

Indiana Department of Revenue  
**Indiana Nonprofit Organization Unrelated Business Income Tax Return**  
**Calendar Year Ending December 31, 2017 or**

Fiscal Year Beginning   **2017** and Ending

Check box if amended.

Check box if name changed.

Name of Organization		Federal Identification Number (FID)	
Number and Street	Enter 2-Digit County Code	Principal Business Activity Code	
City	State	ZIP Code	Telephone Number
<p><b>K</b> Check all boxes that apply: <input type="checkbox"/> Initial Return <input type="checkbox"/> Final Return <input type="checkbox"/> In Bankruptcy <input type="checkbox"/> Schedule M</p> <p><b>L</b> Do you have on file a valid extension of time to file your return (federal Form 7004 or an electronic extension of time)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>			

**Adjusted Gross Income Tax Calculation on Unrelated Business Income**

1. Unrelated business taxable income (before NOL deduction and specific deduction) from federal return Form 990T (enclose Form 990T); use minus sign for negative amounts .....	1	00
2. Specific deduction (generally \$1,000; see instructions) .....	2	00
3. Interest on U.S. government obligations on the federal return less related expenses .....	3	00
4. Deduction for qualified patents income .....	4	00
5. Enter total from lines 2 through 4 .....	5	00
6. Subtotal for unrelated business income (subtract line 5 from line 1).....	6	00
7. Indiana modifications (see instructions; use a minus sign to denote negative amounts) .....	7	00
8. Unrelated business income, as adjusted (add lines 6 and 7). (If not apportioning, enter same amount on line 10.).....	8	00
9. Enter Indiana apportionment percentage, if applicable, from line 9 of IT-20 Schedule E apportionment (enclose schedule) .....	9	% 00
10. Unrelated business apportioned to Indiana (multiply line 8 by line 9; otherwise, enter line 8 amount)	10	00
11. Enter Indiana NOL deduction without specific deduction (enclose Schedule IT-20NOL; see instructions) .....	11	00
12. Taxable Indiana unrelated business income (subtract line 11 from line 10) .....	12	00
13. Taxable income from other forms (Form 1120-POL) .....	13	00
14. Subtotal (add lines 12 and 13) .....	14	00
15. Indiana tax on unrelated business income (multiply line 14 by tax rate; see instructions for line 15) ....	15	00
16. Sales/use tax on purchases subject to use tax from Sales/Use Tax Worksheet .....	16	00
17. Total tax due (add lines 15 and 16).....	17	00

**Credit for Estimated Tax and Other Payments**

18. Quarterly estimated tax paid: Qtr. 1 _____ Qtr. 2 _____ Qtr. 3 _____ Qtr. 4 _____ Enter total	18	00
19. Amount paid with extension .....	19	00
20. Amount of overpayment credit (from tax year ending _____) .....	20	00
21. EDGE credit. Enter the total EDGE credit amount claimed (line 19 on Schedule IN-EDGE).....	21	00
22. EDGE-R credit. Enter the total EDGE-R credit amount claimed (line 19 on Schedule IN-EDGE-R) ..	22	00
23. Enter the amount of other credit _____ Code No. _____ .....	23	00
24. Certified credits. Enter the total of certified credits claimed from Schedule IN-OCC and enclose this schedule with your return .....	24	00
25. Total credits (add lines 18-24) .....	25	00
26. Balance of tax due (line 17 minus line 25).....	26	00
27. Penalty for the underpayment of income tax. Attach Schedule IT-2220 .....	27	00
<input type="checkbox"/> Check box if using annualization method		
28. Interest: If payment is made after the original due date, compute interest.....	28	00
29. Penalty: If paid late, enter 10% of line 26; see instructions. If line 17 is zero, enter \$10 per day filed past due date.....	29	00
30. Total payment due (add lines 26-29). (Payment must be made in U.S. funds) <b>PAY THIS AMOUNT ..</b>	30	00
31. Total overpayment (line 25 minus lines 17 and 27-29) .....	31	00
32. Amount of line 31 to be refunded .....	32	00
33. Amount of line 31 to be applied to the following year's estimated tax account .....	33	00



