

2008 EASTLAKE INCOME TAX RETURN

FOR THE CALENDAR YEAR 2008, FILE ON OR BEFORE APRIL 15, 2009
FISCAL AND PARTIAL YEARS, FILE WITHIN 4 MONTHS OF END OF PERIOD

OR OTHER TAXABLE PERIOD BEGINNING _____ 20 _____ and ENDING _____ 20 _____

BUSINESSES SEE PAGE 2

PLEASE MAKE CHECKS AND MONEY ORDERS PAYABLE TO:
EASTLAKE INCOME TAX DEPARTMENT
P.O. BOX 72485
and Mail to: **CLEVELAND, OHIO 44192-0485**
Phone 440-951-1416 Ext. 160
www.EastlakeOhio.com

READ INSTRUCTIONS

Failure to File This Return by April 15th Will Result in a Minimum Penalty of \$50.00

This return must be submitted by everyone who is age 18 or more and who is a resident of Eastlake, or who conducts a business in Eastlake, **WHETHER OR NOT TAX IS DUE**

Social Security # _____ File # _____

****IF RETIRED [] GIVE DATE OF RETIREMENT _____**
IF YOU MOVED OR HAD ANY CHANGE IN STATUS DURING 2007, COMPLETE THE FOLLOWING:

Date moved into Eastlake _____
Previous Address _____
Date moved out of Eastlake _____
Present Address _____
Name change _____
*If renting, name landlord _____

MAKE CORRECTIONS TO NAME, ADDRESS & SOCIAL AS NEEDED

EXTENSIONS MUST BE RECEIVED IN OUR OFFICE BY APRIL 15.

1. WAGES — If your only source of income is from wages, fill in Line 1 thru Line 19 only.

W-2 COPIES MUST BE ATTACHED	EMPLOYER'S NAME	CITY EMPLOYED	A	B
			CITY TAX WITHHELD	TOTAL W-2 WAGES
	1) TOTALS			

2. PROFIT FROM ANY BUSINESS OWNED/RENTAL INCOME (FROM PAGE 2 LINE 23)\$ _____
3. TAXABLE INCOME (ADD LINES 1B & 2)\$ _____

4. EASTLAKE CITY TAX (2% OF LINE 3)\$ _____
A. REFUNDS RECEIVED IN 2008 FROM WORK MUNICIPALITIES\$ _____
5. CREDITS
A. MUNICIPAL INCOME TAX WITHHELD FROM 1[A], **DO NOT EXCEED 2% PER W-2** \$ _____
B. DIRECT PAYMENTS TO OTHER CITIES **NOT TO EXCEED 2%** (ATTACH COPY OF RETURN) \$ _____
C. ESTIMATED TAX PAID TO EASTLAKE FOR 2008 \$ _____
D. PRIOR YEAR OVERPAYMENTS/CREDITS \$ _____
E. TOTAL CREDITS ALLOWABLE (ADD 5[A] THRU 5[D])\$ _____
6. **BALANCE DUE (ADD LINE 4 & 4[A] LESS LINE 5[E]). REMITTANCE MUST ACCOMPANY RETURN**\$ _____
7. OVERPAYMENT CLAIMED (LINE 5[E] EXCEEDS LINE 4, LESS LINE 4[A])..... \$ _____
8. ENTER AMOUNT OF LINE 7 YOU WANT CREDITED TO YOUR 2009 ESTIMATED TAX \$ _____ REFUNDED \$ _____
9. **LATE FILING PENALTY - RETURNS FILED AFTER APRIL 15th, ENTER \$50.00 FINE.**\$ _____
10. ASSESSMENT 1.5% PER MONTH INTEREST \$ _____; 1.5% PER MONTH PENALTY \$ _____ TOTAL HERE \$ _____
11. TOTAL AMOUNT DUE - ADD LINES 6, 9, 10 **MUST BE PAID IN FULL FOR 2008 INCOME TAX**\$ _____
LESS THAN \$1.00 NOT REFUNDED OR PAYABLE AMOUNT TO BE REFUNDED \$ _____

IF BALANCE DUE EXCEEDS \$60 AND/OR YOU HAVE PAID THE CITY OF EASTLAKE AN ESTIMATED TAX FOR THE 2008 TAX YEAR, COMPLETE (LINES 12 THRU 19).

MANDATORY DECLARATION OF ESTIMATED TAX FOR 2009 OR FISCAL YEAR BEGINNING _____ ENDING _____

12. ESTIMATED TAXABLE INCOME FOR 2009\$ _____
13. ESTIMATED TAX DUE 2% (.02) OF LINE 12.....\$ _____
14. LESS: EASTLAKE TAX TO BE WITHHELD \$ _____ AND/OR PAID TO ANOTHER CITY (UP TO 2%) \$ _____\$ ()
15. BALANCE OF ESTIMATED EASTLAKE TAX (Line 13 less Line 14)\$ _____
16. CREDITS:
A. OVERPAYMENT CLAIMED ON PREVIOUS YEAR'S RETURN\$ _____
B. OTHER (SPECIFY)\$ _____
C. TOTAL CREDITS.....\$ _____
17. NET TAX DUE (LINE 15 LESS LINE 16C)\$ _____
18. AMOUNT PAID (NOT LESS THAN 1/4 OF LINE 17) **MUST BE PAID FOR 2009 DECLARATION**\$ _____
19. **TOTAL TAX DUE - ADD LINES 11 AND 18 - REMIT THIS AMOUNT ON OR BEFORE APRIL 15, 2009**\$ _____

