| Form ID: IN Indiana General Information  |   |  |                        |
|--|---|--|------------------------|
| School corporation name (as of January 1 of tax year)<br>School corporation code (as of January 1 of tax year) |   |  | [1][2] Taxpayer Spouse |
| County of residence (as of January 1 of tax year) County of employment (as of January 1 of tax year)           |   |  | [3][4][5][6]           |
| Household employment taxes:  Employee Name Income  |   | Employee SSN State Tax Withheld                | [7]                    |
| County Tax Withheld  |   | County Code                                    |                        |
|  | