





### IT 1040 Rev. 10/06 Individual Income Tax Return

use staples.				
Your Social Security number	Spouse's Social Security number (only if joint return) For the year Jan. 1- Dec. 31, 2006 or			
Check if		Check if	other taxable year beginning	
deceased Please us	e only UPPERCASE letters.	deceased	/ / 2 0 0 6	
Your first name	M.I. Last name			
Spouse's first name (only if joint return)	M.I. Last name			
9				
Home address (number and street)				
Home address (number and street)  City				
City	State	ZIP code	Ohio county (first four letters)	
Foreign country		Foreign p	ostal code	
In care of/executor's name (must indicate if refund	will be issued in decedent's name)			
Ohio Residency Status (see instructions on pa	age 9) Part-year			
Resident Nonresident	resident from:	/ 2 0 0 6	to / 2 0 0 6	
State abbrevia				
Filing Status – Check one (same as reported on			not use staples.	
Single or head of household or qualifying widow(er)			d IT 40P on top of your return.	
Married filing separately –	Plac		ng documents or statements age of your return.	
enter spouse's SS#				
Ohio Political Party Fund	Yes No		ess. It's FREE!	
Do you want \$1 to go to this fund?		· · · · · · · · · · · · · · · · · · ·	I-File.	
If joint return, does your spouse want \$1 to go to this		tax.o	phio.gov	
Note: Checking "Yes" will not increase your tax or dec	crease your refund.	File electronical	ly and receive your	
Ohio Public School District Number			s by direct deposit!	
(see pages 35-39)			· ·	
INCOME INFORMATION — If amount is nega	ative or a loss, please shade the negat	ive sign ("–") in the box	provided. Example:	
Federal adjusted gross income (from federal for 21; or 1040EZ, line 4)		_ 1	0 0	
,			0 0	
2. Ohio adjustments. Amount from line 48 on page 3		, 2,		
3. Ohio adjusted gross income (line 2 added to or su	btracted from line 1)	3. ,	, , , , , , , , , , , , , , , , , , , ,	
4. Multiply your personal and dependent exemptions	times \$1,400 and enter the resi	ult here	4.	
5. Ohio taxable income (line 3 minus line 4; enter -0-	if line 3 is less than line 4)	5.	, 00	
SIGN HERE (required)			Continue to IT 1040 – pg. 2	
I have read this return. Under penalties of perjury, I of		and belief,	Daniel de la contra del la contra del la contra del la contra de la contra del la contra de la contra de la contra del la co	
the return and all enclosures are true, correct and co	mplete.	For	Departmental Use Only	
Your signature	Date			
			9 9 9	
Spouse's signature (if filing jointly, BOTH must sig	n) Phone number			
Preparer's signature	Phone number		Code	

