



# Turn Your Taxes into Scholarships for Catholic Education

*with the Emmaus Road Scholarship Fund*

OUR CATHOLIC SCHOOLS  
THE DIOCESE OF COLUMBUS

*It's true!* Thanks to a state law passed in 2021, Ohio taxpayers now are eligible to receive a tax credit for qualified donations to our scholarship granting organization (SGO), the **Emmaus Road Scholarship Fund!** Donors receive a dollar-for-dollar credit (not deduction) on their Ohio income tax liability of up to \$750 or \$1,500 if married, filing jointly.

*Why?* The Emmaus Road Scholarship Fund was established to help make an authentic Catholic education affordable and accessible for all families in our Catholic Diocese of Columbus.



The law effectively gives you the power to direct your tax dollars to support Our Catholic Schools' efforts to lead children to an encounter with Jesus Christ and change lives.

It's a win-win for all involved if you pay taxes to the State of Ohio – and you probably do!

## Can this Tax Credit Benefit You?

Every person's situation is unique but, if your year-over-year tax circumstances haven't changed significantly, you may be eligible to receive the tax credit by making a contribution to the Emmaus Road Scholarship Fund. The easiest place to start is by reviewing your most recent Ohio Income Tax Return. Then, follow these three, easy steps.

### 1 Pull your prior year return

The form you'll need to review is **Ohio IT 1040**.

### 2 Review line 8c on page 2

This is your total income tax liability *before credits*, or what the state says you owe as a taxpayer.

### 3 Is line 10 greater than \$0.00?

If so, you can reduce this liability on a dollar-for-dollar basis with a gift to the Emmaus Road Scholarship Fund, up to \$750 or \$1,500 if married and filing jointly.

**2021 Ohio IT 1040**  
Individual Income Tax Return

SSN

21000202 Sequence No. 2

7a. Amount from line 7 on page 1 .....	7a.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8a. Nonbusiness income tax liability on line 7a (see instructions for tax tables).....	8a.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8b. Business income tax liability – Ohio Schedule IT BUS, line 14 (include schedule).....	8b.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8c. Income tax liability before credits (line 8a plus line 8b) .....	8c.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9. Ohio nonrefundable credits – Ohio Schedule of Credits, line 38 (include schedule).....	9.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10. Tax liability after nonrefundable credits (line 8c minus line 9; if negative, enter zero).....	10.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
11. Interest penalty on underpayment of estimated tax (include Ohio IT/SD 2210).....	11.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
12. Unpaid use tax (see instructions).....	12.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
13. Total Ohio tax liability before withholding or estimated payments (add lines 10, 11 and 12).....	13.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
14. Ohio income tax withheld – Schedule of Ohio Withholding, part A, line 1 (include schedule and income statements).....	14.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
15. Estimated and extension payments (from Ohio IT 1040ES and IT 40P), and credit carryforward from last year's return .....	15.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
16. Refundable credits – Ohio Schedule of Credits, line 44 (include schedule).....	16.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
17. Amended return only – amount previously paid with original and/or amended return .....	17.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
18. Total Ohio tax payments (add lines 14, 15, 16 and 17).....	18.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
19. Amended return only – overpayment previously requested on original and/or amended return.....	19.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
20. Line 18 minus line 19. Place a "-" in the box if negative.....	20.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
If line 20 is MORE THAN line 13, skip to line 24. OTHERWISE, continue to line 21.									
21. Tax due (line 13 minus line 20). If line 20 is negative, ignore the "-" and add line 20 to line 13.....	21.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

*\*This graphic is for informational purposes only and is not intended to provide tax or accounting advice. Please consult your tax advisor to confirm your eligibility before engaging in any transaction.*

# A Tale of Two Tax Returns

## Individual without SGO Donation

2021 Ohio IT 1040  
Individual Income Tax Return

SSN [REDACTED] 21000206 Sequence No. 2

7a. Amount from line 7 on page 1	7a.	[REDACTED]	00
8a. Nonbusiness income tax liability on line 7a (see instructions for tax tables)	8a.	[REDACTED]	00
8b. Business income tax liability - Ohio Schedule IT BUS, line 14 (include schedule)	8b.	[REDACTED]	00
8c. Income tax liability before credits (line 8a plus line 8b)	8c.	750	00
9. Ohio nonrefundable credits - Ohio Schedule of Credits, line 38 (include schedule)	9.	0	00
10. Tax liability after nonrefundable credits (line 8c minus line 9; if negative, enter zero)	10.	750	00
11. Interest penalty on underpayment of estimated tax (include Ohio IT/SD 2210)	11.	[REDACTED]	00
12. Unpaid use tax (see instructions)	12.	[REDACTED]	00
13. Total Ohio tax liability before withholding or estimated payments (add lines 10, 11 and 12)	13.	750	00
14. Ohio income tax withheld - Schedule of Ohio Withholding, part A, line 1 (include schedule and income statements)	14.	500	00
15. Estimated and extension payments (from Ohio IT 1040ES and IT 40P), and credit carryforward from last year's return	15.	[REDACTED]	00
16. Refundable credits - Ohio Schedule of Credits, line 44 (include schedule)	16.	[REDACTED]	00
17. Amended return only - amount previously paid with original and/or amended return	17.	[REDACTED]	00
18. Total Ohio tax payments (add lines 14, 15, 16 and 17)	18.	[REDACTED]	00
19. Amended return only - overpayment previously requested on original and/or amended return	19.	[REDACTED]	00
20. Line 18 minus line 19. Place a "-" in the box if negative. If line 20 is MORE THAN line 13, skip to line 24. OTHERWISE, continue to line 21.	20.	[REDACTED]	00
21. Tax due (line 13 minus line 20). If line 20 is negative, ignore the "-" and add line 20 to line 13.	21.	[REDACTED]	00
22. Interest due on late payment of tax (see instructions)	22.	[REDACTED]	00
23. TOTAL AMOUNT DUE (line 21 plus line 22). Include Ohio IT 40P (if original return) or IT 40XP (if amended return) and make check payable to "Ohio Treasurer of State"	23. AMOUNT DUE	250	00
24. Overpayment (line 20 minus line 13)	24.	[REDACTED]	00
25. Original return only - portion of line 24 carried forward to next year's tax liability	25.	[REDACTED]	00
26. Original return only - portion of line 24 you wish to donate: a. Military Injury Relief    b. Ohio History Fund    c. Nature Preserves/Scenic Rivers [REDACTED]    [REDACTED]    [REDACTED] d. Breast/Cervical Cancer    e. Wishes for Sick Children    f. Ohio State Parks [REDACTED]    [REDACTED]    [REDACTED] Total ...26g.	26g.	[REDACTED]	00
27. REFUND (line 24 minus lines 25 and 26g) YOUR REFUND	27.	[REDACTED]	00

