



Form
IT-40PNR
State Form 472
(R11 / 9-12)

Indiana Part-Year or Full-Year Nonresident Individual Income Tax Return

2012

If filing for a fiscal year, enter the dates (see instructions) (MM/DD/YYYY):

Due April 15, 2013

from to:

Your Social Security Number

Spouse's Social Security Number

☐ Place "X" in box if applying for ITIN

☐ Place "X" in box if applying for ITIN

Your first name Initial Last name Suffix

If filing a joint return, spouse's first name Initial Last name Suffix

Present address (number and street or rural route)

Place "X" in box if you are married filing separately. ☐

City State Zip/Postal code

Foreign country 2-character code (see pg. 5) School corporation number (see pages 61 and 62)

Enter below the **2-digit county code** numbers (found on the back of Schedule CT-40PNR) for the county where you lived and worked on January 1, 2012.

County where **you** lived County where **you** worked County where **spouse** lived County where **spouse** worked

Round all entries

1. Complete Schedule A first. Enter here the amount from Section 3, line 37B, and enclose Schedule A _____ **Indiana Income** 1 .00
2. Enter amount from Schedule B, line 6, and enclose Schedule B _____ **Indiana Add-Backs** 2 .00
3. Add line 1 and line 2 _____ 3 .00
4. Enter amount from Schedule C, line 12, and enclose Schedule C _____ **Indiana Deductions** 4 .00
5. Subtract line 4 from line 3 _____ **Indiana Adjusted Income** 5 .00
6. You must complete Schedule D. Enter amount from Schedule D, line 7, and enclose Schedule D _____ **Indiana Exemptions** 6 .00
7. Subtract line 6 from line 5 _____ **State Taxable Income** 7 .00
8. State adjusted gross income tax: multiply line 7 by 3.4% (.034) (if answer is less than zero, leave blank) 8 .00
9. County tax. Enter county tax due from Schedule CT-40PNR (if answer is less than zero, leave blank) 9 .00
10. Other taxes. Enter amount from Schedule E, line 4 (enclose sch.) 10 .00
11. Add lines 8, 9 and 10. Enter total here and on line 16 on the back _____ **Indiana Taxes** 11 .00



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12. Enter credits from Schedule F, line 8 (enclose schedule) _____	12		.00
13. Enter offset credits from Schedule G, line 7 (enclose schedule) _____	13		.00
14. Automatic Taxpayer Refund credit			
Enter \$ 111 if joint filing but only one is eligible (leave blank if not eligible; see instructions on page 9) _____	14		.00
15. Add lines 12, 13 and 14 _____	Indiana Credits		15 .00
16. Enter amount from line 11 _____	Indiana Taxes		16 .00
17. If line 15 is equal to or more than line 16, subtract line 16 from line 15 (if smaller, skip to line 24)	17		.00
18. Amount from line 17 to be donated to the Indiana Nongame Wildlife Fund _____	18		.00
19. Subtract line 18 from line 17 _____	Overpayment		19 .00
20. Amount from line 19 to be applied to your 2013 estimated tax account (see instructions on page 11).			
Enter your county code county tax to be applied \$	a		.00
Spouse's county code county tax to be applied \$	b		.00
Indiana adjusted gross income tax to be applied _____ \$	c		.00
Total to be applied to your estimated tax account (a + b + c; cannot be more than line 19) _____	20d		.00
21. Penalty for underpayment of estimated tax from Schedule IT-2210 or IT-2210A (enclose sch.) _____	21		.00
22. Refund: Line 19 minus lines 20d and 21. Note: If less than zero, see line 24 instructions	Your Refund		22 .00
23. Direct Deposit (see page 12) c. Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Hoosier Works MC			
a. Routing Number 			
b. Account Number 			
d. Place an "X" in the box if refund will go to an account outside the United States <input type="checkbox"/>			
24. If line 16 is more than line 15, subtract line 15 from line 16. Add to this any amount on line 21 (see instructions on page 13) _____	24		.00
25. Penalty if filed after due date (see instructions) _____	25		.00
26. Interest if filed after due date (see instructions) _____	26		.00
27. Amount Due: Add lines 24, 25 and 26 _____	Amount You Owe		27 .00

Do not send cash. Please make your check or money order payable to: Indiana Department of Revenue.

Sign and date this return after reading the Authorization statement on Schedule H. You must enclose Schedule H.

	Date		Date
Your Signature		Spouse's Signature	

- If enclosing payment mail to: Indiana Department of Revenue, P.O. Box 7224, Indianapolis, IN 46207-7224.
- Mail all other returns to: Indiana Department of Revenue, P.O. Box 40, Indianapolis, IN 46206-0040.

