

Do not staple or paper clip.



Department of Taxation

2020 Ohio IT 10
Zero Liability / No Refund
Individual Income Tax Return
Use only black ink and UPPERCASE letters.



20120102

Important: If you are liable for school district income tax, you cannot file this return. You must file the Ohio IT 1040.

Primary taxpayer's SSN (required)
If deceased check box
Spouse's SSN (if filing jointly)
If deceased check box
School district # (see instructions)
SD#

First name
M.I. Last name

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

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

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

City
State
ZIP code
Ohio county (first four letters)

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

Residency Status - Check only one for primary
Resident
Part-year resident
Nonresident Indicate state
Check only one for spouse (if married filing jointly)
Resident
Part-year resident
Nonresident Indicate state

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

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.

Reason(s) For Filing (Required): By filing this return, the primary taxpayer and spouse (if filing jointly) declare that their correctly calculated tax liability (Ohio IT 1040, line 8c) is \$0.00 for one or more of the following reasons (check all that apply):

- There is no tax liability on my Ohio taxable nonbusiness income (Ohio IT 1040, line 7) and taxable business income (Ohio IT 1040, line 6).
I was a nonresident of Ohio for the entire tax year and did not have Ohio-sourced income (e.g. the above address is for mailing purposes only).
I was a nonresident military servicemember for the entire tax year and my only source of income earned in Ohio is from the military.
I was a civilian spouse of a nonresident servicemember stationed in Ohio.

I understand that I cannot request a refund of any amount on this return.

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
Spouse's signature
Date (MM/DD/YY)

Preparer's printed name
Preparer's TIN (PTIN)

Mail to:
Ohio Department of Taxation
P.O. Box 2476
Columbus, OH 43216-2476

MM-DD-YY
Code