2010 Ohio IT 1041EXT Ohio Income Tax Extension Payment Coupon for Estates and Trusts

If you will be providing taxpayer information on a cartridge tape, please see “Cartridge Tape Ohio IT 1041ES Filing Requirements Definition,” which follows the instructions for this payment coupon.

Please cut on the dotted lines. DO NOT USE PENCIL to complete this form.

OHIO IT 1041EXT

Rev. 6/10

Ohio Income Tax Extension Payment Coupon For Estates and Trusts

Reset Form

Extension Payment

Do NOT fold check or coupon.

For Taxable Year Beginning In

2010

Federal Employer Identification Number

☐ **TRUST**

Social Security Number of Decedent (estates only)

☐ **ESTATE**

Name of trust or estate

Fiduciary name and title

Number, street, P.O. Box, suite or room number

City, state, ZIP code

Payment Amount $ .00

DO NOT STAPLE, PAPER CLIP OR OTHERWISE ATTACH YOUR CHECK OR CHECK STUB TO THIS COUPON. DO NOT SEND CASH. Return this coupon with check or money order made payable to **OHIO TREASURER OF STATE** and mail to OHIO DEPARTMENT OF TAXATION, P.O. BOX 2619, COLUMBUS, OH 43216-2619.

419

Cartridge Tape Filing: IT 1041ES Payments Requirements Definition

Overview

The Ohio Department of Taxation is providing a "Fast Tax" option to replace the manual paper filing with a cartridge tape(s) for all third-party vendors that file Ohio form IT 1041ES on behalf of their clients. This process will not only eliminate paper and manual processing functions, but also increase the accuracy of the information updated to the taxpayer's file. This requirement's definition will define the requirements and specifications. These same requirements apply to the IT 1041EXT. The Department of Taxation can revoke this option if the user tax is not fully complying with the Fast Tax requirements.

Department of Taxation Contacts

Contact Russell Strope at (614) 752-1987 if you have any questions about the Ohio form IT 1041ES information or the cartridge tape. The user must provide the Department of Taxation with a contact person and phone number for reporting production transmittal discrepancies.

Test Cartridge Tape

Two tapes must be run with the information required. One tape will be sent with documentation and the second tape will be retained by the vendor as a backup. If the production tape is corrupt, the vendor must supply the backup tape within three days. This process should also be continued when production begins.The external label must indicate that this is a **test tape** of Ohio form IT 1041ES test data.

Send Test Cartridge Tape To:

Ohio Dept. of Taxation – Information Services Division
S.O.C.C. – 1320 Arthur E. Adams Drive
Room 224 – Tape Library
Columbus, Ohio 43221

Approval Process

Fast Tax will be advised of the test results and informed of changes (if any) that are required before live production begins.

Cartridge Tape Requirements

A file will be required to be sent to the Ohio Department of Taxation as follows.

- Ohio form IT 1041ES documents
- 3490 cartridge tape

Tape File Specification	
Medium	3490 cartridge tape
File name	Ohio form IT I041ES data file Label: "ODT.IT1041ES.INPUT"
Record length	260 characters
Block size	32760
Record format	Fixed block (FB)

Cartridge Tape Layout

See chart below.

Record Layout – Ohio IT 1041ES Detail Record
(Supplied by Department of Taxation to Vendor)

Field Name	Length	Data Type	Position	
			Start	End
FEIN	9	N	1	9
Tax Year	4	N	10	13
Batch Number	11	N	14	24
Trust Name – 1	35	A/N	25	59
Trust Name – 2	35	AJN	60	94
Fiduciary Name – 1	35	A/N	95	129
Fiduciary Name – 2	35	A/N	130	164
Address	35	A/N	165	199
City	20	A	200	219
State	2	A	220	221
ZIP Code	5	N	222	226
Check Amount	11	N	227	237
Receive Date	8	N	238	245
Processing Code	1	A	246	246
Document Type	1	A	247	247
Form Type	2	A/N	248	249
Source ID	2	N	250	251
Filler	9	A/N	252	260

The following section describes how each field on the Ohio form IT I041ES record should be formatted or valued.

