



03 22 21

Check here if this is an amended return. Include the Ohio IT RE. Do NOT include a copy of the previously filed return.

Check here if claiming an NOL carryback. Include Schedule IT NOL.

Primary taxpayer's SSN (required) 881 98 1329

If deceased check box

Spouse's SSN (if filing jointly) If deceased check box

School district # (see instructions). SD# 3101

First name VARUN ADITYA M.I. Last name RAGHAVAN

Spouse's first name (only if married filing jointly) M.I. Last name

Address line 1 (number and street) or P.O. Box 2360 VICTOR ST

Address line 2 (apartment number, suite number, etc.) APT 1

City CINCINNATI State OH ZIP code 45219 Ohio county (first four letters) HAMI

Foreign country (if the mailing address is outside the U.S.) Foreign postal code

Residency Status - Check only one for primary. X Resident Part-year resident Nonresident Indicate state

Filing Status - Check one (as reported on federal income tax return). X Single, head of household or qualifying widow(er) Married filing jointly Spouse's SSN Married filing separately

Ohio Nonresident Statement - See instructions for required criteria. Primary meets the five criteria for irrefutable presumption as nonresident. Spouse meets the five criteria for irrefutable presumption as nonresident.

Check here if you filed the federal extension form 4868. Check here if someone else is able to claim you (or your spouse if joint return) as a dependent.

Do not staple or paper clip.

Table with 2 columns: Description and Amount. Row 1: Federal adjusted gross income 25778 00. Row 2: Additions 00. Row 3: Deductions 00. Row 4: Ohio adjusted gross income 25778 00. Row 5: Exemption amount 2400 00. Row 6: Ohio income tax base 23378 00. Row 7: Taxable business income 00. Row 8: Line 5 minus line 6 23378 00.



MM-DD-YY Code

2020 Ohio IT 1040 Individual Income Tax Return



SSN 881 98 1329

Table with 2 columns: Description and Amount. Rows include 7a. Amount from line 7 on page 1, 8a. Nonbusiness income tax liability, 8b. Business income tax liability, 8c. Income tax liability before credits, 9. Ohio nonrefundable credits, 10. Tax liability after nonrefundable credits, 11. Interest penalty on underpayment of estimated tax, 12. Use tax due on internet, mail order or other out-of-state purchases, 13. Total Ohio tax liability before withholding or estimated payments, 14. Ohio income tax withheld, 15. Estimated and extension payments, 16. Refundable credits, 17. Amended return only, 18. Total Ohio tax payments, 19. Amended return only, 20. Line 18 minus line 19, 21. Tax liability, 22. Interest due on late payment of tax, 23. TOTAL AMOUNT DUE, 24. Overpayment, 25. Original return only, 26. Original return only (donations), 27. REFUND.

Sign Here (required): I have read this return. Under penalties of perjury, I declare that, to the best of my knowledge and belief, the return and all enclosures are true, correct and complete.

Primary signature \_\_\_\_\_ Phone number (480) 417-0804
Spouse's signature \_\_\_\_\_ Date (MM/DD/YY) \_\_\_\_\_

Preparer's printed name RVSSMANIKUMARAPPANA Phone number (646) 727-7157
Preparer's TIN (PTIN) P 02090332

If your refund is \$1.00 or less, no refund will be issued. If you owe \$1.00 or less, no payment is necessary.

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

Payment Included - Mail to: Ohio Department of Taxation P.O. Box 2057 Columbus, OH 43270-2057

# 2020 Schedule of Ohio Withholding

Use only black ink/UPPERCASE letters.

Primary taxpayer's SSN



20350198

Sequence No. 11

881 98 1329

List your and your spouse's (if filing jointly) W-2, 1099, and W-2G forms **only if they have Ohio withholding**. Complete all fields for each form entered. Enter "P" in the "P/S" box if the form is the primary taxpayer's and enter "S" if it is the spouse's. Complete additional copies if necessary. Place state copies of your income statements after the last page of your return.

