

Do not use staples.



Department of Taxation



Taxable year beginning in

2012

SD 100 School District Income Tax Return Rev. 9/12

Use only black ink.

File a separate Ohio form SD 100 for each taxing school district in which you lived during the taxable year.

Taxpayer Social Security no. (required) If deceased Spouse's Social Security no. (only if joint return) If deceased

Enter school district # for this return (see pages SD 7-8).

SD#

Use UPPERCASE letters.

Your first name M.I. Last name

Spouse's first name (only if married filing jointly) M.I. Last name

Mailing address (for faster processing, use a street address)

City State ZIP code Ohio county (first four letters)

Home address (if different from mailing address) - do NOT show city or state ZIP code County (first four letters)

Foreign country (provide this information if the mailing address is outside the U.S.) Foreign postal code

School District Residency - File a separate Ohio form SD 100 for each taxing school district in which you lived during the taxable year.

Check applicable box Full-year resident Part-year resident of SD# above Full-year nonresident of SD# above

Filing Status - Check one (must match Ohio income tax return):

Single or head of household or qualifying widow(er) Married filing jointly Married filing separately (enter spouse's SS#)

Do not use staples, tape or glue. Place your W-2(s), check (payable to School District Income Tax) and Ohio form SD 40P on top of your return. Include forms W-2G and 1099-R if tax was withheld. Place any other supporting documents or statements after the last page of your return.

Go paperless. It's FREE! Visit tax.ohio.gov to try Ohio I-File.

Most electronic filers receive their refunds in 5-7 business days by direct deposit!

Tax Type - Check one (for an explanation, see page SD 1 of the instructions)

I am filing this return because during the taxable year I lived in a(n): Traditional tax base school district. Earned income only tax base school district.

INCOME INFORMATION - If the amount on line 1 is negative, shade the negative sign ("-") in the box provided.

1. Traditional tax base school district filer. Enter on this line your Ohio taxable income reported on line 5 of Ohio form IT 1040EZ or IT 1040. Earned income only tax base school district filer. Complete Schedule A on page 2 of this return and then enter on this line the amount you show on page 2, line 22 of this return. 2. The amount of Ohio taxable income, if any, you earned while not a resident of the traditional tax base school district whose number you entered above. Earned income only tax base school district filers must leave this line blank. 3. School district taxable income (line 1 minus line 2; enter -0- if less than zero)

NO Payment Enclosed - Mail to: School District Income Tax P.O. Box 182197 Columbus, OH 43218-2197

If you have a federal extension of time to file, include a copy or the confirmation number of the extension.

Payment Enclosed - Mail to: School District Income Tax P.O. Box 182389 Columbus, OH 43218-2389



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SS# [] SD# []

3a. Amount from line 3, page 1 3a. [] [] [] [] 0 0
4. School district tax rate (use the applicable decimal rate from pages SD 7-8 of the instructions)
• 0 times line 3a..... 4. [] [] [] [] 0 0
5. Senior citizen credit (you must be 65 or older to claim this credit; limit \$50 per return) 5. [] [] [] [] 0 0
6. Total due (line 4 minus line 5; enter -0- if less than zero) 6. [] [] [] [] 0 0
7. Interest penalty on underpayment of estimated tax. Enclose Ohio form IT/SD 2210 and the appropriate worksheet if you annualize 7. [] [] [] [] 0 0
8. Total due plus IT/SD 2210 interest penalty (add lines 6 and 7) TOTAL TAX ▶ 8. [] [] [] [] 0 0
9. School district income tax withheld (school district number on W-2(s), W-2G(s) and/or 1099-R(s) must agree with school district number in the upper right-hand corner on page 1 of this return) ... 9. [] [] [] [] 0 0
10. Add the 2012 Ohio form SD 100ES payment(s), 2012 Ohio form SD 40P extension payment(s) and 2011 school district overpayment credited to 2012 10. [] [] [] [] 0 0
11. Add lines 9 and 10 TOTAL PAYMENTS ▶ 11. [] [] [] [] 0 0
If line 11 is MORE THAN line 8, go to line 12. If line 11 is LESS THAN line 8, skip to line 15.
12. If line 11 is MORE THAN line 8, subtract line 8 from line 11 AMOUNT OVERPAID ▶ 12. [] [] [] [] 0 0
13. Amount of line 12 to be credited to 2013 school district income tax liability CREDIT TO 2013 ▶ 13. [] [] [] [] 0 0
14. Line 12 minus line 13. Enter here, then skip to line 16 14. [] [] [] [] 0 0
15. If line 11 is LESS THAN line 8, subtract line 11 from line 8..... AMOUNT DUE ▶ 15. [] [] [] [] 0 0
16. Interest and penalty due on late-paid tax and/or late-filed return (see page SD 6 of the instructions)... 16. [] [] [] [] 0 0
If you entered an amount on line 14, skip to line 18. If you entered an amount on line 15, go to line 17.
17. Amount due plus interest and penalty (add lines 15 and 16). If payment is enclosed, make check payable to School District Income Tax and include Ohio form SD 40P (see our Web site at tax.ohio.gov) AMOUNT DUE PLUS INTEREST AND PENALTY ▶ 17. [] [] [] [] 0 0
18. Refund less interest and penalty (line 14 minus line 16). Enter the amount here. (If line 16 is more than line 14, you have an amount due. Subtract line 14 from line 16 and enter this amount on line 17.) YOUR REFUND ▶ 18. [] [] [] [] 0 0
If your refund is less than \$1.01, no refund will be issued. If you owe less than \$1.01, no payment is necessary.

SCHEDULE A - EARNED INCOME ONLY TAX BASE SCHOOL DISTRICT AMOUNTS (See page SD 6 of the instructions.)

Complete this schedule only if you entered an earned income only tax base school district number in the upper right-hand corner on page 1 of this return.
19. Wages and other compensation described on page SD 6 of the instructions..... 19. [] [] [] [] 0 0
20. Net earnings from self-employment described on page SD 6 of the instructions. Shade the negative sign ("-") at right if the amount is less than -0- 20. [] [] [] [] 0 0
21. Depreciation expense adjustment, if any, described on page SD 6 of the instructions..... 21. [] [] [] [] 0 0
22. Add lines 19, 20 and 21. Enter the total here and on line 1 of this return 22. [] [] [] [] 0 0

SIGN HERE (required) - See page 1 of this return for mailing information.

I have read this return. Under penalties of perjury, I declare that, to the best of my knowledge and belief, the return and all enclosures are true, correct and complete.
Your signature Date
Spouse's signature (see page SD 3 of the instructions) Phone number (optional)
Preparer's printed name (see page SD 3 of the instructions) Phone number
Do you authorize your preparer to contact us regarding this return? Yes No

For Department Use Only
[] [] [] [] [] [] [] [] [] []
[] [] [] [] [] [] [] [] [] []
Code