

Name(s) shown on Form IT-40/IT-40PNR/IT-40RNR

Your Social Security Number

	A Social Security Number	B Form Code	C Employer or Payer ID Number	D State Income	E State Tax Withheld	F Local Income	G Local Tax Withheld	H Locality Code
1				00	00	00	00	
2				00	00	00	00	
3				00	00	00	00	
4				00	00	00	00	
5				00	00	00	00	
6				00	00	00	00	
7				00	00	00	00	
8				00	00	00	00	
9				00	00	00	00	
10				00	00	00	00	
11				00	00	00	00	
12				00	00	00	00	
13				00	00	00	00	
14				00	00	00	00	
15				00	00	00	00	
16				00	00	00	00	
17				00	00	00	00	
18				00	00	00	00	
19				00	00	00	00	
20				00	00	00	00	
21				00	00	00	00	
22				00	00	00	00	
23				00	00	00	00	
24				00	00	00	00	
25				00	00	00	00	
26	Add lines 1 through 25 column E. Enter total on line 1 of IT-40 Schedule 5, or line 1 of IT-40PNR Schedule F, or line 7 of IT-40RNR.				00			
27	Add lines 1 through 25 column G. Enter total on line 2 of IT-40 Schedule 5, or line 2 of IT-40PNR Schedule F, or line 8 of IT-40RNR.						00	

Schedule IN-W Reference Chart					
Form Type	Form Code	Form Type	Form Code	Form Type	Form Code
W2/W2C	W	1099R	R	1099G	U
W2G	G	1099M	M	1099NEC	N

