

IT-8453OL

Purpose of this form

This form is to be completed and signed by the taxpayer before their return can be filed electronically through the Federal/State On-Line Filing Program.

The On-Line Software will:

1. Enter the Document Control Number (DCN) assigned to the electronic tax return in the field provided at the top of the form.
2. Fill in the taxpayer's (and spouse's if filing a joint return) name, address, social security number, and daytime telephone number where indicated at the top of the form.
3. Complete Part I, using the amounts from the taxpayer's Indiana individual income tax return.
4. Complete Part II, if the taxpayer elects to have their refund direct deposited into their financial institution savings or checking account or deposited into their Hoosier Works Card.

The Taxpayer will:

1. Complete Part III, with their signature and date.
2. Mail nothing into the Indiana Department of Revenue, unless requested by the department.
3. Keep and maintain the IT-8453OL for three (3) years from December 31st of the year the return was signed.

Do Not
Mail