

Part A ACCOUNT INFORMATION

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|---|---|---|
| Name _____ Address _____ City _____ State _____ Zip Code _____ | EIN/FID Number _____ Filing Status - check only one <input type="checkbox"/> C-Corporation <input type="checkbox"/> S-Corporation <input type="checkbox"/> Fiduciary (Trust and Estates) <input type="checkbox"/> Partnership/Association <small>(do not use this form for Schedule C filers)</small> | JEDD OR JEDDS OF INCOME 1. _____ 2. _____ 3. _____ |
|---|---|---|

Part B EXTENSION INFORMATION

| JEDD | ESTIMATED TOTAL TAXABLE INCOME | Tax Rate | ESTIMATED TAX DUE | LESS AMOUNT PAID ON CURRENT ESTIMATE AND/OR ANY OVERPAYMENT CREDITS | NET TAX DUE (TENTATIVE AMOUNT) |
|----------------------------|--------------------------------|----------|-------------------|---|--------------------------------|
| North Pickaway County JEDD | 20 | 2.5% | | | |
| Prarie Township JEDD | 22 | 2.5% | | | |
| Madison Township JEDD | 24 | 2.5% | | | |

Make payable to: **COLUMBUS CITY TREASURER**
 Mail to: Columbus Income Tax Division
 PO Box 182158
 Columbus, Ohio 43218-2158

Payment
 (with this extension)

\$

Payment can only be accepted for the JEDDs listed above.

If an extension of time is necessary, file this form **on or before the due date** with the Columbus Income Tax Division in accordance with the instructions available on our website www.columbus-tax.net.

An extension of 180 days for filing a JEDD income tax return for the year stated above is hereby requested for the following reason:

This form only serves to extend the time to file a JEDD tax return. Any tax remaining due after the original due date of the return will be subject to penalty and interest as prescribed in the city tax codes.

Part C SIGNATURE

Signature of taxpayer(s). I declare that the extension requested herein for filing a JEDD income tax return for the taxable year stated is necessary for the reason given above and that I am authorized to sign this request.

Sign Here ▶ _____

Title (if officer of the Corporation)

Date

If request is not signed by the taxpayer, enter the name and address of the firm.

Address