FORM 32-EXT **REGIONAL INCOME TAX AGENCY**

Estimated Income Tax and/or Extension of Time to File

SSN	N #:	Spouse's SSN#:				
Nan	ne:					
Spo	use's Name:					
Add	lress #:	Street:	Si	uite:		
		State:				
retu	rn is extended as well. It is not	extension to file your federal income necessary to file a copy of your fede federal extension when filing your mo	eral extension with	RITA by the annual		
exte	nsion for filing your municipal	ved a federal income tax filing extern income tax return by indicating y the filing due date of April 17, 2018.				
due		rn is not an extension to pay - the ta 2 to pay the tax due for tax year 2				
SE	CTION 1: EXTENSION OF TH	ME TO FILE				
■ If you have a copy of your <u>federal extension, you do NOT have to fill out this section</u> . SKIP to SECTION 2. Check this box if you have not requested or received a federal extension and you are requesting a 6 month extension to file for the tax year 2017.						
SE	CTION 2: PAYMENT (Balance	e due on annual return and/or estim	ated payment)			
1. A	nticipated Tax Balance Due on 2	017 Annual Return	\$.00		
(Extension Payment)					
2.2	This line will NOT update your 2 anticipate owing \$200 or more estimate your taxes and make earned. If you need to report of Liability, go to Section 3, page 2 less than 90% of the tax due, or	e less than 1/4 of Total Estimate) payment enter the amount on Line 2. 2018 total estimated tax liability. If you in municipal income tax, you must quarterly payments as your income is r update your 2018 Total Estimated Ta 2. If your estimated payments are eith r not equal to or greater than your price be subject to penalty and interest.	S IX Ier	.00		
3. A	mount Paid (Add Lines 1 and 2)		\$.00		
	(make check payable to RITA s	ee page 2 for mailing address)				
4. A	llocate to applicable RITA Munic	ipalities Balance Due from Line 1 and/	or Estimated Tax f	rom Line 2.		
►	Municipality:	Tax Year:	Amount:			
			\$.00		
			\$.00		

Total allocation (equal Line 3 above) \$

.00

.00

.00

.00

\$ \$

\$

SECTION 3: ESTIMATED INCOME TAX DECLARATION

Use this section to report or update your Annual Estimated Income Tax Liability. If you anticipate owing \$200 or more in municipal income tax, you must estimate your taxes and make quarterly payments as your income is earned. If your estimated payments are either less than 90% of the tax due, or not equal to or greater than your prior year's total tax liability, you will be subject to penalty and interest. Form 37 Instructions "Worksheet 2" may be used to calculate your Estimated Income Tax Liability.

	Tax Year	Ar	mount	
Total Estimated Income Tax		\$.00
SECTION 4: VERIFICATION				
Taxpayer – Under penalties of perjury, I decla made herein are true and correct.	are that to the best of my kn	owledge and	d belief, the	statements
Your Signature:		Date:		
Spouse's Signature:		Date:		
Preparer other than taxpayer – Under pena belief, the statements made herein are true a Declaration and/or Extension.				
Signature of Preparer:		Date:		
Printed Name of Preparer:				
May RITA discuss this Declaration/Extens	sion with the preparer abo	ve?	🗌 Yes	🗆 No
Mail Declaration/Extension to:				
<u>With Payment</u> made payable to RITA: REGIONAL INCOME TAX AGENCY P.O. BOX 6600 CLEVELAND, OH 44101-2004	Without Payment: REGIONAL INCOME TAX P.O. BOX 477900 BROADVIEW HEIGHTS 4			