



Department of  
Taxation

# Scan Specifications for the 2010 Ohio IT 1040

## Important Note

The following document (**2010 IT 1040**) contains grids for placement of information on this specific tax form. To accurately print, do not reduce the size, rotate or center this document. Doing so will jeopardize the integrity of the grid. When printing from Adobe Reader, please select "None" for "Page Scaling," which is under "Page Handling."

Ohio Department of Taxation  
4485 Northland Ridge Blvd.  
Columbus, OH 43229  
[tax.ohio.gov](http://tax.ohio.gov)



Department of  
Taxation

# Grid layout with notations

Please do not use staples.



Department of Taxation



10000110

Taxable year beginning in

2010

IT 1040 Rev. 9/10 Individual Income Tax Return

Please use only black ink.

Taxpayer Social Security no. (required)

888 88 8888

If deceased

Spouse

Joint return

If deceased

Placement of the 1D bar code and tax year is critical. Make sure to follow the grid positions for layout. Do not forget to get your bar code(s) assignments for every form, version and page.

Use UPPERCASE letters.

Your first name

JOHNXXXXXXXXXXXXX

check box

Spouse's first name (only if joint return)

M.I.

Last name

JANEXXXXXXXXXXXXXX

Q

PUBLICXXXXXXXXXXXXXXXXXX

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

8888 CHERRY LANEXXXXXXXXXXXXXXXXXXXXXX

City

State

ZIP code

County (first four letters)

COLUMBUSXXXXXXXXXXXXX

OH

88888

FRAN

Home address (if different from mailing address) - please do NOT show city or state

ZIP code

County (first four letters)

8888 BERRY AV

88888

PICK

Foreign country (please provide)

This is where you place the 2D bar code. This text must be deleted when doing the 2D version. Please follow grid layout for location of your 2D barcode.

Foreign postal code

JAPANXXXXX

8888888

Ohio Residency Status

Full-year resident

Part-year resident

Indicate state

OH

Check applicable box for spouse (only if married filing jointly)

Full-year resident

Part-year resident

Nonresident

OH

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#)

888 88 8888

Please do not use staples, tape or glue. Place your W-2(s), check (payable to Ohio Treasurer of State) and Ohio form IT 40P on top of your return. Also place forms W-2G and 1099-R if tax was withheld. Place any other supporting documents or statements after the last page of your return.

Ohio Political Party Fund

Yes No

Do you want \$1 to go to this fund? X X

If joint return, does your spouse want \$1 to go to this fund? X X

Note: Checking "Yes" will not increase your tax or decrease your refund.

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

Ohio School District Number for 2010

(see pages 42-46 of the instructions)

8888

Most electronic filers receive their refunds in 5-7 business days by direct deposit!

INCOME AND TAX INFORMATION

Table with 10 rows of income and tax information, including Federal adjusted gross income, adjustments, Ohio adjusted gross income, personal exemption, Ohio taxable income, tax on income, and Ohio tax less exemption credit.

For static text use Arial font (black ink) and try to match size. For data entry fields (shown in red for identification purposes only), use Courier font (black ink). All the data entry fields must follow grid layout. When a field reflects a negative amount, make sure there is one space between the amount and the negative sign. Never hard code a negative sign.

Target marks or registration marks must measure .2" X .2". The three target marks or registration marks on every page must follow grid layout.



Taxable year beginning in

**2010**

**IT 1040** Rev. 9/10  
**Individual  
 Income Tax Return**

10a. Amount from line 10 on page 1.....	10a.	888	888	888	00
11. Joint filing credit. See the instructions on page 19 for eligibility and documentation requirements (this credit is for married filing jointly status only). 88 % times line 10a (limit \$650).....	11.			888	00
12. Ohio tax less joint filing credit (line 10a minus line 11; if line 11 is more than line 10a, enter -0-).....	12.	888	888	888	00
13. Total credits from line 69 on page 4 of Ohio form IT 1040 (enclose page 4).....	13.	888	888	888	00
14. Manufacturing equipment grant. You must include the grant request form.....	14.	888	888	888	00
15. Ohio income tax (line 12 minus lines 13 and 14; if the total of lines 13 and 14 is more than line 12, enter -0-).....	15.	888	888	888	00
16. Interest penalty on underpayment of income tax. Enclose Ohio form IT/SD 2210 (see page 20 of the instructions).....	16.	8	888	888	00
17. Unpaid Ohio use tax (see worksheet on page 32 of the instructions).....	17.	8	888	888	00
18. Total Ohio tax liability (add lines 15, 16 and 17).....	<b>TOTAL TAX</b> ▶ 18.	888	888	888	00
19. Ohio tax withheld (box 17 on your W-2; box 14 on your W-2G; and box 10 on your 1099-R). Place W-2(s), W-2G(s) and 1099-R(s) on top of this return.....	<b>AMOUNT WITHHELD</b> ▶ 19.	888	888	888	00
20. 2009 overpayment credited to 2010, 2010 est. tax payments and any other 2010 tax payments....	20.	888	888	888	00
21. Refundable credits. Include certificate(s) and K-1(s):					
a. Business jobs credit	b. Pass-through entity credit				
88 888 888 00	88 888 888 00				
c. Historic preservation credit	d. Motion picture production credit				
88 888 888 00	88 888 888 00				
22. Add lines 19, 20 and 21a, b, c and d.....	<b>TOTAL PAYMENTS</b> ▶ 22.	888	888	888	00
<b>If line 22 is MORE THAN line 18, go to line 23. If line 22 is LESS THAN line 18, skip to line 27.</b>					
23. If line 22 is MORE THAN line 18, subtract line 18 from line 22.....	<b>AMOUNT OVERPAID</b> ▶ 23.	888	888	888	00
24. Amount of line 23 to be credited to 2011 income tax liability.....	<b>CREDIT TO 2011</b> ▶ 24.	888	888	888	00
25. Amount of line 23 that you wish to <u>donate</u> to the following funds:					
a. Military injury relief	b. Wildlife species/endangered wildlife	c. Natural areas/endangered species			
88 888 00	88 888 00	88 888 00			
26. Line 23 minus the sum of lines 24 and 25a, b and c. Enter amount here, then skip to line 28.....	26.	888	888	888	00
27. If line 22 is LESS THAN line 18, subtract line 22 from line 18.....	<b>AMOUNT DUE</b> ▶ 27.	888	888	888	00
28. Interest and penalty due on late-paid taxes and/or late-filed return (see page 21 of the instructions).....		8	888	888	00
.....	<b>INTEREST AND PENALTY</b> ▶ 28.				
<b>If you entered an amount on line 26, skip to line 30. If you entered an amount on line 27, go to line 29.</b>					
29. Amount due plus interest and penalty (add lines 27 and 28). If payment is enclosed, make check payable to Ohio Treasurer of State and include Ohio form IT 40P (see page 7 or 47 of the instructions).....	<b>AMOUNT DUE PLUS INTEREST AND PENALTY</b> ▶ 29.	888	888	888	00
30. Refund less interest and penalty (line 26 minus line 28). Enter the amount here. (If line 28 is more than line 26, you have an amount due. Subtract line 26 from line 28 and enter this amount on line 29.).....	<b>YOUR REFUND</b> ▶ 30.	888	888	888	00

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)** — See page 4 of this return for mailing information.

I have read this return. Under penalties of perjury, I declare that, to the best of my belief, the return and all enclosures are true, correct and complete.

▶ Your signature \_\_\_\_\_  
 ▶ Spouse's signature (see page 10 of the instructions) \_\_\_\_\_ Phone number (optional) \_\_\_\_\_  
 Preparer's name (please print; see page 10 of the instructions) \_\_\_\_\_ Phone number \_\_\_\_\_  
 Do you authorize your preparer to contact us regarding this return?  Yes  No

Please follow grid layout for the information circled to the right.

