

Form ID: OH Ohio General Information

Enter your current Ohio county of residence _____ [1]
School district number _____ [2]

Use Tax

Mark this field to certify no sales or use tax is due _____ [3]
Purchases subject to use tax _____ [4]

Contributions

Amount of political and charitable contributions you wish to make to:
Political

	Taxpayer	Spouse
Contribution to Ohio political party fund?	____ [5]	____ [6]

Charitable Contributions

Military injury relief fund	_____ [7]
Natural areas and endangered species fund	_____ [8]
Wildlife species and endangered wildlife	_____ [9]
Ohio Historical Society	_____ [10]
Breast and cervical cancer project	_____ [11]

Credits

	Taxpayer	Spouse
Displaced worker training expenses for 12-month period since loss of job	_____ [12]	_____ [13]
Amount contributed to Ohio political campaigns	_____ [14]	_____ [15]

Part-year Resident and Nonresident Information

If you were a part-year resident during the tax year, enter the dates you lived in Ohio

	Taxpayer	Spouse
Part-year residency dates:		
From	_____ [16]	_____ [18]
To	_____ [17]	_____ [19]

	Taxpayer	Spouse
Residency status (If taxpayer and spouse are different) (R = Resident, P = Part-year resident, N = Nonresident)	____ [20]	____ [21]
If nonresident, enter state of residency	____ [22]	____ [23]
If foreign, enter country of residency	____ [24]	____ [25]

NOTES/QUESTIONS: