

Indiana Full-Year Resident **Individual Income Tax Return**

Due April 15, 2010

00

(R8 / 9-09) If you are **not** filing for the calendar year January 1 through December 31, 2009, enter period from: /2009 /2009 to: Your Social Spouse's Social Security Number Security Number Place "X" in box if applying for ITIN Place "X" in box if applying for ITIN Your first name Initial Last name If filing a joint return, spouse's first name Initial Last name Present address (number and street or rural route) Place "X" in box if you are married filing separately. City State Zip code + 4 School Corporation Number (see pages 43 and 44) Foreign Country (if applicable) Enter below the 2-digit county code numbers (found on the back of Schedule CT-40) for the county where you lived and worked on January 1, 2009. County where County where County where County where you lived you worked spouse lived spouse worked Round all entries 1. Enter your federal adjusted gross income (AGI) from your federal tax return (from Form 1040, line 37; Form 1040A, line 21; or from Form 1040EZ, line 4). Federal AGI . 00 1 . 00 2 . 00 Add line 1 and line 2..... Enter amount from Schedule 2, line 12, and attach Schedule 2...... Indiana Deductions . 00 . 00 Subtract line 4 from line 3..... 5 You must complete Schedule 3. Enter amount from Schedule 3, line 5, 6 . 00 00 . 00 State adjusted gross income tax: multiply line 7 by 3.4% (.034)........ 8 County tax. Enter county tax due from Schedule CT-40 9 . 00 Other taxes. Enter amount from Schedule 4, line 5 (attach schedule) 10 00

You	r Signature Date Spouse's Signature]	Date	
Sig	n and date this return after reading the <i>Filing Authorization</i> statement on Schedule 7. Attach S	Schedule 7.		
	▶ No payment is due if you owe less than \$1. Do not send cash. Please make your check or mone order payable to: Indiana Department of Revenue. Credit card payers must see instructions.			
26.	Amount Due: Add lines 23, 24 and 25	26		00
25.	Interest if filed after due date (see instructions)	25		00
24.	Penalty if filed after due date (see instructions)	24		00
23.	If line 15 is more than line 14, subtract line 14 from line 15. Add to this any amount on line 20 (see instructions on page 11)	23	•	00
	c. Type: Checking Savings Hoosier Works MC			
	b. Account Number	(see page 1		
22.	a. Routing Number	Direct Depo	eit	
21.	Refund: Line 18 minus lines 19d and 20. Note: If less than zero, see line 23 instructions Your Refund	21		00
20.	Penalty for underpayment of estimated tax from Schedule IT-2210 or IT-2210A	20	-	00
	Total to be applied to your estimated tax account (a + b + c; cannot be more than line 18)	19d	-	00
	Indiana adjusted gross income tax to be applied\$ c • 00			
	Spouse's county code county tax to be applied\$ b • 00			
	Enter your county code county tax to be applied\$ a • 00			
19.	Amount from line 18 to be applied to your 2010 estimated tax account (see instructions on page 9).			
	Subtract line 17 from line 16Overpayment	18	•	00
17.	Amount from line 16 to be donated to the Indiana Nongame Wildlife Fund	17		00
16.	If line 14 is equal to or more than line 15, subtract line 15 from line 14 (if smaller, skip to line 23)	16	-	00
15.	Enter amount from line 11	15	-	00
	Add lines 12 and 13	14		00
13.	Enter offset credits from Schedule 6, line 7 (attach schedule)			
12.	Enter credits from Schedule 5, line 9 (attach schedule)			

- If enclosing payment mail to: Indiana Department of Revenue, P.O. Box 7224, Indianapolis, IN 46207-7224.
 Mail all other returns to: Indiana Department of Revenue, P.O. Box 40, Indianapolis, IN 46206-0040.