**For Department Use Only**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



Taxable year beginning in

**2010**

— IF LINE 2 (ON PAGE 1) IS -0- OR BLANK, DO NOT MAIL PAGE 3. —

**SCHEDULE A – Income Adjustments (Additions and Deductions)**

**Additions (add income items only to the extent not included on page 1, line 1).**

31. Non-Ohio state or local government interest and dividends.....	31.	888	888	888	00
32. Certain pass-through entity Ohio taxes paid and Ohio Revised Code section 5733.40(A) pass-through entity adjustment.....	32.	888	888	888	00
33a. Federal interest and dividends subject to state taxation.....	33a.	888	888	888	00
b. Reimbursement of college tuition expenses and fees deducted in any previous year(s).....	b.	888	888	888	00
c. Losses from sale or disposition of Ohio public obligations.....	c.	888	888	888	00
d. Nonmedical withdrawals from an Ohio medical savings account, lump sum distribution add-back and miscellaneous federal income tax adjustments.....	d.	888	888	888	00
e. Reimbursement of expenses previously deducted for Ohio income tax purposes, but only if the reimbursement is not in federal adjusted gross income.....	e.	888	888	888	00
f. Noneducation expenditures from college savings account.....	f.	888	888	888	00
g. 5/6 adjustment for IRC section 168(k) and 179 depreciation expense.....	g.	888	888	888	00
34. <b>Total additions</b> (add lines 31 through 33g and enter here). You must complete the applicable line items above.....	34.	88	888	888	888 00

**Deductions (deduct income items only to the extent included on page 1, line 1).**

**Important: See caution on page 23 of the instructions.**

35. Federal interest and dividends exempt from state taxation.....	35.	888	888	888	00
36. Employee compensation earned in Ohio by full-year residents of neighboring states and certain income earned by military nonresidents and civilian nonresident spouses (see instructions).....	36.	888	888	888	00
37. Military pay for Ohio residents, but only if the military pay is included on line 1 of this return and is received while the military member was stationed outside Ohio.....	37.	888	888	888	00
38. State or municipal income tax overpayments shown on IRS form 1040, line 10.....	38.	888	888	888	00
39. Disability and survivorship benefits (do not include pension continuation benefits).....	39.	888	888	888	00
40. Qualifying Social Security benefits and certain railroad retirement benefits.....	40.	888	888	888	00
41. Contributions to Ohio CollegeAdvantage 529 savings plan and/or purchases of tuition credits...41.	41.	888	888	888	00
42. Certain Ohio National Guard reimbursements and benefits (see page 25 of the instructions).....	42.	888	888	888	00
43. Unreimbursed long-term care insurance premiums, unsubsidized health care insurance premiums and excess health care expenses (see worksheet on page 25 of the instructions).....	43.	888	888	888	00
44. Funds deposited into, and earnings of, a medical savings account for eligible health care expenses (see worksheet on page 26 of the instructions).....	44.	888	888	888	00
45a. Wage expense not deducted due to the targeted jobs or the work opportunity tax credits.....	45a.	888	888	888	00
b. Interest income from Ohio public obligations and from Ohio purchase obligations and gains from the sale or disposition of Ohio public obligations.....	b.	888	888	888	00
c. Refund or reimbursements shown on IRS form 1040, line 21 for itemized deductions claimed on a prior year federal income tax return.....	c.	888	888	888	00
d. Repayment of income reported in a prior year and miscellaneous federal tax adjustments.....	d.	888	888	888	00
e. Qualified organ donor expenses (maximum \$10,000 per taxpayer) and amounts contributed to an individual development account.....	e.	888	888	888	00
f. Adjustment for Internal Revenue Code sections 168(k) and 179 depreciation expense.....	f.	888	888	888	00
g. Military retirement income and military injury relief fund amounts included in federal adjusted gross income (line 1).....	g.	888	888	888	00
46. <b>Total deductions</b> (add lines 35 through 45g). You must complete the applicable line items above.....	46.	88	888	888	888 00
47. Net adjustments – If line 34 is GREATER than line 46, <b>enter the difference here and on line 2 as a positive amount.</b> If line 34 is LESS than line 46, <b>enter the difference here and on line 2 as a negative amount. Include this page when you file your return</b> .....	47.	88	888	888	888 00



Department of Taxation



Taxable year beginning in

2010

IT 1040 Rev. 9/10 Individual Income Tax Return

SS# 888 88 8888

10000410

IF LINE 7 (PAGE 1) AND LINE 13 (PAGE 2) ARE BOTH -0- OR BLANK, DO NOT MAIL PAGE 4.

SCHEDULE B - Nonbusiness Credits

Table with 4 columns: Line number, Description, and Amount. Includes rows for Retirement income credit, Senior citizen credit, Lump sum distribution credit, Child care and dependent care credit, Lump sum retirement credit, Displaced worker training credit, Ohio political contributions credit, and Ohio adoption credit.

SCHEDULE C - Ohio Resident Credit

Table with 4 columns: Line number, Description, and Amount. Includes rows for portion of line 3 on page 1, Ohio adjusted gross income, and Ohio resident tax credit.

SCHEDULE D - Nonresident / Part-Year Resident Credit (date of part-year residency 88/88/88 to 88/88/88)

Table with 4 columns: Line number, Description, and Amount. Includes rows for portion of Ohio adjusted gross income not earned or received in Ohio, Ohio adjusted gross income, and result of division.

SUMMARY OF CREDITS FROM SCHEDULES C, D AND E

Table with 4 columns: Line number, Description, and Amount. Includes rows for Nonrefundable Business Credits, amount from line 62, amount from line 65, and total amount.

MAILING INFORMATION

NO Payment Enclosed - Mail to: Ohio Department of Taxation, P.O. Box 2679, Columbus, OH 43270-2679

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 2057, Columbus, OH 43270-2057



Department of  
Taxation

# Grid layout

Please do not use staples.



Department of Taxation



10000110

Taxable year beginning in

2010

IT 1040 Rev. 9/10 Individual Income Tax Return

Please use only black ink.

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

888 88 8888

X

888 88 8888

X

Use UPPERCASE letters.

Your first name

M.I.

Last name

JOHNXXXXXXXXXXXXX

Q

PUBLICXXXXXXXXXXXXX

Spouse's first name (only if joint return)

M.I.

Last name

JANEXXXXXXXXXXXXXX

Q

PUBLICXXXXXXXXXXXXX

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

8888 CHERRY LANEXXXXXXXXXXXXXXXXXXXXXX

City

State

ZIP code

County (first four letters)

COLUMBUSXXXXXXXXXXXXX

OH

88888

FRAN

Home address (if different from mailing address) - please do NOT show city or state

ZIP code

County (first four letters)

8888 BERRY AVEXXXXXXXXXXXXXX

88888

PICK

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

Foreign postal code

JAPANXXXXXXXXXXXXXXXXX

8888888

Ohio Residency Status - Check applicable box

Check applicable box for spouse (only if married filing jointly)

X Full-year resident X Part-year resident X Nonresident Indicate state OH

X Full-year resident X Part-year resident X Nonresident Indicate state OH

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

X Single or head of household or qualifying widow(er)

X Married filing jointly

X Married filing separately 888 88 8888 (enter spouse's SS#)

Please do not use staples, tape or glue. Place your W-2(s), check (payable to Ohio Treasurer of State) and Ohio form IT 40P on top of your return. Also place forms W-2G and 1099-R if tax was withheld. Place any other supporting documents or statements after the last page of your return.

Ohio Political Party Fund

Yes No

Do you want \$1 to go to this fund? X X

If joint return, does your spouse want \$1 to go to this fund? X X

Note: Checking "Yes" will not increase your tax or decrease your refund.

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

Ohio School District Number for 2010

(see pages 42-46 of the instructions) 8888

Most electronic filers receive their refunds in 5-7 business days by direct deposit!

INCOME AND TAX INFORMATION

Table with 10 rows of income and tax information, including Federal adjusted gross income, adjustments, Ohio adjusted gross income, personal exemption, Ohio taxable income, tax on line 5, credits, and exemption credit.



Department of Taxation



10000210

Taxable year beginning in

2010

IT 1040 Rev. 9/10 Individual Income Tax Return

SS# 888 88 8888

Table with 4 columns for tax amounts. Rows include: 10a. Amount from line 10 on page 1 (888 888 888 00); 11. Joint filing credit (888 00); 12. Ohio tax less joint filing credit (888 888 888 00); 13. Total credits from line 69 on page 4 of Ohio form IT 1040 (enclose page 4) (888 888 888 00); 14. Manufacturing equipment grant (888 888 888 00); 15. Ohio income tax (line 12 minus lines 13 and 14; if the total of lines 13 and 14 is more than line 12, enter -0-) (888 888 888 00); 16. Interest penalty on underpayment of income tax (8 888 888 00); 17. Unpaid Ohio use tax (8 888 888 00); 18. Total Ohio tax liability (add lines 15, 16 and 17) TOTAL TAX (888 888 888 00); 19. Ohio tax withheld (888 888 888 00); 20. 2009 overpayment credited to 2010, 2010 est. tax payments and any other 2010 tax payments (888 888 888 00); 21. Refundable credits (a. Business jobs credit 88 888 888 00, b. Pass-through entity credit 88 888 888 00, c. Historic preservation credit 88 888 888 00, d. Motion picture production credit 88 888 888 00); 22. Add lines 19, 20 and 21a, b, c and d TOTAL PAYMENTS (888 888 888 00); 23. If line 22 is MORE THAN line 18, subtract line 18 from line 22 AMOUNT OVERPAID (888 888 888 00); 24. Amount of line 23 to be credited to 2011 income tax liability CREDIT TO 2011 (888 888 888 00); 25. Amount of line 23 that you wish to donate to the following funds: a. Military injury relief (88 888 00), b. Wildlife species/endangered wildlife (88 888 00), c. Natural areas/endangered species (88 888 00); 26. Line 23 minus the sum of lines 24 and 25a, b and c. Enter amount here, then skip to line 28 (888 888 888 00); 27. If line 22 is LESS THAN line 18, subtract line 22 from line 18 AMOUNT DUE (888 888 888 00); 28. Interest and penalty due on late-paid taxes and/or late-filed return (see page 21 of the instructions) (8 888 888 00); 29. Amount due plus interest and penalty (add lines 27 and 28). If payment is enclosed, make check payable to Ohio Treasurer of State and include Ohio form IT 40P (see page 7 or 47 of the instructions) AMOUNT DUE PLUS INTEREST AND PENALTY (888 888 888 00); 30. Refund less interest and penalty (line 26 minus line 28). Enter the amount here. (If line 28 is more than line 26, you have an amount due. Subtract line 26 from line 28 and enter this amount on line 29.) YOUR REFUND (888 888 888 00)

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) - See page 4 of this return for mailing information.

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.

For Department Use Only

Your signature Date

Spouse's signature (see page 10 of the instructions) Phone number (optional)

Preparer's name (please print; see page 10 of the instructions) Phone number

Do you authorize your preparer to contact us regarding this return? [X] Yes [X] No Code



Taxable year beginning in

**2010**

— IF LINE 2 (ON PAGE 1) IS -0- OR BLANK, DO NOT MAIL PAGE 3. —

**SCHEDULE A – Income Adjustments (Additions and Deductions)**

**Additions (add income items only to the extent not included on page 1, line 1).**

31. Non-Ohio state or local government interest and dividends.....	31.	888	888	888	00
32. Certain pass-through entity Ohio taxes paid and Ohio Revised Code section 5733.40(A) pass-through entity adjustment.....	32.	888	888	888	00
33a. Federal interest and dividends subject to state taxation.....	33a.	888	888	888	00
b. Reimbursement of college tuition expenses and fees deducted in any previous year(s).....	b.	888	888	888	00
c. Losses from sale or disposition of Ohio public obligations.....	c.	888	888	888	00
d. Nonmedical withdrawals from an Ohio medical savings account, lump sum distribution add-back and miscellaneous federal income tax adjustments.....	d.	888	888	888	00
e. Reimbursement of expenses previously deducted for Ohio income tax purposes, but only if the reimbursement is not in federal adjusted gross income.....	e.	888	888	888	00
f. Noneducation expenditures from college savings account.....	f.	888	888	888	00
g. 5/6 adjustment for IRC section 168(k) and 179 depreciation expense.....	g.	888	888	888	00
34. <b>Total additions</b> (add lines 31 through 33g and enter here). You must complete the applicable line items above.....	34.	88	888	888	888 00

**Deductions (deduct income items only to the extent included on page 1, line 1).**

**Important: See caution on page 23 of the instructions.**

35. Federal interest and dividends exempt from state taxation.....	35.	888	888	888	00
36. Employee compensation earned in Ohio by full-year residents of neighboring states and certain income earned by military nonresidents and civilian nonresident spouses (see instructions).....	36.	888	888	888	00
37. Military pay for Ohio residents, but only if the military pay is included on line 1 of this return and is received while the military member was stationed outside Ohio.....	37.	888	888	888	00
38. State or municipal income tax overpayments shown on IRS form 1040, line 10.....	38.	888	888	888	00
39. Disability and survivorship benefits (do not include pension continuation benefits).....	39.	888	888	888	00
40. Qualifying Social Security benefits and certain railroad retirement benefits.....	40.	888	888	888	00
41. Contributions to Ohio CollegeAdvantage 529 savings plan and/or purchases of tuition credits ...	41.	888	888	888	00
42. Certain Ohio National Guard reimbursements and benefits (see page 25 of the instructions).....	42.	888	888	888	00
43. Unreimbursed long-term care insurance premiums, unsubsidized health care insurance premiums and excess health care expenses (see worksheet on page 25 of the instructions).....	43.	888	888	888	00
44. Funds deposited into, and earnings of, a medical savings account for eligible health care expenses (see worksheet on page 26 of the instructions).....	44.	888	888	888	00
45a. Wage expense not deducted due to the targeted jobs or the work opportunity tax credits.....	45a.	888	888	888	00
b. Interest income from Ohio public obligations and from Ohio purchase obligations and gains from the sale or disposition of Ohio public obligations.....	b.	888	888	888	00
c. Refund or reimbursements shown on IRS form 1040, line 21 for itemized deductions claimed on a prior year federal income tax return.....	c.	888	888	888	00
d. Repayment of income reported in a prior year and miscellaneous federal tax adjustments.....	d.	888	888	888	00
e. Qualified organ donor expenses (maximum \$10,000 per taxpayer) and amounts contributed to an individual development account.....	e.	888	888	888	00
f. Adjustment for Internal Revenue Code sections 168(k) and 179 depreciation expense.....	f.	888	888	888	00
g. Military retirement income and military injury relief fund amounts included in federal adjusted gross income (line 1).....	g.	888	888	888	00
46. <b>Total deductions</b> (add lines 35 through 45g). You must complete the applicable line items above.....	46.	88	888	888	888 00
47. Net adjustments – If line 34 is GREATER than line 46, enter the difference here and on line 2 as a positive amount. If line 34 is LESS than line 46, enter the difference here and on line 2 as a negative amount. Include this page when you file your return.....	47.	88	888	888	888 00



Department of Taxation



10000410

Taxable year beginning in

2010

IT 1040 Rev. 9/10 Individual Income Tax Return

SS# 888 88 8888

IF LINE 7 (PAGE 1) AND LINE 13 (PAGE 2) ARE BOTH -0- OR BLANK, DO NOT MAIL PAGE 4.

SCHEDULE B - Nonbusiness Credits

Table with 4 columns: Line number, Description, and Amount. Includes rows for Retirement income credit, Senior citizen credit, Lump sum distribution credit, Child care and dependent care credit, Lump sum retirement credit, Displaced worker training credit, Ohio political contributions credit, and Ohio adoption credit.

SCHEDULE C - Ohio Resident Credit

Table with 4 columns: Line number, Description, and Amount. Includes rows for portion of line 3 on page 1, Ohio adjusted gross income, and Ohio resident tax credit.

SCHEDULE D - Nonresident / Part-Year Resident Credit (date of part-year residency 88/88/88 to 88/88/88)

Table with 4 columns: Line number, Description, and Amount. Includes rows for portion of Ohio adjusted gross income and Nonresident / Part-Year Resident Credit.

SUMMARY OF CREDITS FROM SCHEDULES C, D AND E

Table with 4 columns: Line number, Description, and Amount. Includes rows for Nonrefundable Business Credits and summary of credits.

MAILING INFORMATION

NO Payment Enclosed - Mail to: Ohio Department of Taxation, P.O. Box 2679, Columbus, OH 43270-2679

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 2057, Columbus, OH 43270-2057



Department of  
Taxation

**Document without  
grid layout**

Please do not use staples.



Taxable year beginning in

2010

IT 1040 Rev. 9/10 Individual Income Tax Return

Please use only black ink.

Taxpayer Social Security no. (required) 888 88 8888 If deceased X Spouse's Social Security no. (only if joint return) 888 88 8888 If deceased X

Use UPPERCASE letters.

Your first name JOHNXXXXXXXXXXXX M.I. Q Last name PUBLICXXXXXXXXXXXX

Spouse's first name (only if joint return) JANXXXXXXXXXXXX M.I. Q Last name PUBLICXXXXXXXXXXXX

Mailing address (for faster processing, please use a street address) 8888 CHERRY LANEXXXXXXXXXXXXXXXXXXXXX

City COLUMBUSXXXXXXXXXXXX State OH ZIP code 88888 County (first four letters) FRAN

Home address (if different from mailing address) - please do NOT show city or state 8888 BERRY AVEXXXXXXXXXXXXX ZIP code 88888 County (first four letters) PICK

Foreign country (please provide this information if your mailing address is outside the U.S.) JAPANXXXXXXXXXXXXXXXX Foreign postal code 8888888

Ohio Residency Status - Check applicable box X Full-year resident X Part-year resident X Nonresident Indicate state OH Check applicable box for spouse (only if married filing jointly) X Full-year resident X Part-year resident X Nonresident Indicate state OH

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

X Single or head of household or qualifying widow(er) X Married filing jointly X Married filing separately 888 88 8888 (enter spouse's SS#)

Please do not use staples, tape or glue. Place your W-2(s), check (payable to Ohio Treasurer of State) and Ohio form IT 40P on top of your return. Also place forms W-2G and 1099-R if tax was withheld. Place any other supporting documents or statements after the last page of your return.

