



If you are **not** filing for the calendar year January 1 through December 31, 2009, enter period from:

/ /2009 to: / /2009

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

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 are married filing separately.

City

State

Zip code + 4

Foreign Country (if applicable)

School Corporation Number (see pages 41 and 42)

Enter below the **2-digit county code** numbers (found on page 40 in the instruction booklet) for the county where you lived and worked on January 1, 2009.

County where you lived

County where you worked

County where spouse lived

County where spouse worked

DRAFT 7/17/09

Round all entries

1. Enter your federal adjusted gross income (AGI) from your federal tax return (from Form 1040, line 37; Form 1040A, line 21; or from Form 1040EZ, line 4).	Federal AGI	1		.00
2. Enter amount from Schedule 1, line 15, and attach Schedule 1	Indiana Add-Backs	2		.00
3. Add line 1 and line 2.....		3		.00
4. Enter amount from Schedule 2, line 12, and attach Schedule 2	Indiana Deductions	4		.00
5. Subtract line 4 from line 3.....		5		.00
6. You must complete Schedule 3. Enter amount from Schedule 3, line 5, and attach Schedule 3	Indiana Exemptions	6		.00
7. Subtract line 6 from line 5 (if answer is less than zero, leave blank).....	State Taxable Income	7		.00
8. State adjusted gross income tax: multiply line 7 by 3.4% (.034).....		8		.00
9. County tax. Enter county tax due from Schedule CT-40		9		.00
10. Other taxes. Enter amount from Schedule 4, line 5 (attach schedule)		10		.00
11. Add lines 8, 9 and 10. Enter total here and on line 15 on the back.....	Indiana Taxes	11		.00



DRAFT 7/17/09

12.	Enter credits from Schedule 5, line 9 (attach schedule).....	12		.00	
13.	Enter offset credits from Schedule 6, line 7 (attach schedule).....	13		.00	
14.	Add lines 12 and 13		Indiana Credits	14	.00
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 14 (if smaller, skip to line 25)	16			.00
17.	Complete this line if you are filing after April 15, 2010, and do not have an extension of time to file. Enter in Box A the smaller of the number of days that have elapsed since April 15, 2010, or the number 50 Box A <input type="text"/> X \$10 (skip to line 25 if line 17 is more than line 16) Late File Penalty	17			.00
18.	Subtract line 17 from line 16 (if less than zero, skip to line 25).....		Subtotal	18	.00
19.	Amount from line 18 to be donated to the Indiana Nongame Wildlife Fund..... 	19			.00
20.	Subtract line 19 from line 18.....		Overpayment	20	.00
21.	Amount from line 20 to be applied to your 2010 estimated tax account. a. Enter your county code <input type="text"/> (whole dollar amount) \$ <input type="text"/> b. Spouse's county code <input type="text"/> (whole dollar amount) \$ <input type="text"/> c. Indiana adjusted gross income tax (whole dollar amount) \$ <input type="text"/> Total to be applied (a + b + c: cannot be more than line 20).....	21d			.00
22.	Penalty for underpayment of estimated tax from Schedule IT-2210 or IT-2210A.....	22			.00
23.	Refund: Line 20 minus lines 21 and 22. Note: If less than zero, see line 25 instruction Your Refund	23			.00
24.	a. Routing Number <input type="text"/> b. Account Number <input type="text"/> c. Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Hoosier Works MC				
25.	If line 15 is more than line 14, subtract line 14 from line 15 OR, if line 17 is more than line 16, subtract line 16 from line 17. Add to this any amount on line 22.....	25			.00
26.	Penalty if filed after due date (see instructions)	26			.00
27.	Interest if filed after due date (see instructions)	27			.00
28.	Amount Due: Add lines 25, 26 and 27	28	Amount You Owe		.00

(see page XX)

Direct Deposit
(see page XX)

▶ No payment is due if you owe less than \$1. **Do not send cash.** Please make your check or money order payable to: **Indiana Department of Revenue.** Credit card payers must see instructions.

Sign and date this return after reading the *Filing Authorization* statement on Schedule 7. Attach Schedule 7.

Your Signature _____ Date _____ Spouse's Signature _____ Date _____

- 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.



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