Do not staple or paper clip. **Chio** Department of Taxation

2021 Ohio IT 10

Zero Liability / No Refund Individual Income Tax Return Use only black ink and UPPERCASE letters.



Important: You can only file an IT 1040 or an IT	If you are liable for school district income tax,	you must file the Ohio IT 1040.
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Primary taxpayer's SSN	(required)	✓ If deceased	Sp	oouse's SSN (if	filing jointly	у)	✓ If decease	d School d	istrict #
First name			M.I.	Last name					
Spouse's first name (onl	y if married filing	j jointly)	M.I.	Last name					
Address line 1 (number	and street) or P.(O. Box							
Address line 2 (apartme	nt number, suite	number, etc.)							
City					State	ZIP coo	de	Ohio county (first four	r letters)
Foreign country (if the m	nailing address is	s outside the U.S.)			Foreign p	postal co	de		
Residency Status		e for primary			Filing	Status	- Check one	(as reported on feder	al income tax return)
Resident	Part-year resident	Nonresident Indicate state	••		-			old or qualifying wido	
Check only one for spou	use (if married fil	ina iointly)			M	arried fili	ng jointly		
Resident	Part-year resident	Nonresident Indicate state	••		м	arried fili	ng separately		e's SSN
Ohio Nonresident	Statement -	See instructions for	or requ	ired criteria					
Primary meets the five criteria for irrebuttable presumption as nonresident.				Federal extension filers - check here.					
Spouse meets the t	five criteria for irre	ebuttable presumption	on as r	nonresident.					
Reason(s) For Filing (Required) : By filing this return, the primary taxpayer and spouse (if filing jointly) declare that their correctly calculated tax liability (Ohio IT 1040, line 8c) is \$0.00 for one or more of the following reasons (check all that apply):									
There is no tax liability on my Ohio taxable nonbusiness income (Ohio IT 1040, line 7) and taxable business income (Ohio IT 1040, line 6).					I was a nonresident military servicemember for the entire tax year and my only source of income earned in Ohio is from the military.				
I was a nonresident of Ohio for the entire tax year and did not have Ohio-sourced income (e.g. the above address is for mailing purposes only).			I was a civilian spouse of a nonresident servicemember stationed in Ohio.						
I understand that I cann	ot request a ref	und of any amount	on this	s return.					
Sign Here (required) correct and complete.	: I have read this	return. Under penalti	es of p	erjury, I declare t	that, to the	best of my	y knowledge ar	d belief, the return and	all enclosures are true,
Primary signature				Phone nu	mber			Mail	to:
Spouse's signature				Date				Obio Donortro	of Toxation
Check here to authorize your preparer to discuss this return with the Department				Ohio Department of Taxation P.O. Box 2476					
Preparer's printed name Phone num				mber			Columbus, OH	43216-2476	
Preparer's TIN (PTIN)									

Code

MM-DD-YY