Ohio Political Party Fund Yes No Do you want \$1 to go to this fund? X X If joint return, does your spouse want \$1 to go to this fund? X X Note: Checking "Yes" will not increase your tax or decrease your refund.

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

Ohio School District Number for 2010 (see pages 42-46 of the instructions) 8888

Most electronic filers receive their refunds in 5-7 business days by direct deposit!

INCOME AND TAX INFORMATION

Table with 10 rows of income and tax information, including Federal adjusted gross income, adjustments, Ohio adjusted gross income, personal exemption, Ohio taxable income, tax on line 5, credits, and exemption credit.



Taxable year beginning in

**2010**

**IT 1040** Rev. 9/10  
**Individual  
 Income Tax Return**

10a. Amount from line 10 on page 1 ..... 10a. 888 888 888 00

11. Joint filing credit. See the instructions on page 19 for eligibility and documentation requirements (this credit is for married filing jointly status only). 88 % times line 10a (limit \$650)..... 11. 888 00

12. Ohio tax less joint filing credit (line 10a minus line 11; if line 11 is more than line 10a, enter -0-) ..... 12. 888 888 888 00

13. Total credits from line 69 on page 4 of Ohio form IT 1040 (enclose page 4) ..... 13. 888 888 888 00

14. Manufacturing equipment grant. You must include the grant request form ..... 14. 888 888 888 00

15. Ohio income tax (line 12 minus lines 13 and 14; if the total of lines 13 and 14 is more than line 12, enter -0-)..... 15. 888 888 888 00

16. Interest penalty on underpayment of income tax. Enclose Ohio form IT/SD 2210 (see page 20 of the instructions) ..... 16. 8 888 888 00

17. Unpaid Ohio use tax (see worksheet on page 32 of the instructions) ..... 17. 8 888 888 00

18. Total Ohio tax liability (add lines 15, 16 and 17)..... **TOTAL TAX** ▶ 18. 888 888 888 00

19. Ohio tax withheld (box 17 on your W-2; box 14 on your W-2G; and box 10 on your 1099-R). Place W-2(s), W-2G(s) and 1099-R(s) on top of this return ..... **AMOUNT WITHHELD** ▶ 19. 888 888 888 00

20. 2009 overpayment credited to 2010, 2010 est. tax payments and any other 2010 tax payments.... 20. 888 888 888 00

21. Refundable credits. Include certificate(s) and K-1(s):

a. Business jobs credit	b. Pass-through entity credit
88 888 888 00	88 888 888 00
c. Historic preservation credit	d. Motion picture production credit
88 888 888 00	88 888 888 00

22. Add lines 19, 20 and 21a, b, c and d..... **TOTAL PAYMENTS** ▶ 22. 888 888 888 00

**If line 22 is MORE THAN line 18, go to line 23. If line 22 is LESS THAN line 18, skip to line 27.**

23. If line 22 is MORE THAN line 18, subtract line 18 from line 22..... **AMOUNT OVERPAID** ▶ 23. 888 888 888 00

24. Amount of line 23 to be credited to 2011 income tax liability..... **CREDIT TO 2011** ▶ 24. 888 888 888 00

25. Amount of line 23 that you wish to donate to the following funds:

a. Military injury relief	b. Wildlife species/endangered wildlife	c. Natural areas/endangered species
88 888 00	88 888 00	88 888 00

26. Line 23 minus the sum of lines 24 and 25a, b and c. Enter amount here, then skip to line 28 ..... 26. 888 888 888 00

27. If line 22 is LESS THAN line 18, subtract line 22 from line 18..... **AMOUNT DUE** ▶ 27. 888 888 888 00

28. Interest and penalty due on late-paid taxes and/or late-filed return (see page 21 of the instructions).....  
 ..... **INTEREST AND PENALTY** ▶ 28. 8 888 888 00

**If you entered an amount on line 26, skip to line 30. If you entered an amount on line 27, go to line 29.**

29. Amount due plus interest and penalty (add lines 27 and 28). If payment is enclosed, make check payable to Ohio Treasurer of State and include Ohio form IT 40P (see page 7 or 47 of the instructions) ..... **AMOUNT DUE PLUS INTEREST AND PENALTY** ▶ 29. 888 888 888 00

30. Refund less interest and penalty (line 26 minus line 28). Enter the amount here.  
 (If line 28 is more than line 26, you have an amount due. Subtract line 26 from line 28 and enter this amount on line 29.) ..... **YOUR REFUND** ▶ 30. 888 888 888 00

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)** – See page 4 of this return for mailing information.

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.

**For Department Use Only**

▶ Your signature \_\_\_\_\_ Date \_\_\_\_\_

▶ Spouse's signature (see page 10 of the instructions) \_\_\_\_\_ Phone number (optional) \_\_\_\_\_

Preparer's name (please print; see page 10 of the instructions) \_\_\_\_\_ Phone number \_\_\_\_\_

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

Code



IF LINE 2 (ON PAGE 1) IS -0- OR BLANK, DO NOT MAIL PAGE 3.

**SCHEDULE A – Income Adjustments (Additions and Deductions)**

**Additions (add income items only to the extent not included on page 1, line 1).**

31. Non-Ohio state or local government interest and dividends.....	31.	888	888	888	00
32. Certain pass-through entity Ohio taxes paid and Ohio Revised Code section 5733.40(A) pass-through entity adjustment .....	32.	888	888	888	00
33a. Federal interest and dividends subject to state taxation.....	33a.	888	888	888	00
b. Reimbursement of college tuition expenses and fees deducted in any previous year(s) .....	b.	888	888	888	00
c. Losses from sale or disposition of Ohio public obligations .....	c.	888	888	888	00
d. Nonmedical withdrawals from an Ohio medical savings account, lump sum distribution add-back and miscellaneous federal income tax adjustments .....	d.	888	888	888	00
e. Reimbursement of expenses previously deducted for Ohio income tax purposes, but only if the reimbursement is not in federal adjusted gross income .....	e.	888	888	888	00
f. Noneducation expenditures from college savings account .....	f.	888	888	888	00
g. 5/6 adjustment for IRC section 168(k) and 179 depreciation expense.....	g.	888	888	888	00
34. <b>Total additions</b> (add lines 31 through 33g and enter here). You must complete the applicable line items above .....	34.	88	888	888	888 00

**Deductions (deduct income items only to the extent included on page 1, line 1).**

**Important: See caution on page 23 of the instructions.**

35. Federal interest and dividends exempt from state taxation .....	35.	888	888	888	00
36. Employee compensation earned in Ohio by full-year residents of neighboring states and certain income earned by military nonresidents and civilian nonresident spouses (see instructions).....	36.	888	888	888	00
37. Military pay for Ohio residents, but only if the military pay is included on line 1 of this return and is received while the military member was stationed outside Ohio .....	37.	888	888	888	00
38. State or municipal income tax overpayments shown on IRS form 1040, line 10.....	38.	888	888	888	00
39. Disability and survivorship benefits (do not include pension continuation benefits) .....	39.	888	888	888	00
40. Qualifying Social Security benefits and certain railroad retirement benefits.....	40.	888	888	888	00
41. Contributions to Ohio CollegeAdvantage 529 savings plan and/or purchases of tuition credits ...	41.	888	888	888	00
42. Certain Ohio National Guard reimbursements and benefits (see page 25 of the instructions) .....	42.	888	888	888	00
43. Unreimbursed long-term care insurance premiums, unsubsidized health care insurance premiums and excess health care expenses (see worksheet on page 25 of the instructions) .....	43.	888	888	888	00
44. Funds deposited into, and earnings of, a medical savings account for eligible health care expenses (see worksheet on page 26 of the instructions) .....	44.	888	888	888	00
45a. Wage expense not deducted due to the targeted jobs or the work opportunity tax credits .....	45a.	888	888	888	00
b. Interest income from Ohio public obligations and from Ohio purchase obligations and gains from the sale or disposition of Ohio public obligations .....	b.	888	888	888	00
c. Refund or reimbursements shown on IRS form 1040, line 21 for itemized deductions claimed on a prior year federal income tax return.....	c.	888	888	888	00
d. Repayment of income reported in a prior year and miscellaneous federal tax adjustments .....	d.	888	888	888	00
e. Qualified organ donor expenses (maximum \$10,000 per taxpayer) and amounts contributed to an individual development account .....	e.	888	888	888	00
f. Adjustment for Internal Revenue Code sections 168(k) and 179 depreciation expense.....	f.	888	888	888	00
g. Military retirement income and military injury relief fund amounts included in federal adjusted gross income (line 1) .....	g.	888	888	888	00
46. <b>Total deductions</b> (add lines 35 through 45g). You must complete the applicable line items above .....	46.	88	888	888	888 00
47. Net adjustments – If line 34 is GREATER than line 46, <b>enter the difference here and on line 2 as a positive amount.</b> If line 34 is LESS than line 46, <b>enter the difference here and on line 2 as a negative amount. Include this page when you file your return</b> .....	47.	88	888	888	888 00



IF LINE 7 (PAGE 1) AND LINE 13 (PAGE 2) ARE BOTH -0- OR BLANK, DO NOT MAIL PAGE 4.

