

Do not use staples.



Department of Taxation



13000106

Taxable year beginning in

2013

IT 1040 Rev. 11/13 Individual Income Tax Return

Use only black ink.

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 43-48). 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

E-mail address

Ohio Residency Status - Check applicable box Full-year resident Part-year resident Nonresident Indicate state

Check applicable box for spouse (only if married filing jointly) Full-year resident Part-year resident Nonresident Indicate state

Filing Status - Check one (as reported on federal income tax return, with limited exceptions - see instructions on page 14) Single, head of household or qualifying widow(er) Married filing jointly Married filing separately

Required to file Schedule IT S (see instructions on page 9)

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.

Do not use staples, tape or glue. Place your W-2(s), check (payable to Ohio Treasurer of State) and Ohio form IT 40P after the last page 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!

INCOME AND TAX INFORMATION - If amount is negative, type a negative sign ("-") before the figure.

Table with 10 rows for income and tax information, including Federal adjusted gross income, adjustments, Ohio adjusted gross income, personal exemption, Ohio taxable income, tax on line 5, Schedule B credits, Ohio tax less Schedule B credits, income-based exemption credit, and Ohio tax less exemption credit.



Ohio

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SS# [] [] []

10a. Amount from line 10 on page 1 10a. [] [] [] 0 0
11. Joint filing credit. See the instructions on page 19 for eligibility and documentation requirements (this credit is for married filing jointly status only). _____ % times line 10a (limit \$650) 11. [] [] 0 0
12. Ohio income tax less joint filing credit (line 10a minus line 11) 12. [] [] 0 0
13. Total credits from line 71 on page 4 of Ohio form IT 1040 (enclose page 4) 13. [] [] 0 0
14. Earned income credit (see the worksheet on page 20 of the instructions) 14. [] [] 0 0
15. Ohio adoption credit (\$1,500 per child adopted during the year) 15. [] [] 0 0
16. Manufacturing equipment grant. You must include the grant request form 16. [] [] 0 0
17. Ohio income tax (line 12 minus lines 13, 14, 15 and 16; enter -0- if the total of lines 13, 14, 15 and 16 is more than line 12) 17. [] [] 0 0
18. Interest penalty on underpayment of estimated tax. Enclose Ohio form IT/SD 2210 (see page 21 of the instructions) 18. [] [] 0 0
19. Unpaid Ohio use tax (see the worksheet on page 33 of the instructions) 19. [] [] 0 0
20. Total Ohio tax liability (add lines 17, 18 and 19) TOTAL TAX ▶ 20. [] [] 0 0
21. Ohio income tax withheld (box 17 on W-2; box 15 on W-2G; and box 12 on 1099-R). Place W-2(s), W-2G(s) and 1099-R(s) after the last page of this return AMOUNT WITHHELD ▶ 21. [] [] 0 0
22. Add the 2013 Ohio form IT 1040ES payment(s), 2013 Ohio form IT 40P extension payment(s) and 2012 overpayment credited to 2013 22. [] [] 0 0
23. Refundable credits from line 73 on page 4 of Ohio form IT 1040 (enclose page 4) 23. [] [] 0 0
24. Add lines 21, 22 and 23 TOTAL PAYMENTS ▶ 24. [] [] 0 0
If line 24 is MORE THAN line 20, go to line 25. If line 24 is LESS THAN line 20, skip to line 29.
25. If line 24 is MORE THAN line 20, subtract line 20 from line 24 AMOUNT OVERPAID ▶ 25. [] [] 0 0
26. Amount of line 25 to be credited to 2014 income tax liability CREDIT TO 2014 ▶ 26. [] [] 0 0
27. Amount of line 25 that you wish to donate to the following fund(s):
a. Military injury relief [] [] 0 0 b. Natural areas [] [] 0 0
c. Ohio Historical Society [] [] 0 0 d. Wildlife species [] [] 0 0
28. Line 25 minus the sum of lines 26 and 27a, b, c and d. Enter here, then skip to line 30 28. [] [] 0 0
29. If line 24 is LESS THAN line 20, subtract line 24 from line 20 AMOUNT DUE ▶ 29. [] [] 0 0
30. Interest and penalty due on late-paid tax and/or late-filed return (see page 21 of the instructions) INTEREST AND PENALTY ▶ 30. [] [] 0 0
If you entered an amount on line 28, skip to line 32. If you entered an amount on line 29, go to line 31.
31. Amount due plus interest and penalty (add lines 29 and 30). If payment is enclosed, make check payable to Ohio Treasurer of State and include Ohio form IT 40P (see our Web site at tax.ohio.gov) AMOUNT DUE PLUS INTEREST AND PENALTY ▶ 31. [] [] 0 0
32. Refund less interest and penalty (line 28 minus line 30). Enter the amount here. (If line 30 is more than line 28, you have an amount due. Subtract line 28 from line 30 and enter this amount on line 31.) YOUR REFUND ▶ 32. [] [] 0 0

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.

If your refund is \$1.00 or less, no refund will be issued. If you owe \$1.00 or less, no payment is necessary.

Your signature _____ Date (MM/DD/YYYY) [] [] [] []
Spouse's signature (see page 10 of the instructions) _____ Phone number (optional) [] [] [] [] [] []
Preparer's printed name (see page 10 of the instructions) _____ Phone number [] [] [] [] [] []
Do you authorize your preparer to contact us regarding this return? [] Yes [] No

For Department Use Only
[] []
Code

MAILING INFORMATION
NO Payment Enclosed - Mail to: Ohio Department of Taxation, P.O. Box 2679, Columbus, OH 43218-2679
Enclose your federal income tax return if line 1 on page 1 of this return is -0- or negative.
Payment Enclosed - Mail to: Ohio Department of Taxation, P.O. Box 2057, Columbus, OH 43218-2057

If line 2 (on page 1) is -0- or blank, do not mail page 3.



