Regional Income Tax Agency RITA Individual Income For use by single or married tax		0	Cleveland 800.860.7482 Columbus 866.721.7482 Youngstown 866.750.7482 TDD 440.526.5332
Your social security number Your first name and middle initial If a joint return, spouse's first name and middle initial	Spouse's social security number Last name Last name		Filing Status: Single or Married Filing Separately 3 Joint 2 If you have overpaid, indicate your choice: Refund 3 Credit 2 If this is an amended return, check here:
Current home address (number and street)		Apt #	
City, state, and ZIP code Daytime phone number	Evening phone number		Easy, Fast, Free & Secure www.ritaohio.com

Contact us toll free:

Move Information

Check here if you moved since January 1, 2010, and indicate your change of address. If you moved more than once, supply the additional move information on a separate sheet.

Date of Move:	1	Previous home address (number and street)	Apt #
		City, state, and ZIP code	

Section A

List all W-2 wages earned in 2010 and the amount of municipal (city) tax withheld while living in a RITA municipality. In general, unless you moved into or out of a RITA municipality during the year, your taxable wages cannot be less than Medicare wages (Box 5 of your W-2). List all tax withheld to your resident municipality in Column 3 only (even if you worked in the municipality where you lived). In Column 4, indicate the name of the municipality in which you or your spouse physically worked. This may be different from the employer's address shown on the W-2. If you did not work in a city or village enter "None" in Column 4. DO NOT enter school district tax into columns 2 or 3.

sm	Column 1 Wages	Column 2 Local/City Tax Withheld for	Column 3 Local/City Tax Withheld for	Column 4 Workplace Municipality	Column 5 Resident Municipality	Column 6 Dates Wages Were Earned	
of W-2 Forms rrder Here be or glue	(Greater of Box 1, 5 or 18 from W-2)	Workplace Municipality	Resident Municipality	(Name of city or village where you worked)	(Name of city or village where you lived)	From Date MM/DD/YY	Thru Date MM/DD/YY
ity copy of W Money Order I aples, tape or							
/ City or Mc stapl							
Paperclip and C Do no							
Ра							
Totals					1 on Page 2, Line 1a; enter enter the total of Column 3		

STOP

Stop here if you had only W-2 income, do not expect to owe tax, and you want RITA to complete your return for you. Sign below and mail this return to RITA with copies of your W-2s. If we complete your return and it turns out you owe tax, you will receive a bill for the tax due plus any penalty and interest due for late payment. Due to processing volumes, there may be a delay before the bill is issued. Our on-line e-File system at www.ritaohio.com is easy to use and will calculate your tax due (if any) immediately. Continue to page 2 if you want to manually calculate your tax due.

Under penalties of perjury, I declare that I have examined this return, and to the best of my knowledge and belief, it is true, correct, and accurately lists all amounts and sources of municipal taxable income I received during the tax year.

Your Signature	Date	Prepa	arer's Sig	gnature		Date
Spouse's Signature if a joint return	Date	Prepa	arer's Ad	dress		ID Number
May RITA discuss this return with the preparer shown above? \Box Yes \Box No \Box Preparer Phone #:						
Filing is mandatory for most residents: see "Filing Requirements" on page 1 of the Instructions for Form 37 for exceptions.						

Form 37 (2010)

Section	B					
		Total W-2 wages from Page 1, Section A, Column 1	1a			
	b	Total self-employment, rental, partnership, and (if applicable) S corporation income as well as any other taxable income from				
		Page 3, Schedule J, Line 31. If less than zero enter -0-	1b			
	2	Total Taxable Income. Add lines 1a and 1b	2			
	3	Multiply Line 2 by the tax rate of your resident municipality from the ta back of the instructions. Enter the tax rate of your resident municipalit			3	
Withheld taxes	4 a	Tax Withheld for all cities other than your city of residence from Page 1, Section A, Column 2. Do not enter estimated tax payments	4a			
taxes shown on your W-2 forms are		Direct Payment from Page 3, Schedule K, Line 35. Do not enter tax withheld from your wages or estimated tax payments on this line	4b			
reported on		Add lines 4a and 4b	5a			
either line 4a or 7a.	b	Total credit limit from Worksheet 2, Column E located at the bottom of this page. Your resident municipality's credit limit:	5b			
Estimated	С	Enter the smaller of line 5a or line 5b	5c			
tax payments made to	6	Multiply Line 5c by the tax credit of your resident municipality from the tax table. Your resident municipality's tax credit:	6			
RITA by check, credit card, debit	7 a	Tax withheld for your resident municipality from Page 1, Section A, Column 3. Do not enter estimated tax payments. (See Instructions)	7a			
card, or	b	Tax paid by your partnership/S corp to any RITA municipality	7b			
website e-payment	8	Total credits allowable (Add lines 6, 7a, and 7b)			8	
are reported on line 13.	9	Subtract Line 8 from Line 3	9			
	10	Tax on non-withheld wages from Page 3, Schedule K, Line 32	10			
	11	Tax on Schedule J Income from Page 3, Schedule K, Line 36	11			
	12	TAX DUE RITA AFTER WITHHOLDING. Add lines 9, 10 and 11. If -0- and see the instructions about filing a Form 10-A to claim your refu		than zero, enter	12	
Refunds: To avoid	13	2010 Estimated Tax Payments made to RITA by check, debit or			12	
delays in	10	credit card or e-payment. Do not enter tax withheld from your W-2s.				
processing your refund,		Do not include payments made in 2010 for years other than 2010	13			
check the	14	Credit carried forward from 2009	14			
refund box in the upper	15	15 TOTAL CREDITS. Add lines 13 and 14				
right-hand corner of page 1.	16 Balance Due. If line 15 is less than line 12, subtract line 15 from line 12. Amount than \$1 will not be collected (see instructions for exceptions to this rule)				16	
Refunds of	17	If line 15 is GREATER than 12, subtract line 12 from line 15 and enter	OVE	RPAYMENT	17	
tax withheld	18	Amount you want credited to your 2011 estimated tax	18			
from your wages must be applied	19	Amount to be refunded. You may not split an overpayment between a refund and a credit. Allow 90 days for your refund	19			
for on Form 10-A.	20 a	due 4/18/11, 7/31/11, 10/31/11 and 1/31/12	20a			
Download	b	Enter full estimate or first quarter estimate (1/4 of line 20a)	20b			
Form 10-A at www.ritaohio	21	Subtract line 18 from line 20b			21	
.com	22	TOTAL DUE by April 18, 2011. Add Lines 16 and 21			22	I

