CITY OF TROY
INCOME TAX DIVISION
100 S Market St, Troy OH 45373
(937) 339-3861
www.troyohio.gov

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2008

City of Troy
Individual Income Tax Return

*** IMPORTANT***

THIS RETURN IS DUE BY APRIL 15, 2009.

RECENT ORDINANCE CHANGES MAY AFFECT THE PREPARATION OF YOUR TAX RETURN.

In this packet you will find the forms and information necessary to file your CITY OF TROY INDIVIDUAL INCOME TAX RETURN for tax year 2008, including details regarding recent Ordinance changes. For more information about Ordinance changes, please visit our website at www.troyohio.gov. Additional information regarding who must file and what income is reportable and taxable is included inside this package. If you are married, you may elect to file either a joint return with your spouse, or file individually, regardless of how your Federal return is filed. Be sure to indicate your filing status on the enclosed tax form.

Filing of this return is MANDATORY for all residents who are 18 years of age or older.

The filing and payment of 2009 Estimated Income Tax Quarterly Payments is MANDATORY and will be enforced. First quarter is due with the filing of the 2008 tax return, and vouchers for second, third and fourth quarters are included in this packet.

We will gladly prepare your return for you, and THERE IS NO CHARGE FOR THIS SERVICE. Simply bring your tax records and this package to our office. We highly suggest having your return prepared by our staff prior to March 31, 2009. Waiting until after this date may result in long lines or extended waiting for our office staff to prepare your return.

OFFICE HOURS 8:00 am to 5:00 pm Monday through Friday
OFFICE LOCATION: 100 S Market St, Troy OH 45373
PHONE: (937) 339-3861 FAX: (937) 440-1352
WEBSITE: www.troyohio.gov E-MAIL: income.tax@troyohio.gov

Please check our website after January 1, 2009 for extended office hours.

GENERAL INCOME TAX INFORMATION

For additional information, contact (937) 339-3861

WHO MUST FILE	**All residents of Troy age 18 and older are required to file an annual income tax return.** There is no maximum age limit for reporting and paying on taxable income, however, earnings for individuals under the age of 16 are exempt from Troy tax. Please refer to the listing below to determine whether or not specific types of income / compensation are taxable. Non-residents with reportable income (rental property, self-employment, underwithheld wages, etc.) must also file a return. As a resident, you must file even if you did not work or did not have taxable income. Contact our office if you are unsure as to whether you are required to file.
PART YEAR RESIDENTS	All income earned in Troy is fully taxable and reportable, regardless of residency. All income earned while a resident is reportable. Any proration of income results in proration of other city tax credits. Calculations must be supported by documentation. For clarification, part year residents should include copies of pay stubs from each employer closest to the date of move.
EXTENSIONS	Extension requests must be postmarked by 4/15/09, accompanied by a copy of your Federal Extension Request and payment in full of the balance of any 2008 income tax liability. AN EXTENSION OF TIME TO PAY A BALANCE DUE WILL NOT BE GRANTED. Penalty and interest will be assessed for failure to pay by the due date.
DECLARATIONS	Filing and paying quarterly estimated tax payments is required. First quarter declaration for 2009 is calculated on the 2008 city tax return, and is due by 4/15/09. Second quarter is due 7/31/09; third quarter is due 10/31/09; and fourth quarter is due by 1/31/10. Vouchers for 2nd, 3rd and 4th quarter payments are included in this mailing, and will not be mailed to you separately. Penalty and interest will be assessed for failure to file and pay timely.
DOCUMENTATION	Supporting documentation is necessary to verify all amounts of taxable income, expenses, deductions and credits. Federal schedules (including page 1 of your federal tax return), forms, W-2's, 1099's, etc., are required for your return to be complete. Failure to include all documentation may result in your return being sent back to you, and deemed as not filed.
AMENDED RETURNS	An amended return is needed for any year in which an amended Federal return is filed, or in which your Federal liability has changed. An amended return must be filed within ninety (90) days of the filing of any amended Federal return.
PAYMENT METHOD	**Payment in full is required by April 15, 2009.** You may pay by cash (in person), check, or money order.
BUSINESS ENTITIES	Business entities that are required to file as such must use a Business Income Tax Return, obtainable from the Income Tax Department, or on our website at www.troyohio.gov. Business entities include, but are not limited to, corporations, partnerships, S-corporations, limited liability companies, limited liability partnerships, etc.
REFUNDS	When Troy tax is overpaid, a refund request may be submitted. All supporting documentation must be attached. When a refund request is due to days worked out of Troy (for a non-resident of Troy), or for tax withheld in error by an employer, or for any other employment-related withholding issue, the completion of a REFUND REQUEST FORM and certification of employer is required. This form is available on our website at www.troyohio.gov. Refunds are processed in the order received, and will be issued within 90 days after a completed return is submitted. Any missing documentation or information will result in delays in processing. During tax season, refunds can take up to 90 days to be issued.

TAXABLE INCOME

1. Wages, salaries, and other compensation.
2. Bonuses, stipends, and tip income.
3. Commissions, fees, and other earned income.
4. Sick pay.
5. Employer supplemental unemployment benefits (SUB Pay).
6. Strike pay.
7. Vacation pay.
8. Employee contributions to retirement plans and tax deferred annuity plans (including Section 401k, 403b, 457b, etc.)
9. Pre-retirement distributions from retirement plans.
10. Profit-sharing.
11. Contributions made on behalf of employees to tax deferred annuity programs.
12. Net rental income.
13. Uniform, automobile, moving and travel allowances.
14. Farm net income.
15. Lottery, gambling, prizes, games of chance, etc.
16. Stock options.
17. Employer paid premiums for group term life insurance over $50,000.00.
18. Compensation paid in goods or services or property usage.
19. Income from wage continuation plans (including retirement incentive plans and severance pay).
20. Income from guaranteed annual wage contracts.
21. Prizes and gifts if connected with employment.
22. Director fees.
23. Income from jury duty.
24. Executor fees.
25. Union steward fees.
26. Income from partnerships, estates and trusts.
27. Net profits of businesses, professions and proprietorships.
28. Ordinary gains as reported on Federal form 4797.
29. Reimbursements in excess of deductible expenses.
30. Employer provided educational assistance, taxable to the same extent as for Federal taxation.

NON-TAXABLE INCOME

1. Interest or dividend income.
2. Welfare benefits, social security.
3. Income from qualified pension plans.
4. State unemployment benefits.
5. Worker's compensation.
6. Proceeds of life insurance.
7. Alimony.
8. Active duty military pay (including active duty National Guard).
9. Capital gains.
10. Income from election day poll work (under $1,000.00).
11. Section 125 Cafeteria Plans.
12. Compensatory insurance proceeds derived from property damage or personal injury settlements.
13. Patent and copyright income.
14. Royalties derived from intangible income.
15. Annuity distributions.
16. Housing allowances for clergy to the extent that the allowance is used to provide a home.
17. Health and welfare benefits distributed by governmental, charitable, religious or educational organizations.
18. Third party sick pay, when W-2 is issued by the third party.

Above lists are not all-inclusive. For more information, contact (937) 339-3861.

Troy Income Tax Educational Page

DECLARATION OF ESTIMATED INCOME TAX DUE - Understanding the requirements to file and pay

WHO MUST FILE AND PAY ESTIMATED INCOME TAX FOR THE CURRENT YEAR?
Any individual who has income that is subject to Troy tax, and any of the following apply:

- You are a resident of Troy and work in a city or village that is subject to either no tax withholding or a lower tax rate withheld (or work in a township where no tax is withheld);
- You are a resident of Troy and are self employed (filing a Schedule C on your Federal Tax Return) and perform work in Troy or work in a city or village where you are paying a lower rate of city tax on income earned (or no tax at all for work performed in a township); or a non-resident of Troy with self-employment income earned in Troy;
- You own rental property in Troy, regardless of residency;
- You have any similar type of situation where your income is not fully withheld on and you have a tax balance due to Troy.

You are required to pay estimated tax due for the current year as you earn income. For every person who anticipates taxable income during the current year which is not fully withheld on (or may be from self-employment, rental activity, or other business activity) resulting in a tax due to Troy, a Declaration must be filed by April 15th of each year which shows the amount anticipated to be due. The estimated tax due must be paid in quarterly installments, with at least 90% of the total amount anticipated to be due PAID IN FULL by the final installment date. The payment due dates are as shown below:

DUE DATE	QUARTER	PERIOD COVERED
April 15	1st Quarter	Income earned January through March
July 31	2nd Quarter	Income earned April through June
October 31	3rd Quarter	Income earned July through September
January 31	4th Quarter	Income earned October through December

