

Do not use staples. Use only black ink and UPPERCASE letters.



Department of
Taxation
Rev. 10/15

2015 Schedule J – Dependents Claimed on the Universal IT 1040 Return



15230102

Social Security no. of primary filer

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Do not list below the primary filer and/or spouse reported on Ohio IT 1040. Use this schedule to claim dependents. If you have more than 15 dependents, complete additional copies of this schedule and include them with your income tax return. Abbreviate the "Dependent's relationship to you" below if there are not enough boxes to spell it out completely.

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Dependent's first name

M.I. Last name

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Do not write in this area: for department use only.



2015 Schedule J – Dependents Claimed on the Universal IT 1040 Return



15230202

Social Security no. of primary filer

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<input type="text"/>	<input type="text"/>	<input type="text"/>

Dependent's first name

M.I. Last name

<input type="text"/>	<input type="text"/>
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9. Dependent's Social Security no. (required)	Dependent's date of birth (MM/DD/YYYY)	Dependent's relationship to you (required)
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Dependent's first name

M.I. Last name

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Dependent's first name

M.I. Last name

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Dependent's first name

M.I. Last name

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Dependent's first name

M.I. Last name

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