

Do not use staples.



Department of
Taxation



Taxable year beginning in

2013

IT 1040EZ

Rev. 11/13

**Individual Income Tax
Return for Full-Year
Ohio Residents**

Use only black ink.

Taxpayer Social Security no. (required) ▶▶ If deceased

check box

Spouse's Social Security no. (only if joint return) ▶▶ If deceased

check box

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

Filing Status – Check one (as reported on federal income tax return)

☐ Single, head of household or qualifying widow(er)

☐ Married filing jointly

☐ Married filing separately
(enter spouse's SS#)

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, shade the negative sign ("–") in the box provided.

1. Federal adjusted gross income (from IRS form 1040, line 37; 1040A, line 21; or 1040EZ, line 4)	1.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
2. Enter the amount from the worksheet on page 17 of the instructions.....	2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
3. Ohio adjusted gross income (line 1 minus line 2)	3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
4. Personal exemption and dependent exemption deduction – multiply your personal and dependent exemptions _____ times \$1,700 and enter the result here.....	4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
5. Ohio taxable income (line 3 minus line 4; enter -0- if line 3 is less than line 4)	5.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
6. Tax on line 5 (see tax tables on pages 35-41 of the instructions)	6.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
7. If line 5 is \$10,000 or less, enter a credit of \$88; otherwise, enter -0- or leave blank.....	7.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
8. Ohio tax less line 7 credit (line 6 minus line 7; enter -0- if line 6 is less than line 7)	8.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0	0
9. Income-based exemption credit (see instructions on page 17)	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"/>	0	0
10. Ohio tax less exemption credit (line 8 minus line 9; enter -0- if line 8 is less than line 9)	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"/>	0	0

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**Ohio**Department of
Taxation

13010202

Taxable year beginning in

2013**IT 1040EZ**

Rev. 11/13

**Individual Income Tax
Return for Full-Year
Ohio Residents**SS#

10a. Amount from line 10 on page 1.....	10a.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	00
11. Joint filing credit. See instructions on page 17 for eligibility and documentation requirements (this credit is for married filing jointly status only). _____ % times line 10a (limit \$650).....	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"/>	00
12. Ohio income tax less joint filing credit (line 10a minus line 11).....	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"/>	00
13. Earned income credit (see the worksheet on page 20 of the instructions).....	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"/>	00
14. Ohio income tax less earned income credit (line 12 minus line 13).....	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"/>	00
15. Interest penalty on underpayment of income tax. Enclose Ohio form IT/SD 2210 (see page 18 of the instructions).....	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"/>	00
16. Unpaid Ohio use tax (see the worksheet on page 33 of the instructions).....	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"/>	00
17. Total Ohio tax liability (add lines 14, 15 and 16)..... TOTAL TAX ▶	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"/>	00
18. 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) on top of this return..... AMOUNT WITHHELD ▶	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"/>	00

REFUND OR AMOUNT YOU OWE**If line 18 is MORE THAN line 17, go to line 19. If line 18 is LESS THAN line 17, skip to line 22.**

19. If line 18 is MORE THAN line 17, subtract line 17 from line 18..... AMOUNT OVERPAID ▶	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"/>	00
20. Amount of line 19 that you wish to donate to the following fund(s):										
a. Military injury relief		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	00
b. Natural areas		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	00
c. Ohio Historical Society		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	00
d. Wildlife species		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	00
21. Line 19 minus the sum of lines 20a, b, c and d. Enter the amount here, then skip to line 23.....	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"/>	00
22. If line 18 is LESS THAN line 17, subtract line 18 from line 17..... AMOUNT DUE ▶	22.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	00
23. Interest and penalty due on late-paid tax and/or late-filed return (see page 18 of the instructions). INTEREST AND PENALTY ▶	23.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	00
If you entered an amount on line 21, skip to line 25. If you entered an amount on line 22, go to line 24.										
24. Amount due plus interest and penalty (add lines 22 and 23). 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 ▶	24.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	00
25. Refund less interest and penalty (line 21 minus line 23). Enter the amount here. (If line 23 is more than line 21, you have an amount due. Subtract line 21 from line 23 and enter this amount on line 24.)..... YOUR REFUND ▶	25.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	00

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

▶ 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? <input type="checkbox"/> Yes <input type="checkbox"/> No	

For Department Use Only

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

NO Payment Enclosed – Mail to:
Ohio Department of Taxation
P.O. Box 182294
Columbus, OH 43218-2294**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 182850
Columbus, OH 43218-2850**2013 IT 1040EZ**

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