

**Shareholder's/Partner's Share of Indiana Adjusted Gross  
Income, Deductions, Modifications, and Credits**

Tax Year Beginning   2023 and Ending

Name of S Corporation/Partnership  Federal Employer Identification Number

**Distributions** - Provide Schedule IN K-1 to each shareholder/partner. Enclose Schedule IN K-1 with Form IT-20S/IT-65 return.

**Part 1 – Shareholder/Partner's Identification Section**

1. Shareholder/Partner Name

Check if amended

2. Shareholder/Partner FEIN or Social Security Number

3. Shareholder/Partner Federal Pro Rata Percentage

.  %

4. If the partner is a disregarded entity (DE), enter the partner's:

a. Name

b. FEIN

5. What type of entity is the partner?

6. Shareholder/Partner State of Residence or Commercial Domicile

7. Indiana County of Principal Employment 2-digit code

8. Payer's Name

9. Payer's FEIN

10. Pass Through Entity Tax

10  .00

11. IN State Tax Withheld

11  .00

12. IN County Tax Withheld

12  .00

**Part 2 - Pro Rata Share of Indiana Pass-through Tax Credits from S Corporation/Partnership**

	Column A IT-20S/IT65 FEIN if Credit is from IN K-1	Column B Certification Year	Column C Certification/Project/PIN Number	Column D Tax Credit Code	Column E Amount Claimed
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> .00
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> .00

Pass-through entities with more than 24 IN K-1s must file electronically



**Part 3 - Distributive Share Amount** (use apportioned figures for nonresident shareholders/partners)

1. Ordinary business income (loss) _____	1	.00
2. Net rental real estate income (loss) _____	2	.00
3. Other net rental income (loss) _____	3	.00
4. Guaranteed payments ( <b>for IT-65 filers only; if filing IT-20S, skip to line 5</b> ) _____	4	.00
5. Interest income _____	5	.00
6. Ordinary dividends _____	6	.00
7. Royalties _____	7	.00
8. Net short-term capital gain (loss) _____	8	.00
9. Net long-term capital gain (loss) _____	9	.00
10. Net IRC Section 1231 gain (loss) _____	10	.00
11. Other income (loss) _____	11	.00
12. IRC Section 179 expense deduction _____	12	.00
13. a. Portion of expenses related to investment portfolio income, including investment interest expense and other (federal nonitemized) deductions (see instructions) _____	13a	.00
b. Other information from line 20 of federal K-1 related to investment interest and expenses not listed elsewhere (see instructions) _____	13b	.00
14. Total pro rata distributions. Add all positive amounts on lines 1 through 11. See instructions for lines 12, 13a, 13b, and if you reported negative amounts on lines 1 through 11. _____	14	.00

**Part 4 - State Modifications** Add or subtract the following. Designate the distributive share amount of each modification for Indiana adjusted gross income from line 2 on the front of Form IT-20S/IT-65. For nonresidents, apply apportioned figures. (Use a minus sign to denote negative amounts.)

1. State income taxes deducted _____	1	.00
2. Net bonus depreciation allowance _____	2	.00
3. Excess IRC Section 179 deduction _____	3	.00
4. Interest on U.S. obligations _____	4	.00
5. Addback/Deduction _____ Code No. <input type="text"/>	5	.00
6. Addback/Deduction _____ Code No. <input type="text"/>	6	.00
7. Addback/Deduction _____ Code No. <input type="text"/>	7	.00
8. Total distributive share of modifications (see instructions) _____	8	.00
9. Add Part 3, line 14, to Part 4, line 8. See instructions for reporting on Schedule PTET, Schedule Composite, and/or Schedule Composite-COR. _____ <b>Adjusted Gross Income</b>	9	.00

