

2022 Ohio IT 1040

Individual Income Tax Return



Sequence No. 1

03 25 23

AKHIL

Use only black ink/UPPERCASE letters. Use whole dollars only.

AMENDED RETURN - Check here and include Ohio IT RE.

✓ If deceased

Spouse's SSN (if filing jointly)

✓ If deceased

NOL CARRYBACK - Check here and include Schedule IT NOL.

School district # 9999

First name

662 99 8303

Primary taxpayer's SSN (required)

M.I. Last name VOLAM

Spouse's first name (if filing jointly)

M.I. Last name

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

13530 LINDEN AVE N

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

APT 413

City

Do not staple or paper clip.

State

ZIP code

Ohio county (first four letters)

SEATTLE

WA

98133

FRAN

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

Foreign postal code

Residency Sta	tus - Check only	one for pri	mary			Fili	na Status - Check one (as	reported on federal income tax return)
-		-	•					•
Resident	Part-year resident		rresident icate state	>>	WA	×	Single, head of household o	r qualifying widow(er)
Check only one for	spouse (if filing jo	int l y)					Married filing jointly	
Resident	Part-year	Nor	resident	••				Spouse's SSN
	resident	Indi	cate state				Married filing separately	
Ohio Nonresid	ent Statemen	t – See ins	tructions fo	or rec	uired criteria			
	the five criteria for						Federal extension filers - ch	eck here.
Spouse meets	the five criteria for	irrebuttab l e	presumpti	on as	nonresident.		If someone can daim you (or dependent, check here.	your spouse if filing jointly) as a
Federal adjuste if negative	ed gross income							105263
2a.Additions – Ohio	o Schedule of Adju	stments, lir	ne 10 (incl	ude	schedule)		2a.	
2b. Deductions - O	hio Schedu l e of Ad	ljustments,	line 39 (in	clud	e schedule)		2b.	
3. Ohio adjusted g	ross income (line	1 plus line 2	≀a minus l i	ne 2k	o). Place a "-" i	n the box	c if negative3.	105263
•	unt (include Sche options including yo		•	•	• ,		4. L	1900
5. Ohio income tax	κ base (l ine 3 minι	s line 4; if r	negative, e	nter:	zero)		5.	103363



6. Taxable business income – Ohio Schedule IT BUS, line 13 (include schedule)......6.



103363

REV 02/14/23 PRO

2022 Ohio IT 1040

Individual Income Tax Return



SSN 662 99 8303

Preparer's printed name

22000298 Sequence No. 2

7a.Amount from line 7 on page 1	7a.	103363
8a. Nonbusiness income tax liability on line 7a (see instructions for tax tables)	8a.	2814
8b.Business income tax liability – Ohio Schedule IT BUS, line 14 (include schedule)	8b.	
8c. Income tax liability before credits (line 8a plus line 8b)	8c.	2814
9. Ohio nonrefundable credits – Ohio Schedule of Credits, line 35 (include schedule)	9.	2705
10.Tax liability after nonrefundable credits (line 8c minus line 9; if negative, enter zero)	10.	109
11. Interest penalty on underpayment of estimated tax (include Ohio IT/SD 2210)	11.	
12.Unpaid use tax (see instructions)	12.	
13. Total Ohio tax liability before withholding or estimated payments (add lines 10, 11 and 12)	13.	109
14.Ohio income tax withheld – Schedule of Ohio Withholding, part A, line 1 (include schedule and income statements)	14.	32
15. Estimated and extension payments (from Ohio IT 1040ES and IT 40P), and credit carryforward from last year's return	15.	
16. Refundable credits – Ohio Schedule of Credits, line 41 (include schedule)	16.	
17. <u>Amended return only</u> – amount previously paid with original and/or amended return	17.	
18. Total Ohio tax payments (add lines 14, 15, 16 and 17)	18.	32
19. <u>Amended return only</u> – overpayment previously requested on original and/or amended return	19.	
20. Line 18 minus line 19. Place a "-" in the box if negative	20.	32
If line 20 is MORE THAN line 13, skip to line 24. OTHERWISE, continue to line 21.		77
21. Tax due (line 13 minus line 20). If line 20 is negative, ignore the "-" and add line 20 to line 13	21.	1 1
22. Interest due on late payment of tax (see instructions)	22.	
23.TOTAL AMOUNT DUE (line 21 plus line 22). Include Ohio IT 40P (if original return) or IT 40XP (if amended return) and make check payable to "Ohio Treasurer of State" AMOUNT I	DUE ▶ 23.	77
24. Overpayment (line 20 minus line 13)	24.	
25. Original return only – portion of line 24 carried forward to next year's tax liability	25.	
d. Nature Preserves/Scenic Rivers e. Breast/Cervical Cancer f. Wishes for Sick Children	otal26g.	
27. REFUND (line 24 minus lines 25 and 26g)	UND ▶ 27.	<u>_</u>
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.	If your refund is \$1.00 or less, if you owe \$1.00 or less, no	
▶Primary signature Phone number (513) 981−9767	NO Payment Inclu	ded – Mail to:
Spouse's signature Date	Ohio Department P.O. Box 2	
Check hare to authorize your preparer to discuss this return with the Department	Columbus, OH 4	

Preparer's TIN (PTIN)

Phone number_

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

REV 02/14/23 PRO



2022 Ohio Schedule of Credits

Use only black ink. Use whole dollars only. Primary taxpayer's SSN



22280198

Sequence No. 7

03 25 23 662 99 8303

Many of these credits <u>must</u> be calculated using a worksheet and/or be supported by additional required documentation. See the instructions for worksheets and information on supporting documentation.

Nonrefundable Credits

Tax liability before credits (from Ohio IT 1040, line 8c)	1,	2814
2. Retirement income credit (include 1099-R forms)	2.	
3. Lump sum retirement credit (include a copy of the worksheet and 1099-R forms)	3.	
4. Senior citizen credit (must be 65 or older to claim this credit)	4.	
5. Lump sum distribution credit (include a copy of the worksheet and 1099-R forms)	5.	
6. Child care & dependent care credit (include a copy of the worksheet)	6.	
7. Displaced worker training credit (include a copy of the worksheet and all required documentation)	ion)7.	
8. Campaign contribution credit for Ohio statewide office or General Assembly	8.	C
9. Income-based exemption credit	9.	C
10. Total (add lines 2 through 9)	10.	C
11. Tax less credits (line 1 minus line 10; if negative, enter zero)	11.	2814
12. Joint filing credit (see instructions for table). % times line 11, up to \$650	12.	C
13. Earned income credit	13.	
14. Home school expenses credit (include copies of all required documentation)	14.	
15. Scholarship donation credit (include copies of all required documentation)	15.	
16. Nonchartered, nonpublic school tuition credit (include copies of all required documentation)	16.	
17. Vocational job credit (include a copy of the credit certificate)	17.	
18. Ohio adoption credit	18.	
19. Nonrefundable job retention credit (include a copy of the credit certificate)	19.	
20. Credit for eligible new employees in an enterprise zone (include a copy of the credit certificate	e)20.	
21. Grape production credit	21.	
22. InvestOhio credit (include a copy of the credit certificate)	22.	
23. Lead abatement credit (include a copy of the credit certificate)	23.	
24. Opportunity zone investment credit (include a copy of the credit certificate)	24.	



2022 Ohio Schedule of Credits

Primary taxpayer's SSN 662 99 8303



80298

Sequence No. 8

25. Technology investment credit carr	ryforward (include a copy of the	credit certificate)25.				
26. Enterprise zone day care & training credits (include a copy of the credit certificate)						
27. Research & development credit (i	nclude a copy of the credit cert	tificate)27.				
28. Nonrefundable Ohio historic prese	ervation credit (include a copy of	f the credit certificate)28.				
29. Total (add lines 12 through 28)		29.	0			
30. Tax less additional credits (line 11	minus line 29; if negative, enter z	zero)30.	2814			
Nonresident Credit						
Dates of Ohio residency	to	Other state of residency				
31. Nonresident Portion of Ohio adjust Ohio IT NRC Section I, line 18 (ir		101183				
32. Ohio adjusted gross income (Ohio	o IT 1040, line 3) 32.	105263				
33a. Divide line 31 by line 32 (four decin if greater than 1, enter 1.0000)	nals; do not round;	33a. 0.9612				
•	line 33a)	33.	2705			
Resident Credit						
34. Resident credit – Ohio IT RC, line	7 (include a copy)	34.				
35. Total nonrefundable credits (ad	d lines 10, 29, 33 and 34; enter he	ere and on Ohio IT 1040, line 9)35.	2705			
	Refundable Credits					
36. Refundable Ohio historic preserva	ation credit (include a copy of the	e credit certificate)36.				
37. Refundable job creation credit & jo	b retention credit (include a copy o	of the credit certificate)37.				
38. Pass-through entity credit (includ	le a copy of the Ohio IT K-1s)	38.				
39. Motion picture & Broadway theatr	ical production credit (include a c	copy of the credit certificate)39.				
40. Venture capital credit (include a	copy of the credit certificate)	40.				
41. Total refundable credits (add lin	es 36 through 40; enter here and	on Ohio IT 1040, line 16)41.				



2022 Schedule of Ohio Withholding

Use only black ink/UPPERCASE letters. Use whole dollars only.

Primary taxpayer's SSN

662 99 8303

Sequence No. 11

List your and your spouse's (if filing jointly) W-2, 1099, and W-2G forms only if they have Ohio withholding. Enter "P" in the "P/S" box if the form is the primary taxpayer's and enter "S" if it is the spouse's. If the Ohio ID number on a statement has 9 digits, enter only the first 8 digits. 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 10401. 32

<u>Part B -</u> 1. P/S P	- W-2s Box b - EIN 316000989	Box 1 - Wages, tips, other compensation 2515	Box 2 - Federal income tax withheld
	Box 15 - Employer's Ohio ID number 51160145	Box 16 - Ohio wages, tips, etc. 2515	Box 17 - Ohio income tax
2. P/S P	Box b - EIN 232573585	Box 1 - Wages, tips, other compensation 1565	Box 2 - Federal income tax withheld
	Box 15 - Employer's Ohio ID number 52302592	Box 16 - Ohio wages, tips, etc. 1565	Box 17 - Ohio income tax
3. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax
4. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax
5. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax
6. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax
7. P/S	Box b - EIN	Box 1 - Wages, tips, other compensation	Box 2 - Federal income tax withheld
	Box 15 - Employer's Ohio ID number	Box 16 - Ohio wages, tips, etc.	Box 17 - Ohio income tax



2022 Schedule of Ohio Withholding Primary taxpayer's SSN

662 99 8303





ъ.		4000 B	662 99 8303			Sequence No. 12
	<u>rt C -</u> P/S	<u>1099-Rs</u> Payer's TIN	Box 1 - Gross distribution	Total distribution		Box 7 - Distribution code
		Box 15 - Payer's Ohio number	Box 4 - Federal income tax withheld		Box 14	- Ohio tax withheld
2.	P/S	Payer's TIN	Box 1 - Gross distribution	Total distribution		Box 7 - Distribution code
		Box 15 - Payer's Ohio number	Box 4 - Federal income tax withheld		Box 14	- Ohio tax withheld
3.	P/S	Payer's TIN	Box 1 - Gross distribution	Total distribution		Box 7 - Distribution code
		Box 15 - Payer's Ohio number	Box 4 - Federal income tax withheld		Box 14	- Ohio tax withheld
4.	P/S	Payer's TIN	Box 1 - Gross distribution	Total distribution		Box 7 - Distribution code
		Box 15 - Payer's Ohio number	Box 4 - Federal income tax withheld		Box 14	- Ohio tax withheld
Da.	rt D	<u>W-2Gs</u>				
		Payer's federal ID number	Box 1 - Reportable winnings	Box 4	- Federa	I income tax withheld
		Box 13 - Ohio state ID number	Box 14 - Ohio state winnings		Box 15	- Ohio income tax withheld
2.	P/S	Payer's federal ID number	Box 1 - Reportable winnings	Box 4	- Federa	I income tax withheld
		Box 13 - Ohio state ID number	Box 14 - Ohio state winnings		Box 15	- Ohio income tax withheld
3.	P/S	Payer's federal ID number	Box 1 - Reportable winnings	Box 4	- Federa	I income tax withheld
		Box 13 - Ohio state ID number	Box 14 - Ohio state winnings		Box 15	- Ohio income tax withheld
Pai	rt F -	1099-NECs				
	P/S	Payer's TIN	Box 1 - Nonemployee compensation	Box 4	- Federa	I income tax withheld
		Box 6 - Payer's Ohio number	Box 7 - State income		Box 5 -	· Ohio tax withheld
2.	P/S	Payer's TIN	Box 1 - Nonemployee compensation	Box 4	- Federa	I income tax withheld
		Box 6 - Payer's Ohio number	Box 7 - State income		Box 5 -	· Ohio tax withheld