

Ohio | Department of
Taxation



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Ohio

Department of
Taxation



Why eForms?

Why Now?



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Expanding paperless filing options

Targeted demographic includes:

- Paper 1040 population***
- Paper 1040 EZ population***
- TeleFile population***



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Benchmarking and Research

***Most of the states and software providers use Adobe to
save documents***

***Our PDF fill in forms received a tremendous
amount of use on nearly all form types***

No cost to the taxpayer

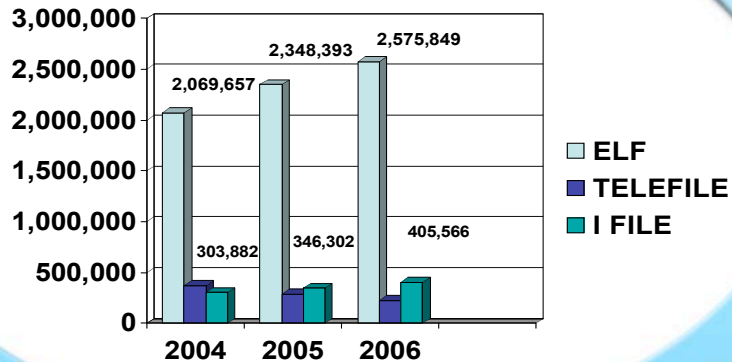
Annual return filing base:

Personal Income Tax averages 5.5 million

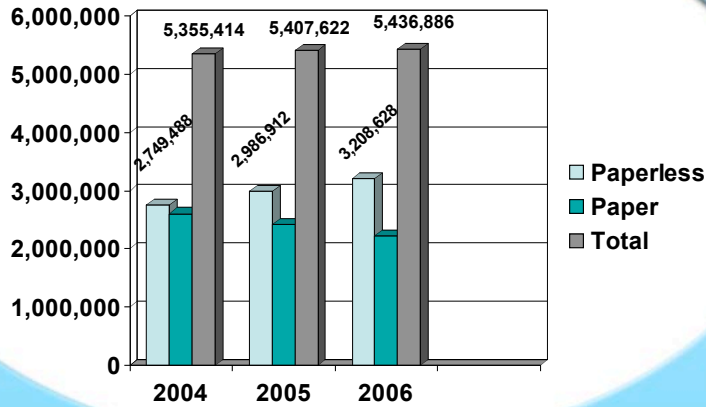
School District Income Tax averages 600,000

School District Income Tax will grow to 700,000 by 2010

2004 through 2006 Electronic



2004-2006 Paper versus Paperless



Taxpayer Paperless Filing Choices



If you hate dealing with tax forms, I-File may be for you. Our I-File wizard asks you a series of questions, then compiles a state or school income tax return for you based on your answers. I-File will even do the math for you. And it's free. If you owe taxes, there's also an ePayment option that allows you to pay by either electronic check or credit card.



Our newest option for 2008 is eForms. Through eForms, you can complete Adobe Acrobat versions of all our major state and school income tax forms online, much as you would on paper. eForms will even do most of your math for you. And it's free.



If you file through a tax preparer, or if you use software on your home computer to prepare a return, you may be able to file your state and federal tax returns electronically through the IRS e-file program. The IRS maintains a list of tax preparers who are authorized e-file providers. Taxpayers with lower or moderate incomes may also be eligible for the IRS "free file" options. Please visit the IRS Web site for more information.

TeleFile

If you used your touchtone telephone to file a return last year, the Department of Taxation will be sending you a TeleFile booklet so you can again file by telephone.



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How it works

eForms will display an Ohio income tax return form on the taxpayer computer screen.

The taxpayer will fill in the lines on the return that apply.

eForms will do most of the math calculations and figure out the tax.



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After completion of the eForm return, the taxpayer can either file the return electronically or print it out and send it to us in the mail.

If the return is filed electronically, the taxpayer is required to complete the online registration process.



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eForms will guide the taxpayer through the registration and transmission of the return and provide a filing confirmation number.

Print Blank Form



Ohio Department of
TAXATION

Please do not use staples.