I CERTIFY I HAVE EXAMINED THIS RETURN, INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS, AND TO THE BEST OF MY KNOWLEDGE BELIEVE IT IS TRUE AND CORRECT, AND THAT THE FIGURES USED HEREIN ARE THE SAME AS FOR FEDERAL INCOME TAX PURPOSES.* I authorize the Income Tax Division to discuss my account with the preparer named below. Check here

Signature of Taxpayer or Agent

Date

Signature of Person Preparing If Other Than Taxpayer

Date

Signature of Spouse If Joint Return

Address or Name and Address of Firm or Employer

ATTACH W-2'S HERE

DISREGARD THIS PAGE IF ENTIRE AND ONLY TAXABLE INCOME IS FROM SALARIES AND WAGES
EASTLAKE BUSINESS INCOME TAX RETURN

Business Name Fed. I.D No. Fed. Code #
Local Business Address Nature of Business
Eastlake Business Only, List Persons or Entity to Whom You Pay Rent

SCHEDULE C RETURNS WILL NOT BE ACCEPTED WITHOUT COPIES OF FEDERAL SCHEDULES C AND E, FORMS 1120, 1120S, FORM 1065 WHEN APPLICABLE. MUST INCLUDE ALL PAGES, SCHEDULES & STATEMENTS.

CALCULATIONS MUST BEGIN WITH THE NET PROFIT FIGURES BEFORE SPECIAL DEDUCTIONS (1120 LINE 28, 1120S LINE 20, 1065 LINE 22) FROM THE FEDERAL RETURN. SCHEDULE C FROM BUSINESS OR PROFESSION

1. Net profit or loss per Federal Income Tax Return \$ Present Year Loss..... \$ ()

SCHEDULE G Income from Rents — Attach Federal Schedule E and Supporting Documentation

Table with 6 columns: KIND & LOCATION OF PROPERTY, RENT RECEIVED, DEPRECIATION, REPAIRS, EXPENSES, NET INCOME (OR LOSS)

NET INCOME SCHEDULE G \$

SCHEDULE H All Other Taxable Income

INCOME FROM PARTNERSHIPS, ESTATES & TRUSTS: FEES, TIPS, COMMISSIONS, GAMBLING WINNINGS AND MISCELLANEOUS

Table with 3 columns: RECEIVED FROM, FOR (DESCRIBE), AMOUNT

TOTAL INCOME SCHEDULE H \$

SCHEDULE X RECONCILIATION WITH FEDERAL INCOME TAX RETURN (NOT FOR INDIVIDUAL NON-BUSINESS USE)

Table with 4 columns: ITEMS NOT DEDUCTIBLE, ADD, ITEMS NOT TAXABLE, DEDUCT. Rows include Capital Losses, Expenses, Taxes, Retirement plans, Officers Compensation, Capital gains, Interest Income, Dividend Income, Section 179 Deduction, Other (explain), Total Additions, Total Deductions.

SCHEDULE Y BUSINESS ALLOCATION FORMULA (ALL STEPS MUST BE COMPLETED IF LESS THAN 100% EASTLAKE BUSINESS)

Table for Business Allocation Formula with columns: a. LOCATED EVERYWHERE, b. LOCATED IN EASTLAKE, c. PERCENTAGE (b ÷ a). Steps include AVG. ORIGINAL COST OF REAL & TANG. PERSONAL PROPERTY, GROSS RECEIPTS FROM SALES, WAGES, SALARIES, AND OTHER COMPENSATION PAID, TOTAL PERCENTAGES, AVERAGE PERCENTAGE.

Table for Totals and Adjustments. Rows include: 20. TOTALS FROM SCHEDULES C, G & H ABOVE; 21. A. ITEMS NOT DEDUCTIBLE (From Line h, Schedule X Above) ADD \$; B. ITEMS NOT TAXABLE (From Line o, Schedule X Above) DEDUCT \$; C. ENTER EXCESS OF LINE 21A or 21B; 22. A. ADJUSTED NET INCOME (Line 20 plus or minus Line 21C); B. AMOUNT ALLOCABLE TO EASTLAKE IF SCHEDULE Y IS USED % OF Line 22A; C. LESS ALLOCABLE: LOSS PER IMMEDIATELY PROCEEDING EASTLAKE INCOME TAX RETURNS (LIMIT 1 YEAR); 23. AMOUNT SUBJECT TO MUNICIPAL INCOME TAX (Carry to Page 1 Line 2).

SCHEDULE Z Partners' Distributive Shares of Net Income — From Federal Schedules 1065 and 1099

Table for Partners' Distributive Shares of Net Income with columns: 1. NAME OF EACH PARTNER, 2. ADDRESS, 3. Distributive Shares of Partners (Percent, Amount), 4. Other Payments, 5. Taxable Percentage, 6. Amount Taxable.