**SCHEDULE B – Nonbusiness Credits**

48. Retirement income credit (see table on page 28 of the instructions) (limit \$200 per return).....	48.	888	00
49. Senior citizen credit (limit \$50 per return). You must be 65 or older to claim this credit .....	49.	88	00
50. Lump sum distribution credit (you must be 65 or older to claim this credit).....	50.	888	888 888 00
51. Child care and dependent care credit (see worksheet on page 29 of the instructions) .....	51.	8	888 00
52. Lump sum retirement credit .....	52.	888	888 888 00
53. If line 5 on page 1 is \$10,000 or less, enter \$93; otherwise, enter -0- or leave blank .....	53.		88 00
54. Displaced worker training credit (see the instructions and worksheet on page 29) (limit \$500 per taxpayer) .....	54.	8	888 00
55. Ohio political contributions credit (limit \$50 per taxpayer) .....	55.		888 00
56. Ohio adoption credit (\$1,500 per child adopted during the year) .....	56.	8	888 00
57. Total Schedule B credits (add lines 48 through 56). Enter here and on page 1, line 7 .....	57.	888	888 888 00

**SCHEDULE C – Ohio Resident Credit**

58. Enter the portion of line 3 on page 1 subjected to tax by other states or the District of Columbia while you are an Ohio resident (limits apply – see page 30 of the instructions) .....	58.	88	888 888 888 00
59. Enter Ohio adjusted gross income (line 3 on page 1).....	59.	88	888 888 888 00
60. Divide line 58 by line 59 and enter the result here (four digits; do not round). <b>. 8888</b> Multiply this factor by the amount on line 12 on page 2 and enter the result here .....	60.	888	888 888 00
61. Enter the 2010 income tax, less all credits other than withholding and estimated tax payments and overpayment carryforwards from previous years, paid to other states or the District of Columbia (limits apply – see page 30 of the instructions).....	61.	888	888 888 00
62. Enter the smaller of line 60 or line 61. This is your Ohio resident tax credit. Enter here and on line 67 below. If you filed a return for 2010 with a state(s) other than Ohio, list the two-letter state abbreviation in the boxes below.....	62.	888	888 888 00
		AB	AB AB AB AB AB

**SCHEDULE D – Nonresident / Part-Year Resident Credit (date of part-year residency 88/88/88 to 88/88/88)**

63. Enter the portion of Ohio adjusted gross income (line 3) that was not earned or received in Ohio. Include Ohio form IT 2023 if required (see page 30 of the instructions).....	63.	88	888 888 888 00
64. Enter the Ohio adjusted gross income (line 3).....	64.	88	888 888 888 00
65. Divide line 63 by line 64 and enter the result here (four digits; do not round). <b>. 8888</b> Multiply this factor by the amount on line 12. Enter here and on line 68 below.....	65.	888	888 888 00

**SUMMARY OF CREDITS FROM SCHEDULES C, D AND E**

66. Enter the amount from line 11 of Schedule E, Nonrefundable Business Credits (see page 30 of the instructions) .....	66.	888	888 888 00
67. Enter the amount from line 62 above.....	67.	888	888 888 00
68. Enter the amount from line 65 above.....	68.	888	888 888 00
69. Add lines 66, 67 and 68. Enter here and on page 2, line 13.....	69.	888	888 888 00

**MAILING INFORMATION**

NO Payment Enclosed – Mail to:  
 Ohio Department of Taxation  
 P.O. Box 2679  
 Columbus, OH 43270-2679

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 2057  
 Columbus, OH 43270-2057



Department of  
Taxation

**Blank  
document**

Please do not use staples.



Taxable year beginning in

2010

IT 1040 Rev. 9/10 Individual Income Tax Return

Please use only black ink.

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

Use UPPERCASE letters.

Your first name

check box

M.I. Last name

check box

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

County (first four letters)

Home address (if different from mailing address) - please do NOT show city or state

ZIP code

County (first four letters)

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

Foreign postal code

Ohio Residency Status - Check applicable box

Full-year resident Part-year resident Nonresident Indicate state

Check applicable box for spouse (only if married filing jointly)

Full-year resident Part-year resident Nonresident Indicate state

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 (payable to Ohio Treasurer of State) and Ohio form IT 40P on top of your return. Also place forms W-2G and 1099-R if tax was withheld. Place any other supporting documents or statements after the last page of your return.

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.

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

Ohio School District Number for 2010

(see pages 42-46 of the instructions)

Most electronic filers receive their refunds in 5-7 business days by direct deposit!

INCOME AND TAX INFORMATION

- 1. Federal adjusted gross income (from IRS form 1040, line 37; 1040A, line 21; 1040EZ, line 4; 1040NR, line 36; or 1040NR-EZ, line 10).....1.
2. Adjustments from line 47 on page 3 of Ohio form IT 1040 (enclose page 3) .....2.
3. Ohio adjusted gross income (line 2 added to or subtracted from line 1).....3.
4. Personal exemption and dependent exemption deduction - multiply your personal and dependent exemptions times \$1,600 and enter the result here .....4.
5. Ohio taxable income (line 3 minus line 4; enter -0- if line 3 is less than line 4) .....5.
6. Tax on line 5 (see tax tables on pages 34-40 of the instructions) .....6.
7. Credits from Schedule B from line 57 on page 4 of Ohio form IT 1040 (enclose page 4) .....7.
8. Ohio tax less Schedule B credits (line 6 minus line 7; enter -0- if line 7 is more than line 6) .....8.
9. Exemption credit: Number of personal and dependent exemptions times \$20 .....9.
10. Ohio tax less exemption credit (line 8 minus line 9; enter -0- if line 8 is less than line 9) .....10.



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Taxable year beginning in

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IT 1040 Rev. 9/10 Individual Income Tax Return

SS#

10000210

- 10a. Amount from line 10 on page 1 ..... 10a.
11. Joint filing credit. See the instructions on page 19 for eligibility and documentation requirements (this credit is for married filing jointly status only). % times line 10a (limit \$650)..... 11.
12. Ohio tax less joint filing credit (line 10a minus line 11; if line 11 is more than line 10a, enter -0-) ..... 12.
13. Total credits from line 69 on page 4 of Ohio form IT 1040 (enclose page 4) ..... 13.
14. Manufacturing equipment grant. You must include the grant request form ..... 14.
15. Ohio income tax (line 12 minus lines 13 and 14; if the total of lines 13 and 14 is more than line 12, enter -0-)..... 15.
16. Interest penalty on underpayment of income tax. Enclose Ohio form IT/SD 2210 (see page 20 of the instructions) ..... 16.
17. Unpaid Ohio use tax (see worksheet on page 32 of the instructions) ..... 17.
18. Total Ohio tax liability (add lines 15, 16 and 17)..... TOTAL TAX ▶ 18.
19. Ohio tax withheld (box 17 on your W-2; box 14 on your W-2G; and box 10 on your 1099-R). Place W-2(s), W-2G(s) and 1099-R(s) on top of this return ..... AMOUNT WITHHELD ▶ 19.
20. 2009 overpayment credited to 2010, 2010 est. tax payments and any other 2010 tax payments.... 20.
21. Refundable credits. Include certificate(s) and K-1(s):
a. Business jobs credit b. Pass-through entity credit
c. Historic preservation credit d. Motion picture production credit
22. Add lines 19, 20 and 21a, b, c and d..... TOTAL PAYMENTS ▶ 22.
If line 22 is MORE THAN line 18, go to line 23. If line 22 is LESS THAN line 18, skip to line 27.
23. If line 22 is MORE THAN line 18, subtract line 18 from line 22..... AMOUNT OVERPAID ▶ 23.
24. Amount of line 23 to be credited to 2011 income tax liability..... CREDIT TO 2011 ▶ 24.
25. Amount of line 23 that you wish to donate to the following funds:
a. Military injury relief b. Wildlife species/endangered wildlife c. Natural areas/endangered species
26. Line 23 minus the sum of lines 24 and 25a, b and c. Enter amount here, then skip to line 28 ..... 26.
27. If line 22 is LESS THAN line 18, subtract line 22 from line 18..... AMOUNT DUE ▶ 27.
28. Interest and penalty due on late-paid taxes and/or late-filed return (see page 21 of the instructions)..... INTEREST AND PENALTY ▶ 28.
If you entered an amount on line 26, skip to line 30. If you entered an amount on line 27, go to line 29.
29. Amount due plus interest and penalty (add lines 27 and 28). If payment is enclosed, make check payable to Ohio Treasurer of State and include Ohio form IT 40P (see page 7 or 47 of the instructions) ..... AMOUNT DUE PLUS INTEREST AND PENALTY ▶ 29.
30. Refund less interest and penalty (line 26 minus line 28). Enter the amount here. (If line 28 is more than line 26, you have an amount due. Subtract line 26 from line 28 and enter this amount on line 29.) ..... YOUR REFUND ▶ 30.

