

Please do not use staples.



Department of Taxation



Taxable year beginning in

2008

IT 1040EZ Rev. 9/08 Individual Income Tax Return for Full-Year Ohio Residents

Please use only black ink.

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

Grid boxes for Social Security numbers and check boxes for deceased status.

Use UPPERCASE letters.

Place Label Here

Your first name, M.I., Last name

Spouse's first name (only if joint return), M.I., Last name

Mailing address (for faster processing, please use a street address)

City, State, ZIP code, Ohio county (first four letters)

Home address (if different from mailing address) - please do NOT show city or state, ZIP code, Ohio county (first four letters)

Foreign country (please provide this information if the mailing address is outside the U.S.), Foreign postal code

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

Single or head of household or qualifying widow(er), Married filing jointly, Married filing separately, Enter spouse's SS#

Please do not use staples, tape or glue. Place your W-2(s), check and Ohio form IT 40P on top of your return. Place any other supporting documents or statements after the last page of your return.

Go paperless. It's FREE! Try I-File or Ohio eForms by visiting tax.ohio.gov.

Ohio Political Party Fund

Do you want \$1 to go to this fund? Yes No. If joint return, does your spouse want \$1 to go to this fund? Yes No.

Ohio School District Number for 2008 (see pages 38-42 in the instructions)

Most electronic filers receive 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.

Table with 10 rows for income and tax information, including Federal adjusted gross income, Ohio adjusted gross income, personal exemption deduction, Ohio taxable income, tax on line 5, and Ohio tax less exemption credit.



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SS#

10a. Amount from line 10 on page 1 10a. 0 0

11. Joint filing credit (only for married filing jointly filers; see page 13 in the instructions and include documentation) _____% times line 10a (limit \$650) 11. 0 0

12. Ohio income tax (line 10a minus line 11; enter -0- if line 10a is less than line 11) 12. 0 0

ADDITIONAL AMOUNTS

13. Interest penalty on underpayment of income tax. Check if Ohio form IT/SD 2210 is included (see instructions on page 14) **INTEREST PENALTY** ▶ 13. 0 0

14. Unpaid Ohio use tax (see Worksheet B on page 15 in the instructions) **USE TAX** ▶ 14. 0 0

TOTAL TAX AND AMOUNT WITHHELD

15. Total Ohio tax (add lines 12, 13 and 14) **TOTAL TAX** ▶ 15. 0 0

16. **Ohio Tax Withheld** (box 17 on your W-2). Place W-2(s) on top of this return **AMOUNT WITHHELD** ▶ 16. 0 0

REFUND OR AMOUNT YOU OWE

If line 16 is GREATER THAN line 15, go to line 17. If line 16 is LESS THAN line 15, skip to line 22.

17. If line 16 is GREATER than line 15, subtract line 15 from line 16 **AMOUNT OVERPAID** ▶ 17. 0 0

18. Amount of line 17 that you wish to **donate** to the Military Injury Relief Fund 18. 0 0

19. Amount of line 17 that you wish to **donate** for Ohio's wildlife species and conservation of endangered wildlife 19. 0 0

20. Amount of line 17 that you wish to **donate** for nature preserves, scenic rivers and protection of endangered species 20. 0 0

21. Amount of line 17 to be refunded (line 17 minus amounts on lines 18, 19 and 20) **YOUR REFUND** ▶ 21. 0 0

22. **Amount You Owe** (if line 16 is less than line 15, subtract line 16 from line 15). If payment is enclosed, make check payable to Ohio Treasurer of State and include Ohio form IT 40P (see pages 5 or 43 in the instructions) **AMOUNT YOU OWE** ▶ 22. 0 0

If your refund is less than \$1.01, no refund will be issued. If you owe less than \$1.01, 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 _____

▶ Spouse's signature (see instructions on page 9) _____ Phone number _____

Preparer's name (please print; see instructions on page 9) _____ Phone number _____

Do you authorize your preparer to contact us regarding this return? Yes No

For Department Use Only

Code

NO Payment Enclosed – Mail to:
 Ohio Department of Taxation
 P.O. Box 182294
 Columbus, OH 43218-2294

Do not enclose your federal income tax return unless line 1 on page 1 is -0- or negative.

Payment Enclosed – Mail to:
 Ohio Department of Taxation
 P.O. Box 182850
 Columbus, OH 43218-2850