

**Shareholder's/Partner's Share of Indiana Adjusted Gross
 Income, Deductions, Modifications, and Credits**

Tax Year Beginning 2023 and Ending

Name of S Corporation/Partnership Federal Employer Identification Number

Distributions - Provide Schedule IN K-1 to each shareholder/partner. Enclose Schedule IN K-1 with Form IT-20S/IT-65 return.

Part 1 – Shareholder/Partner's Identification Section

1. Shareholder/Partner Name Check if amended

2. Shareholder/Partner FEIN or Social Security Number

3. Shareholder/Partner Federal Pro Rata Percentage . %

4. If the partner is a disregarded entity (DE), enter the partner's:

a. Name b. FEIN

5. What type of entity is the partner?

6. Shareholder/Partner State of Residence or Commercial Domicile

7. Indiana County of Principal Employment 2-digit code

8. Payer's Name

9. Payer's FEIN

10. Pass Through Entity Tax 10 .00

11. IN State Tax Withheld 11 .00

12. IN County Tax Withheld 12 .00

Part 2 - Pro Rata Share of Indiana Pass-through Tax Credits from S Corporation/Partnership

| | Column A IT-20S/IT65 FEIN if Credit is from IN K-1 | Column B Certification Year | Column C Certification/Project/PIN Number | Column D Tax Credit Code | Column E Amount Claimed |
|----|--|-----------------------------------|---|--------------------------------|----------------------------|
| 1. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> .00 |
| 2. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> .00 |
| 3. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> .00 |
| 4. | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> .00 |

Pass-through entities with more than 24 IN K-1s must file electronically



Part 3 - Distributive Share Amount (use apportioned figures for nonresident shareholders/partners)

| | | |
|--|-----|-----|
| 1. Ordinary business income (loss) _____ | 1 | .00 |
| 2. Net rental real estate income (loss) _____ | 2 | .00 |
| 3. Other net rental income (loss) _____ | 3 | .00 |
| 4. Guaranteed payments (for IT-65 filers only; if filing IT-20S, skip to line 5) _____ | 4 | .00 |
| 5. Interest income _____ | 5 | .00 |
| 6. Ordinary dividends _____ | 6 | .00 |
| 7. Royalties _____ | 7 | .00 |
| 8. Net short-term capital gain (loss) _____ | 8 | .00 |
| 9. Net long-term capital gain (loss) _____ | 9 | .00 |
| 10. Net IRC Section 1231 gain (loss) _____ | 10 | .00 |
| 11. Other income (loss) _____ | 11 | .00 |
| 12. IRC Section 179 expense deduction _____ | 12 | .00 |
| 13. a. Portion of expenses related to investment portfolio income, including investment interest expense and other (federal nonitemized) deductions (see instructions) _____ | 13a | .00 |
| b. Other information from line 20 of federal K-1 related to investment interest and expenses not listed elsewhere (see instructions) _____ | 13b | .00 |
| 14. Total pro rata distributions. Add all positive amounts on lines 1 through 11. See instructions for lines 12, 13a, 13b, and if you reported negative amounts on lines 1 through 11. _____ | 14 | .00 |

Part 4 - State Modifications Add or subtract the following. Designate the distributive share amount of each modification for Indiana adjusted gross income from line 2 on the front of Form IT-20S/IT-65. For nonresidents, apply apportioned figures. (Use a minus sign to denote negative amounts.)

| | | |
|---|---|-----|
| 1. State income taxes deducted _____ | 1 | .00 |
| 2. Net bonus depreciation allowance _____ | 2 | .00 |
| 3. Excess IRC Section 179 deduction _____ | 3 | .00 |
| 4. Interest on U.S. obligations _____ | 4 | .00 |
| 5. Addback/Deduction _____ Code No. <input type="text"/> | 5 | .00 |
| 6. Addback/Deduction _____ Code No. <input type="text"/> | 6 | .00 |
| 7. Addback/Deduction _____ Code No. <input type="text"/> | 7 | .00 |
| 8. Total distributive share of modifications (see instructions) _____ | 8 | .00 |
| 9. Add Part 3, line 14, to Part 4, line 8. See instructions for reporting on Schedule PTET, Schedule Composite, and/or Schedule Composite-COR. _____ Adjusted Gross Income | 9 | .00 |