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) - See page 4 of this return for mailing information.

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.

For Department Use Only

Your signature Date

Spouse's signature (see page 10 of the instructions) Phone number (optional)

Preparer's name (please print; see page 10 of the instructions) Phone number

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



Department of Taxation



Taxable year beginning in

2010

IT 1040 Rev. 9/10 Individual Income Tax Return

SS#

10000310

IF LINE 2 (ON PAGE 1) IS -0- OR BLANK, DO NOT MAIL PAGE 3.

SCHEDULE A - Income Adjustments (Additions and Deductions)

Additions (add income items only to the extent not included on page 1, line 1).

- 31. Non-Ohio state or local government interest and dividends... 31.
32. Certain pass-through entity Ohio taxes paid and Ohio Revised Code section 5733.40(A) pass-through entity adjustment ...32.
33a. Federal interest and dividends subject to state taxation...33a.
b. Reimbursement of college tuition expenses and fees deducted in any previous year(s) .....b.
c. Losses from sale or disposition of Ohio public obligations .....c.
d. Nonmedical withdrawals from an Ohio medical savings account, lump sum distribution add-back and miscellaneous federal income tax adjustments .....d.
e. Reimbursement of expenses previously deducted for Ohio income tax purposes, but only if the reimbursement is not in federal adjusted gross income .....e.
f. Noneducation expenditures from college savings account .....f.
g. 5/6 adjustment for IRC section 168(k) and 179 depreciation expense.....g.
34. Total additions (add lines 31 through 33g and enter here). You must complete the applicable line items above ..... 34.

Deductions (deduct income items only to the extent included on page 1, line 1).

Important: See caution on page 23 of the instructions.

- 35. Federal interest and dividends exempt from state taxation .....35.
36. Employee compensation earned in Ohio by full-year residents of neighboring states and certain income earned by military nonresidents and civilian nonresident spouses (see instructions).....36.
37. Military pay for Ohio residents, but only if the military pay is included on line 1 of this return and is received while the military member was stationed outside Ohio .....37.
38. State or municipal income tax overpayments shown on IRS form 1040, line 10.....38.
39. Disability and survivorship benefits (do not include pension continuation benefits) .....39.
40. Qualifying Social Security benefits and certain railroad retirement benefits.....40.
41. Contributions to Ohio CollegeAdvantage 529 savings plan and/or purchases of tuition credits ...41.
42. Certain Ohio National Guard reimbursements and benefits (see page 25 of the instructions) .....42.
43. Unreimbursed long-term care insurance premiums, unsubsidized health care insurance premiums and excess health care expenses (see worksheet on page 25 of the instructions) ..... 43.
44. Funds deposited into, and earnings of, a medical savings account for eligible health care expenses (see worksheet on page 26 of the instructions) .....44.
45a. Wage expense not deducted due to the targeted jobs or the work opportunity tax credits .....45a.
b. Interest income from Ohio public obligations and from Ohio purchase obligations and gains from the sale or disposition of Ohio public obligations .....b.
c. Refund or reimbursements shown on IRS form 1040, line 21 for itemized deductions claimed on a prior year federal income tax return.....c.
d. Repayment of income reported in a prior year and miscellaneous federal tax adjustments .....d.
e. Qualified organ donor expenses (maximum \$10,000 per taxpayer) and amounts contributed to an individual development account .....e.
f. Adjustment for Internal Revenue Code sections 168(k) and 179 depreciation expense.....f.
g. Military retirement income and military injury relief fund amounts included in federal adjusted gross income (line 1) .....g.
46. Total deductions (add lines 35 through 45g). You must complete the applicable line items above ..... 46.
47. Net adjustments - If line 34 is GREATER than line 46, enter the difference here and on line 2 as a positive amount. If line 34 is LESS than line 46, enter the difference here and on line 2 as a negative amount. Include this page when you file your return ..... 47.



Department of Taxation



Taxable year beginning in

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IT 1040 Rev. 9/10 Individual Income Tax Return

SS#

IF LINE 7 (PAGE 1) AND LINE 13 (PAGE 2) ARE BOTH -0- OR BLANK, DO NOT MAIL PAGE 4.

SCHEDULE B - Nonbusiness Credits

- 48. Retirement income credit (see table on page 28 of the instructions) (limit \$200 per return)..... 48.
49. Senior citizen credit (limit \$50 per return). You must be 65 or older to claim this credit .....49.
50. Lump sum distribution credit (you must be 65 or older to claim this credit)..... 50.
51. Child care and dependent care credit (see worksheet on page 29 of the instructions) ..... 51.
52. Lump sum retirement credit .....52.
53. If line 5 on page 1 is \$10,000 or less, enter \$93; otherwise, enter -0- or leave blank ..... 53.
54. Displaced worker training credit (see the instructions and worksheet on page 29) (limit \$500 per taxpayer) ..... 54.
55. Ohio political contributions credit (limit \$50 per taxpayer).....55.
56. Ohio adoption credit (\$1,500 per child adopted during the year) .....56.
57. Total Schedule B credits (add lines 48 through 56). Enter here and on page 1, line 7 .....57.

SCHEDULE C - Ohio Resident Credit

- 58. Enter the portion of line 3 on page 1 subjected to tax by other states or the District of Columbia while you are an Ohio resident (limits apply - see page 30 of the instructions) .....58.
59. Enter Ohio adjusted gross income (line 3 on page 1)..... 59.
60. Divide line 58 by line 59 and enter the result here (four digits; do not round). Multiply this factor by the amount on line 12 on page 2 and enter the result here .....60.
61. Enter the 2010 income tax, less all credits other than withholding and estimated tax payments and overpayment carryforwards from previous years, paid to other states or the District of Columbia (limits apply - see page 30 of the instructions).....61.
62. Enter the smaller of line 60 or line 61. This is your Ohio resident tax credit. Enter here and on line 67 below. If you filed a return for 2010 with a state(s) other than Ohio, list the two-letter state abbreviation in the boxes below.....62.

SCHEDULE D - Nonresident / Part-Year Resident Credit (date of part-year residency \_\_\_\_\_ to \_\_\_\_\_)

- 63. Enter the portion of Ohio adjusted gross income (line 3) that was not earned or received in Ohio. Include Ohio form IT 2023 if required (see page 30 of the instructions)..... 63.
64. Enter the Ohio adjusted gross income (line 3)..... 64.
65. Divide line 63 by line 64 and enter the result here (four digits; do not round). Multiply this factor by the amount on line 12. Enter here and on line 68 below.....65.

SUMMARY OF CREDITS FROM SCHEDULES C, D AND E

- 66. Enter the amount from line 11 of Schedule E, Nonrefundable Business Credits (see page 30 of the instructions) .....66.
67. Enter the amount from line 62 above.....67.
68. Enter the amount from line 65 above.....68.
69. Add lines 66, 67 and 68. Enter here and on page 2, line 13.....69.

MAILING INFORMATION

NO Payment Enclosed - Mail to: Ohio Department of Taxation P.O. Box 2679 Columbus, OH 43270-2679

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 2057 Columbus, OH 43270-2057



Department of  
Taxation

**General information  
regarding this form**

# General Information (2010 IT 1040):

## 1) Dimensions:

Target or Registration Marks - .2" X .2". Follow grid layout for positioning.

1D barcode (2 of 5 interleaved) - .375"H x 1.5"W. Follow grid layout for positioning. The number for the barcode should be placed under the barcode and centered.

2D barcode - See 2D information and instructions. Follow grid layout for positioning.

**2) 1D barcode** - The last two numbers of the 1D barcode represent the vendor/version number for this form. Please use the same last two numbers as you did for last year's return. You will have a different vendor/version number for returns that are "OCR scanned" versus "2D scanned". If you have a question about your barcode assignment, please e-mail Theresa Goeller at [theresa\\_goeller@tax.state.oh.us](mailto:theresa_goeller@tax.state.oh.us). The first six numbers are constant for this form (100001XX - 100004XX).

