

## Form FIT-20

State Form 44623  
(R24 / 8-25)

Indiana Department of Revenue

Indiana Financial Institution Tax Return  
for Calendar Year Ending December 31, 2025

2025

or Fiscal Year Beginning 2025 and Ending

Check box if amended.

Check box if amendment is due to a federal audit.

Check box if name changed.

Name of Corporation

Federal Employer Identification Number

Number and Street

Principal Business Activity Code

Foreign Country 2-Character Code

City

State

ZIP Code

2-Digit County Code

Telephone Number

Check box if this is a state chartered credit union or an investment company registered under the Investment Company Act of 1940.  
(Also see instructions for line 19 and FIT-20 Schedule E-U.)

A. Date of incorporation in the state of

H. Check all boxes that apply:

B. State of commercial domicile

Initial Return Final Return In Bankruptcy REMIC

C. Year of initial Indiana return

I. Is this return filed on a combined basis? Yes No

If yes, complete Schedule H.

D. Location of records if different from above address:

J. Is this a separate return by a member of a unitary group?

(See instructions on page 5.) Yes No

E. Accounting method: Cash Accrual

F. Did the corporation make estimated tax payments using a different

K. Do you have on file a valid extension of time to file your return (federal

Federal Employer Identification Number? Yes No

Form 7004 or an electronic extension of time)? Yes No

List any other Federal Employer Identification Numbers on Schedule H.

L. Are you a member of a partnership? Yes No

G. Is 80% or more of your gross income derived from making, acquiring,  
selling, or servicing loans or extensions of credit? Yes No

If you answer yes, see instruction page 6.

If you answer no, do not file this return; file Form IT-20.

## Schedule A

## Income

Round all entries

1. Federal taxable income (before federal NOL and special deductions); use a minus sign for negative amounts

1 00

2. Qualifying dividend deduction

2 00

3. Subtotal (Subtract line 2 from line 1)

3 00

Add back – Enter an amount equal to the deduction taken for:

4. Bad debts (IRC Section 166) (see instructions)

4 00

5. Bad debt reserves for banks (IRC Section 585)

5 00

6. Bad debt reserves (IRC Section 593)

6 00

7. Charitable contributions (IRC Section 170)

7 00

8. All state and local income taxes

8 00

9. Net capital loss carryovers to the extent used in offsetting capital gains on federal Schedule D (IRC Section 1212)

9 00

10. Amount of interest excluded for state and local obligations (IRC Section 103)

10 00

minus the associated expenses (IRC Section 265)

10 00

## Other modifications to income (see instructions)

11a. Excess business interest deduction, add or subtract net amount

11a 00

11b. Net bonus depreciation, add or subtract net amount

11b 00

11c. Excess IRC Section 179 deduction, add or subtract

11c 00

If line 11a, 11b, or 11c are negative, use a minus sign.

11d. Qualified patents income deduction (use a minus sign for negative amounts)

11d 00

12a. Enter name of addback or deduction

Code #

12a 00

12b. Enter name of addback or deduction

Code #

12b 00

12c. Enter name of addback or deduction

Code #

12c 00

12d. Enter name of addback or deduction

Code #

12d 00

13. Total addbacks (add lines 4 through 12d)

13 00

14. Subtotal (add line 3 and line 13)

14 00

## Deductions

15. Subtract income that is derived from sources outside the U.S. and included in federal taxable income

15 00

16. Subtract an amount equal to a debt or portion of a debt that becomes worthless – Net of all recoveries (IRC Section 166)

16 00

17. Subtract an amount equal to any bad debt reserves that are included in federal income because of  
accounting method changes (IRC Section 585(c)(3)(a) or Section 593)

17 00

18. Total Deductions (add lines 15 through 17)

18 00

19. Total Income Prior to Apportionment (subtract line 18 from line 14)

19 00



2410000000

0000000000111111111112222222222333333333333444444444455555555555666666666677777777777888888  
1234567890123456789012345678901234567890123456789012345678901234567890123456789012345

