

Name(s) shown on Form IT-40

Your Social Security Number

Round all entries

| | | | |
|--|----|----------------------|-----|
| 1. Indiana state tax withheld: enclose W-2s, 1099s showing state tax withholding amounts _____ | 1 | <input type="text"/> | .00 |
| 2. Indiana county tax withheld: enclose W-2s, 1099s showing county tax withholding amounts _____ | 2 | <input type="text"/> | .00 |
| 3. Estimated tax paid for 2021: include any extension payment made with Form IT-9 _____ | 3 | <input type="text"/> | .00 |
| 4. Unified tax credit for the elderly _____ | 4 | <input type="text"/> | .00 |
| 5. Earned income credit: enclose Schedule IN-EIC and enter amount from line A-3 _____ | 5 | <input type="text"/> | .00 |
| 6. Lake County residential income tax credit _____ | 6 | <input type="text"/> | .00 |
| 7. Economic development for a growing economy credit. Enter amount from Schedule IN-EDGE, line 19 (enclose schedule) _____ | 7 | <input type="text"/> | .00 |
| 8. Economic development for a growing economy retention credit. Enter amount from Schedule IN-EDGE-R, line 19 (enclose schedule) _____ | 8 | <input type="text"/> | .00 |
| 9. Headquarters relocation credit (refundable portion - see instructions) _____ | 9 | <input type="text"/> | .00 |
| 10. Add lines 1 through 9. Enter total here and on Form IT-40, line 12 _____ Total Credits | 10 | <input type="text"/> | .00 |

Schedule IN-DONATE

Important. The amount on line 2 cannot exceed the amount on Form IT-40/IT-40PNR, line 16.

1. Donations: List fund name, 3-digit code and amount to be donated (see instructions)

| | | | | | | |
|---|----------------------|----------|----------------------|----|----------------------|-----|
| a. Enter fund name | <input type="text"/> | code no. | <input type="text"/> | 1a | <input type="text"/> | .00 |
| b. Enter fund name | <input type="text"/> | code no. | <input type="text"/> | 1b | <input type="text"/> | .00 |
| c. Enter fund name | <input type="text"/> | code no. | <input type="text"/> | 1c | <input type="text"/> | .00 |
| 2. Add lines 1a through 1c. Enter total here and on Form IT-40/IT-40PNR, line 17 Total Donations | | | | 2 | <input type="text"/> | .00 |