#### **NO Payment Enclosed – Mail to:**

Ohio Department of Taxation P.O. Box 2679 Columbus, OH 43270-2679

**Payment Enclosed – Mail to:** 

Ohio Department of Taxation P.O. Box 2057 Columbus, OH 43270-2057







# IT 1040 Rev. 10/06 Individual Income Tax Return

TAX AND CREDITS So	ocial Security no	).	
6. Tax on line 5 (see tax tables, pages 28-34)	6.		0 0
7. Credits from Schedule B (from line 58 on page 4 of form IT 1040)			0 0
8. Ohio tax less Schedule B credits. (Subtract line 7 from line 6. If line 7 is more than line 6, enter -			0 0
9. Exemption credit: Number of personal and dependent exemptions times \$20		9.	0 0
10. Ohio tax less exemption credit. (Subtract line 9 from line 8. If line 9 is more than line 8, enter -0-	.)10.	<b>, , , , , , , , , , , , , , , , , , , </b>	0 0
11. Joint filing credit (see instructions on page 14 and include documentation)	10 (limit \$650)	11.	0 0
12. Ohio tax less joint filing credit. (Subtract line 11 from line 10. If line 11 is more than line 10, enter	· -0)12.	, , , , , , , , , , , , ,	0 0
13. Resident/nonresident/part-year credits (Sch. C or D) and nonrefundable business credits (Sch. E	E)13.	, , , , , , , , , , , , , , , , , , , ,	0 0
14. Ohio income tax before manufacturing equipment grant. (Subtract line 13 from line 12. If line 13 more than line 12, enter -0)		, , , , , , , ,	0 0
15. Manufacturing equipment grant. You must include the grant request form	15.	, , , , , , , , , , , , , , , , , , , ,	0 0
16. Ohio income tax. (Subtract line 15 from line 14. If line 15 is more than line 14, enter -0)	16.		0 0
17. Interest penalty on underpayment of estimated tax:  Check if form IT 2210-1040 is included		NTEREST PENALTY	
18. Unpaid Ohio use tax (see worksheet on page 27)	00	SE TAX	0.0
19. Total Ohio tax (add lines 16, 17 and 18)	19.	, , ,	0 0
PAYMENTS			
20. Ohio Tax Withheld (box 17 on your W-2). Include W-2s on front of return AMOUNT WITH	HHELD ▶ 20.	, , , , , , , , , , , , , , , , , , , ,	0 0
21. 2005 overpayment credited to 2006, Ohio 2006 estimated tax and 2006 IT 40P extension payment	ents21.	<u>                                     </u>	0 0
22. a. Refundable business jobs credit b. Refundable pass-through entity credit 0 0	0		
0 0 Must include certificate(s) Must include K-1(s)	U		
Total of lines 22a and 22b	22.	, , , , , , , , , , , , , , , , , , , ,	0 0
23. Add lines 20, 21 and 22	<b>MENTS</b> ▶ 23.	, , , , , , , ,	0 0
REFUND OR AMOUNT YOU OWE			
24. <b>Amount You Owe</b> (if line 23 is less than line 19, subtract line 23 from line 19).  Check here and enclose form IT 40P (see page 41) with the front of return if you are enclosing	ng a payment (payab	ole to Ohio Treasurer of Sta	ate).
Check here if you have paid or will pay with an electronic check or credit card (see page 41)		_,,	00
25. If line 23 is GREATER than line 19, subtract line 19 from line 23AMOUNT OVERPAID ▶ 25.	0 0		
26. Amount of line 25 to be credited to 2007 estimated income tax liabilityCREDIT ▶ 26.	0 0		
27. Amount of line 25 that you wish to <b>donate</b> to the Military Injury Relief Fund	0 0		
28. Amount of line 25 that you wish to <b>donate</b> for Ohio's wildlife species and conservation of endangered wildlife	0 0		
29. Amount of line 25 that you wish to <b>donate</b> for nature preserves, scenic rivers and protection of endangered species	0 0		
30. Amount of line 25 to be refunded (subtract amounts on lines 26, 27, 28 and 29 from line 25)  YOUR REFU		, , , , , , , , , , , ,	00





