

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

Tax Year Beginning 2024 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/IT-65 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 (for IT-65 filers only; if filing IT-20S, skip to line 5) _____	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. _____ Adjusted Gross Income	9	_____	.00

