

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

2017

7	(R16 / 9-17) If filing for a fiscal year, enter the dates (see instructions) (MM/DD/YYYY				
	from to:	Due April	17, 2018		
	Your Social Spouse's Social Security Number Security Number				
	tit it it it	ox if applying for ITIN			
	Your first name Initial Last name		Suffix		
	If filing a joint return, spouse's first name Initial Last name				
	Present address (number and street or rural route) Place "X" in box if you ar married filing separately.				
	City State Zip/Po	ostal code			
	Foreign country 2-character code (see instructions)				
	Enter below the 2-digit county code numbers (found on the back of Schedule CT-40PNR) for the co	ounty where you lived	and		
	worked on January 1, 2017. County where County where County where County where	ty where			
		se worked			
		Round all ent	rios		
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		
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5.	Subtract line 4 from line 3	5	.00		
6.	You must complete Schedule D. Enter amount from Schedule D, line 7,		\neg		
	and enclose Schedule DIndiana Exemptions	6	00		
7.	Subtract line 6 from line 5Indiana Adjusted Gross Income	7	.00		
8.	State adjusted gross income tax: multiply line 7 by 3.23% (.0323)				
9	(if answer is less than zero, leave blank) 8				
٥.	(if answer is less than zero, leave blank) 9	o			
10	Other toyon Enter amount from Schodule E. line 4 (amolese act.)				
10.	Other taxes. Enter amount from Schedule E, line 4 (enclose sch.)	الد	— —		
11	Add lines 8, 0 and 10. Enter total here and on line 15 on the back.	11			

12.	Enter credits from Schedule F, line 9 (enclose schedule) 12	.00				
13.	Enter offset credits from Schedule G, line 8 (enclose schedule) 13	.00				
14.	Add lines 12 and 13	Indiana Credits	14			
15.	Enter amount from line 11	Indiana Taxes	15 .00			
16.	If line 14 is equal to or more than line 15, subtract line 15 from line 1	4 (if smaller, skip to line 23)	16 .00			
17.	Enter donations from Schedule IN-DONATE (enclose schedule); can	not be greater than line 16	17 .00			
18.	Subtract line 17 from line 16	Overpayment	18 .00			
19.	Amount from line 18 to be applied to your 2018 estimated tax account (see instructions).					
	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	pe more than line 18)	19d . 00			
20.	Penalty for underpayment of estimated tax from Schedule IT-2210 or	20 .00				
21.	Refund: Line 18 minus lines 19d and 20. Note: If less than zero, see lin	e 23 instructions Your Refund	21 .00			
22.	Direct Deposit (see instructions)					
	a. Routing Number					
	b. Account Number					
	c. Type: Checking Savings Hoosier Works MC					
	d. Place an "X" in the box if refund will go to an account outside the l	United States				
23.	If line 15 is more than line 14, subtract line 14 from line 15. Add to th (see instructions)	is any amount on line 20	23 .00			
24.	Penalty if filed after due date (see instructions)		24 .00			
25.	Interest if filed after due date (see instructions)		25 .00			
26.	Amount Due: Add lines 23, 24 and 25		26			
Sign and date this return after reading the Authorization statement on Schedule H. You must enclose Schedule H (both pages).						
You	r Signature Date	 Spouse's Signature	 Date			
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- 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.