**Part A - Total Withholding**

1. Total of all Ohio state tax withheld on pages 1 and 2 as well as any additional pages. Enter here and on line 14 of your Ohio IT 1040 .....1. 734 00

**Part B - W-2s**

1. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
	P 472954697	28278 00	3515 00
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax
	54 081284	28278 00	734 00
2. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
		00	00
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax
		00	00
3. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
		00	00
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax
		00	00
4. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
		00	00
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax
		00	00
5. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
		00	00
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax
		00	00
6. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
		00	00
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax
		00	00
7. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
		00	00
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax
		00	00



# 2020 Schedule of Ohio Withholding

Primary taxpayer's SSN  
881 98 1329



20350298

Sequence No. 12

## Part C - 1099-Rs

1. P/S Payer's TIN

Box 1 - Gross distribution

00

Total  
distributionBox 7 -  
Distribution code

Box 15 - Payer's Ohio number

Box 4 - Federal income tax withheld

00

Box 14 - Ohio tax withheld

00

2. P/S Payer's TIN

Box 1 - Gross distribution

00

Total  
distributionBox 7 -  
Distribution code

Box 15 - Payer's Ohio number

Box 4 - Federal income tax withheld

00

Box 14 - Ohio tax withheld

00

3. P/S Payer's TIN

Box 1 - Gross distribution

00

Total  
distributionBox 7 -  
Distribution code

Box 15 - Payer's Ohio number

Box 4 - Federal income tax withheld

00

Box 14 - Ohio tax withheld

00

4. P/S Payer's TIN

Box 1 - Gross distribution

00

Total  
distributionBox 7 -  
Distribution code

Box 15 - Payer's Ohio number

Box 4 - Federal income tax withheld

00

Box 14 - Ohio tax withheld

00

## Part D - W-2Gs

1. P/S Payer's federal ID number

Box 1 - Reportable winnings

00

Box 4 - Federal income tax withheld

00

Box 13 - Ohio state ID number

Box 14 - Ohio state winnings

00

Box 15 - Ohio income tax withheld

00

2. P/S Payer's federal ID number

Box 1 - Reportable winnings

00

Box 4 - Federal income tax withheld

00

Box 13 - Ohio state ID number

Box 14 - Ohio state winnings

00

Box 15 - Ohio income tax withheld

00

3. P/S Payer's federal ID number

Box 1 - Reportable winnings

00

Box 4 - Federal income tax withheld

00

Box 13 - Ohio state ID number

Box 14 - Ohio state winnings

00

Box 15 - Ohio income tax withheld

00

## Part E - 1099-NECs

1. P/S Payer's TIN

Box 1 - Nonemployee compensation

00

Box 4 - Federal income tax withheld

00

Box 6 - Payer's Ohio number

Box 7 - State income

00

Box 5 - Ohio tax withheld

00

2. P/S Payer's TIN

Box 1 - Nonemployee compensation

00

Box 4 - Federal income tax withheld

00

Box 6 - Payer's Ohio number

Box 7 - State income

00

Box 5 - Ohio tax withheld

00



2020 Ohio Schedule of Credits

Primary taxpayer's SSN



20280198 Sequence No. 7

03 22 21

881 98 1329

Nonrefundable Credits

1. Tax liability before credits (from Ohio IT 1040, line 8c) .....	1.	351	00
2. Retirement income credit (see instructions for table; <b>include 1099-R forms</b> ) .....	2.		00
3. Lump sum retirement credit (see instructions for worksheet; <b>include a copy</b> ) .....	3.		00
4. Senior citizen credit (must be 65 or older to claim this credit) .....	4.		00
5. Lump sum distribution credit (see instructions for worksheet; <b>include a copy</b> ) .....	5.		00
6. Child care & dependent care credit (see instructions for worksheet; <b>include a copy</b> ) .....	6.		00
