Form SC-40 State Form 44404 (R24 / 9-25)

# Indiana Department of Revenue Unified Tax Credit for the Elderly Married Claimants Must File Jointly.

2025



Due April 15, 2026

Your first name Initial  Spouse's first name Initial			Initial	nitial Last name					Your So					ocial S	Secu	rity Nu	mber			
			Initial I and the second																	
			Last na	Last name							Spouse's Social Security Number									
Pres	sent address (num	nber and street o	or rural rout	e)								_								
City or Town			State	State ZIP/Postal code							r's date of death Spouse's date of death 2025						025			
Chec	ck box if you we	re age 65 or o	lder by De	ec. 31, 2	025 [		С	heck l	oox i	м f spo	м ouse	D e wa	s age	65 or	r old	м er by	м Dec.		<sup>D</sup> 025 [	
Were	e you a resident	of Indiana for	six month	s or mo	re durir	ng 202	25?	Ye	es		١	No [								
Was	your spouse a r	resident of Ind	iana for si	x month	s or mo	re du	ring 2	025?		Yes	s [	]	No							
Certa Ente	ermine Your Inc ain income, sucl r all other incom cources listed be	h as Social Se ne received by	you and y	our spo	use du	ring th	ne tax	year.	Com	nple	te a									
Α. '	Wages, salaries	s, tips and com	missions,	unempl	oymen <sup>:</sup>	t comp	oensa	ition, e	etc					Α						0.0
В.	Dividend and interest income								В						0.0					
C.	Net gain or loss from rental income, business income, etc										С						0.0			
D.										D						00				
E. '	. —									Е						0.0				
F. Your Elderly Credit (See chart on back to figure your refund)													F						00	
G	Direct Deposit (1) Routing Number													(3) (	hoc	cking		(1) 5	Saving	
G.	Direct Deposit	(1) Rodding 1	vuilibei [											(3)	J1160	T	$\vdash$	T -	Javing	∍ ]
	(2) A	Account Numb	er																	
	(5) Fer penalty of per ect and that I am		ve examir	ned this r	eturn a	ınd to	the b	est of	my (						lief,	it is tr	ue, c	omple	ete, ar	ıd
Your Signature				Date				Spouse's Signature						Date						
Dayt	ime Telephone I	Number																		
pers	horize the depa onal represent s, complete the	ative. Yes		return No 🗌	with m	y		Paid	Prep	are	r: Fi	irm's	s Nan	ne (or	you	rs if s	elf-er	nploy	ed)	
Personal Representative's Name (please print)								PTIN												
Telep numl	ohone ber																			
Addr	ess							Addre	ess											
City								City												
State	9	ZIF	P Code					State						Z	IP C	ode				



## Instruction for Unified Tax Credit for the Elderly

### **Important Information**

- The filing due date for this form is April 15, 2026.
- You cannot file this form if you have an extension of time to file.
   Instead, you must file and claim this credit on Form IT-40 or Form IT-40PNR.
- You must file no later than three years after the filing due date to be eligible to claim a refund on this form.

The Unified Tax Credit for the Elderly is available to individuals age 65 or over with taxable income of less than \$10,000. If your income on Line E is less than the amounts on the chart below, you are eligible to claim this credit on this form. If it is more, then you must file Form IT-40 or Form IT-40PNR to claim the credit. **Do not** file Form SC-40 if you are required to file Form IT-40 or Form IT-40PNR.

# Who may use this form to claim the Unified Tax Credit for the Elderly?

You may be able to claim a credit if you and/or your spouse meet the following requirements:

- You and/or your spouse must have been age 65 or older by Dec. 31, 2025;
- If married, you must file a joint return;
- You and/or your spouse must have been an Indiana resident for at least six months during 2025; and
- You and/or your spouse must not have been in prison 180 days or more during 2025.

You may file this form if you meet all the above requirements, and

- You are single or widowed and your income on Line E is under \$2,500\*; or
- You are married, and only one person is age 65 or older, and your income on Line E is less than \$3,500\*; or
- You are married, both of you are age 65 or older, and your income on Line E is less than \$5,000\*.

Complete Lines A through E on the front of this form. Then, compare the Line E amount to the amounts on the chart below based on your filing status and age. This will give you your refund amount.

**Important.** If your income is more than these amounts, **do not** file this form. Instead, you must file Form IT-40 (or IT-40PNR if you are not a full-year resident), and claim the credit on that form.

**Note.** If a spouse dies before this return is filed, the surviving spouse can claim this credit by filing a joint return. A copy of the death certificate must be attached to the tax return to verify the date of death. However, if a taxpayer dies and does not have a surviving spouse, the estate cannot claim the credit on behalf of the deceased taxpayer.

### **Direct Deposit**

You may have your refund directly deposited in your checking or savings account.

The **routing number** is nine digits, with the first two digits of the number beginning with 01 through 12 or 21 through 32. Do not use a deposit slip to verify the number because it may have internal codes as part of the actual routing number.

The **account number** can be up to 17 digits. Omit any hyphens, accents and special symbols. Enter the number from left to right and leave any unused boxes blank.

Check the appropriate box for the type of account to which you are making your deposit, and if the refund will go to an account outside the United States.

## **Personal Representative Information**

If you complete this area, you are authorizing the department to be in contact with someone other than you (e.g., paid preparer, relative or friend, etc.) concerning information about this tax return. After your return is filed, the department will communicate primarily with your designated personal representative.

**Note.** Your refund will be paid to you (and your spouse, if filing jointly) even if you designate a personal representative.

If you have not received your refund within 12 weeks of filing, check the status of your refund online at <a href="https://www.in.gov/dor/i-am-a/individual/check-refund">www.in.gov/dor/i-am-a/individual/check-refund</a>, or call our automated information line at 317-232-2240.

Please mail your claim for refund to:

Elderly Credit Indiana Department of Revenue P.O. Box 6103 Indianapolis, IN 46206-6103

Mail by April 15, 2026.

Compare the Figure on Line E to the Chart Below: Enter Your Refund Amount on Line F.											
Single or Widov	wed 65 or Older	Married with only on	e person 65 or Older	Married with both persons 65 or Older							
If Line E is:	Your Refund Amount is:	If Line E is:	Your Refund Amount is:	If Line E is:	<u>Your Refund</u> <u>Amount is:</u>						
0-\$999.99	\$100.00	0-\$999.99	\$100.00	0-\$999.99	\$140.00						
\$1,000-\$2,499.99	\$50.00	\$1,000-\$2,999.99	\$50.00	\$1,000-\$2,999.99	\$90.00						
\$2,500 or Over	You <u>must</u> file form IT-40 or IT-40PNR	\$3,000-\$3,499.99	\$40.00	\$3,000-\$4,999.99	\$80.00						
		\$3,500 or Over	You <u>must</u> file form IT-40 or IT-40PNR	\$5,000 or Over	You must file Form IT-40 or IT-40PNR						

