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Do not file draft forms. Although we do not expect this draft to change significantly before we publish the final version, we will not post the final version until after year-end.

PRINT RESET FORM

FORM 32
EST-EXT

Regional Income Tax Agency
Estimated Income Tax and/or Extension of Time to File

RITA REGIONAL INCOME TAX AGENCY

800.860.7482
TDD 440.526.5332
ritaohio.com

SSN #:_____ Spouse's SSN#: _____

Name: _____

Spouse's Name: _____

Address #:_____ Street:_____ Suite: _____

City:_____ State:_____ Zip: _____

See Page 2 for EXTENSION instructions

SECTION 1: 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. Use Estimate Your Tax - Quick Calc at ritaohio.com or Form 37 Instructions "Worksheet 1" may be used to calculate your Estimated Income Tax Liability.

	Tax Year	Amount
Total Estimated Income Tax	2027	$ _____ .00

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SECTION 2: PAYMENT (Balance due on annual return and/or estimated payment)

1. Anticipated Tax Balance Due on 2026 Annual Return (Extension Payment) $ _____ .00

2. 2027 Estimated Tax Payment (not less than 1/4 of Total Estimate) $ _____ .00
   If you are making an estimated payment enter the amount on Line 2. This line will NOT update your 2027 total estimated 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 you need to report or update your 2027 Total Estimated Income Tax enter in Section 1. 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.

3. Amount Paid (Add Lines 1 and 2) $ 0 .00
   (make check payable to RITA see page 2 for mailing address)

4. Allocate to applicable RITA Municipalities Balance Due from Line 1 and/or Estimated Tax from Line 2.

► Municipality:	Tax Year:	Amount:
_____	_____	$ _____ .00
_____	_____	$ _____ .00
_____	_____	$ _____ .00
_____	_____	$ _____ .00
_____	_____	$ _____ .00

Total allocation (equal Line 3 above) $ 0 .00

SECTION 3: EXTENSION OF TIME TO FILE

☐ If you have a copy of your federal extension, you do NOT have to fill out this section. 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 2026.

If you have requested or received an extension to file your federal income tax return, your municipal income tax return is extended as well. It is not necessary to file a copy of your federal extension with RITA by the annual filing due date. Attach a copy of the federal extension when filing your municipal income tax return on or before the extended due date.

If you have not requested or received a federal income tax filing extension, you may receive a six-month extension for filing your municipal income tax return by indicating your request in Section 3 above, and submitting this request on or before the filing due date of April 15, 2027.

An extension to file the annual return is not an extension to pay - the tax owed is still due by the annual filing due date. Please complete Section 2 to pay the tax due for tax year 2026 and the first quarter of estimated payments due for tax year 2027.

SECTION 4: VERIFICATION

Taxpayer – Under penalties of perjury, I declare that to the best of my knowledge and belief, the statements made herein are true and correct.

Your Signature:_____ **Date:** _____

Spouse's Signature:_____ **Date:** _____
(If filing jointly, BOTH must sign)

Preparer other than taxpayer – Under penalties of perjury, I declare that to the best of my knowledge and belief, the statements made herein are true and correct, that I am authorized by the taxpayer to prepare this Declaration and/or Extension.

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Signature of Preparer:_____ **Date:** _____

Printed Name of Preparer:_____

May RITA discuss this Declaration/Extension with the preparer above? ☐ **Yes** ☐ **No**

Mail Declaration/Extension to:

With Payment made payable to RITA:
REGIONAL INCOME TAX AGENCY
P.O. BOX 6600
CLEVELAND, OH 44101-2004

Without Payment:
REGIONAL INCOME TAX AGENCY
P.O. BOX 477900
BROADVIEW HEIGHTS, OH 44147-7900