## IT 1040 Rev. 10/06 Individual Income Tax Return

use staples.	
SCHEDULE A – Adjustments to Income (Additions and Deductions)  Social Security	y no.
Additions – Add to the extent not included in federal adjusted gross income (line 1).  31. Add non-Ohio state or local government interest and dividends	0 0
32. Add certain pass-through entity Ohio taxes paid	0 0
	0 0
33. Add income from an electing small business trust (see page 18)	0 0
34. a. Federal interest and dividends subject to state taxation	0 0
b. Reimbursement of college tuition expenses and fees deducted in any previous year(s)b.	0 0
c. Losses from sale or disposition of Ohio public obligations	
d. Nonmedical withdrawals from an Ohio medical savings account and miscellaneous federal tax adjustmentsd.	, , , , , , , , 0 0
e. Reimbursement of expenses previously deducted for Ohio income tax purposes, but only if the reimbursement is not in federal adjusted gross income	, , , , 0 0
f. Noneducation expenditures from college savings account	, , , , , , , , , , , , , , , , , , , ,
g. Adjustment for Internal Revenue Code sections 168(k) and 179 depreciation expenseg.	, , , , , , , , , , , , , , , , , , , ,
35. <b>Total additions</b> (add lines 31 through 34g and enter here). Applicable line items must be completed 35.	0 0
Deductions – See page 19 for limitations.	
36. Deduct federal interest and dividends exempt from state taxation	0 0
37. Deduct employee compensation earned in Ohio by full-year residents of neighboring states and certain	
income earned by military nonresidents	, 0 0
38. Deduct state or municipal income tax overpayments included in federal adjusted gross income	, , , , , , , , , , , , , , , , , , , ,
39. Deduct disability and survivorship benefits (do not include pension continuation benefits)	, , , , , , , , , , , , , , , , , , , ,
40. Deduct qualifying Social Security benefits and certain railroad retirement benefits	, , , , , , , , , , , , , , , , , , , ,
41. Deduct contributions to CollegeAdvantage 529 savings plan and/or purchases of tuition credits41.	, , , , , , , , , , , , , , , , , , , ,
42. Deduct certain Ohio National Guard reimbursements and benefits (see page 20)NEW 42.	, , , , , , , , , , , , , , , , , , , ,
43. Deduct unsubsidized health insurance, long-term care insurance and excess medical expenses (see worksheet on page 21)	, , , , , , 0 0
44. Deduct funds deposited into, and earnings of, a medical savings account for eligible medical expenses (see worksheet on page 21)	0 0
45. Deduct certain losses from an electing small business trust (see page 22)	0 0
46. a. Wage and salary expense not deducted due to the federal targeted jobs or the work opportunity tax credits46a.	0 0
b. Interest income from Ohio public obligations and Ohio purchase obligations and gains from the sale or	
disposition of Ohio public obligationsb.	, , , , , , , , , , , , , , , , , , , ,
c. Refund or reimbursements shown on federal form 1040, line 21 for itemized deductions claimed on a prior year federal income tax returnc.	, , , , , , 0 0
d. Repayment of income reported in a prior year and miscellaneous federal tax adjustmentsd.	, , , , , , , , , , , , , , , , , , , ,
e. Amount contributed to an individual development accounte.	, , , , , , , , , , , , , , , , , , , ,
f. Adjustment for Internal Revenue Code sections 168(k) and 179 depreciation expensef.	, , , , , , , , , , , , , , , , , , ,
47. <b>Total deductions</b> (add lines 36 through 46f). Applicable line items must be completed	, , , , , 0 0
48. Net adjustments – If line 35 is GREATER than line 47, enter the difference here and on line 2 as	
a positive amount. If line 35 is LESS than line 47, enter the difference here and on line 2 as a negative amount	, , , , , 0 0







### IT 1040 Rev. 10/06 Individual Income Tax Return

use staples.		
SCHEDULE B – Credits Social Security	no.	
49. Retirement income credit (see credit table on page 23) (limit \$200 per return)	49.	0 0
50. Senior citizen credit (\$50 per return)	50.	0 0
51. Lump sum distribution credit (you must be 65 years of age or older to claim this credit)51.		0 0
52. Child care and dependent care credit (see instructions and worksheet on page 23)	52.	0 0
53. Lump sum retirement credit		0 0
54. If line 5 is \$10,000 or less, enter \$102; otherwise, enter -0- or leave blank	54.	0 0
55. Job training credit (see instructions on page 23 and worksheet on page 24) (limit \$500 per taxpayer)	55.	0 0
56. Ohio political contributions credit (limit \$50 per taxpayer)	56.	0 0
57. Ohio adoption credit (\$500 per child adopted during the year)	57. ,	0 0
58. Total credits (add lines 49 through 57) – enter here and on line 7		00
SCHEDULE C – Ohio Resident		
59. Enter the portion of line 3 subjected to tax by other states or the District of Columbia while an Ohio resident (limits apply – see line 59 instructions on page 24)	,,,	0 0
60. Enter Ohio adjusted gross income (line 3)		0 0
61. Divide line 59 by line 60 and enter the result here.    Multiply by the amount on line 1261.		0 0
62. Enter the 2006 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 line 62 instructions on page 25)		0 0
63. Enter the smaller of line 61 or line 62. This is your Ohio resident tax credit. Enter here and on line 13. If you filed a return in 2006 with a state(s) other than Ohio, list the two-letter state abbreviation in the boxes below		00
SCHEDULE D – Nonresident/Part-Year Resident		
64. Enter the portion of Ohio adjusted gross income (line 3) that was not earned or received in Ohio. Include form IT 2023 (limits apply – see line 64 instructions on page 25)		0 0
65. Enter the Ohio adjusted gross income (line 3)		0 0
66. Divide line 64 by line 65 and enter the result here.  Multiply by the amount on line 12.  Enter here and on line 13. If both the resident credit and the noresident/part-year resident credit apply, enter the sum of lines 63 and 66 on line 13		0 0