

IT 1040 EZ

2002

OHIO Income Tax Return For Full Year Ohio Residents

Please clip your check or money order here.

Your first name	Initial	Last name
If a joint return, spouse's first name	Initial	Last name
Home address (number and street)	Apt. Number	
PLACE LABEL HERE OR PRINT/TYPE INFORMATION		
City, town or post office, state and ZIP code		Ohio County

Social Security Number(s) must be filled in below

Your Social Security No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Spouse's Social Security No. (if joint filing)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Public School District Number (See pages 33-35.)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Filing Status (check only one)

Single or Head of Household
 Married Filing Joint
 Married Filing Separate

Ohio Political Party Fund Checking "Yes" will not increase your tax or reduce your refund.

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

Attach W-2's to backside.

	Dollars	Cents
1. Federal Adjusted Gross Income from Federal Form 1040, line 35; or 1040A, line 21; or 1040EZ, line 4; or 1040TEL	<input type="text"/>	<input type="text"/>
2. Enter the amount from Worksheet A on the back of this return	<input type="text"/>	<input type="text"/>
3. Ohio Adjusted Gross Income (line 1 minus line 2)	<input type="text"/>	<input type="text"/>
4. Personal and Dependency Exemption Deduction – Multiply the number of your exemptions _____ times \$1,200 and enter the result here	<input type="text"/>	<input type="text"/>
5. Ohio Taxable Income (line 3 minus line 4)	<input type="text"/>	<input type="text"/>
6. Tax on line 5 (see tax tables, pages 26-32)	<input type="text"/>	<input type="text"/>
7. Exemption Credit – Multiply the number of your personal and dependent exemptions _____ times \$20 and enter the result here	<input type="text"/>	<input type="text"/>
8. Tax Less Exemption Credit (line 6 minus line 7)	<input type="text"/>	<input type="text"/>
9. Joint Filing Credit (see instructions) _____% times line 8 (Limit \$650)	<input type="text"/>	<input type="text"/>
10. Ohio Income Tax (line 8 minus line 9)	<input type="text"/>	<input type="text"/>
11. Unpaid Ohio Use Tax (from Worksheet B, line e on back of this form)	<input type="text"/>	<input type="text"/>
12. Total Ohio Tax (add lines 10 and 11)	<input type="text"/>	<input type="text"/>
13. Ohio Tax Withheld Enter the amount of Ohio income taxes withheld (box 17 on your W-2) (Indicate the number of W-2's attached _____) WITHHOLDING ▶ 13.	<input type="text"/>	<input type="text"/>
14. Refund (if line 13 is more than line 12, subtract line 12 from line 13). This is your refund. YOUR REFUND ▶ 14.	<input type="text"/>	<input type="text"/>
15. Amount You Owe (if line 13 is less than line 12, subtract line 13 from line 12). This is the amount you owe. Attach payment made payable to: Treasurer of State of Ohio. Write your social security number on your check or money order. Check here <input type="checkbox"/> if you have paid or will pay with a credit card (see instructions) AMOUNT YOU OWE ▶ 15.	<input type="text"/>	<input type="text"/>

If the amount you owe is less than \$1.01, payment need not be made. And if your refund is less than \$1.01, no refund will be issued.

Wildlife Donations and Natural Areas (These will REDUCE your refund.)

16. Amount of line 14 you wish to donate for conservation of endangered species and wildlife diversity: \$3 \$5 \$10 other 16. .

17. Amount of line 14 you wish to donate to nature preserves, scenic rivers and endangered species protection: \$3 \$5 \$10 other 17. .

Do not complete lines 16 and 17 unless you want to donate all or part of your refund on line 14 to Wildlife and Natural Areas. Your refund will be automatically reduced by the amount donated.

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

Sign Here	Your Signature	Date
	Spouse's Signature (if joint return)	Phone No. (optional)
	Paid Preparer's Name and Signature	Preparer's Phone No.
	Paid Preparer's Address (including zip code)	

FOR DEPARTMENTAL USE ONLY		
<input type="text"/>	13A	U
No Payment Enclosed – Mail to: Ohio Department of Taxation P.O. Box 182294 Columbus, OH 43218-2294	Payment Enclosed – Mail to: Ohio Department of Taxation P.O. Box 182850 Columbus, OH 43218-2850	

2002 Ohio Form IT 1040EZ Additional Instructions and Worksheets

TIP:

Line 4 and Line 7–Personal Exemption Deduction and Exemption Credit

Every taxpayer who files an Ohio income tax return is entitled to a personal exemption of \$1,200 (line 4) and a \$20.00 exemption credit (line 7). You are entitled to this deduction and credit even if you can be claimed on another taxpayer's tax return. Some taxpayers (mostly working students) are not taking advantage of this deduction and credit because they are claimed on their parents' return and believe they are not entitled to the personal exemption deduction or exemption credit provided on the Ohio return. By taking advantage of this deduction and credit, you will increase your refund or decrease the amount you owe.

Worksheet A for Line 2

If you filed a **federal Form 1040** tax return, you may be entitled to a deduction on your Ohio tax return this year for state or municipal income tax refunds you received in 2002. You are **not** entitled to a deduction this year if you filed a **federal Form 1040EZ, 1040A, or federal Form 1040TEL**. Complete this worksheet to determine if you are entitled to a deduction on line 2 of this return.

a) Did you file a 2002 federal Form 1040EZ? <i>or</i> Did you file a 2002 federal Form 1040A? <i>or</i> Did you file a 2002 federal Form 1040TEL by telephone? <input type="checkbox"/> Yes. STOP and enter -0- on line 2 of this return. <input type="checkbox"/> No. Complete line b.	
b) Enter the amount from line 10 of your 2002 federal Form 1040 here and on line 2 of this return. This deduction is for state and/or local income tax refunds that you claimed as an itemized deduction (Schedule A) on your 2001 federal Form 1040 and added back as income on your 2002 federal Form 1040.	\$.00

Worksheet B for Line 11

If you made any out-of-state purchase(s) during 2002 (e.g., Internet, television/radio ads, catalog purchases or purchases made directly from an out-of-state company) and if you paid **no** sales tax on that purchase(s), you are required to complete this worksheet to determine what tax you owe on that purchase(s). Please complete the following worksheet to determine if you owe any Ohio use tax (which is the sales tax on those purchases).

a) Did you make any of the purchases described above during 2002? <input type="checkbox"/> No–STOP –You do not owe any Ohio use tax. Enter -0- on line e, below, and on line 11 of this tax return. <input type="checkbox"/> Yes –Complete line b of this worksheet to determine if you owe Ohio use tax on your purchase(s).	
b) Did the retailer charge you sales tax on your out-of-state purchase(s)? <input type="checkbox"/> Yes–STOP–You do not owe any Ohio use tax. Enter -0- on line e, below, and on line 11 of this tax return. <input type="checkbox"/> No –You owe Ohio use tax on your purchase(s). Complete lines c, d, and e of this worksheet.	
c) Enter your total out-of-state purchases on which you paid no sales tax or Ohio use tax.	\$.00
d) Enter your county use tax rate (see page 24 in the instruction booklet if you do not know your county's sales/use tax rate). Please use the rate decimals on page 24 to calculate your tax.	X . _ _ _ _
e) Multiply line c by line d. This is the amount of Ohio use tax that you owe on your out-of-state purchase(s). Write the amount here (round to nearest dollar) and on line 11 of this return. This amount is part of your income tax liability.	\$.00