07000103

Taxable years beginning in

2007

IT 1040 Rev. 8/07

Individual
Income Tax Return

Taxpayer Social Security no. (required)	If deceased	Spouse's Social Security no. (only if joint return)	If deceased
<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
Use UPPERCASE letters.	check box	M.I.	Last name
Your first name	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>			Date of Birth (MMDDYYYY)
<input type="text"/>			<input type="text"/>
Spouse's first name (only if joint return)		M.I.	Last name
<input type="text"/>		<input type="text"/>	<input type="text"/>
<input type="text"/>			Date of Birth (MMDDYYYY)
<input type="text"/>			<input type="text"/>
Mailing address – for faster processing, please use a street address			
<input type="text"/>			
City	State	ZIP code	Ohio county
<input type="text"/>	OH <input type="text"/>	<input type="text"/>	NONE <input type="text"/>
Home address (if different from mailing address) – please do NOT show city or state		ZIP code	Ohio county
<input type="text"/>		<input type="text"/>	NONE <input type="text"/>
Foreign country (please provide this information if the mailing address is outside the U.S.)		Foreign postal code	
<input type="text"/>		<input type="text"/>	

Ohio Residency Status (see instructions on page 9)
 Resident Nonresident/state Part-year resident from: _____ to _____

Filing Status – Check one (as reported on federal income tax return)
 Single or head of household or qualifying widow(er)
 Married filing jointly
 Married filing separately – enter spouse's SS# _____

Ohio Political Party Fund Yes No
 Do you want \$1 to go to this fund?
 If joint return, does your spouse want \$1 to go to this fund?
 Note: Checking "Yes" will not increase your tax or decrease your refund.

Ohio Public School District Number (see pages 35-39 in the instructions) Columbus

INCOME AND TAX INFORMATION

1. Federal adjusted gross income (from federal forms 1040, line 37; or 1040-A, line 21; 1040-EZ, line 4; or 1040-NR, line 36)	1.	\$49,000	00
2. Adjustments from line 47 on page 3 of Ohio form IT 1040 Schedule A	2.	\$0	00
3. Ohio adjusted gross income (line 2 added to or subtracted from line 1)	3.	\$49,000	00
4. Personal exemption and dependent exemption deduction – multiply your personal and dependent exemptions 2 times \$1,450 and enter the result here	4.	\$2,900	00
5. Ohio taxable income (line 3 minus line 4; enter -0- if line 3 is less than line 4)	5.	\$46,100	00
6. Tax on line 5 (see tax tables, pages 28-34 in the instructions)	6.	\$1,446	00
7. Credits from Schedule B from line 57 on page 4 of Ohio form IT 1040 Schedule B	7.	\$0	00

Submitting your return electronically will expedite receipt of your refund. If you choose to submit your return by mail it will slow down the refund process.


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

SCHEDULE A – Income Adjustments (Additions and Deductions) Back to page 1


Additions – Add to the extent not included in federal adjusted gross income (line 1).

31. Non-Ohio state or local government interest and dividends	31.	\$0	00
32. Certain pass-through entity Ohio taxes paid	32.	\$0	00
33a. Federal interest and dividends subject to state taxation	33a.	\$0	00
b. Reimbursement of college tuition expenses and fees deducted in any previous year(s)	b.	\$0	00
c. Losses from sale or disposition of Ohio public obligations	c.	\$0	00
d. Nonmedical withdrawals from an Ohio medical savings account and miscellaneous federal tax adjustments Health Care Expenses Worksheet	d.	\$0	00
e. Reimbursement of expenses previously deducted for Ohio income tax purposes, but only if the reimbursement is not in federal adjusted gross income	e.	\$0	00
f. Noneducation expenditures from college savings account	f.	\$0	00
g. Adjustment for Internal Revenue Code sections 168(k) and 179 depreciation expense	g.	\$0	00
h. Ohio Revised Code section 5733.40(A) pass-through entity adjustment	h.	\$0	00
34. Total additions (add lines 31 through 33h and enter here). You must complete the applicable line items above	34.	\$0	00

Health Care Expenses Worksheet for Line 43		Back to Schedule A
Do not include on this worksheet any amounts excluded from federal adjusted gross income under a cafeteria plan or under any flexible spending plan		
<i>One of six worksheets that assist the taxpayer</i>		
1a. Enter the unreimbursed health care expenses you paid	1a.	\$0 00
b. Enter the unreimbursed premiums you paid for dental, vision and health insurance (see Note #1 below). Do not include any amount you claimed for the self-employed health insurance deduction on line 29 of IRS form 1040.	1b.	\$0 00
c. Enter the unreimbursed premiums you paid for long-term care insurance (see Note #1 below)	1c.	\$0 00
d. Add lines 1 a, 1b and 1c	1d.	\$0 00
2a. Enter the unreimbursed premiums you paid for long-term care insurance (from line 1c above)	2a.	\$0 00
b. During the year, were you eligible to participate in any subsidized health insurance plan (see Note #2 below)?		
<input type="checkbox"/> Yes (enter -0- on line 2b)		
<input type="checkbox"/> No (enter on line 2b the premiums you paid for unsubsidized dental, vision and health care insurance) (see Note #3 below)	2b.	00
c. Add lines 2a and 2b and enter the total on both lines 2c and 2d	2c.	\$0 00
3. Line 1d minus line 2c; if less than -0-, enter -0-	3.	\$0 00
4. Enter your federal adjusted gross income (from line 1 of your Ohio form IT 1040)	4.	\$49,000 00
5. Statutory factor	5.	x 7.5%
6. Multiply line 4 by line 5 and enter here	6.	\$3,675 00
7. Line 3 minus line 6. If less than -0-, enter -0-. This amount is your excess medical expenses	7.	\$0 00
8. Line 2d plus line 7. Also enter on line 43 of Schedule A on		



