

Name(s) shown on Form IT-40PNR

Your Social Security Number

Round all entries

- | | | | |
|--|----|----------------------|-----|
| 1. Indiana state tax withheld: See instructions _____ | 1 | <input type="text"/> | .00 |
| 2. Indiana county tax withheld: See instructions _____ | 2 | <input type="text"/> | .00 |
| 3. Pass Through Entity Tax Credit _____ | 3 | <input type="text"/> | .00 |
| 4. Estimated tax paid for 2024: include any extension payment made with Form IT-9 _____ | 4 | <input type="text"/> | .00 |
| 5. Unified tax credit for the elderly _____ | 5 | <input type="text"/> | .00 |
| 6. Earned income credit: see instructions Enter earned income credit from Schedule IN-EIC, line A-3 _____ Box A <input type="text"/> | | | .00 |
| Enter number from Schedule A, Proration Section, line 21D ____ Box B <input type="text"/> | | | |
| Multiply Box A by Box B, enter total here _____ | 6 | <input type="text"/> | .00 |
| 7. Lake County residential income tax credit _____ | 7 | <input type="text"/> | .00 |
| 8. Economic development for a growing economy credit. Enter amount from Schedule IN-EDGE, line 19 (enclose schedule) _____ | 8 | <input type="text"/> | .00 |
| 9. Economic development for a growing economy retention credit. Enter amount from Schedule IN-EDGE-R, line 19 (enclose schedule) _____ | 9 | <input type="text"/> | .00 |
| 10. Headquarters relocation credit (refundable portion - see instructions) _____ | 10 | <input type="text"/> | .00 |
| 11. Adoption Credit _____ | 11 | <input type="text"/> | .00 |
| 12. Reserved for future use _____ | 12 | <input type="text"/> | .00 |
| 13. Add lines 1 through 12. Enter total here and on Form IT-40PNR, line 12 _____ Total Credits | 13 | <input type="text"/> | .00 |

Schedule IN-DONATE

Important: The amount on line 2 cannot exceed the amount on Form IT-40PNR, line 16.

1. Donations: List fund name, 3-digit code and amount to be donated (see instructions)

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|---|-------------------------------|----|----------------------|-----|
| a. Enter fund name <input type="text"/> | code no. <input type="text"/> | 1a | <input type="text"/> | .00 |
| b. Enter fund name <input type="text"/> | code no. <input type="text"/> | 1b | <input type="text"/> | .00 |
| c. Enter fund name <input type="text"/> | code no. <input type="text"/> | 1c | <input type="text"/> | .00 |

2. Add lines 1a through 1c. Enter total here and on Form IT-40PNR, line 17 _____ **Total Donations**

| | | |
|---|----------------------|-----|
| 2 | <input type="text"/> | .00 |
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