		40X OHIO Amended Individual Income Tax Retu						
È	Your first name  For fiscal year ending					FOR DEPARTMENT USE ONLY ing Status: (Check only one box in each column)		
r Type	If a joint	a joint return, spouse's first name Initial Last name		use's social security number	Origina	ı <b>l</b> Single	Amended	
101	., , ,						ed filing joint return	
14-1	Home address (number and street)			Ohio county			ed filing separately	
Please	City, town or post office, state and ZIP code		Ohio P	Ohio Public School District Number				
$\vdash$				(for current add	dress)			
Ohio	Resi	moved since you filed your last tax return? If yes, check the box. Lidency Status: Resident Part-year Resident Nonresident yone box) From Lucy to Lucy to Lucy I	ent	As File	ed		As Amended	
(0110	1	Federal Adjusted Gross Income	1		00	1	00	
INCOME	2	Schedule A Adjustment	2		00	2	00	
	3	Ohio Adjusted Gross Income (Line 2 subtracted from or added to Line 1)			00	3	00	
	4	Personal and Dependency Exemptions			00	4	00	
	5	Ohio Taxable Income (subtract Line 4 from Line 3)	-		00	5	00	
TAX AND CREDITS	6	Tax on line 5 (see tax tables)			00	6	00	
	7	Schedule B Credits (cannot exceed Line 6)			00	7	00	
	8	Tax less Schedule B Credits (subtract Line 7 from Line 6)	_ <u> </u>		00	8	00	
	9	Exemption Credit			00	9	00	
	10	Tax less Exemption Credit (subtract Line 9 from Line 8)			00		00	
	11	Joint Filing Credit			00		00	
	12	Tax less Joint Filing Credit (subtract Line 11 from Line 10)			00		00	
	13	Schedule C, D, and E Credits	-	+	00	H	00	
	14	Ohio Income Tax (subtract Line 13 from Line 12)	-	+	00		00	
¥	15	IT 2210 Interest/Penalty		+	00	15	00	
	16	Unpaid Ohio Use Tax		+	00		00	
	17	Total Ohio Tax (add lines 14, 15 and 16)		+		17	00	
PAYMENTS	18	Ohio Income Tax Withheld		-	00	$\vdash$	00	
	19	Ohio Estimated Tax, IT 40P Payments and Credit Carryover	_		00		00	
	20	Refundable Credits			00	$\vdash$	00	
	21	Amount paid with Previously Filed Returns		_		21	00	
	-				00	21	00	
	22	Total of Lines 18 through 21				22	00	
REFUND/AMOUNT OWED	23	Overpayment shown on original return and on previously filed amended ret						
		(even if you have not yet received the refund)				23	00	
	24	Subtract Line 23 from Line 22				24	00	
		If Line 24 is less than Line 17 (as amended), subtract Line 24 from Line 17						
	25	Make your payment payable to Ohio Treasurer of State	AMC	DUNT YOU	OWE	25	00	
	26	If Line 24 is greater than Line 17 (as amended), subtract Line 17 from Line						
RE		Enter the Amount of your Refund		YOUR REF	UND	26	00	
븼	If the balance due is less than \$1.01 payment need not be made, and if the overpayment is less than \$1.01 no refund will be issued.							
皇	Und it is	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.						
SIGN HERE						nterest		
		Your Signature Date						
ÉR		Date	8.0	منائد د	hio Dener	ture a co	at of Toyotion	
TAXPAYER	Spouse's Signature (if filing joint, BOTH must sign)  Telephone Number (optional)			Mail to: Ohio Department of Taxation P.O. Box 1460				
IĀ		Preparer's Signature and Address (including zip code)  Columbus, OH 43216-1460						