

**REGIONAL INCOME TAX AGENCY**

**Declaration of Estimated Income Tax**

For Tax Year

Soc. Sec. No.:    -   -     Spouse's Soc. Sec. No.:    -   -

Name:

Spouse's Name:

Address #:       Suite:

Street Name:

City:

State:   Zip:       -



\*FORM 32\*

Signature \_\_\_\_\_ Date \_\_\_\_\_ Home Phone #    -    -

Signature \_\_\_\_\_ Date \_\_\_\_\_ Business Phone #    -    -

*(If filing jointly, BOTH must sign even if only one had income)*

**SECTION 1**

IF YOU ARE NOT A RESIDENT OF A RITA MUNICIPALITY, SKIP TO LINE 9. Tax rates, credits, and credit limits are listed on the Tax Table.

- 1. Estimate your total taxable income (Pro-rate if part year resident) ..... 1. \_\_\_\_\_
- 2. Multiply Line 1 by Residence City Tax Rate and enter result on Line 2 ..... 2. \_\_\_\_\_
- 3. Tax expected to be withheld or paid to other than your residence municipality ..... 3. \_\_\_\_\_
- 4. Multiply each separate income earned outside your residence city  
in another taxing area by the credit limit of your residence city ..... 4. \_\_\_\_\_
- 5. Multiply Line 3 or 4, whichever is less, by the Tax Credit of your residence city ..... 5. \_\_\_\_\_
- 6. Tax expected to be withheld for residence municipality ..... 6. \_\_\_\_\_
- 7. Add lines 5 and 6 ..... 7. \_\_\_\_\_
- 8. Subtract Line 7 from Line 2 ..... 8. \_\_\_\_\_

**NON-WITHHELD SECTION**

- 9. Enter below income expected to be earned in a RITA municipality not your residence city and not withheld; multiply  
this figure by the Tax Rate of the municipality where the income was earned.  
\$ \_\_\_\_\_ x \_\_\_\_\_ Enter result on Line 9 ..... 9. \_\_\_\_\_
- 10. Total estimated tax. (Add Lines 8 and 9.) Place this amount on Line 1 Section 2 ..... 10. \_\_\_\_\_

**SECTION 2**

- 1. Total Estimated Tax for     ..... \$  ,  ,   .00  
(From Line 10, Section 1)
- 2. Less Prior Year Credit ..... \_\_\_\_\_
- 3. Total Tax Due ..... \_\_\_\_\_
- 4. Amount Paid (Make Check Payable to RITA) ..... \$  ,  ,   .00  
(Not Less than 1/4 Tax Due. Return form and payment within 30 days)

**PLEASE FURNISH THE FOLLOWING INFORMATION**

- A. Municipality where you live ..... \_\_\_\_\_
- B. Municipality where you earn income ..... \_\_\_\_\_
- C. Prior city of residence ..... \_\_\_\_\_
- D. Date moved into current city of residence ..... \_\_\_\_\_

E. Is municipal tax withheld from all your earnings? .....  Yes  No

**Remit To: Regional Income Tax Agency  
P.O. Box 6600, Cleveland, OH 44101-2004**

**Phone: (440) 526-0900 (Cleveland Local)  
(614) 538-0512 (Columbus Local)  
(800) 860-RITA (Toll Free)  
(440) 526-5332 (TDD Only)**

**Obtain forms at [www.ritaohio.com](http://www.ritaohio.com)**