**Donation to SGO** (arrow from line 8c to line 9)

**Paid to Government** (arrow from line 13 to line 23)

**Refund to You** (arrow from line 27 to line 23)

Sign Here (required): 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.

Primary signature \_\_\_\_\_ Phone number \_\_\_\_\_

Spouse's signature \_\_\_\_\_ Date \_\_\_\_\_

Preparer's printed name \_\_\_\_\_ Phone number \_\_\_\_\_

Preparer's TIN (PTIN) P \_\_\_\_\_

NO Payment Included - Mail to:  
Ohio Department of Taxation  
P.O. Box 2679  
Columbus, OH 43270-2679

Payment Included - Mail to:  
Ohio Department of Taxation  
P.O. Box 2057  
Columbus, OH 43270-2057

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## Individual with SGO Donation

2021 Ohio IT 1040  
Individual Income Tax Return

SSN [REDACTED] 21000206 Sequence No. 2

7a. Amount from line 7 on page 1	7a.	[REDACTED]	00
8a. Nonbusiness income tax liability on line 7a (see instructions for tax tables)	8a.	[REDACTED]	00
8b. Business income tax liability - Ohio Schedule IT BUS, line 14 (include schedule)	8b.	[REDACTED]	00
8c. Income tax liability before credits (line 8a plus line 8b)	8c.	750	00
9. Ohio nonrefundable credits - Ohio Schedule of Credits, line 38 (include schedule)	9.	750	00
10. Tax liability after nonrefundable credits (line 8c minus line 9; if negative, enter zero)	10.	0	00
11. Interest penalty on underpayment of estimated tax (include Ohio IT/SD 2210)	11.	[REDACTED]	00
12. Unpaid use tax (see instructions)	12.	[REDACTED]	00
13. Total Ohio tax liability before withholding or estimated payments (add lines 10, 11 and 12)	13.	0	00
14. Ohio income tax withheld - Schedule of Ohio Withholding, part A, line 1 (include schedule and income statements)	14.	500	00
15. Estimated and extension payments (from Ohio IT 1040ES and IT 40P), and credit carryforward from last year's return	15.	[REDACTED]	00
16. Refundable credits - Ohio Schedule of Credits, line 44 (include schedule)	16.	[REDACTED]	00
17. Amended return only - amount previously paid with original and/or amended return	17.	[REDACTED]	00
18. Total Ohio tax payments (add lines 14, 15, 16 and 17)	18.	[REDACTED]	00
19. Amended return only - overpayment previously requested on original and/or amended return	19.	[REDACTED]	00
20. Line 18 minus line 19. Place a "-" in the box if negative. If line 20 is MORE THAN line 13, skip to line 24. OTHERWISE, continue to line 21.	20.	[REDACTED]	00
21. Tax due (line 13 minus line 20). If line 20 is negative, ignore the "-" and add line 20 to line 13.	21.	[REDACTED]	00
22. Interest due on late payment of tax (see instructions)	22.	[REDACTED]	00
23. TOTAL AMOUNT DUE (line 21 plus line 22). Include Ohio IT 40P (if original return) or IT 40XP (if amended return) and make check payable to "Ohio Treasurer of State"	23. AMOUNT DUE	[REDACTED]	00
24. Overpayment (line 20 minus line 13)	24.	[REDACTED]	00
25. Original return only - portion of line 24 carried forward to next year's tax liability	25.	[REDACTED]	00
26. Original return only - portion of line 24 you wish to donate: a. Military Injury Relief    b. Ohio History Fund    c. Nature Preserves/Scenic Rivers [REDACTED]    [REDACTED]    [REDACTED] d. Breast/Cervical Cancer    e. Wishes for Sick Children    f. Ohio State Parks [REDACTED]    [REDACTED]    [REDACTED] Total ...26g.	26g.	[REDACTED]	00
27. REFUND (line 24 minus lines 25 and 26g) YOUR REFUND	27.	500	00

**Donation to SGO** (arrow from line 8c to line 9)

**Paid to Government** (arrow from line 13 to line 23)

**Refund to You** (arrow from line 27 to line 23)

Sign Here (required): 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.

Primary signature \_\_\_\_\_ Phone number \_\_\_\_\_

Spouse's signature \_\_\_\_\_ Date \_\_\_\_\_

Preparer's printed name \_\_\_\_\_ Phone number \_\_\_\_\_

Preparer's TIN (PTIN) P \_\_\_\_\_

NO Payment Included - Mail to:  
Ohio Department of Taxation  
P.O. Box 2679  
Columbus, OH 43270-2679

Payment Included - Mail to:  
Ohio Department of Taxation  
P.O. Box 2057  
Columbus, OH 43270-2057

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