

## 2012

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

	If filing for a fiscal year, enter the dates (see instructions) (MIM/DD/Y	Y Y Y ): —			
	from to:				
	Your Social Security Number Security Number Security Number Security Number Security Number Security Number	" in how	, if applyin	a for ITIN	
,	Place "X" in box if applying for ITIN Place "X  Your first name	in box	if applyin	g for 1111N Suffix	
Ī	If filing a joint return, spouse's first name Initial Last name			Suffix	
Ī	Present address (number and street or rural route)	1 0	Place "Y" ir	n box if you are	
		n	narried filir	ng separately.	
[	City State Z	ip/Post	al code		
ا آ	Foreign country 2-character code (see pg. 6 ) School corporation numb	er (see	pages 59	and 60 )	
	Enter below the 2-digit county code numbers (found on the back of Schedule CT-40) for the co	ounty w	here you l	ived and	
	worked on January 1, 2012.  County where Cou	ounty v	where i		
		-	worked		
			Round	l all entries	
1.	Enter your federal adjusted gross income (AGI) from your federal tax return (from Form 1040,		1		0 0
	line 37; Form 1040A, line 21; or from Form 1040EZ, line 4) Federal A				
2.	Enter amount from Schedule 1, line 8, and enclose Schedule 1 Indiana Add-Back	ks2	2		0.0
3.	Add line 1 and line 2	3	3		00
4.	Enter amount from Schedule 2, line 12, and enclose Schedule 2 Indiana Deduction	ns	4		00
_	Subtract line 4 from line 3Indiana Adjusted Incon		5		0 0
5.	Subtract line 4 from line 3Indiana Adjusted Incom	ie <u> </u>	)	•	00
6.	You must complete Schedule 3. Enter amount from Schedule 3, line 5, and enclose Schedule 3 Indiana Exemption	ns 6	6		0 0
	•				
	Subtract line 6 from line 5 State Taxable Incompate adjusted gross income tax: multiply line 7 by 3.4% (.034)	ne	7		00
	(if answer is less than zero, leave blank) 8	.00			
9.	County tax. Enter county tax due from Schedule CT-40 (if answer is less than zero, leave blank)	.00			
10.	Other taxes. Enter amount from Schedule 4, line 4 (enclose sch.)	.00			
11	Add lines 8 9 and 10 Enter total here and on line 16 on the back Indiana Tax	PS 11	1		0.0



12.	Enter credits from Schedule 5, line 8 (enclose schedule) 12 .00	
	Enter offset credits from Schedule 6, line 7 (enclose schedule) 13 .00  Automatic Taxpayer Refund credit. Leave blank if not eligible. See instructions on page 9.	
	Enter \$ 111 if you are eligible  Enter \$ 222 if joint filing and both are eligible  Enter \$ 111 if joint filing but only one is eligible	
15.	Add lines 12, 13 and 14 Indiana Credits	15 .00
16.	Enter amount from line 11 Indiana Taxes	16
17.	If line 15 is equal to or more than line 16, subtract line 16 from line 15 (if smaller, skip to line 24)	17 .00
18.	Amount from line 17 to be donated to the Indiana Nongame Wildlife Fund	18 .00
19.	Subtract line 18 from line 17 Overpayment	19 .00
20.	Amount from line 19 to be applied to your 2013 estimated tax account (see instructions on page 11)	
	Enter your county code county tax to be applied _\$ a .00	
	Spouse's county code county tax to be applied _\$ b .00	
	Indiana adjusted gross income tax to be applied\$ c .00	
	Total to be applied to your estimated tax account (a + b + c; cannot be more than line 19)	20d . 00
21.	Penalty for underpayment of estimated tax from Schedule IT-2210 or IT-2210A (enclose sch.) _	21 .00
22.	Refund: Line 19 minus lines 20d and 21. Note: If less than zero, see line 24 Your Refund	22 .00
23.	Direct Deposit (see page 12) c. Type: Checking Savings Hoosier Works M	С
	a. Routing Number	
	b. Account Number	
	d. Place an "X" in the box if refund will go to an account outside the United States	
24.	If line 16 is more than line 15, subtract line 15 from line 16. Add to this any amount on line 21	
	(see instructions on page 13)	24 .00
	Penalty if filed after due date (see instructions)	25 .00
26.	Interest if filed after due date (see instructions)	26 .00
27.	Amount Due: Add lines 24, 25 and 26 Amount You Owe  Do not send cash. Please make your check or money order payable to: Indiana Department of R	27 . 00 evenue.
Sign	and date this return after reading the Authorization statement on Schedule 7. You must en	close Schedule 7.
	Signature Date Spouse's Signature enclosing payment mail to: Indiana Department of Revenue, P.O. Box 7224, Indianapolis, IN 4620	Date

- If enclosing payment mail to: Indiana Department of Revenue, P.O. Box 7224, Indianapolis, IN 4620
   Mail all other returns to: Indiana Department of Revenue, P.O. Box 40, Indianapolis, IN 46206-0040.

