

Enter your first name, middle initial and last name and spouses full name if filing a joint return	Your Social Security Number	<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td> </tr> </table>								

Instructions for Schedule 1 begin on page 9.

1. Renter's deduction: Address where rented if different from the one on the front page
 B _____ Landlord's name and address
 C _____ Amount of rent paid \$ D _____
 Number of months rented E _____ Enter the lesser of \$2,000 or amount of rent paid
2. Residential Homeowner's Property Tax deduction: Address where property tax was paid if different from front page F _____
 Number of months lived there G _____ Amount of property tax paid \$ H _____
 Enter the lesser of \$2,500 or the actual amount of property tax paid
3. State tax refund reported on federal return (see page 11)
4. Interest on U.S. Government Obligations (see page 11)
5. Taxable Social Security benefits (see page 11)
6. Taxable Railroad Retirement benefits (see page 11)
7. Military Service deduction: \$2,000 maximum for qualifying individual (see page 11)
8. Non-Indiana Locality Earnings deduction:\$2,000 maximum per qualifying person(see page 11)
9. Insulation deduction: \$1,000 maximum: attach verification (see page 12)
10. Disability Retirement deduction:\$5,200 maximum per qualifying person (see page 12)
 Attach Schedule IT-2440
11. Civil Service Annuity deduction: \$2,000 maximum per qualifying person (see page 12)
12. Nontaxable portion of Unemployment Compensation (see page 12)
13. Indiana Lottery Winnings (see page 12)
14. Indiana Net Operating Loss deduction: attach Schedule IT-40NOL (see page 12)
15. Enterprise Zone Employee deduction: attach Schedule IT-40QEC (see page 13)
16. Recovery of deductions (see page 13)
17. Human Services deduction (see page 13)
18. Indiana partnership long term care policy premiums deduction (see page 13)
19. Other deductions: list source(s) and amounts (see page 14) _____
20. Add lines 1 through 19 and enter total on line 6 of Form IT-40 **Total Deductions**

Please round all entries to nearest whole dollar (see instructions, pg 7)

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Schedule 2: Indiana Credits

1. Credit for Local Taxes Paid Outside Indiana (see page 24)
2. County Credit for the Elderly: attach federal Schedule R (see page 26)
3. Other Local Credits: List source(s) and amounts (see page 26) _____
Important: Lines 1 plus 2 & 3 cannot be greater than the county tax due on IT-40 line 15 (see page 26)
4. College Credit: Attach Schedule CC-40 (see page 27)
5. Credit for Taxes Paid to Other States: attach other state's return (see page 27)
6. Research Expense Credit: attach Form IT-20REC (see page 28)
7. Neighborhood Assistance Credit: attach Schedule NC-20 (see page 28)
8. Enterprise Zone Credits (attach appropriate schedule: see page 28)
9. Teacher Summer Employment Credit: attach Schedule TSE (see page 28)
10. Twenty-First Century Scholars Program Credit (see page 28)
11. Other Credits: List source(s) and amounts (see page 29) _____
Important: Lines 4 through 11 added together cannot be greater than the state adjusted gross income tax due on IT-40 line 14 (see instructions on page 31)
12. Add lines 1 through 11 and enter total on line 25 of Form IT-40 **Total Credits**

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