

Tax Year Beginning 2025 and Ending

Pass-through entities with more than 24 IN K-1s must file electronically

Name of S Corporation/Partnership

Federal Employer Identification Number

Distributions – Provide Schedule IN K-1 to each shareholder/partner. Enclose Schedule IN K-1 with Form IT-20S/IT-65 return.

Part 1 – Shareholder/Partner's Identification Section

1. Shareholder/Partner Name

Check if amended

2. Shareholder/Partner FEIN or Social Security Number

3. Shareholder/Partner Federal Pro Rata Percentage

. %

4. If the partner is a disregarded entity (DE), enter the partner's:

a. Name

b. FEIN

5. What type of entity is the partner?

7. Indiana County of Principal Employment 2-digit code

6. Shareholder/Partner State of Residence or Commercial Domicile

8. Payer's Name

9. Payer's FEIN

10. Pass Through Entity Tax

10 . 00

11. Indiana State Tax Withheld

11 . 00

12. Indiana County Tax Withheld

12 . 00

Part 2 - Pro Rata Share of Indiana Pass-through Tax Credits from S Corporation/Partnership

Column A
IT-20S/IT-65 FEIN
if Credit is from IN K-1

Column B
Certification
Year

Column C
Certification/Project/PIN
Number

Column D
Tax Credit
Code

Column E
Amount Claimed

1. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> . <input type="text"/> 00
2. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> . <input type="text"/> 00
3. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> . <input type="text"/> 00
4. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> . <input type="text"/> 00



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Part 3 - Distributive Share Amount (use apportioned figures for nonresident shareholders/partners)

1. Ordinary business income (loss) _____	1	_____ .00
2. Net rental real estate income (loss) _____	2	_____ .00
3. Other net rental income (loss) _____	3	_____ .00
4. Guaranteed payments (for IT-65 filers only; if filing IT-20S, skip to line 5) _____	4	_____ .00
5. Interest income _____	5	_____ .00
6. Ordinary dividends _____	6	_____ .00
7. Royalties _____	7	_____ .00
8. Net short-term capital gain (loss) _____	8	_____ .00
9. Net long-term capital gain (loss) _____	9	_____ .00
10. Net IRC Section 1231 gain (loss) _____	10	_____ .00
11. Other income (loss) _____	11	_____ .00
12. IRC Section 179 expense deduction _____	12	_____ .00
13. a. Portion of expenses related to investment portfolio income, including investment interest expense and other (federal nonitemized) deductions (see instructions) _____	13a	_____ .00
b. Other information from line 20 of federal K-1 related to investment interest and expenses not listed elsewhere (see instructions) _____	13b	_____ .00
14. Total pro rata distributions. Add all positive amounts on lines 1 through 11. See instructions for lines 12, 13a, 13b, and if you reported negative amounts on lines 1 through 11. _____	14	_____ .00

Part 4 - State Modifications Add or subtract the following. Designate the distributive share amount of each modification for Indiana adjusted gross income from line 2 on the front of Form IT-20S/IT-65. For nonresidents, apply apportioned figures. (Use a minus sign to denote negative amounts.)

1. State income taxes deducted _____	1	_____ .00
2. Net bonus depreciation allowance _____	2	_____ .00
3. Excess IRC Section 179 deduction _____	3	_____ .00
4. Interest on U.S. obligations _____	4	_____ .00
5. Addback/Deduction _____	Code #	_____ .00
6. Addback/Deduction _____	Code #	_____ .00
7. Addback/Deduction _____	Code #	_____ .00
8. Total distributive share of modifications (see instructions) _____	8	_____ .00
9. Add Part 3, line 14, to Part 4, line 8. See instructions for reporting on Schedule PTET, Schedule Composite, and/or Schedule Composite-COR. _____	Adjusted Gross Income	9 _____ .00



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