MAIL COMPLETED FORM WITH PAYMENT TO

TAX OFFICE
VILLAGE OF INDIAN HILL, OHIO
6525 DRAKE ROAD
CINCINNATI, OHIO 45243

DUE ON OR BEFORE APRIL 15, 2009

2008 INCOME TAX RETURN

FOR

THE VILLAGE OF

Indian Hill, Ohio

6525 Drake Road, Cincinnati, Ohio 45243
Tax Department (513) 979-6203
(513) 561-6500 www.ihill.org

NOTE:
2008 TAX RATE: .4%

Please check:
- ❍ Single
- ❍ Married, Filing Joint Return
- ❍ Married, Filing Separate Return
- ❍ Corporation

TAXPAYER'S NAME(S) AND ADDRESS (CORRECT IF NECESSARY)

TAXPAYER SOCIAL SECURITY NUMBER _____

OCCUPATION _____

TAXPAYER SOCIAL SECURITY NUMBER _____

OCCUPATION _____

If you moved into or out of Indian Hill during 2008, please furnish the following information.
In _____ or Out _____

PLEASE READ INSTRUCTIONS ON REVERSE SIDE BEFORE COMPLETING THIS FORM

1. INCOME: Ohio Adjusted Gross Income* ..... 1. $ _____
2. ADJUSTMENTS:
   (A) Ohio State Teachers Retirement System (STRS), Public Employees Retirement System (PERS), Police & Fireman Retirement Systems of Ohio (P & FRS), or City of Cincinnati Retirement System (RSCC), income received in 2008 and included in Line 1 above. A Copy of Your 1099R Must Be Attached. ..... 2A. $ _____
   (B) Other retirement income in line 1 above. Maximum $4,000.00 ..... 2B. $ _____
3. ADJUSTED GROSS INCOME. (Line 1 less Line 2) ..... 3. $ _____
4. NON-RESIDENCY ..... 4. $ _____
5. INDIAN HILL TAXABLE INCOME. (Line 3 less Line 4) ..... 5. $ _____
6. INDIAN HILL TAX. (.4% of Line 5) ..... 6. $ _____
7. AMOUNT PREVIOUSLY PAID ..... 7. $ _____
8. BALANCE OR (OVERPAYMENT Please indicate if to be refunded or credited) ..... 8. $ _____
9. INTEREST ..... 9. $ _____
10. PENALTY ..... 10. $ _____
11. **TOTAL DUE** ..... 11. $ _____
    (If the amount on line 11 is less than $5.00, payment need not be made, nor will a refund be given)

COPIES OF 2008 STATE OF OHIO INDIVIDUAL RETURN (IT-1040) AND ALL W-2'S MUST ACCOMPANY THIS RETURN.

*Corporations use Taxable Income from Federal Form 1120 and attach Page 1 of Federal form.

** If Line 1 is not in excess of $5,000.00, no tax shall be due, however a return must be submitted if State return is filed.

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 Person Preparing if Other Than Taxpayer _____ Date _____

Signature of Taxpayer _____ Date _____

Address _____ Telephone Number _____

Signature of Taxpayer _____ Date _____

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

INFORMATION FORM FOR INDIVIDUALS NOT REQUIRED TO FILE

Name(s) _____

Address _____

Social Security Number(s) _____

I am (we are) not filing a 2008 Indian Hill Income Tax Return because:

(A) Total income is less than $5,000 AND I (we) have not filed a State of Ohio Tax Return for 2008 (Indian Hill Return must be filed if State of Ohio Return is Filed).

(B) Other _____

SIGNED: _____

REORDER FROM: Data Design (859) 363-7444
C-277005 OF

SUBMIT TO: ***The Village of Indian Hill***
Tax Office
6525 Drake Road
Cincinnati, OH 45243

REQUEST FOR EXTENSION OF TIME TO FILE 2008 INDIAN HILL INCOME TAX RETURN

NAME: _____

SOCIAL SECURITY NO.: _____

ADDRESS: _____

_____

A Federal extension does not automatically create an Indian Hill extension. An automatic extension to file the Indian Hill Income tax return to November 30, 2009, is granted if at least 80% of the estimated tax to be due has previously been paid or is paid with this form no later than April 15, 2009.

Extension requests which indicate that there will be no tax due and no payment made, will be granted on a contingency basis. If, when final return is submitted no tax is owed or tax owed is less than $50.00, penalty will not be charged. If tax owed is more than $50.00, penalty will be charged.

Interest is assessed on all taxes remaining unpaid after April 15, 2009.

(A) Estimated 2008 Indian Hill Tax @ 0.4% **$** _____

(B) Amount Paid with this form
(Must be at least 80% of Line A) **$** _____

If this form is submitted by taxpayer's accountant or agent, please give name & address:

_____

_____

_____