Estimated Taxes (Line 20a)

If you anticipate owing \$10.00 or more in income tax in 2011, you must estimate your taxes and make quarterly payments of the anticipated tax due as your income is earned. See the Special Notes beginning on page 5 of the instruction booklet for municipalities that have exceptions to the \$10.00 rule. If your estimated taxes are not 90% of the tax due or not equal to or greater than your prior year's total tax liability, you may be subject to penalty and interest. You may use the amount on Line 12 as your 2011 estimate or use Worksheet 3 in the instruction booklet to calculate your estimate.

Worksheet 2: Credit Limit (applies to Section A wages & Schedule J, Line 29 income)								
Α	В	C	D	E				
Wages/Income	Credit limit	Maximum credit		Allowable Credit				
earned outside of	for resident city	(multiply column A	Workplace tax	Enter lesser of				
resident city	from tax table	by column B)	withheld/paid	columns C or D				
Total Allowable	Fotal Allowable Credit. Enter on Section B, Line 5b above.							

Mail your return with W-2 and copies of your federal schedules to:

With payment made payable to R.I.T.A.: Regional Income Tax Agency PO Box 6600 Cleveland OH 44101-2004

Without payment: Regional Income Tax Agency PO Box 94801 Cleveland OH 44101-4801

COPIES OF ALL APPROPRIATE FEDERAL SCHEDULES ARE REQUIRED IF COMPLETING SCHEDULE J.

SCHEDULE J	SUMMARY OF NON W-2 INCOME (Enter Municipality Where Earned)						
Print the name of each municipality where a profit/ (loss) was earned in the	COLUMN 1 RESIDENCE MUNICIPALITY	COLUMN 2 NONTAXING MUNICIPALITY	COLUMN 3 RITA MUNICIPALITY OF	COLUMN 4 RITA MUNICIPALITY OF	COLUMN 5 TAXED BY A NON-RITA MUNICIPALITY	COLUMN 6 ADD COLUMNS 1, 2, 3, 4 and 5	
appropriate box(es)	11	12	13	14	15	1, 2, 0, 4 and 0	
From Federal 23. SCHEDULE C Attached	21	22	23	24	25		
From Federal 24. SCHEDULE E Attached	31	32	33	34	35		
All Other Taxable Income 25. (or loss). Attach Schedule(s)	41	42	43	44	45		
TOTAL NON-WAGE INCOME 26. (Add Lines 23, 24, 25)							
LESS LOSS CARRY 27. FORWARD	⁵¹ ()	⁵² ()	53	54	55		
WORKPLACE INCOME 28. (Line 26 minus Line 27)	61	62					
WORKPLACE INCOME 29. (Line 26 minus Line 27)			63	64	65		
MUNICIPAL TAX DUE 30. (NOTE: Line 30 cannot be less than zero.)					Column 6, Line 28 or less than zero. If am zero, use zero.		

TOTAL of Column 6, place the total in Section B, Line 1b. 31.

NOTE: If any columns on Line 29 have entries complete Schedule K, Line 34.

SCHEDULE K See instructions on page 10. If additional space is needed, use separate sheet. 32. W-2 WAGES EARNED IN A RITA MUNICIPALITY OTHER THAN YOUR RESIDENCE MUNICIPALITY FROM WHICH NO MUNICIPAL INCOME TAX WAS WITH USED BY EARLY OVER Committee Lines Follow:

NO MUNICIPAL INCOME TAX WAS WITHHELD BY EMPLOYER. Complete Lines below.								
Wages	Municipality	Tax Rate (see instructions)	Tax due					

Copy total tax due onto Line 32 and in Section B, Line 10.

33. W-2 WAGES EARNED IN A NON-RITA TAXING MUNICIPALITY AND FROM WHICH NO MUNICIPAL INCOME TAX WAS WITHHELD BY EMPLOYER. (ONLY USE THIS SECTION IF YOU HAVE FILED AND PAID THE TAX DUE TO YOUR WORKPLACE MUNICIPALITY. PROOF OF PAYMENT MAY BE REQUIRED) Complete Lines Below.

		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Wages	Municipality	Tax Rate (see instructions)	Tax due

Copy total tax due onto Line 33

34. TAX DUE TO OTHER THAN RESIDENCE MUNICIPALITY ON NON W-2 INCOME REPORTED IN SCHEDULE J, LINE 29, COLUMNS 3, 4, AND 5. Complete Lines below.

Workplace Income (Line 29, Columns 3, 4, & 5)	Municipality	Tax Rate (see instructions)	Tax due

Copy total tax due onto Line 34

35. TOTAL LINES 32, 33 AND 34. Enter total on Line 35 and in Section B, Line 4b.

36. FROM SCHEDULE J ABOVE, ADD LINE 30 COLUMNS 3 AND 4. Enter total on Line 36 and in Section B, Line 11.

32._____

33.

34.			
35.			
36.			