

Name(s) shown on Form IT-40PNR

Your Social Security Number





**Section 1: Income or (Loss)** Enter in Column A the same income or loss you reported on your 2015 federal income tax return, Form 1040, 1040A or 1040EZ (except for line 19B and/or a net operating loss carryforward on line 20B; see instructions). Round all entries.

	Column A Income from Federal Return		Column B Income Taxed by Indiana	
1. Your wages, salaries, tips, commissions, etc _____	1A	<input type="text"/> .00	1B	<input type="text"/> .00
2. Spouse's wages, salaries, tips, commissions, etc _____	2A	<input type="text"/> .00	2B	<input type="text"/> .00
3. Taxable interest income _____	3A	<input type="text"/> .00	3B	<input type="text"/> .00
4. Dividend income _____	4A	<input type="text"/> .00	4B	<input type="text"/> .00
5. Taxable refunds, credits, or offsets of state and local taxes from your federal return _____	5A	<input type="text"/> .00	5B	<input type="text"/> .00
6. Alimony received _____	6A	<input type="text"/> .00	6B	<input type="text"/> .00
7. Business income or loss from federal Schedule C or C-EZ _____	7A	<input type="text"/> .00	7B	<input type="text"/> .00
8. Capital gain or loss from sale or exchange of property from your federal return _____	8A	<input type="text"/> .00	8B	<input type="text"/> .00
9. Other gains or (losses) from Form 4797 _____	9A	<input type="text"/> .00	9B	<input type="text"/> .00
10. Total IRA distribution _____	10A	<input type="text"/> .00	10B	<input type="text"/> .00
11. Total pensions and annuities _____	11A	<input type="text"/> .00	11B	<input type="text"/> .00
12. Net rent or royalty income or loss reported on federal Schedule E _____	12A	<input type="text"/> .00	12B	<input type="text"/> .00
13. Income or loss from partnerships _____	13A	<input type="text"/> .00	13B	<input type="text"/> .00
14. Income or loss from trusts and estates _____	14A	<input type="text"/> .00	14B	<input type="text"/> .00
15. Income or loss from S corporations _____	15A	<input type="text"/> .00	15B	<input type="text"/> .00
16. Farm income or loss from federal Schedule F _____	16A	<input type="text"/> .00	16B	<input type="text"/> .00
17. Unemployment compensation _____	17A	<input type="text"/> .00	17B	<input type="text"/> .00
18. Taxable Social Security benefits _____	18A	<input type="text"/> .00	18B	<input type="text"/> .00
19. Indiana apportioned income from Schedule IT-40PNRA _____			19B	<input type="text"/> .00
20. Other income reported on your federal return _____	20A	<input type="text"/> .00	20B	<input type="text"/> .00
List source(s). (Do not include federal net operating loss in Column B. See instructions.)				
<input type="text"/>				
21. Subtotal: add lines 1 through 20. _____	21A	<input type="text"/> .00	21B	<input type="text"/> .00



**Proration Section** See instructions.

21C. **Note:** Nonresident military personnel see special instructions on page 15. and complete worksheet. 21C  .00

21D. For all other individuals, divide the amount on line 21B by the amount on line 21A (see instructions if either line 21A and/or 21B are less than zero). Please round your answer to a decimal followed by three numbers. Example:  $\$3,100 \div \$8,000 = .3875$ , which rounds to .388 (do not enter a number greater than 1.00). Enter result here and on Schedule D, line 6 21D

**Section 2: Adjustments to Income** Note: Enter in Column A only those deductions claimed on your 2015 federal income tax return, Form 1040, 1040A or 1040EZ. Round all entries.

	Column A Federal Adjustments		Column B Indiana Adjustments	
22. Educator expenses (see instructions) _____	22A	<input type="text"/> .00	22B	<input type="text"/> .00
23. Certain business expenses of reservists, performing artists, etc _____	23A	<input type="text"/> .00	23B	<input type="text"/> .00
24. Health savings account deduction _____	24A	<input type="text"/> .00	24B	<input type="text"/> .00
25. Moving expenses (see instructions) _____	25A	<input type="text"/> .00	25B	<input type="text"/> .00
26. Deductible part of self-employment tax _____	26A	<input type="text"/> .00	26B	<input type="text"/> .00
27. Self-employed, SEP, SIMPLE, and qualified plans _____	27A	<input type="text"/> .00	27B	<input type="text"/> .00
28. Self-employed health insurance deduction _____	28A	<input type="text"/> .00	28B	<input type="text"/> .00
29. Penalty on early withdrawal of savings _____	29A	<input type="text"/> .00	29B	<input type="text"/> .00
30. Alimony paid _____	30A	<input type="text"/> .00	30B	<input type="text"/> .00
31. IRA deduction _____	31A	<input type="text"/> .00	31B	<input type="text"/> .00
32. Student loan interest deduction (see instructions) _____	32A	<input type="text"/> .00	32B	<input type="text"/> .00
33. Tuition and fees deduction (see instructions) _____	33A	<input type="text"/> .00	33B	<input type="text"/> .00
34. Domestic production activities deduction _____	34A	<input type="text"/> .00		
35. Other (see instructions) <input type="text"/>	35A	<input type="text"/> .00	35B	<input type="text"/> .00
36. Add lines 22 through 35 _____	36A	<input type="text"/> .00	36B	<input type="text"/> .00

**Section 3: Totals**

37. Subtract line 36 from line 21 of Section 1. Carry amount from line 37B to Form IT-40PNR, line 1 37A  .00      37B  .00