Methods of calculating estimated tax due:

A. You may pay an amount equal to the amount due in the previous tax year. By paying 100% of the previous year liability in quarterly estimated tax payments, you will not be penalized for underpayment should your income be increased in the current year. (Known as "safe harbor").
B. If you know what your anticipated income will be for 2009, you can base your estimate on that anticipated income amount. Using that figure, you can determine an equal quarterly amount for remittance for each period.
C. You may calculate your quarterly amount due based on wages or income earned during the quarter. For example, you can calculate what you would owe for first quarter based on actual income from January, February and March. Each quarterly amount remitted may not be equal, depending upon the amount of income earned during each period.

THE CALCULATION FOR ESTIMATED TAX AND FIRST QUARTER DUE is part of the 2008 tax return, lines 10-13. You must complete this section to determine if you owe estimated tax. Your first quarter payment will be remitted with your tax return, along with payment in full for tax due for 2008. IMPORTANT! FAILURE TO FILE AND PAY QUARTERLY ESTIMATED TAX DUE WILL RESULT IN PENALTY AND INTEREST ASSESSED. This is a mandatory requirement, and has always been a mandatory requirement of the Income Tax Ordinance.

For further information regarding the requirement for filing and paying the Declaration of Estimated Tax, visit our website at www.troyohio.gov. Click on the link for Income Tax. You may download a copy of the Income Tax Ordinance Chapter 171 for your review. Section 171.07 explains the Declaration requirements.

CHANGES FOR THE 2008 TAX FILING YEAR: (This list is not all inclusive. Refer to Tax Ordinance on our website).

- **All changes are effective with any return filed on and after 1/1/09.**
- Lottery, gambling, games of chance, prizes, etc. are now city taxable and should be reported on the 2008 City of Troy Income Tax return.
- Losses from federal schedules cannot be used to offset wages or other compensation.
- 2106 expenses are limited to the amount deducted from Schedule A after the 2% AGI. You must include pages 1 and 2 of your 1040, Schedule A and your 2106 form. If the 2106 is attributed to income earned in another city with a tax, the amount of credit taken for the other city tax paid must be reduced accordingly. For assistance with calculating the allowable 2106 amount, or calculating the other city credit allowable, please bring your documentation and return to our office for assistance, or visit our website at www.troyohio.gov for specific information regarding 2106 expense deductions.
- Deduction for 1/2 SE tax is no longer allowable.
- Deduction for self-employed health insurance is no longer allowable. Per the Ohio Revised Code, our Ordinance has not included self-employed health insurance as a deductible item.
- Deduction for the additional 1/2 meals and entertainment is no longer allowable. We are adhering to the IRS standard of 50% deduction only.
- Amounts due under $5 need not be paid with the filing of the tax return, and amounts under $5 will not be refunded.

AVOID LATE FILING PENALTIES BY
FILING YOUR CITY OF TROY TAX RETURN TIMELY

Even if you do not owe tax, all residents are required to file an annual income tax return. Failure to file this return timely may subject you to a Late Filing Fee of $25.00 (if filed within 30 days), and $50.00 (if filed after 30 days from the due date.) Avoid this penalty—File your tax return by April 15th! Remember, returns must be postmarked by the due date to be considered timely filed.

INSTRUCTIONS FOR COMPLETING YOUR 2008 CITY OF TROY INCOME TAX RETURN

HEADING Print your name, address and social security number plainly or make needed corrections if already printed. If you have moved, indicate date of move, present address and old address. Indicate whether you are filing a single return, married filing joint or married filing separately. Please provide your home phone number so that we may contact you with any questions regarding your return. Sign up for future updates by completing your e-mail address.

SECTION A Using the worksheets on the reverse, list each W-2 and 1099-misc separately. Attach a separate sheet if necessary. (If 1099-misc is included in gross receipts on Schedule C, do not list here. Schedule income is reported on Line 2). For each W-2, enter the employer's name, the city where work was actually performed, the amount of Troy tax withheld, credit for other city tax withheld (see instructions for line 5B below.) Attach all W-2's and 1099-misc forms. (Photocopies are acceptable).

LINE 1 Add the total W-2 wages from the reverse worksheet and enter on line 1.

