

Department of Taxation



IT 1040 Rev. 10/12 Individual

Use only black ink.	75000705	201	Incom	ne Tax Return
Taxpayer Social Security no. (required) >> If d	eceased Spouse's Social	Security no. (only if joint	t return) If decease	ed
USE OFFERGASE letters.	eck box		check bo	X
Your first name	M.I. Last na	me		
Casuas's first name (only if married filing is inth.)	MIL Loot nor			
Spouse's first name (only if married filing jointly)	M.I. Last nar	ile		
Mailing address (for faster processing, use a stre	eet address)			
indining address (for faster processing, use a six	set address)			
City		State ZIP	code Oh	io county (first four letters)
Home address (if different from mailing address)	– do <u>NOT</u> show city or stat	е	ZIP code	County (first four letters)
Foreign country (provide this information if the n	nailing address is outside th	e U.S.)	Foreign postal code	
E-mail address				
Ohio Residency Status - Check applica	hle hox	Check applicable b	hox for spouse (only	if married filing jointly)
Full-year Part-year Nor	nresident	Full-year	Part-year	Nonresident
	cate state	resident	resident	Indicate state
Filing Status - Check one (as reported on for				. Place your W-2(s), check
Single or head of household or qualifying wid	dow(er)			of State) and Ohio form nclude forms W-2G and
Married filing jointly Married filing separately		1099-R if tax	was withheld. Pla	ace any other supporting
(enter spouse's SS#)		documents or s	statements <u>after t</u> l	he last page of your return.
Ohio Political Party Fund	Yes No	G	o paperless.	It's FREE!
Do you want \$1 to go to this fund?				try Ohio I-File.
If joint return, does your spouse want \$1 to go to Note: Checking "Yes" will not increase your tax				
Ohio School District Number for 201				eceive their refunds
(see pages 43-48 of the instructions)		in 5-7 bu	siness days i	by direct deposit!
INCOME AND TAX INFORMATION -	If amount is negative, sha	de the negative sig	yn ("–") in the box p	rovided.
1. Federal adjusted gross income (from IRS 1040EZ, line 4; 1040NR, line 36; or 1040NR				0 0
2. Adjustments from line 47 on page 3 of Ohio				0 0
Ohio adjusted gross income (line 2 added to	`			0 0
4. Personal exemption and dependent exempt	ion deduction – multiply you	personal		0 0
	700 and enter the result her			0 0
5. Ohio taxable income (line 3 minus line 4; en		,		0 0
6. Tax on line 5 (see tax tables on pages 35-4	•			0 0
7. Schedule B credits from line 57 on page 4 or	`	,		0 0
8. Ohio tax less Schedule B credits (line 6 minus		•		0 0
Exemption credit: Number of personal and containing the second seco	·			0 0
10. Ohio tax less exemption credit (line 8 minus li	ne 9; enter -0- if line 8 is less	than line 9)	10.	

