Regional Income Tax Agency RITA Individual Income Tax Return For use by single or married taxpayers

2011

Contact us toll free:
Cleveland 800.860.7482
Columbus 866.721.7482
Youngstown 866.750.7482
TDD 440.526.5332

							Eiling State		
	I security number		Spouse's socia	al security number			Filing State ☐ Single or ☐ Joint 2		ling Separately 3
Your first n	ame and middle initi	al	Last name					verpaid, indic	ate your choice:
If a joint re	turn, spouse's first n	ame and middle initial	Last name				Ref	fund 3	Credit 2 1
Home add	ress (number and str	reet)			Apt #	‡			
City, state,	and ZIP code				I				-File & Secure
Daytime ph	hone number		Evening phone	number				w.ritaohi	
Chec		ed since January 1, 2 ation on a separate sl		e your change of	address.	If you move	ed more than	once, supp	oly the
Date	of Move:	Current Address (num	ber and street)		City		8	State	Zip
		Prior Address (number	and street)		City		S	State	Zip
moved in tax withhe name of t W-2. If yo	-2 wages earned ito or out of a RITA eld to your resider the municipality in	n 2011 and the amount municipality during the transfer of the municipality in Columbian which you or your spacity or village enter Column 2 Local/City Tax	the year, your ta umn 3 only (ever oouse physically	xable wages can n if you worked in worked. This m	nnot be le n the mun ay be diff enter scho	ss than Med dicipality who erent from the ool district ta	licare wages ere you lived) he employer'	(Box 5 of your color). In Column s address sons 2 or 3.	our W-2). List all n 4, indicate the shown on the
-2 Form -lere glue	(Greater of Box 1 5 or 18 from W-2)		Withheld for Resident Municipality	(Name of city of where you w	or village	(Name of	f city or village e you lived)	From Da MM/DD/	
clip Local/City copy of W-2 Forms nd Check or Money Order Here Do not use staples, tape or glue									
Paperclip L and Ch Do not									
Totals				Enter the total on Page 2, Line					
	2 if you want to n	e system at <u>www.rita.</u> nanually calculate you I declare that I hav and sources of munic	ur tax due. e examined this	y to use and wil	calculate	your tax du	ie (if any) imr	mediately.(Continue to page
Your Sig	nature		Date	Prepare	r's Signa	ature		Dat	te
Spouse's	s Signature if a j	oint return	Date	Prepare	r's Addre	ess		ID	Number

□Yes

□No

Preparer Phone #: _

May RITA discuss this return with the preparer shown above?

Section B

Section	В					
	1 a	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-	41.			
	2		1b 2		-	
	3	Total Taxable Income. Add lines 1a and 1b Multiply Line 2 by the tax rate of your resident municipality from the ta		la lacated at the		
	3	back of the instructions. Enter the tax rate of your resident municipality			3	
Withheld	4 a	·		J,		
taxes		Page 1, Section A, Column 2. Do not enter estimated tax payments	4a			
shown on your W-2	b	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			
forms are reported on	5 a				-	
either line 4a	b	Add lines to date to	5a		-	
or 7a.	D	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	7 a		7.			
card, debit	b	Column 3. Do not enter estimated tax payments. (See Instructions) Tax paid by your partnership/S corp to any RITA municipality	7a		-	
card, or website	8	Total credits allowable (Add lines 6, 7a, and 7b)	7b		8	
e-payment are reported	9	Subtract Line 8 from Line 3	9		0	
on line 13.	10		-		-	
	11	Tax on non-withheld wages from Page 3, Schedule K, Line 32 Tax on Schedule J Income from Page 3, Schedule K, Line 36	10		-	
	12	TAX DUE RITA AFTER WITHHOLDING. Add lines 9, 10 and 11. If	11 less t	than zero, enter		
	12	-0- and see the instructions about filing a Form 10-A to claim your refu		triair 2010, critor ▶	12	
Refunds: To avoid	13	2011 Estimated Tax Payments made to RITA by check, debit or				
delays in processing		credit card or e-payment. Do not enter tax withheld from your W-2s.	42			
your refund,	14	Do not include payments made in 2011 for years other than 2011	13		-	
check the refund box in	15	Credit carried forward from 2010 TOTAL CREDITS. Add lines 13 and 14	14		45	
the upper	16		10	Λ ::::	15	
right-hand corner of	10	Balance Due. If line 15 is less than line 12, subtract line 15 from line than \$1 will not be collected (see instructions for exceptions to this rule)		Amounts less	16	
page 1.	17	If line 15 is GREATER than 12, subtract line 12 from line 15 and enter		RPAYMENT	17	
Refunds of tax withheld	18	Amount you want credited to your 2012 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	Enter 2012 estimated tax in full (see instructions). Estimates are due 4/17/12, 7/31/12, 10/31/12 and 1/31/13	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 17, 2012. Add Lines 16 and 21			22	