LINE 1A Enter the amount of allowable 2106 expense. The allowable 2106 expense is the amount actually deducted from Schedule A, after the 2% AGI. Miscellaneous expenses deducted on Schedule A are not permitted. For more information, please go to www.troyohio.gov. ATTACH COPY OF 2106, SCHEDULE A and PAGES 1 and 2 of your FEDERAL TAX RETURN.

LINE 2 Enter the total of all other income and adjustments, from reverse of tax form (worksheet). All schedules must be attached. (See Worksheets on reverse)

LINE 3 Add lines 1, 1A and 2. This is the amount of income subject to tax.

LINE 4 Multiply the amount of income on line 3 by 1.75% (.0175)

LINE 5 Credits.

- 5A Enter the total Troy tax withheld.
- 5B Enter a credit for the tax you paid to other cities on the income you have reported on this return. DO NOT ENTER THE ACTUAL AMOUNT OF TAX YOU PAID. You must calculate the credit by using the following steps:
  - STEP 1 If all of your income was earned in a city with a tax rate equal to or less than 1.75%, your credit is the amount of tax withheld (provided the amount withheld is correct).
  - STEP 2 If your income was earned in a city with a tax rate that is greater than 1.75%, determine what portion of your W-2 wages had tax withheld at the greater rate. Then, multiply that part of your W-2 wages by 1.75% to find your credit. This step must be completed for each W-2**.** Please note that for both steps 1 and 2, if income has been pro-rated or reduced (due to 2106 deduction, partial year residency, or for any other reason), credits must also be pro-rated or reduced.
- 5C Total of tax year 2008 estimated tax payments that you have paid.
- 5D Prior year tax overpayment that you have carried forward for use on this return. (Do not include amounts refunded to you).
- 5 E Add 5A through 5D. This is your total tax credit.

LINE 6 Subtract line 5E from line 4. If line 4 is greater than line 5E, you have a balance due. ($5 or more). Make sure to complete all lines before signing and remitting return with payment.

LINE 7 If line 5E is greater than line 4, you have an overpayment of tax. ($5 or more). Indicate whether you prefer to credit this to tax year 2009, or have this overpayment refunded. Allow 90 days for processing of a refund. Note: If you had no Troy tax withheld, or no estimated tax paid, or no prior year credits, and you show an overpayment of tax, please re-check your calculations as there is no refund due.

LINE 8 Late payment and/or late filing will result in the assessment of penalty and interest charges. Please contact our office for appropriate rates if applicable.

LINE 9 Balance due. Line 6 plus line 8. DO NOT STOP HERE. You must complete lines 10-14.

SECTION B

LINE 10 Total estimated tax due for 2009. (Income multiplied by tax rate of 1.75%).

LINE 11 Less credits for tax to be withheld by employers, and prior year credit carried forward (from line 7)

LINE 12 Net tax due. Line 10 minus line 11.

LINE 13 First quarter estimated tax due (at least 22.5% of line 12.) By paying 22.5% each quarter, you will have 90% of your liability paid prior to filing of your 2009 Individual Income Tax Return.

LINE 14 TOTAL DUE. Line 9 plus line 13. **PAYMENT IN FULL IS DUE BY 4/15/09.**

SECTION C Complete the return by signing, indicating your occupation, and dating the return. Copies of all W-2's, 1099's, Federal Schedules including page 1 of your federal tax return, and all other supporting documentation must be attached. Be sure to remit payment in full with the completed return.

City of Troy
Income Tax Division
100 S Market St, Troy OH 45373
Phone (937) 339-3861
Fax (937) 440-1352
www.troyohio.gov

2008 INDIVIDUAL INCOME TAX RETURN

DUE ON OR BEFORE APRIL 15, 2009

Print name(s) and address below. If pre-printed, indicate changes.

YOUR SOCIAL SECURITY NUMBER

SPOUSE'S SOCIAL SECURITY NUMBER

☐ RESIDENT
☐ NON RESIDENT
☐ SOLE PROPRIETOR

DATE MOVED IN:____________________
DATE MOVED OUT:____________________
FORMER ADDRESS:____________________

CITY OF RESIDENCE:____________________
CITY OF EMPLOYMENT:____________________
PHONE:____________ E-MAIL:____________________
IF RENTING A RESIDENCE, NAME AND ADDRESS OF OWNER:

____

FILING STATUS ☐ Single
☐ Married Filing Joint Return (even if only one had income). Did you file a Joint or Separate return last year? ☐Joint ☐Separate
☐ Married Filing Separate Return. Enter Spouse's social security number above and full name here:____________________

ATTACH W-2's, 1099's HERE
ATTACH PAGE 1, 1040 and all OTHER ATTACHMENTS TO REVERSE.

