Do	not	use	stap	les.
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Ohio Department of Taxation Use only black ink. 13000106	Taxable year beginning in 2013 IT 1040 Rev. 11/13 Individual Income Tax Return		
Taxpayer Social Security no. (required) >> If deceased Spouse's So	cial Security no. (only if joint return) >> If deceased this return (see pages 43-48).		
Lise LIPPERCASE letters check box	check box SD# ▶▶		
USE OFFERCASE letters.	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)		
Unity Control of the second seco			
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	e the U.S.) Foreign postal code		
E-mail address			
Ohio Residency Status – Check applicable box	Check applicable box for spouse (only if married filing jointly)		
Full-year Part-year Nonresident Indicate state	Full-year Part-year Nonresident		
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 (enter spouse's SS#)			
Required to file Schedule IT S (see instructions on page 9)	Go paperless. It's FREE!		
	Visit <i>tax.ohio.gov</i> to try Ohio I-File.		
Do you want \$1 to go to this fund?	Most electronic filers receive their refunds		
If joint return, does your spouse want \$1 to go to this fund?	in 5-7 business days by direct deposit!		
Note: Checking "Yes" will not increase your tax or decrease your refund			
INCOME AND TAX INFORMATION – If amount is negative, 1. Federal adjusted gross income (from IRS form 1040, line 37; 1040A)	line 04.		
1040EZ, line 4; 1040NR, line 36; 1040NR-EZ, line 10; or Ohio form IT	S, line 31) 1.		
2. Adjustments from line 50 on page 3 of Ohio form IT 1040 (enclose			
3. Ohio adjusted gross income (line 2 added to or subtracted from line			
 Personal exemption and dependent exemption deduction – multiply and dependent exemptions times \$1,700 and enter the result 			
5. Ohio taxable income (line 3 minus line 4; enter -0- if line 3 is less that			
6. Tax on line 5 (see tax tables on pages 35-41 of the instructions)			
7. Schedule B credits from line 59 on page 4 of Ohio form IT 1040 (enclose page 4)7.			
8. Ohio tax less Schedule B credits (line 6 minus line 7; enter -0- if line 6 is	s less than line 7)8.		
9. Income-based exemption credit (see instructions on page 19)			
10. Ohio tax less exemption credit (line 8 minus line 9; enter -0- if line 8 is	less than line 9)10.		
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Department of Taxation

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Taxable year beginning in **2013**

