

Name(s) shown on Form IT-40

Your Social Security Number

Round all entries

1. Tax add back: certain taxes deducted from federal Schedules C, C-EZ, E and/or F _____		1	<input type="text"/>	.00
2. Net operating loss carryforward from federal Form 1040, "Other income" line _____		2	<input type="text"/>	.00
3. OOS municipal obligation interest add-back _____		3	<input type="text"/>	.00
4. Bonus depreciation add-back _____		4	<input type="text"/>	.00
5. Section 179 expense excess add-back _____		5	<input type="text"/>	.00
6. Other Add-Backs: See instructions.				
a. Enter add-back name <input type="text"/>	code no. <input type="text"/>	6a	<input type="text"/>	.00
b. Enter add-back name <input type="text"/>	code no. <input type="text"/>	6b	<input type="text"/>	.00
c. Enter add-back name <input type="text"/>	code no. <input type="text"/>	6c	<input type="text"/>	.00
d. Enter add-back name <input type="text"/>	code no. <input type="text"/>	6d	<input type="text"/>	.00
e. Enter add-back name <input type="text"/>	code no. <input type="text"/>	6e	<input type="text"/>	.00
f. Enter add-back name <input type="text"/>	code no. <input type="text"/>	6f	<input type="text"/>	.00
g. Enter add-back name <input type="text"/>	code no. <input type="text"/>	6g	<input type="text"/>	.00
h. Enter add-back name <input type="text"/>	code no. <input type="text"/>	6h	<input type="text"/>	.00
i. Enter add-back name <input type="text"/>	code no. <input type="text"/>	6i	<input type="text"/>	.00
j. Enter add-back name <input type="text"/>	code no. <input type="text"/>	6j	<input type="text"/>	.00
k. Enter add-back name <input type="text"/>	code no. <input type="text"/>	6k	<input type="text"/>	.00
l. Enter add-back name <input type="text"/>	code no. <input type="text"/>	6l	<input type="text"/>	.00
m. Enter add-back name <input type="text"/>	code no. <input type="text"/>	6m	<input type="text"/>	.00
n. Enter add-back name <input type="text"/>	code no. <input type="text"/>	6n	<input type="text"/>	.00
o. Enter add-back name <input type="text"/>	code no. <input type="text"/>	6o	<input type="text"/>	.00
7. Add lines 1 through 6 Enter total here and on Form IT-40, line 2	Total Indiana Add-Backs	7	<input type="text"/>	.00