10 = tax year

00 = IT 1040

01-04 = page number

XX = vendor/version number (assigned to you by the Ohio Dept. of Taxation, Forms Printing Division).

**3) Use Arial font** for text that is a static portion of the form.

**4) Use Courier font** for the data entry portion of the form. This would be taxpayer's information and data.

**5) Make sure you follow the grid layout** for the data entry portions (shown in red). Also make sure that the tax year, target or registration marks, "For Department Use Only" area and the 1D and 2D barcodes follow grid layout.

**6) Do not use commas, hyphens or decimals** in the data entry fields. Use a space where a comma, hyphen or decimal would appear.

**7) When a data entry field reflects a negative amount**, make sure there is one space between the negative sign and the amount (for example: - 888 888 888 00). The possible negative fields for this return are lines 1, 2, 3 and 47. Do not hard code negative signs.

**8) When a taxpayer is printing the Ohio form IT 1040**, make sure that you explain to them, if they are printing two sides, print pages 1 and 2 together and pages 3 and 4 together. For instance, we have seen some returns filed with pages 2 and 3 together or a worksheet as the backside of a certain page of the form. This will slow down the processing of this tax return.

**9) Make sure that you explain to your customers within your product: "Please do not enclose any worksheets or other documentation unless it is specified on the tax return or instructions."** For example, taxpayers are sending in worksheets from your software packages. This only slows the processing of their tax return.

**10) IMPORTANT NOTE (For those developers producing 2D barcodes):** Please add this statement to your software programs. It should print out with the taxpayer's return. **"Do not hand write in any corrections on the printed paper return. Hand writing in corrections will result in capturing incorrect data and delaying the processing of this income tax return. Please make any corrections to this income tax return within [the software program name], then print and mail."**

**11) We strongly encourage you to produce the 2D barcode version.** This will not only assist our department in processing of tax returns, but also benefits the taxpayers of the state of Ohio. Thank you in advance for making every effort to develop the 2D version.

**12) For review and approval of your return**, please submit one sample with every field filled in with the maximum amount of characters per field, one blank sample and all test scenarios.

**NOTE:** Approval turn-around will be approximately ten (10) business days from date the department receives test scenarios through Jan. 31, 2011. After Jan. 31, 2011 the department cannot guarantee turn-around time for approval status.



Department of  
Taxation

# 2D information and instructions

# Ohio 2010 Scan and 2D Barcode Instructions

## General

- Forms need to be enabled for 2D Barcode decoding
  1. If a form is enabled for 2D Barcode the software **should not allow** users/practitioners the option to turn off/on the 2D Barcode function
- The minimum error correction code level should be 4

## 2D Barcode size and placement on the Form

- 2D Barcode must be placed on the first page of form in the rectangular area [see grid layout]
- 2D Barcode should not be bigger than the allocated area
- The maximum size of the 2D Barcode: 3 ½ inches wide by 2 inches height & must follow the grid layout provided in this document

## 2D Barcode Layout

- Each field in the Barcode is delimited by a single carriage return
  1. <CR> equals single carriage return character
    - 1.1 This separates each piece of data so it may be efficiently processed.
  - Data included in the 2D Barcode varies per form and can be broken down into three general sections
    1. Header
      - 1.1 **Header Version Number**
        - 1.1.1 Static for all Barcodes, value is T1
      - 1.2 **Developer Code**
        - 1.2.1 A four-digit vendor code identifying the software developer whose application produced the Barcode
      - 1.3 **Jurisdiction**
        - 1.3.1 Static for all Barcodes, value is OH
      - 1.4 **Description**
        - 1.4.1 A four-digit form identifier, specific to each form
      - 1.5. **Spec Version**
        - 1.5.1 A one-digit specification version control number starting with the number zero (0)
          - 1.5.1.1 This number identifies the version of the specifications used to produce the form Barcode
      - 1.6 **Form Version**
        - 1.6.1 A one-digit form version control number starting with the number one (1)
          - 1.6.1.1 This number will only be incremented when there are changes made that would affect the content of the Barcode
    2. Form Specific Data – [please see encoding schemas for form specific data]
      - 2.1 Fields that are captured from each form
      - 2.2 All fields on form will be required and must be included in 2D Barcode
        - 2.2.1 Fields must be included into 2D Barcode if present
        - 2.2.2 Fields values not present in 2D Barcode will be empty
          - 2.2.2.1 Will result in two adjacent carriage returns
    3. Trailer
      - 3.1 The last field in the Barcode data stream is the trailer
        - 3.1.1 The trailer is used to indicate the end of data has been reached
          - 3.1.1.1 A static string of "\*EOD\*" is used as the trailer value

### Examples of 2D Barcode data streams

Header Version Number	T1<CR>
Developer Code	1111<CR>
Jurisdiction	OH<CR>
Description	1111<CR>
Spec Version	0<CR>
Form Version	1<CR>
Line Item Specific Data	IN<CR>
Line Item Specific Data	IT40<CR>
Line Item Specific Data	0<CR>
Trailer	*EOD* <CR>

### Testing and Approval Procedures

- As a general guideline, current software testing and forms approval time frame and quality assurance practices would be followed in the implementation of 2D barcoding
  1. **Testing Processes**
    - 1.1 See PATS documentation for testing scenarios coming by [date to be determined]
  2. **Number of test scenarios**
    - 2.1 Forms to be submitted for approval include:
      - 2.1.1 One (1) set of blank forms
      - 2.1.2 Ten (10) test scenarios per form
        - 2.1.2.1 Test scenarios will be provided by ODT
      - 2.1.3 One (1) set of full field test scenario
  3. **Approval Procedures**
    - 3.1 Approval will be given in two (2) areas
      - 3.1.1 Printed form matches template
      - 3.1.2 2D Barcode is valid
        - 3.1.2.1 All test scenarios can be decoded properly
        - 3.1.2.2. All test scenarios submitted are correct
        - 3.1.2.3. 2D Barcode data must match printed form
    - 3.2 Approval will be given for each form type listed
      - 3.2.1 2010 IT 1040
      - 3.2.2 2010 IT 1040EZ
      - 3.2.3 2010 SD 100
    - 3.3 Approval time line
      - 3.3.1 Approval turnaround will be approximately ten (10) business days from date ODT receives test scenarios through January 31, 2011
        - 3.3.1.1 After above date ODT cannot guarantee turnaround time for approval status
        - 3.3.1.2 Forms will be tested, reviewed and approved on a first come, first serve basis
      - 3.3.2 Feedback will be given if test scenarios do not receive approval
        - 3.3.2.1 Corrected test scenarios must be resubmitted for approval
        - 3.3.2.2 ODT cannot guarantee turnaround time for re-approval status
      - 3.3.3 Approval notification will be given once test scenarios meet all specifications and are fully tested
      - 3.3.4 Vendor may submit tests beginning [date to be determined]
        - 3.3.4.1 If tax forms change before January 1, 2011 vendors will be notified and required to re-submit test scenarios

2010  
IT 1040 2D BARCODE SCHEMA

Line Item Number	Field name	Max Chars	Field Format
N/A	header_version_number	2	Always T1
N/A	developer_code	4	Vendor's NACTP code
N/A	jurisdiction	2	Always: OH
N/A	description	4	form code: 1000
N/A	spec version	1	At this time: 0
N/A	form version	1	At this time: 1
N/A	taxpayer_ssn	9	Numeric
N/A	taxpayer_deceased	1	If true place "X" in box, otherwise leave empty
N/A	spouse_ssn	9	Numeric
N/A	spouse_deceased	1	If true place "X" in box, otherwise leave empty
N/A	year	4	2010
N/A	taxpayer_firstname	15	Alpha
N/A	taxpayer_middle_initial	1	Alpha
N/A	taxpayer_lastname	20	Alpha
N/A	spouse_firstname	15	Alpha
N/A	spouse_middle_initial	1	Alpha
N/A	spouse_lastname	20	Alpha
N/A	taxpayer_address	35	Alpha-Numeric
N/A	taxpayer_city	20	Alpha
N/A	taxpayer_state	2	Alpha
N/A	taxpayer_zip	5	Numeric
N/A	taxpayer_county	4	Alpha First 4 characters of county name Uppercase
N/A	foreign_country	20	Alpha First 20 characters of foreign country Uppercase
N/A	foreign_postal_code	7	Alpha-Numeric
N/A	primary_residency_status	1	Numeric Resident = 1, Part-year Resident=2, Non-Resident=3
N/A	spouse_residency_status	1	Numeric Resident = 1, Part-year Resident=2, Non-Resident=3 Only use if married filing jointly return

