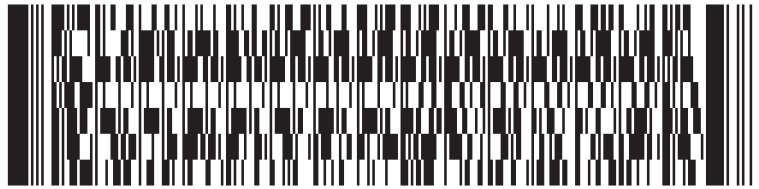


Tax District Name (See instructions)

Tax District Address



Department Use Only—Do not write or staple in this space.

Taxpayer Name

Trade Name

Address

Address 2

City

State

Zip Code

 -

Filing Status:

Filing Status Change? YES NO

- Check one box only**
- Individual Resident
 - Individual Non-Resident
 - Corporation
 - Partnership
 - S Corp
 - Other
- Check all that apply**
- No Activity
 - Amended
 - Fed ID Change (Complete Line F)
 - Final (Complete Line G)
 - Name Change
 - Address Change

Tax District Account Number

Method of Accounting

Fed ID

SSN

Accrual Cash

A Principal business activity

NAICS Code:

B Did you have employees during the past year?

YES NO

Number of employees who worked in this locality

C Did you make payments in the sum of \$600.00 or more for services rendered in this locality to any individual other than an employee? If "YES", submit copy of 1099s to local tax district.

YES NO

D Did you file a consolidated C - Corporation federal return? If "YES", see instructions.

YES NO

E During the past year, did IRS change or propose to change net income reported for that year or any prior year? If "YES", see instructions.

YES NO

Which year(s)?

F If Federal ID changed, list the name of new entity :

Ownership Change Date:

 / / 20

G If final return, state reason for discontinuance :

Discontinuance Date:

 / / 20

List successor if sold:

H List Principal Administrative Officer's Name, Address, and Social Security Number:

Name

SSN:

Address

Address 2

City

State

Zip Code

 -