7. Displaced worker training credit (see instructions for all required documentation; <b>include copies</b> ) .....	7.		00
7a. Campaign contribution credit for Ohio statewide office or General Assembly .....	7a.	0	00
8. Income-based exemption credit (\$20 times the number of exemptions) .....	8.	20	00
9. Total (add lines 2 through 8) .....	9.	20	00
10. Tax less credits (line 1 minus line 9; if less than zero, enter zero) .....	10.	331	00
11. Joint filing credit (see instructions for table). % times line 10, up to \$650 .....	11.	0	00
12. Earned income credit .....	12.		00
13. Ohio adoption credit .....	13.		00
14. Nonrefundable job retention credit ( <b>include a copy of the credit certificate</b> ) .....	14.		00
15. Credit for eligible new employees in an enterprise zone ( <b>include a copy of the credit certificate</b> ) ...	15.		00
16. Credit for purchases of grape production property .....	16.		00
17. InvestOhio credit ( <b>include a copy of the credit certificate</b> ) .....	17.		00
18. Lead abatement credit ( <b>include a copy of the credit certificate</b> ) .....	18.		00
19. Opportunity zone investment credit ( <b>include a copy of the credit certificate</b> ) .....	19.		00
20. Technology investment credit carryforward ( <b>include a copy of the credit certificate</b> ) .....	20.		00
21. Enterprise zone day care & training credits ( <b>include a copy of the credit certificate</b> ) .....	21.		00
22. Research & development credit ( <b>include a copy of the credit certificate</b> ) .....	22.		00
23. Nonrefundable Ohio historic preservation credit ( <b>include a copy of the credit certificate</b> ) .....	23.		00
24. Total (add lines 11 through 23) .....	24.	0	00
25. Tax less additional credits (line 10 minus line 24; if less than zero, enter zero) .....	25.	331	00



## 2020 Ohio Schedule of Credits

Primary taxpayer's SSN

881 98 1329



20280298

Sequence No. 8

**Nonresident Credit**

Date of nonresidency	to	State of residency	
26. Nonresident Portion of Ohio adjusted gross income - Ohio IT NRC Section I, line 18 (include a copy) .....			00
27. Ohio adjusted gross income (Ohio IT 1040, line 3).....			00
28. Divide line 26 by line 27 and enter the result here (four digits; do not round). Multiply this factor by line 25 to calculate your nonresident credit .....			00

**Resident Credit**

29. Portion of Ohio adjusted gross income taxed by another state or the District of Columbia while an Ohio resident- Ohio IT RC, line 1a (include a copy) .....			00
30. Ohio adjusted gross income (Ohio IT 1040, line 3).....			00
31. Divide line 29 by line 30 and enter the result here (four digits; do not round). Multiply this factor by line 25 and enter the result here .....			00
32. 2020 income tax liability after credits paid to another state or the District of Columbia Ohio IT RC, line 1b (include a copy) .....			00
33. Enter the lesser of line 31 or line 32. This is your Ohio resident tax credit. Enter the two-letter state abbreviation in the boxes below for each state in which income was subject to tax.....			00
34. <b>Total nonrefundable credits</b> (add lines 9, 24, 28 and 33; enter here and on Ohio IT 1040, line 9) ....			20 00

**Refundable Credits**

35. Refundable Ohio historic preservation credit ( <b>include a copy of the credit certificate</b> ) .....			00
36. Refundable job creation credit & job retention credit ( <b>include a copy of the credit certificate</b> ) .....			00
37. Pass-through entity credit ( <b>include a copy of the Ohio IT K-1s</b> ).....			00
38. Motion picture & Broadway theatrical production credit ( <b>include a copy of the credit certificate</b> ).....			00
39. Venture capital credit ( <b>include a copy of the credit certificate</b> ) .....			00
40. <b>Total refundable credits</b> (add lines 35 through 39; enter here and on Ohio IT 1040, line 16).....			00