- **FEIN:** This is the federal employer identification number identifying the taxpayer. This field is required and must be numeric.
- **Tax Year:** The year for which the Ohio form IT 1041ES is being filed (i.e., 2002). This field is required and must be numeric.
- **Batch Number:** For Department of Taxation use. Zero-fill.
- **Trust Name – 1, Trust Name – 2, Fiduciary Name – 1 and Fiduciary Name – 2:** Names and information identifying the account. Space-fill any unused name field.
- **Address, City, State and ZIP Code:** Mailing address of the account. Space-fill address, city or state, if unknown. Zero-fill ZIP code, if unknown.
- **Check Amount:** The amount of the payment being sent in dollars and cents. Must be numeric with leading zeros and no punctuation. Maximum amount is $999,999,999.99. (i.e., for a payment of $396.45 value 00000039645).
- **Receive Date:** For Ohio Department of Taxation use. Zero-fill.
- **Processing Code:** For Ohio Department of Taxation use. Space-fill.
- **Document Type:** For Ohio Department of Taxation use. Value N.
- **Form Type:** Value T2 if the Ohio form IT 1041ES is filed for trust tax; value E2 if the Ohio form IT 1041ES is filed for estate tax.
- **Source ID:** A code to identify the source of the information. Value 05.
- **Filler:** Currently unused. Space-fill.

Tape Submittal Information
The following is the list of requirements for each cartridge tape that is sent in.

- The external label on the production cartridge tape must reflect the target agency, content, due date, volume number, transmitter's company name, number of records, batch tax due amount, batch check amount. Volume numbers must indicate the proper sequence (e.g., Tape: 2 of 3) on each label.

Example Label

Ohio Department of Taxation	
Ohio IT 1041ES:	Voucher Due Date:
Tape: **1 of 4**	Vol-Ser: **213456**
Company Name: **Fast Tax**	
Number of Records: **500**	
Batch Tax Due Amount: **456,123.78**	
Batch Check Amount: **456,123.78**	

- Transmittal letter (see sample, next page)
- Send cartridge tape(s) and check(s) (see Document Processing, Check Processing and Balancing Processing) to the following address:

  State of Ohio – Department of Taxation
  c/o Mike Cardi
  4485 Northland Ridge Blvd.
  Columbus, OH 43229

Document Processing
Only zero tax liability and tax due liability information is required to be filed by cartridge tape. It is suggested that a listing of all taxpayers on the cartridge tape be made for ease of reconciliation. You are not required to file this report with the Ohio Department of Taxation.

Check Processing
The requirements for check processing will be as follows:

- One check remitted for each cartridge tape submitted.
- Each check must be in balance with each cartridge tape.
- Make checks payable to: **Ohio Treasurer of State.**

Balancing Processing
Once the Ohio Department of Taxation receives the cartridge tape(s) and certified check(s), the cartridge tape(s) will be run to see if the amount on the transmittal letter matches. If the cartridge tape(s) do not match, Fast Tax will be notified immediately by phone that there was a discrepancy, and the tape(s) will be withheld from further processing.

Vendor Responsibility
Fast Tax is responsible for the integrity of the data that they are sending to the Ohio Department of Taxation.

Transmittal Letter
The following information will need to be included on the Ohio form IT 1041ES transmittal letter for each cartridge tape sent in.

- Company name
- Data set name (DSN) on cartridge tape (Ex: 'ODT. IT1041 ES.INPUT'...refer to section 4.1).
- Tape identifier (Vol-Ser) for each cartridge tape (Ex: '213456')
- Number of records on each cartridge tape
- Check amount
- Signature, date and title of the transmitter.

Make check(s) (one check per tape) payable to **Ohio Treasurer of State** and send to the following address:

Ohio Department of Taxation
c/o Mike Cardi
4485 Northland Ridge Blvd.
Columbus, OH 43229

Ohio IT 1041ES Transmittal Letter

Ohio Department of Taxation
Remittance of Ohio IT 1041ES Payments

Company name: **Fast Tax** DSN: _____

Make check(s) (one check per tape) payable to Ohio Treasurer of State and mail to:

Ohio Department of Taxation
c/o Mike Cardi
4485 Northland Ridge Blvd.
Columbus, OH 43229

Tape Vol-Ser	Number of Records	Check and Document Amount
Total		

Total of all checks enclosed

_____ _____
Signature Date

_____ $ _____
Title

Federal Privacy Act Notice

Because we require you to provide us with a Social Security number, the *Federal Privacy Act of 1974* requires us to inform you that providing us with your Social Security number is mandatory. Ohio Revised Code sections 5703.05, 5703.057 and 5747.08 authorize us to request this information. We need your Social Security number in order to administer this tax.