



Unified Tax Credit for the Elderly

Married Claimants Must File Jointly

2010

You Must File This Form by June 30, 2011

Your first name	Initial	Last name		Your Social Security Number								
Or succ's first name	Initial	Lectromo										
Spouse's first name	Initial	Last name				Spo	use's So	ocial S	Security	Numb	er	
Present address (number	r and street or rur	al route)			Ι	' [
		·	·		Taxpayer	r's date	of deat	h	Spouse	e's dat	e of de	eath
City or Town		State	Zip/Pos	tal code			2010)			20	010
					ММ	D D	I,		M M	D	D	
1. Check box if you were	age 65 or older by	y Dec. 31, 2010) (Check box i	if spouse w	vas age	e 65 or c 1	lder b	by Dec. 3	31, 20	10 🗌	
2. Were you a resident of	Indiana for six me	onths or more d	luring 201	0?			Yes		No			
3. Was your spouse a res	ident of Indiana fo	or six months or	r more dur	ring 2010?			Yes		No			
		Dete	rmine Y	'our Inco	me							
Certain income, such as S Enter all other income rece sources listed below, place	eived by you and	your spouse du	uring the ta	ax year. Co	mplete all							
A. Wages, salaries, tips							A					00
 B. Dividend and interest 												00
C. Net gain or loss from												00
 D. Pensions or annuities (Do not enter Social Security benefits) 												00
E. Total income (Add Li									00			
F. Your Refund (See cl	hart on back to fig	gure your refund	<u></u> (۱	·····	·····		F					00
G. Direct Deposit (1) F	Routing Number					(3)		cking	(4)	Sav	inas	
						(0) -						1
(2) Accou	Int Number											
(5) Place	an "X" in the box	if refund will go	o to an acc	count outsid	de the Unit	ed Sta	tes. 🗌					
Under penalty of perjury, I and that I am (we are) not	(we) have examin	ned this return ar	nd to the b	est of my (o				, it is t	rue, con	nplete,	and c	orrect
Your Signature		Date		Spouse	e's Signatu	ire				Date		
Daytime Telephone Numb	er											
I authorize the Department to discuss my return with my personal representative I Yes If yes, complete the information below.				Paid Preparer: Firm's Name (or yours if self-employed)								
Personal Representativ	r e's Name (please p	orint)		Fec	deral I.D. Nu	ımber [or [] Social	Securit	ty Num	ber
Telephone												
Address				Address_								_
City				City								_
State	Zip Co	ode + 4		State				Zip	Code + 4	1		_



Note: If you lived in Lake County and paid property tax on your residence, file Form IT-40 to get both the residential property tax credit plus the Unified Tax Credit for the Elderly.

Who may use this form to claim the Unified Tax Credit for the Elderly?

You may be able to claim a credit if you and/or your spouse meet the following requirements:

- You and/or your spouse must have been age 65 or older by Dec. 31, 2010;
- If married, you must file a joint return;
- You and/or your spouse must have been an Indiana resident for more than six months during 2010; and
- You and/or your spouse must not have been in prison more than 180 days during 2010.

You may file this form if you meet **all** the above requirements, **and**

- You are single or widowed and your income on Line E is under \$2,500*; **or**
- You are married, and only one person is age 65 or older, and your income on Line E is less than \$3,500*; or
- You are married, both of you are age 65 or older, and your income on Line E is less than \$5,000*.

Complete Lines A through E on the front of this form. Then, compare the Line E amount to the amounts on the chart below based on your filing status and age. This will give you your refund amount.

*If your income is more than these amounts, you will need to file either Form IT-40 (if you are a full-year resident), or Form IT-40PNR (if you and/or your spouse are part-year residents), and claim the credit on one of those forms.

Note: If a spouse dies before this return is filed, the surviving spouse can claim this credit by filing a joint return. A copy of the death certificate must be attached to the tax return to verify the date of death. However, if a taxpayer dies and does not have a surviving spouse, the estate **cannot** claim the credit on behalf of the deceased taxpayer.

Direct deposit

You may have your refund directly deposited in your checking or savings account.

The **routing number** is nine digits, with the first two digits of the number beginning with 01 through 12 or 21 through 32. Do not use a deposit slip to verify the number because it may have internal codes as part of the actual routing number.

The **account number** can be up to 17 digits. Omit any hyphens, accents and special symbols. Enter the number from left to right and leave any unused boxes blank.

Check the appropriate box for the type of account to which you are making your deposit, and if the refund will go to an account outside the United States.

Personal Representative Information

If you complete this area, you are authorizing the Department to be in contact with someone other than you (e.g. paid preparer, relative or friend, etc.) concerning information about this tax return. After your return is filed, the Department will communicate primarily with your designated personal representative.

Note: If you are due a refund, it will be paid to you (and your spouse, if filing jointly) even if you designate a personal representative.

File this form by June 30, 2011, to be eligible for this credit. If you have not received your refund within 12 weeks of filing, you may call our automated information line at (317) 233-4018.

Please mail your claim for refund to:

Elderly Credit Indiana Dept. of Revenue P.O. Box 6103 Indianapolis, IN 46206-6103

Mail by June 30, 2011

Compare the Figure on Line E to the Chart Below: Enter Your Refund Amount on Line F.								
Single or Widowed 65 or Older			nly one person Older	Married with both persons 65 or Older				
If Line E is:	<u>Your Refund</u> <u>Amount is:</u>	If Line E is:	<u>Your Refund</u> <u>Amount is:</u>	If Line E is:	<u>Your Refund</u> <u>Amount is:</u>			
0-\$999.99	\$100.00	0-\$999.99	\$100.00	0-\$999.99	\$140.00			
\$1,000-\$2,499.99	\$50.00	\$1,000-\$2,999.99	\$50.00	\$1,000-\$2,999.99	\$90.00			
\$2,500 or Over	You <u>must</u> file form IT-40 or IT-40PNR	\$3,000-\$3,499.99	\$40.00	\$3,000-\$4,999.99	\$80.00			
		\$3,500 or Over	You <u>must</u> file form IT-40 or IT-40PNR	\$5,000 or Over	You <u>must</u> file Form IT-40 or IT-40PNR			