04  
05

20.	Total Income Prior to Apportionment (amount from line 19)	20		00
21.	Apportionment Percentage (line 15 of Schedule E-U)	21	.	%
22.	Current Year Apportioned Adjusted Gross Income attributed to Indiana (multiply line 20 by line 21)	22		00
23.	Indiana Net Capital Loss Adjustment from attached worksheet. <i>Line 23 cannot exceed amount on line 22</i>	23		00
24.	Subtotal of line 22 minus line 23. Do not enter an amount less than zero	24		00
25.	Indiana Net Operating Loss Deduction from Schedule FIT-20NOL. <i>Line 25 cannot exceed amount on line 24</i>	25		00
26.	Total Indiana Adjusted Gross Income subject to tax (subtract line 25 from line 24)	26		00
27.	Financial Institution Tax (multiply line 26 by tax rate; see instructions)	27		00
28.	Less: Nonresident Taxpayer Credit (enclose Schedule FIT-NRTC) (816)	28		00
29.	Net Financial Institution Tax Due (subtract line 28 from line 27)	29		00
30.	Sales/Use Tax Due	30		00
31.	Subtotal Due (add lines 29 and 30)	31		00
<b>Tax Liability Credits</b> (enclose schedules)				
32.	Neighborhood Assistance Tax Credit (NC-20) (828)	32		00
33.	Enterprise Zone Employment Expense Credit (EZ 2) (812)	33		00
34.	Enterprise Zone Loan Interest Tax Credit (LIC) (814)	34		00
35.	Enter name of other credit 35a. Code #	35b		00
36.	Enter name of other credit 36a. Code #	36b		00
37.	Enter the total of certified credits claimed from Schedule IN-OCC and enclose this schedule with your return	37		00
38.	Total Credits (add lines 32 through 37)	38		00
39.	Net Tax Due (subtract line 38 from line 31)	39		00
<b>Credit for Estimated Tax and Other Payments</b>				
40.	Total quarterly estimated income tax paid (itemize quarterly FT-QP payments below)	40		00
Quarter 1      Quarter 2      Quarter 3      Quarter 4				
41.	Extension payment and prior year overpayment credit Enter combined total	41		00
42.	Other payments (enclose supporting documentation)	42		00
43.	EDGE credit. Enter the total EDGE credit amount claimed (line 19 on Schedule IN-EDGE)	43		00
44.	EDGE-R credit. Enter the total EDGE-R credit amount claimed (line 19 on Schedule IN-EDGE-R)	44		00
45.	Total Payments (add lines 40 through 44)	45		00
46.	<b>Balance of Tax Due</b> (subtract line 45 from line 39. If line 45 exceeds line 39, enter zero)	46		00
47.	Penalty for the Underpayment of Tax from Schedule FIT-2220 (Form page 4)	47		00
48.	If payment is made after the original due date, add interest (see instructions)	48		00
49.	Late penalty: If paying late, enter 10% of line 46. If line 31 is zero, enter \$10 per day filed past due date	49		00
50.	Total Due (add lines 46 through 49) <b>Payable in U.S. funds</b> to: Indiana Department of Revenue	50		00
51.	Total Overpayment (subtract lines 39, 47, 48, and 49 from line 45)	51		00
52.	Refund (enter portion of line 51 to be refunded)	52		00
53.	Overpayment Credit (amount of line 51 to be applied to next year's estimated tax account)	53		00

**Certification of Signatures and Authorization Section**  
Under penalties of perjury, I declare I have examined this return, including all accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete.

**I authorize the Department to discuss my return with my personal representative (see instructions).**      Yes ☐      No ☐

Paid Preparer's Email Address

<b>Personal Representative's Name (Print or Type)</b>	
Email Address	
Signature of Corporate Officer	Date
Print or Type Name of Corporate Officer	Title
Signature of Paid Preparer	Date
Print or Type Name of Paid Preparer	

<b>Paid Preparer: Firm's Name</b> (or yours if self-employed)	
PTIN	
Telephone Number	
Address	
City	
State	ZIP Code + 4

Please mail your return to: Indiana Department of Revenue, PO Box 7228, Indianapolis, IN 46207-7228.