A

1. **TOTALS** (Attach all W-2's. If part year resident, provide pay stubs closest to date of move, or explanation.). 1.

   1A **2106 EXPENSE DEDUCTION** (Attach Schedule A, Form 2106, Pages 1 and 2 of 1040. See instructions.) 1A.

2. **INCOME OTHER THAN WAGES** from worksheets on reverse. (Attach Federal Schedules, forms, documentation) 2.
3. **TOTAL INCOME** (Add boxes 1 through 2)
4. **TAX LIABILITY** Multiply box 3 by 1.75% (0.0175) 4.
5. **CREDITS**
   A. Troy tax withheld 5A.
   B. Credit for other city tax withheld (see instructions) 5B.
   C. 2008 Estimated tax payments 5C.
   D. Prior year credit carried forward 5D.
   E. Total of credits. Add 5A through 5D and enter here 5E.
6. If box 4 is greater than box 5E, enter YOUR BALANCE DUE here ($5 or more) 6.
7. If box 5E is greater than box 4, enter YOUR OVERPAYMENT here ($5 or more) 7.

   Amount to be **REFUNDED** $____________ or **CREDITED TO 2009** $____________

8. PENALTY:__________ INTEREST:__________ LATE FILING FEE:__________ 8.
9. **BALANCE DUE FOR 2008** Add box 6 and box 8. DO NOT STOP HERE - You must complete lines 10-14 9.

B

2009 MANDATORY DECLARATION OF ESTIMATED TAX DUE - You must complete this section

10. Total estimated tax due for tax year 2009 (gross taxable income multiplied by 1.75%) 10.
11. Less credits (including credit carried forward to 2009 from line 7; see instructions) 11.
12. Net tax owed for tax year 2009 estimated tax (Box 10 minus box 11) 12.
13. Amount paid with this declaration for FIRST QUARTER ESTIMATED TAX for 2009 (must be at least 22.5% of line 12) 13.
14. **TOTAL DUE. ADD BOXES 9 and 13 FOR TOTAL BALANCE DUE BY APRIL 15, 2009** 14.

C

I certify that I have examined this return including accompanying Federal 1040 page one, W-2's, schedules and statements, and to the best of my knowledge and belief it is true, accurate and correct. If my return was prepared by a tax practitioner, I have indicated whether or not you may contact my preparer directly concerning the preparation of this return. ☐ YES ☐ NO (Note: Preparer must completely fill out section below regarding "Preparer".)

____________________ ____________________ ____________
Your signature Occupation Date

____________________ ____________________ ____________
Spouse signature (if filing joint return) Occupation Date

Signature and address of preparer (if not prepared by taxpayer):____________________

PHONE NUMBER OF PREPARER: ____________ E-MAIL:____________ DATE:____________

For office use only

☐ MAINTENANCE $____________ CK____________

WORKSHEET 1 - QUALIFYING WAGES, TIPS, SALARIES, OTHER EMPLOYEE COMPENSATION

NAME OF EMPLOYER	CITY WHERE EMPLOYED	INCOME FROM EACH W-2	*2106 EXPENSE (AFTER 2% AGI)	TROY TAX WITHHELD	*OTHER CITY TAX WITHHELD
TOTALS:					
		To Page 1, Line 1	To Page 1, Line 1A	To Page 1, Line 5A	To Page 1, Line 5B

* Income reduced by 2106 expense and earned in another city must also reduce the tax withheld / credit for tax withheld for another city accordingly.

WORKSHEET 2 - SCHEDULE C, SCHEDULE E, SCHEDULE F

(Attach copies of all Federal Schedules. If tax paid to another municipality, other city returns must be attached)

SCHEDULE C SOLE PROPRIETORSHIP

Business name:____ Business address:____

Nature of business:_____________________________________ Date started:__________________ Date ended:__________________

A. Net profit or loss from Schedule C (must be attached). If multiple, all must be attached. $________________________

(Complete this information separately for each Schedule C by attaching separate form)

B. Percentage amount allowable or reportable to Troy. If sole proprietor or business is located in Troy, 100% reportable. Provide copies of other city tax returns filed to allow credit for tax paid. (Provide documentation to support percentage used / allocation). ________________________

C. Amount subject to tax (multiply A times B).

NET PROFIT / LOSS SCHEDULE C

SCHEDULE E RENTAL PROPERTY

Attach Schedule E's, and provide name(s) of legal owners of each property.

(This can be documented on the Schedule E copy remitted)

RENTAL NET PROFIT / LOSS SCHEDULE E

SCHEDULE E OTHER REPORTABLE INCOME / LOSS (Partnerships, estates, trusts, etc)

Attach Schedule E's, and provide name(s) of participants in each activity.

(This can be documented on the Schedule E copy remitted)

OTHER SCHEDULE E PROFIT / LOSS

SCHEDULE F FARM INCOME

Attach Schedule F.

NET PROFIT / LOSS SCHEDULE F

WORKSHEET 2 TOTAL** $________________________

***Losses from federal schedules and other sources reported for federal income tax purposes cannot be used to offset qualifying wages, commissions, other compensation and other taxable income earned or received by residents or nonresidents of the Municipality. If an individual is engaged in two or more taxable business activities to be included in the same return, the net loss of one unincorporated business activity may be used to offset the profits of another (except any portion of a loss or profit separately reportable for municipal tax purposes to another taxing entity) for purposes of arriving at overall net profits or net operating loss.*

WORKSHEET 3 - OTHER INCOME (Attach appropriate / forms / attachments).

Income from lottery, gambling, etc. to be included on this worksheet.

RECEIVED FROM NAME / I.D. NUMBER	FOR (DESCRIPTION AND/OR LOCATION) (APPLICABLE LOSSES WITHOUT EXACT LOCATIONS / DOCUMENTATION WILL BE DISALLOWED) For gambling winnings, report the amount after loss deduction (cannot be less than zero). Attach page 1 and 2 of 1040 and Schedule A.	AMOUNT

WORKSHEET 3 TOTAL $ ________________________

CALCULATIONS FOR FRONT OF RETURN

A. Worksheet 2 total: ________________ (CANNOT BE LESS THAN ZERO. IF LESS THAN ZERO, LEAVE BLANK.)

B. Worksheet 3 total: ________________

TOTAL OF A AND B ABOVE: ________________ PLACE THIS NUMBER ON LINE 2, PAGE 1 of TROY TAX RETURN.

CITY OF TROY ESTIMATED TAX INSTALLMENT VOUCHER	TAX YEAR 2009	City of Troy Income Tax Division 100 S Market St, Troy OH 45373 (937) 339-3861
Verify any pre-printed information and make necessary changes, or provide your name, address and social security number	VOUCHER 2	Due on or before July 31, 2009
	Amount paid with this voucher	****NOTE**** **THIS VOUCHER IS NOT FOR PAYING ANY PRIOR YEAR BALANCE. THIS VOUCHER IS FOR PRE-PAYMENT OF CURRENT YEAR TAX LIABILITY ONLY.**
	Unpaid Balance for tax year 2009	Do not write in area below:

CITY OF TROY ESTIMATED TAX INSTALLMENT VOUCHER	TAX YEAR 2009	City of Troy Income Tax Division 100 S Market St, Troy OH 45373 (937) 339-3861
Verify any pre-printed information and make necessary changes, or provide your name, address and social security number	VOUCHER 3	Due on or before October 31, 2009
	Amount paid with this voucher	****NOTE**** **THIS VOUCHER IS NOT FOR PAYING ANY PRIOR YEAR BALANCE. THIS VOUCHER IS FOR PRE-PAYMENT OF CURRENT YEAR TAX LIABILITY ONLY.**
	Unpaid Balance for tax year 2009	Do not write in area below:

CITY OF TROY ESTIMATED TAX INSTALLMENT VOUCHER	TAX YEAR 2009	City of Troy Income Tax Division 100 S Market St, Troy OH 45373
Verify any pre-printed information and make necessary changes, or provide your name, address and social security number	VOUCHER 4	Due on or before January 31, 2010
	Amount paid with this voucher	****NOTE**** **THIS VOUCHER IS NOT FOR PAYING ANY PRIOR YEAR BALANCE. THIS VOUCHER IS FOR PRE-PAYMENT OF CURRENT YEAR TAX LIABILITY ONLY.**
	Unpaid Balance for tax year 2009 (should be zero)	Do not write in area below: