . Credited 15a. \_\_\_\_\_  
Refunded 15b. \_\_\_\_\_

**DECLARATION OF ESTIMATED TAX FOR**

16. Estimated Income Subject to Tax \$ \_\_\_\_\_ @ tax rate 1.00% . . . . . 16. \_\_\_\_\_
17. Overpayment Applied From Prior Year . . . . . 17. \_\_\_\_\_
18. Other Payments and Credits . . . . . 18. \_\_\_\_\_
19. Total Payments and Credits (Add Lines 17 and 18) . . . . . 19. \_\_\_\_\_
20. Net Estimated Tax Due (Line 16 minus line 19) . . . . . 20. \_\_\_\_\_
21. Estimate Paid With Return (not less than 25% of line 20) . . . . . 21. \_\_\_\_\_
22. TOTAL DUE (Line 14 plus Line 21) . . . . . 22. \_\_\_\_\_

Signature of Tax Preparer \_\_\_\_\_ Date \_\_\_\_\_

Signature of Officer or Partner \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_ Phone Number \_\_\_\_\_

Do you authorize your preparer to contact us regarding this return?     Yes     No

Preparer Address and Phone Number \_\_\_\_\_