Form I	lule 7			90123456789 Department of Rev			202		Enclosure ence No. <b>06</b>
		Schedule	7: Addi	tional Require	ed Inforn	nation	202	<b>S</b> eque	ence No. <b>U</b> C
(R16 / 9-2									
Name(s) show	n on Form IT-40					′our Socia	I Security N	lumber	
XXXXXXXX	XXXXXXXXX	XXXXXXXX	XXXXXX	xxxxxxxxx	XXX	999	99	9999	
1. Federal fili	ng information								
		x return for 2025	5? Place "X"	' in appropriate box	. Yes X	No X			
2. Out-of-stat	e income								
Complete if you	u and/or your spou	ıse (if filing a joir	nt return) red	ceived any salary, v	vage, tip and	d/or comm	ission inco	me from Illir	nois,
	igan, Ohio, Penns r spouse worked.	sylvania or Wisco	onsin. <u>Enter</u>	two-digit code num	nber from the	e back of S	Schedule C	1-40 for sta	te where
State where yo		Your incor	me	State whe	re spouse w	orked		Spouse's in	come
XX		99999999	9.00		XX		9	9999999	99.00
	of time to file				200				7
a. Place "X	in box if you have	e riled a tederal e	extension of	time to file, Form 48	368, or made	e an online	extension	payment.	7
b. Place "X	" in box if you have	e filed an Indiana	extension	of time to file, Form	IT-9, or mad	e an India	na extensio	n payment o	online. X
2. 1.400 /	Joanave		2,1131131311		o, or maa	ilidia			
4. Farm/Fishi						7.7			
				as made from farmi Schedule IT-2210.	ng or fishing	j. X			
		are box, you will	o i allacii i	Goriedule 11-22 IU.					
<ol><li>Schedule I If you are eligible</li></ol>		orm 8857. Regu	est for Inno	cent Spouse Relief	and are co	mpletina li	ndiana Sch	edule IN-40	PA. X
	ule IN-40PA and c								
6. Date of dea									
If any individua	I listed at the top o	of the IT-40 died	during 2025	5, enter date of dea	th (MM/DD)				
Taxpay	er's date of death	99 99	2025	Spouse's date of	of death	9 9	9 202	5	
талрау	or o date or dodin			opodoo o dato c					
					or acaim		J		
	– Sign Form IT-4								
Under penalty	of perjury, I have e	examined this ret	turn and all	ng statement. attachments and to	the best of	my knowle	edge and b	elief, it is tru	
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