Ohio



Taxable year beginning in 2012

IT 1040 Rev. 10/12 Individual **Income Tax Return**

SS	#	TSUNDSUS		Income Tax Retur	'n
11.	Joint filing credit. See the instructions	s on page 20 for eligibility and docume	ntation requirements		0 0
		status only) % times line 10			0 0
		lit (line 10a minus line 11)			0 0
		of Ohio form IT 1040 (enclose page 4			0 0
		u must include the grant request form. s 13 and 14; enter -0- if the total of line			0 0
16.	Interest penalty on underpayment of	f estimated tax. Enclose Ohio form IT/	SD 2210 (see page		0 0
17.	Unpaid Ohio use tax (see the works	heet on page 33 of the instructions)		7.	0 0
18.	Total Ohio tax liability (add lines 15,	16 and 17)	TOTAL TAX > 18	3	0 0
		n W-2; box 14 on W-2G; and box 12 o top of this return).	0 0
20.	Add the 2012 Ohio form IT 1040ES p	payment(s), 2012 Ohio form IT 40P ext	tension payment(s)		0 0
21.	Refundable credits. Include certificat a. Business jobs credit				
		0 0	, 00		
(c. Historic preservation credit	d. Motion picture produc			
		00,	, 00		0 0
		ine 22 Is line 22 in LESS THAN line 4		2.	
	· · · · · · · · · · · · · · · · · · ·	ine 23. If line 22 is LESS THAN line 1 btract line 18 from line 22AN		3.	0 0
25.	Amount of line 23 that you wish to <u>d</u>	2013 income tax liability	CREDIT TO 2013 ▶ 24		0 0
		latural areas			
	c. Wildlife species d. N	0 0			
26.		nd 25a, b, c and d. Enter here, then sk	kip to line 2826	,	0 0
		otract line 22 from line 18	·		0 0
28.	Interest and penalty due on late-paid	d tax and/or late-filed return (see page	e 22 of the		0 0
instructions)					
	check payable to Ohio Treasurer of S	ty (add lines 27 and 28). If payment is State and include Ohio form IT 40P (se AMOUNT DUE PLUS INTERES	e our Web site at		0 0
	(If line 28 is more than line 26, you h	te 26 minus line 28). Enter the amount nave an amount due. Subtract line 26 e 29.)YOUR REFU	from	, 00	
	SN HERE (required)	, 20., POOK REP		your refund is less than \$1.01, no refu	
l ha beli	ve read this return. Under penalties of, the return and all enclosures are	of perjury, I declare that, to the best of true, correct and complete.	f my knowledge and	If you owe less than \$1.01, no paymen	-
	∕our signature	Date		For Department Use	Only
	Spouse's signature (see page 10 of	the instructions) Phone nu	ımber (optional)		
	Preparer's printed name (see page 1	· ·			
Do you authorize your preparer to contact us regarding this return? Yes No Code NO Payment Enclosed – Mail to: Ohio Department of Taxation, P.O. Box 2679, Columbus, OH 43218-2679					
MA	MAILING INFORMATION: NO Payment Enclosed – Mail to: Onlo Department of Taxation, P.O. Box 2079, Columbus, OH 43218-2079 Payment Enclosed – Mail to: Onlo Department of Taxation, P.O. Box 2079, Columbus, OH 43218-2057				







Taxable year beginning in IT 1040 Rev. 10/12 Department of \bigcirc hio Taxation Individual Income Tax Return SS# SCHEDULE A - Income Adjustments (Additions and Deductions) Additions (add income items only to the extent not included on page 1, line 1). 0 0 32. Certain pass-through entity Ohio taxes paid and Ohio Revised Code section 5733.40(A) 0 0 0 0 b. Reimbursement of college tuition expenses and fees deducted in any previous year(s) and 0 0 noneducation expenditures from a college savings accountb. O 0 0 d. Nonmedical withdrawals from a medical savings account.................d. e. Reimbursement of expenses previously deducted for Ohio income tax purposes, but only if 0 0 the reimbursement is not in federal adjusted gross income.....e. 0 0 f. Lump sum distribution add-back and miscellaneous federal income tax adjustmentsf. 0 0 g. Adjustment for Internal Revenue Code sections 168(k) and 179 depreciation expenseg. 0 0 34. Total additions (add lines 31 through 33g and enter here). You must complete the Deductions (deduct income items only to the extent included on page 1, line 1). 0 0 0 0 b. Adjustment for Internal Revenue Code sections 168(k) and 179 depreciation expenseb. 36. Employee compensation earned in Ohio by full-year residents of neighboring states and certain 0 0 37a. Military pay for Ohio residents, but only if the military pay is included on line 1 of this return 0 0 and is received while the military member was stationed outside Ohio.......37a. b. Military retirement income and military injury relief fund amounts included in federal adjusted 0 0 gross income (line 1 on page 1).....b. 0 0 b. 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 0 c. Repayment of income reported in a prior year and miscellaneous federal tax adjustments............c. 0 0 0 0 40. Qualifying Social Security benefits and certain railroad retirement benefits40. 0 0 0 0 b. Pell/Ohio College Opportunity taxable grant amounts used to pay room and board.....b. 0 0 43a. Unreimbursed long-term care insurance premiums, unsubsidized health care insurance 0 0 premiums and excess health care expenses (see worksheet on page 27 of the instructions)...43a. b. Funds deposited into, and earnings of, a medical savings account for eligible health care 0 0 expenses (see worksheet on page 28 of the instructions).....b. Qualified organ donor expenses (maximum \$10,000 per taxpayer) and amounts contributed 0 0 to an individual development account..... 0 0 44. Wage expense not deducted due to the targeted jobs or the work opportunity tax credits......44. 45. 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 0 0 state of Ohio or income from a transfer agreement45. 0 0 46. Total deductions (add lines 35a through 45 only). You must complete the applicable46. 47. Net adjustments – If line 34 is MORE THAN line 46, enter the difference here and on line 2 as a positive amount. If line 34 is LESS THAN line 46, enter 0 047. the difference here and on line 2 as a negative amount