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Taxpayer Choice

Transmit the return electronically

Or

Print the return and mail

*Electronic selection at the bottom
of page four*

eFile

Print Form

Check For Errors

Reset Form

Print Blank Form

Registration

In order to submit this form electronically, you must be registered with the Ohio Department of Taxation's website. This registration is only valid for the current calendar year. You will be required to register again next year.

- If you have not registered this year please select "New Registration" below and enter the requested information. Click on the "Submit Form" button to register and file this return electronically.
- If you have already registered this year, please select "Already Have an Account" below and enter your password. Click on the "Submit Form" to register and file this return electronically.

Note: Due to security concerns, you will not be able to save this page to your computer. Therefore, we strongly recommend you retain your registration information. If you are experiencing problems, please E-Mail us using the following link https://www-01.tax.state.oh.us/PROD/TaxMailWeb/global_emailus.html or call us at 800-282-1780.

New Registration

Already Have an Account

Registration

New Registration Already Have an Account

Registration Information

Social Security Number (SSN)	242 42 4270
Confirm Social Security Number (SSN)	242 42 4270
New Password	*****
Confirm New Password	*****
Mother's Maiden Name	MINNEAPOLIS
Last Name	IFILE
Date of Birth (MMDDYYYY)	02 26 1953
Email Address	
Phone Number	

Please use the following rules when creating your password:

- Passwords must be a minimum of eight(8) characters and a maximum of sixteen(16) characters
- Passwords must include both alphabetic and numeric characters
- Passwords should not include special characters (Other than alphabetic and numeric)
- Passwords are case sensitive
- Passwords can not be a series of repeating characters. Repeating 2 times is okay.
Eg. 222abc123 is an incorrect password whereas 22abc123 is a correct password.

Submit Form



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Taxpayer Message

Warning: JavaScript Window - Information




Registration process completed successfully.
For the submission process to complete, the form will now connect to the
taxation server.
Please click allow on the next message to file this return.


OK

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Successful Transmission

Warning: JavaScript Window - Filing Successful

 Your return is submitted successfully, confirmation number is: 0808416875. Please print this form for your records.

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Query Return Transmission

eForms **View Taxpayer Submitted Data** Welcome dgcharlan

Search By... Confirmation Number: or Taxpayer ID: or Date:

Welcome to eForms!

To view taxpayer submitted data, enter the confirmation number of the submitted form or the taxpayer's ID or the submission date (in mm/dd/yyyy format) into the appropriate field above and click on the Search button.

Date or Confirmation number or Primary SSN on the return

eForms **View Taxpayer Submitted Data** Welcome

Search By... Confirmation Number: or Taxpayer ID: or Date

A record was found matching your criteria:

Confirmation Number	Tax Type	Taxpayer ID	Form Type	Tax Year	Timestamp	Status
0808416875	Income	242424270	IT-1040	2007	03/24/2008 04:48:15.654 PM	Pending

taxpayerSSN	242424270
taxpayerDeceased	00
spouseSSN	
spouseDeceased	00
taxpayerFirstName	TESTCASE
taxpayerMiddle	
taxpayerLastName	IFILE
spouseFirstName	
spouseMiddle	
spouseLastName	
mailingAddr	4548 NORTHLAND RIDGE BLVD

Everything the taxpayer keyed appears on this screen including all line items and direct deposit information

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2007 Tax Year Numbers through April 15

1040 Return	18,930
1040 EZ Return	22,273
SD100 Return	4,505



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What Next?



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June 4, 2008

eForms 1040X

Later in 2008

Non liable spouse worksheets

Income allocation worksheet

School District amended return

Business Tax returns including

Sales and Use Tax forms UUT and UST

Commercial Activity Tax

Our Expectations

*Increase the number of paperless filings that will
increase the overall paperless rate*

This will likely lead to reduced TeleFile usage

Little to no impact on IFile and Electronic Filing numbers

Questions