IT 1040 Rev. 11/13 Individual Income Tax Return

SS	#	00206		515	Income Tax Return	
	Amount from line 10 on page 1 Joint filing credit. See the instructions on page 19 for eli					00
	(this credit is for married filing jointly status only).					0 0
12.	Ohio income tax less joint filing credit (line 10a minus	line 11)				00
13.	Total credits from line 71 on page 4 of Ohio form IT 10	40 (enclo	se page 4)	13.		0 0
14.	Earned income credit (see the worksheet on page 20	of the insti	ructions)	14.		0 0
15.	Ohio adoption credit (\$1,500 per child adopted durin	ig the yea	ır)			00
	Manufacturing equipment grant. You must include the					00
	Ohio income tax (line 12 minus lines 13, 14, 15 and 16 and 16 is more than line 12)					00
18.	Interest penalty on underpayment of estimated tax. Er 21 of the instructions)					00
19.	Unpaid Ohio use tax (see the worksheet on page 33 o					00
	Total Ohio tax liability (add lines 17, 18 and 19)					00
	Ohio income tax withheld (box 17 on W-2; box 15 on W-2(s), W-2G(s) and 1099-R(s) after the last page of t	his return	AMOUNT WIT	FHHELD ▶ 21.		00
22.	Add the 2013 Ohio form IT 1040ES payment(s), 2013 (and 2012 overpayment credited to 2013					00
23.	Refundable credits from line 73 on page 4 of Ohio form	n IT 1040 ((enclose page 4)	23.		00
24.	Add lines 21, 22 and 23		TOTAL PAY	MENTS ▶ 24.		0 0
lf li	ne 24 is MORE THAN line 20, go to line 25. If line 24 is If line 24 is MORE THAN line 20, subtract line 20 from	LESS TH	AN line 20, skip to li	ne 29.		0 0
	Amount of line 25 to be credited to 2014 income tax lia					0 0
	Amount of line 25 that you wish to <u>donate</u> to the follov a. Military injury relief b. Natural areas			C 2011 / 201		
	_ 0 0	0 0				
28.	Line 25 minus the sum of lines 26 and 27a, b, c and d	. Enter hei	re, then skip to line 3	028.		00
	If line 24 is LESS THAN line 20, subtract line 24 from I Interest and penalty due on late-paid tax and/or late-fil			NT DUE ▶ 29.		00
	instructions) ou entered an amount on line 28, skip to line 32. If y		INTEREST AND P		- 31	00
	Amount due plus interest and penalty (add lines 29 an	d 30). If pa	ayment is enclosed, n	nake	,	00
	check payable to Ohio Treasurer of State and include C tax.ohio.gov)AMOUNT DL	JE PLUS I	NTEREST AND PEN			00
32.	Refund less interest and penalty (line 28 minus line 30 (If line 30 is more than line 28, you have an amount du				0 0	
	line 30 and enter this amount on line 31.)	YOL	JR REFUND ▶ 32.	li di sua		II he issued
<u>SI</u> the	<u>SN HERE (required)</u>: I have read this return. Unbest of my knowledge and belief, the return and all en	der penalt closures a	ties of perjury, I decla are true, correct and c		our refund is \$1.00 or less, no refund wil you owe \$1.00 or less, no payment is n	
	Your signature		Date (MM/DD/YYYY)		For Department Use Or	<u>nly</u>
	Spouse's signature (see page 10 of the instructions)					
			Phone number (optional)			
	Preparer's printed name (see page 10 of the instructions) Do you authorize your preparer to contact us regarding this return?		Phone number Yes No			Code
MA	ILING INFORMATION					
	NO Payment Enclosed – Mail to: Ohio Department of Taxation P.O. Box 2679 Columbus, OH 43218-2679	x return i	your federal incom f line 1 on page 1 of n is -0- or negative.		Payment Enclosed – Mail to: Ohio Department of Taxation P.O. Box 2057 Columbus, OH 43218-2057	
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If line 2 (on page 1) is -0- or blank, do not mail page 3.

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Department of Taxation		
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IT 1040 Rev. 11/13 Individual Income Tax Return