2010  
IT 1040 2D BARCODE SCHEMA

Line Item Number	Field name	Max Chars	Field Format
N/A	filing_status	1	Numeric Single=1, Jointly=2, or Separately=3
N/A	taxpayer_fund_contribution	1	Alpha Y or N Uppercase
N/A	spouse_fund_contribution	1	Alpha Y or N Uppercase
N/A	school_district_number	4	Numeric Must be valid School District (see tax instructions booklet for complete list)
N/A	negative_indicator_for_line_1_amount	1	Numeric 1 for negative 0 for non-negative
1	federal_adjusted_gross_income	11	Numeric Send Dollars Only If negative amount use negative indicator field. <b>DO NOT PUT NEGATIVE SIGN IN THIS FIELD</b>
2	adjustments_from_line_47_page_3	11	Numeric Send Dollars Only
3	Ohio_adjusted_gross_income	11	Numeric Send Dollars Only
4	personal_dependent_exemptions	5	Numeric Send Dollars Only
5	Ohio_taxable_income	11	Numeric Send Dollars Only
6	tax_from_line_5	9	Numeric Send Dollars Only
7	credits_from_schedule_B	9	Numeric Send Dollars Only
8	Ohio_tax_less_schedule_B_credits	9	Numeric Send Dollars Only
9	exemption_credit	3	Numeric Send Dollars Only
10	Ohio_tax_less_exemption_credit	9	Numeric Send Dollars Only
10a	amt_from_line_10_page_1	9	Numeric Send Dollars Only
11	joint_filing_credit	3	Numeric Send Dollars Only

2010  
IT 1040 2D BARCODE SCHEMA

Line Item Number	Field name	Max Chars	Field Format
12	Ohio_tax_less_joint_filing_credit	9	Numeric Send Dollars Only
13	total_credits_from_line_69_page_4	9	Numeric Send Dollars Only
14	manufacturing_equipment_grant	9	Numeric Send Dollars Only
15	Ohio_income_tax	9	Numeric Send Dollars Only
16	interest_penalty_on_underpayment_of_income_tax	7	Numeric Send Dollars Only
17	unpaid_Ohio_use_tax	7	Numeric Send Dollars Only
18	total_Ohio_tax_liability	9	Numeric Send Dollars Only
19	Ohio_tax_withheld	9	Numeric Send Dollars Only
20	2009_overpayment_credit_to_2010	9	Numeric Send Dollars Only
21a	business_jobs_credit	8	Numeric Send Dollars Only
21b	pass_through_entity_credit	8	Numeric Send Dollars Only
21c	historic_preservation_credit	8	Numeric Send Dollars Only
21d	motion_picture_production_credit	8	Numeric Send Dollars Only
22	sum_of_lines_19, 20, 21a, b, c, d	9	Numeric Send Dollars Only
23	amount_overpaid	9	Numeric Send Dollars Only
24	amount_line_23_credited_to_2011_income_tax_liability	9	Numeric Send Dollars Only
25a	military_injury_relief_fund_donation	5	Numeric Send Dollars Only

2010  
IT 1040 2D BARCODE SCHEMA

Line Item Number	Field name	Max Chars	Field Format
<b>25b</b>	wildlife_species/endangered_wildlife_donation	5	Numeric Send Dollars Only
<b>25c</b>	natural_areas/endangered_species_donation	5	Numeric Send Dollars Only
<b>26</b>	line_23_minus_sum_of_lines_24_and_25a,b,c	9	Numeric Send Dollars Only
<b>27</b>	amount_due	9	Numeric Send Dollars Only
<b>28</b>	interest_penalty_on_late_paid_tax_late_filed_return	7	Numeric Send Dollars Only
<b>29</b>	amount_due_plus_interest_penalty	9	Numeric Send Dollars Only
<b>30</b>	refund	9	Numeric Send Dollars Only
<b>31</b>	non_Ohio_state_local_government_int_dividends	9	Numeric Send Dollars Only
<b>32</b>	pass_thru_entity_Ohio_taxes_paid_adjusted	9	Numeric Send Dollars Only
<b>33a</b>	federal_interest_dividends_subject_state_taxation	9	Numeric Send Dollars Only
<b>33b</b>	reimb_college_tuition_exp_fees_deducted_prev_yr(s)	9	Numeric Send Dollars Only
<b>33c</b>	loss_sale_disposition_Ohio_public_obligations	9	Numeric Send Dollars Only
<b>33d</b>	non_med_withdraw_Ohio_med_sav_acct_etc	9	Numeric Send Dollars Only
<b>33e</b>	reimb_exp_prev_deducted_Ohio_income_tax_purposes	9	Numeric Send Dollars Only
<b>33f</b>	non_education_exp_from_college_sav_acct	9	Numeric Send Dollars Only

2010  
IT 1040 2D BARCODE SCHEMA

Line Item Number	Field name	Max Chars	Field Format
<b>33g</b>	5/6_adjustment_IRC	9	Numeric Send Dollars Only
<b>34</b>	total_of_lines_31_thru_33g	11	Numeric Send Dollars Only
<b>35</b>	federal_interest_dividends_exempt_state_tax	9	Numeric Send Dollars Only
<b>36</b>	empl_compensation_earned_Ohio	9	Numeric Send Dollars Only
<b>37</b>	military_pay_Ohio_residents	9	Numeric Send Dollars Only
<b>38</b>	state_mun_inc_tax_overpay_IRS_1040_line_10	9	Numeric Send Dollars Only
<b>39</b>	disabiilty_survivorship_benefits	9	Numeric Send Dollars Only
<b>40</b>	qualifying_ss_benefits_rr_retirement_benefits	9	Numeric Send Dollars Only
<b>41</b>	contrib_collegeadv529_sav_tuition_credits	9	Numeric Send Dollars Only
<b>42</b>	Ohio_nat_guard_reimb_benefits	9	Numeric Send Dollars Only
<b>43</b>	unsubsidized_health_care	9	Numeric Send Dollars Only
<b>44</b>	funds_deposited_med_sav_acct	9	Numeric Send Dollars Only
<b>45a</b>	wage_exp_not_deducted	9	Numeric Send Dollars Only
<b>45b</b>	interest_income_Ohio_public_obligations	9	Numeric Send Dollars Only
<b>45c</b>	refund_reimbursements_IRS_1040_line_21	9	Numeric Send Dollars Only
<b>45d</b>	repayment_income_reported_prior_year	9	Numeric Send Dollars Only
<b>45e</b>	organ_donor_expenses	9	Numeric Send Dollars Only
<b>45f</b>	adj_IRC_code_sect_168K_179_depreciation_exp	9	Numeric Send Dollars Only
<b>45g</b>	military_ret_income_incl_fed_adj_gross_inc	9	Numeric Send Dollars Only

2010  
IT 1040 2D BARCODE SCHEMA

Line Item Number	Field name	Max Chars	Field Format
46	total_line_35_thru_45g	11	Numeric Send Dollars Only
47	net_adjustments	11	Numeric Send Dollars Only
48	retirement_income_credit	3	Numeric Send Dollars Only
49	senior_citizen_credit	2	Numeric Send Dollars Only
50	lump_sum_distribution_credit	9	Numeric Send Dollars Only
51	child_care_dependent_care_credit	4	Numeric Send Dollars Only
52	lump_sum_retirement_credit	9	Numeric Send Dollars Only
53	line_5_credit	3	Numeric Send Dollars Only
54	displaced_worker_training_credit	4	Numeric Send Dollars Only
55	Ohio_political_contribution-credit	3	Numeric Send Dollars Only
56	Ohio_adoption_credit	4	Numeric Send Dollars Only
57	total_schedule_B_credits	9	Numeric Send Dollars Only
58	line_3_subject_to_tax_by_other_states	11	Numeric Send Dollars Only
59	Ohio_adjusted_gross_income	11	Numeric Send Dollars Only
60	result_line_58_divided_line_59_multiply_by_line_12	9	Numeric Send Dollars Only
61	2010_income_tax_less_credits_etc	9	Numeric Send Dollars Only
62	smaller_amount_of_line_60_or_61	9	Numeric Send Dollars Only

2010  
IT 1040 2D BARCODE SCHEMA

Line Item Number	Field name	Max Chars	Field Format
63	Ohio_adjusted_gross_income_not_earned	11	Numeric Send Dollars Only
64	Ohio_adjusted_gross_income	11	Numeric Send Dollars Only
65	result_line_63_divided_by_64_multiplied_by_line_12	9	Numeric Send Dollars Only
66	amount_line_11_schedule_e	9	Numeric Send Dollars Only
67	amount_from_line_62	9	Numeric Send Dollars Only
68	amount_from_line_65	9	Numeric Send Dollars Only
69	total_of_lines_66_67_68	9	Numeric Send Dollars Only
N/A	trailer	5	Always *EOD*
<b>Total Bytes/Characters</b>		<b>945</b>	

-  General Fields
-  Demographic Fields
-  Line Item Fields