If line 7 (page 1) <u>and</u> line 13 (page 2) are <u>both</u> -0- or blank, do not mail page 4.				
SS	Ohio Department of Taxation	Taxable year beginni	Rev. 10/12	
sc	HEDULE B – Nonbusiness	Credits		
49. 50.	Senior citizen credit (you must be 68) Lump sum distribution credit (you m	per return). See the table on page 29 of the instructions or older to claim this credit; limit \$50 per return) sust be 65 or older to claim this credit)	4950. ,51	
52.	Lump sum retirement credit			
53.	If line 5 on page 1 is \$10,000 or less	s, enter \$88; otherwise, enter -0- or leave blank	53.	
55.	(limit \$500 per taxpayer)Ohio political contributions credit (lin	e the worksheet and instructions on pages 30 and 31) mit \$50 per taxpayer)	55.	
56.	Ohio adoption credit (\$1,500 per ch	ild adopted during the year)	56.	
57	Total Schedule B credits (add lines	48 through 56). Enter here and on page 1, line 7	57	
	HEDULE C – Full-Year Ohio			
		subjected to tax by other states or the District of ent (limits apply – see page 31 of the instructions) 58.	, 0 0	
59.	Enter Ohio adjusted gross income (line 3 on page 1)59.	, , , , , , , , , , , , , , , , , , , ,	
		result here (four digits; do not round). line 12 on page 2 and enter the result here	60.	
	overpayment carryforwards from pro	edits other than withholding and estimated tax payments an evious years, paid to other states or the District of Columbi structions)	0 0	
	line 67 below. If you filed a return fo	This is your Ohio resident tax credit. Enter here and on r 2012 with a state(s) other than Ohio, enter the two-letter low	62.	
SC	HEDULE D - Nonresident /	Part-Year Resident Credit (date of part-year	residency to	
		ross income (line 3) that was not earned or received f required (see page 31 of the instructions)63.	, , , , , , , , , , , , , , , , , , , ,	
64.	Enter the Ohio adjusted gross incon	ne (line 3 on page 1)64.		
		e result here (four digits; do not round). line 12. Enter here and on line 68 below	65.	
SU	MMARY OF CREDITS FROM	I SCHEDULES C, D AND E		
		hedule E, Nonrefundable Business Credits (see page 32 c		
67.	Enter the amount from line 62 above	e		
68.	Enter the amount from line 65 above	e		
69.	Add lines 66, 67 and 68. Enter here	and on page 2, line 13	69.	
MA	ILING INFORMATION			
	NO Payment Enclosed - Ma	ail to:	Payment Enclosed - Mail to:	

O 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.

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Payment Enclosed – Mail to: Ohio Department of Taxation P.O. Box 2057 Columbus, OH 43218-2057





