Department of Taxa i

2017 Ohio SD 100 School District Income Tax Return



Rev. 9/17

Do not staple or paper clip.

Use only black ink and UPPERCASE letters.

Due Date O.R.C. 5747.08(C	Ohio SD 100 for ea	olack ink and ach taxing schoo			uring the taxable year	r.	
O.R.C. 5748.01(D) Check here if this is an <u>amended</u> retur	n. Include the Ohi	o SD RE (do <u>N</u>	I <mark>OT</mark> include a	copy of the pr	eviously filed return)		
Check here if this a Net Operating Los	s (NOL) carrybacł	k. Include Ohio	Schedule IT I	NOL.			
Taxpayer's SSN (required) O.R.C. 5703.057(A)	▶ If deceased	Spouse's SSN	N (if filing jointl	y)	▶▶ If deceased	Enter school district # for this return (see instruction)	
	check box				check box	SD# O.R.C. 574	48
First name	1	M.I. Last nam	e				
Spouse's first name (only if married filing jo	intly)	M.I. Last nam	e				
Address line 1 (number and street) or P.O. I	Зох						
Address line 2 (apartment number, suite nu	mber, etc.)						
City			State	ZIP code	Ohio county	(first four letters)	
Foreign country (if the mailing address is ou	utside the U.S.)		Foreign _I	postal code			
O.R.C. 57	748.01(F)(I)						
School District Residency - Chec	k applicable box		Check appli	cable box for	spouse (only if marri	ed filing jointly)	
Full-year Part-year resident Full-year nonresident of SD# above		Full-year Part-year resident Full-year nonresident of SD# above					
Enter date of nonresidency	to		Enter date of nonreside	ency	to		
Filing Status – Check one (must match	the Ohio IT 1040):	Tax Type	- Check one	(for an explanation, se	ee instructions)	
Single, head of household or qualifying widow(er)			The school district for which this return is being filed is a(n):				
Married filing jointly O.R.C. 5747.08(E)			Traditional tax base school district. You must start with Schedule A. line 19, on page 2 of this return.				
Married filing separately			Earned income tax base school district. You must start with Schedule B, line 24, on page 2 of this return.				
School district taxable income: Traditional Earned inc	tax base: Enter or ome tax base: Ent	n this line the an	nount you showne amount you	w on line 23. I show on line 2	₂₇ Q.R.C. 57	48.01(E)(1)(a)or	(b)
2. School district tax rate times line 1 (rates found in the instr			ructions)		2 O.R.C. 5	5748.02(A)	
3. Senior citizen credit (you must be 65 or older to claim this credit; limit \$50 per return					3. O.R.C. 5	5748.06	
4. School district income tax liability (line 2 minus line 3; if less than zero, enter zero) 5. Interest penalty on underpayment of estimated tax. Include Ohio IT/SD 2210 and the appro				4.			
b. Interest penalty on underpayment of estimated tax. Include Onio 11/5D 221 worksheet if you annualize				5. O.R		5747.09(D&E)	
6. Total school district income tax liabilit	y before withholdi	ng or estimated	d payments (li	ine 4 plus line	5)6.		
			_				
Do not write in this area; for department use only.				/	tmark date Code		

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SS	SN SD#		
6a. <i>F</i>	Amount from line 6 on page 1School district number on V	V-2(s), W-2G(s) and/or 1099-R(s) must	.6aSee SD 100, line 6
r	agree with the school district number on this return. Include W-2 eturn Estimated (2017 Ohio SD 100ES) and extension (2017 Ohio S		7O.R.C. 5747.08(H)
0. 2	carryforward from previous year return		8O.R.C. 5747.09(A)(1)
9. <u>/</u>	Amended return only – amount previously paid with original a	and/or amended returnO.	R ₉ C. 5747.10 & O.R.C. 5747.11
10. 1	Total school district income tax payments (add lines 7, 8 ar	nd 9)	. 10.
11. <u>/</u>	Amended return only – overpayment previously requested or	n original and/or amended returnO.	.R _{1.} C. 5747.10 & O.R.C. 5747.11
12. L	ine 10 minus line 11. Place a "-" in the box at the right if the amou	. 12.	
	If line 12 is MORE THAN line 6a, go to line 16. OTHER	RWISE, continue to line 13.	
	Tax liability (line 6a minus line 12). If line 12 is negative, ignore to line 6a		.13.
14 l	nterest and penalty due on late filing or late payment of tax (see i	nstructions)	14O.R.C. 5748.08(6). 5747.15
15. 1	TOTAL AMOUNT DUE (line 13 plus line 14). Include Ohio SD 40 (if amended return) and make check payable to "School Distri	OP (if original return) or Ohio SD 40XP	
16. 0	Overpayment (line 12 minus line 6a)		.16 O.R.C. 5747.01(R)
17. ⊆	Original return only – amount of line 16 to be credited toward 20	18 school district income tax liability	.17 O.R.C. 5747.11(A)
18. F	REFUND (line 16 minus line 17)	YOUR REFUND	18.
<u>Sche</u>	edule A - Traditional Tax Base School District Amounts (se	ee instructions)	
	plete this schedule <u>only</u> if filing a traditional tax base school dist		
	Ohio income tax base (Ohio IT 1040, line 3 minus Ohio IT 1040 at the right if the amount is less than zero	O, line 4). Place a "-" in the box	.19 O.R.C. 5748.01(E)(1)(a)
21. 7	Business income deduction add-back (see instructions) Total traditional tax base school district income (line 19 plus line right if the amount is less than zero	e 20). Place a "-" in the box at	.20 O.R.C. 5748.01(E)(1)(a)
r	The amount from line 21, if any, that you earned while <u>not</u> a re number you entered on this return	. ₂₂ O.R.C. 5748.01(G)(1)	
li	ine 1 of this return	······································	.23.
	edule B - Earned Income Tax Base School District Amoun plete this schedule only if filing an earned income tax base scho	· · · · · · · · · · · · · · · · · · ·	
	iplete this schedule <u>only</u> if filling an earned income tax base scho Nages and other compensation you earned while you were a r		
r 25. N	number you entered on this return (see instructions) Net earnings from self-employment to the extent included in Ol	nio adiusted gross income. Place	
a	a "-" in the box at the right if the amount is less than zero		.25 O.R.C. 5748.01(E)(1)(b)
27. 5	Miscellaneous federal adjustments (see instructions)	than zero, enter zero). Enter here and o	n
Sic	In Here (required): I have read this return. Under penalties of per	iury I declare that to the best of my knowledge	o If your refund is \$1.00 or less, no refund will be issued
and	belief, the return and all enclosures are true, correct and complete.	Date (MM/DD/YY) O.R.C. 5703	If you owe \$1.00 or less, no payment is necessary.
I.	pouse's signature		NO Payment Included – Mail to: School District Income Tax P.O. Box 182197
H	Check here to authorize your preparer to discuss this return with Ta		Columbus, OH 43218-2197 Payment Included – Mail to:
	parer's printed name U.R.C. 5747.08(F)	School District Income Tax P.O. Box 182389	
Pnor	ne number Preparer's TIN (P	TIN) P	Columbus, OH 43218-2389