Estimated Taxes (Line 20a)

If you anticipate owing \$10.00 or more in income tax in 2012, 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 2012 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)

A Wages/Income earned outside of resident city	B Credit limit for resident city from tax table	C Maximum credit (multiply column A by column B)	D Workplace tax withheld/paid	E Allowable Credit Enter lesser of columns C or D
Total Allowable	Credit. Enter on	Section B, Line 5h	above.	

Mail your return with W-2s 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

00112001712271111101		TILDULES AITE TIL	QUITED II COMI L	ETING SCHEDULE	J	
SCHEDULE J	SUMMARY OF N	ON W-2 INCOME	(Enter Municipalit	y 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 80. (NOTE: Line 30 cannot be less than zero.)					Column 6, Line 28 or less than zero. If amo zero, use zero.	

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

·			•	needed, use separate sheet
		THAN YOUR RESIDENCE MUNIC OYER. Complete Lines below.	IPALITY FROM WHICH	
Wages	Municipality	Tax Rate (see instructions)	Tax due	
	+	+		-
Copy total tax due onto Line 32	2 and in Section B, Line 10.	<u>'</u>		32
WITHHELD BY EMPLOYER	R. (ONLY USE THIS SECTION I	ALITY AND FROM WHICH NO M F YOU HAVE FILED AND PAID TH		WAS
TTOTAL BIOLINGWON ALI	TY. PROOF OF PAYMENT MAY	/ BE REQUIRED) Complete Lines	Below.	_
Wages Wages	Municipality	/ BE REQUIRED) Complete Lines Tax Rate (see instructions)	Below. Tax due	
Wages Copy total tax due onto Line 33	Municipality 3	Tax Rate (see instructions)	Tax due	33
Wages Copy total tax due onto Line 33	Municipality 3 RESIDENCE MUNICIPALITY	Tax Rate	Tax due	
Wages Copy total tax due onto Line 33 TAX DUE TO OTHER THAN	Municipality 3 RESIDENCE MUNICIPALITY (mplete Lines below.	Tax Rate (see instructions)	Tax due	
Copy total tax due onto Line 33 TAX DUE TO OTHER THAN COLUMNS 3, 4, AND 5. Co	Municipality 3 RESIDENCE MUNICIPALITY (mplete Lines below.	Tax Rate (see instructions) ON NON W-2 INCOME REPORTE Tax Rate	Tax due D IN SCHEDULE J, LINE	
Copy total tax due onto Line 33 TAX DUE TO OTHER THAN COLUMNS 3, 4, AND 5. Co	Municipality 3 RESIDENCE MUNICIPALITY (mplete Lines below.	Tax Rate (see instructions) ON NON W-2 INCOME REPORTE Tax Rate	Tax due D IN SCHEDULE J, LINE	
Copy total tax due onto Line 33 TAX DUE TO OTHER THAN COLUMNS 3, 4, AND 5. Co	Municipality 3 RESIDENCE MUNICIPALITY (mplete Lines below.	Tax Rate (see instructions) ON NON W-2 INCOME REPORTE Tax Rate	Tax due D IN SCHEDULE J, LINE	

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

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

35.

36.