

Instructions for Form BR-42

Application for Filing Extension

For use in preparing
2016 Returns

The City of Columbus administers the municipal income tax for Columbus, Brice, Canal Winchester, Groveport, Harrisburg, Marble Cliff and Obetz.

It is important that a completed return be filed on or before the due date as prescribed by Columbus City Codes. Per Columbus City Code §362.094(A), any business that has duly requested an automatic six-month extension for filing the businesses federal income tax return shall automatically receive an extension for the filing of the city income tax return. The extended due date of the municipal income tax return shall be the fifteenth day of the tenth month after the last day of the taxable year to which the return relates.

If an extension payment needs to be made, or an extension has not been requested or granted by the Internal Revenue Service and you are unable to prepare an accurate return for filing on the due date, this form must be filed and the tax thereon paid by the date the return is normally due.

Part 1: Account Information

1. Please enter the information in the spaces provided for name, current address and EIN/FID number.
2. Check the appropriate box that corresponds to the filing status of the business.
3. List the city or cities of income where business is being conducted. If you are conducting business in a municipality not listed in Part 2, be sure to also list the city or cities in the spaces provided.

Part 2: Extension Information

Column 1 - Enter estimated total taxable income.

TAX RATE - Use tax rate as indicated on appropriate city line.

Column 2 - Enter the estimated tax due - Column 1 multiplied by appropriate tax rate.

Column 3 - Enter all city tax paid on your current estimate and/or any overpayment credits.

Column 4 - Enter net tax due - Column 2 minus Column 3.

Total all net tax due and enter in the "Payment" box.

Signature

The signature on Form BR-42 shall be that of an officer of the corporation or member of a partnership, or the person or firm employed to complete the annual return.

Payment accompanying this request must be an amount equal to the additional liability as shown on the face of this form plus the unpaid balance, if any, on the original declaration. Interest accrues on the unpaid balance from the original due date.

FOR ADDITIONAL INFORMATION CALL (614) 645-8328.

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