

FILE WITH

FAIRFIELD INCOME TAX
5350 Pleasant Avenue
Fairfield, OH 45014-3597
(513) 867-5327
www.fairfield-city.org

FAIRFIELD

INCOME TAX RETURN

FILE ON OR BEFORE APRIL 15, 2005
OR 3 1/2 MONTHS AFTER FISCAL YEAR-END

FISCAL YEAR DATE TO

MAKE CHECK OR MONEY ORDER
PAYABLE TO

FAIRFIELD INCOME TAX

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

THIS SPACE FOR TAX OFFICE USE ONLY

PRINCIPAL BUSINESS ACTIVITY

TAXPAYERS NAME AND ADDRESS

CORPORATION PARTNERSHIP SOLE PROPRIETOR

Empty box for taxpayer name and address.

IF OTHER EXPLAIN

BUSINESS PHONE

CONTACT PHONE

FEIN

ARE YOU A FAIRFIELD RESIDENT? YES NO
DID YOU FILE A PREVIOUS YEAR RETURN? YES NO
HAS IRS INCREASED YOUR INCOME TAX LIABILITY FOR ANY PRIOR YEARS? YES NO
IF SO, HAS AN AMENDED FAIRFIELD INCOME TAX RETURN BEEN FILED? YES NO
IF MOVED SINCE THE PREVIOUS FINAL RETURN WAS DUE, GIVE DATE
INTO CITY OR OUT OF CITY

Income tax calculation lines 1-14. Includes sections for INCOME, ADJUSTMENTS, TAX, and OFFICE USE ONLY.

DECLARATION OF ESTIMATED TAX FOR YEAR 2005

Declaration lines 9-14. Includes total income subject to tax, less credits, net tax due, and amount enclosed for 2004 tax.

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 KNOWLEDGE.

Signature of Person Preparing if Other than Taxpayer Date

Signature of Taxpayer or Agent (REQUIRED) Date

May we discuss this return with the preparer shown to the left? YES NO

Address Telephone Number

SECTION A Adjusted Federal Taxable Income

Ordinary Income for 1120 (Line 28)
Ordinary Income for 1120S (Line 21) or 1065 (Line 22)
Add Income/Losses reported to shareholders on Schedule K:
Net Income from Rental (Real Estate or Other)
Interest
Dividends
Royalties
Capital Gain/(Loss)
Other Income/(Loss)
Total Additions
Less Deductions reported to shareholders on Schedule K:
Charitable Contributions (Limited to 10% of Adjusted Taxable Income)
Section 179 Depreciation
Other Deductions
Total Deductions
Adjusted Federal Taxable Income (generally AFTI for S-Corps equal Line 23, Schedule K)

SECTION B Total from Federal Schedule D, Form 4797

SECTION C Income from rents - from Schedule E

SECTION D All Other Taxable Income

TOTAL From Sections A, B, C & D Enter on Page 1, Line 1

SCHEDULE X Reconciliation with Federal Income Tax Return as Required by ORC Section 718

Table with 4 columns: ITEMS NOT DEDUCTIBLE, ADD, ITEMS NOT TAXABLE, DEDUCT. Rows include: a. Federally deducted losses from IRC 1221 or 1231 property dispositions, b. Five percent of intangible income reported in letter O, except that from IRC 1221 property dispositions, c. Taxes based on income (State), d. Taxes based on income (City), e. Guaranteed payments or accruals to or for current or former partners or members, f. Federally deducted dividends, distributions, or amounts set aside for, credited to, or distributed to REIT or RIC investors, g. Federally deducted amounts paid or accrued to or for qualified self-employed retirement plans, health insurance plans, and life insurance plans for owners or owner-employees of non-C corp entities, h. Charitable Contributions (up to federal allowance), i. Other, m. Total (Enter Line 2a Other Side), n. Capital gains (IRC 1221 OR 1231 property dispositions except to the extent the income and gains apply to those described in IRC 1245 or 1250), o. Federally reported intangible income such as, but not limited to interest, dividends, and patent and copyright income, p. Amount of Federal Tax Credit to the extent they have reduced corresponding operating expenses, q. Not previously deducted IRC Section 179 Expense, r. Other, z. Total (Enter Line 2b Other Side)

SCHEDULE Y Business Apportionment Formula

Table with 3 columns: A. LOCATED EVERYWHERE, B. LOCATED IN THIS CITY, C. PERCENTAGE (B + A). Rows include: STEP 1. ORIGINAL COST OF REAL & TANGIBLE PERSONAL PROPERTY, GROSS ANNUAL RENTALS PAID MULTIPLIED BY 8, TOTAL STEP 1, STEP 2. GROSS RECEIPTS FROM SALES MADE AND/OR WORK OR SERVICES PERFORMED, STEP 3. WAGES, SALARIES AND OTHER COMPENSATION PAID, 4. TOTAL PERCENTAGES, 5. AVERAGE PERCENTAGES. Divide Total Percentages by Number of Percentages Used Carry to Line 3b, Page 1

Are any employees leased in the year covered by this return? YES NO
If YES, please provide the name, address and FID number of the leasing company

EXTENSION POLICY: Extensions may, upon request, be granted for filing of the annual return, provided and IRS extension has been secured. EXTENSION REQUESTS MUST BE MADE IN WRITING AND RECEIVED BY THIS TAX OFFICE BEFORE THE ORIGINAL DUE DATE OF THE RETURN. Only those extension requests received in duplicate with a self-addressed, postpaid envelope will have a copy returned after being appropriately marked.