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13000306

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SS# [] [] []

SCHEDULE A – Income Adjustments (Additions and Deductions)

Additions (add income items only to the extent not included on page 1, line 1).

Table with 3 columns: Description, Amount, and Total. Rows include 33. Non-Ohio state or local government interest and dividends, 34. Certain Ohio pass-through entity and financial institutions taxes paid, 35a. Federal interest and dividends subject to state taxation, 35b. Reimbursement of college tuition expenses, 35c. Losses from sale or disposition of Ohio public obligations, 35d. Nonmedical withdrawals from a medical savings account, 35e. Reimbursement of expenses previously deducted for Ohio income tax purposes, 35f. Lump sum distribution add-back and miscellaneous federal income tax adjustments, 35g. Adjustment for Internal Revenue Code sections 168(k) and 179 depreciation expense, 36. Total additions.

Deductions (deduct income items only to the extent included on page 1, line 1).

Table with 3 columns: Description, Amount, and Total. Rows include 37a. Federal interest and dividends exempt from state taxation, 37b. Adjustment for Internal Revenue Code sections 168(k) and 179 depreciation expense, 38. Employee compensation earned in Ohio by full-year residents of neighboring states, 39a. Military pay for Ohio residents, 39b. Uniformed services retirement income and military injury relief fund amounts, 40a. State or municipal income tax overpayments, 40b. Refund or reimbursements shown on IRS form 1040, 41. Small business investor income deduction, 42. Disability and survivorship benefits, 43. Qualifying Social Security benefits, 44a. Education: Ohio 529 contributions, 44b. Pell/Ohio College Opportunity taxable grant amounts, 45. Certain Ohio National Guard reimbursements, 46a. Unreimbursed long-term care insurance premiums, 46b. Funds deposited into, and earnings of, a medical savings account, 46c. Qualified organ donor expenses, 47. Wage expense not deducted due to the targeted jobs, 48. Interest income from Ohio public obligations, 49. Total deductions, 50. Net adjustments.

If line 7 (page 1) and lines 13 and 23 (page 2) are all -0- or blank, do not mail page 4.

SCHEDULE B – Nonbusiness Credits

51. Retirement income credit (limit \$200 per return). See the table on page 28 of the instructions	51.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
52. Senior citizen credit (you must be 65 or older to claim this credit; limit \$50 per return)	52.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
53. Lump sum distribution credit (you must be 65 or older to claim this credit)	53.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
54. Child care and dependent care credit (see the worksheet on page 29 of the instructions)	54.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
55. Lump sum retirement credit	55.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
56. If line 5 on page 1 is \$10,000 or less, enter \$88; otherwise, enter -0- or leave blank.....	56.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
57. Displaced worker training credit (see the instructions and worksheet on pages 29 and 30) (limit \$500 per taxpayer).....	57.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
58. Ohio political contributions credit (limit \$50 per taxpayer)	58.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
59. Total Schedule B credits (add lines 51 through 58). Enter here and on page 1, line 7	59.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0

SCHEDULE C – Full-Year Ohio Resident Credit

60. Enter the portion of line 3 on page 1 subjected to tax by other states or the District of Columbia while you were an Ohio resident (limits apply – see page 29 of the instructions) .	60.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
61. Enter Ohio adjusted gross income (line 3 on page 1).....	61.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
62. Divide line 60 by line 61 and enter the result here (four digits; do not round). Multiply this factor by the amount on line 12 and enter the result here.....	62.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
63. Enter the 2013 income tax, less all credits other than withholding and estimated tax payments and overpayment carryforwards from previous years, paid to other states or the District of Columbia (limits apply – see page 30 of the instructions).....	63.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
64. Enter the smaller of line 62 or line 63. This is your Ohio resident tax credit. Enter here and on line 69 below. If you filed a return for 2013 with a state(s) other than Ohio, enter the two-letter state abbreviation in the box(es) below	64.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0

SCHEDULE D – Nonresident / Part-Year Resident Credit (date of part-year residency to)

65. Enter the portion of Ohio adjusted gross income (line 3) that was not earned or received in Ohio. Include Ohio form IT 2023 if required (see page 30 of the instructions).....	65.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
66. Enter the Ohio adjusted gross income (line 3 on page 1).....	66.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
67. Divide line 65 by line 66 and enter the result here (four digits; do not round). Multiply this factor by the amount on line 12. Enter here and on line 70 below	67.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0

SUMMARY OF CREDITS FROM SCHEDULES C, D AND E

68. Enter the amount from line 10 of Schedule E, Nonrefundable Business Credits (see page 31 of the instructions).....	68.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
69. Enter the amount from line 64 above.....	69.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
70. Enter the amount from line 67 above.....	70.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
71. Add lines 68, 69 and 70. Enter here and on page 2, line 13	71.	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0

REFUNDABLE CREDITS – INCLUDE CERTIFICATE(S) AND K-1(S)

72a. Business jobs credit	72b. Pass-through entity credit	72c. Historic preservation credit
<input type="text"/> 0 0	<input type="text"/> 0 0	<input type="text"/> 0 0
72d. Motion picture production credit	72e. Financial Institutions Tax (FIT) credit	
<input type="text"/> 0 0	<input type="text"/> 0 0	
73. Total of lines 72a-e. Enter here and on page 2, line 23.		
<input type="text"/> 0 0		