

Name(s) shown on Form IT-40PNR

Your Social Security Number

Complete and enclose Schedule IN-DEP: Dependent Information and Additional Dependent Child Information if you are claiming dependents on lines 2 and/or 3 below. Complete and enclose Schedule IN-DEP-A: Adopted Dependent Information if you are claiming dependents on line 6 below.

Round all entries

1. Enter \$2000 if you are married filing jointly; otherwise, enter \$1000 1 .00

2. Enter the number of dependents listed on Schedule IN-DEP, Box 5 x \$1000 2 .00
You **MUST** enclose Schedule IN-DEP.

3. You may claim an additional exemption for each qualifying dependent child:
- who is a son, stepson, daughter, stepdaughter, foster child and/or child for whom you are a legal guardian;
 - who was under the age of 19 by Dec. 31, 2025; or
 - who is a full-time student who was under the age of 24 by Dec. 31, 2025; and
 - who you are eligible to claim as a dependent on line 2 above.

Enter the number of additional dependents listed on Schedule IN-DEP, Box 6. x \$1500 3 .00

4. Place "X" in box(es) below if, by December 31, 2025:

You were age 65 or older ☐ and/or blind ☐

Spouse was 65 or older ☐ and/or blind ☐

Total number of boxes with Xs x \$1000 4 .00

5. If age 65 or older, enter amount from Schedule A, line 36A.

- If filing as married filing separately and this amount is less than \$20,000, place "X" in the "You were age 65 or older" box below.
- For all other filers age 65 or older, if this amount is less than \$40,000, place "X" in appropriate box(es) below.

You were age 65 or older ☐

Spouse was 65 or older ☐

Total number of boxes with Xs x \$500 5 .00

6. Enter the number of additional adopted child exemptions listed on Schedule IN-DEP-A, Box 6 x \$3000 6 .00
You **MUST** enclose Schedule IN-DEP-A.

7. Add lines 1, 2, 3, 4, 5 and 6 7 .00

8. Enter the number from Schedule A, Proration Section, line 21D 8 .

9. Multiply line 7 by line 8. Enter here and on Form IT-40PNR, line 6 **Total Exemptions** 9 .00