SC	HEDULE A – Income Adjustments (Additions and Deductions)		
	tions (add income items only to the extent not included on page 1, line 1).	0	0
	Non-Ohio state or local government interest and dividends	0	
	section 5733.40(A) pass-through entity adjustment	0	
	Federal interest and dividends subject to state taxation		
D.	noneducation expenditures from a college savings accountb.		
C.	Losses from sale or disposition of Ohio public obligationsc.		
	Nonmedical withdrawals from a medical savings accountd.		
e.	Reimbursement of expenses previously deducted for Ohio income tax purposes, but only if the reimbursement is not in federal adjusted gross incomee.	0	
f.	Lump sum distribution add-back and miscellaneous federal income tax adjustmentsf.		
g.	Adjustment for Internal Revenue Code sections 168(k) and 179 depreciation expense	. 0	0
36	Total additions (add lines 33 through 35g and enter here). You must complete the	0	0
50.	applicable line items above	0	U
Ded	uctions (deduct income items only to the extent included on page 1, line 1).		0
37a.	Federal interest and dividends exempt from state taxation		-
	Adjustment for Internal Revenue Code sections 168(k) and 179 depreciation expenseb.		
	Employee compensation earned in Ohio by full-year residents of neighboring states and certain income earned by military nonresidents and civilian nonresident spouses	0	0
39a.	Military pay for Ohio residents, but only if the military pay is included on line 1 of this return and is received while the military member was stationed outside Ohio	0	0
b.	Uniformed services retirement income and military injury relief fund amounts included in federal adjusted gross income (line 1 on page 1)b.	0	0
10-		0	0
	State or municipal income tax overpayments shown on IRS form 1040, line 1040a. Refund or reimbursements shown on IRS form 1040, line 21 for itemized deductions claimed	0	0
	on a prior year federal income tax returnb.	0	
	Repayment of income reported in a prior year and miscellaneous federal tax adjustmentsc.	0	
41.	Small business investor income deduction	0	
42.	Disability and survivorship benefits (do not include pension continuation benefits)42.	0	
43.	Qualifying Social Security benefits and certain railroad retirement benefits	0	
44a.	Education: Ohio 529 contributions; tuition credit purchases		
b.	Pell/Ohio College Opportunity taxable grant amounts used to pay room and boardb.		
	Certain Ohio National Guard reimbursements and benefits	0	
	Unreimbursed long-term care insurance premiums, unsubsidized health care insurance premiums and excess health care expenses (see worksheet on page 27 of the instructions)46a.	0	0
b.	Funds deposited into, and earnings of, a medical savings account for eligible health care expenses (see worksheet on page 23 of the instructions)b.	. 0	0
C.	Qualified organ donor expenses (maximum \$10,000 per taxpayer) and amounts contributed to an individual development account	_ 0	0
47	Wage expense not deducted due to the targeted jobs or the work opportunity tax credits47.	_ 0	0
	Interest income from Ohio public obligations and from Ohio purchase obligations; gains from the sale or disposition of Ohio public obligations; public service payments received from the		
	state of Ohio or income from a transfer agreement	. 0	0
40	Total deductions (add lines 37a through 48 only). You must complete the applicable	0	0
49.	Total deductions (add lines 37a through 48 only). You must complete the applicable line items above	0	U
50.	Net adjustments – If line 36 is MORE THAN line 49, enter the difference here and on line 2 as a positive amount. If line 36 is LESS THAN line 49, enter	0	0
	the difference here and on line 2 as a negative amount	0	U
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If line 7 (page 1) and lines 13 and 23 (page 2) are all -0- or blank, do not mail page 4.

Ohio Department of Taxation Taxable year beginning in SS# 13000406 13000406	IT 1040 Rev. 11/13 Individual Income Tax Return
SCHEDULE B – Nonbusiness Credits	
51. Retirement income credit (limit \$200 per return). See the table on page 28 of the instructions 51.	0
52. Senior citizen credit (you must be 65 or older to claim this credit; limit \$50 per return)	0
53. Lump sum distribution credit (you must be 65 or older to claim this credit)	0
54. Child care and dependent care credit (see the worksheet on page 29 of the instructions)	0
55. Lump sum retirement credit	0
56. If line 5 on page 1 is \$10,000 or less, enter \$88; otherwise, enter -0- or leave blank	0
(limit \$500 per taxpayer)	0
58. Ohio political contributions credit (limit \$50 per taxpayer)	0
59. Total Schedule B credits (add lines 51 through 58). Enter here and on page 1, line 7	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	0
Columbia while you were an Ohio resident (limits apply – see page 29 of the instructions). 60. 61. Enter Ohio adjusted gross income (line 3 on page 1)	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	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	0 (
(limits apply – see page 30 of the instructions)	
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	0
SCHEDULE D – Nonresident / Part-Year Resident Credit (date of part-year resid	lency 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)	0
66. Enter the Ohio adjusted gross income (line 3 on page 1)	0
67. Divide line 65 by line 66 and enter the result here (four digits; do not round).	0
Multiply this factor by the amount on line 12. Enter here and on line 70 below	
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)	0
69. Enter the amount from line 64 above	0
70. Enter the amount from line 67 above	0
71. Add lines 68, 69 and 70. Enter here and on page 2, line 13	0
REFUNDABLE CREDITS – INCLUDE CERTIFICATE(S) AND K-1(S)	
72a. Business jobs credit 72b. Pass-through entity credit 72c. Historic	preservation credit
72d. Motion picture production credit 72e. Financial Institutions Tax (FIT) credit	00
. 0 0	
73. Total of lines 72a-e. Enter here and on page 2, line 23.	
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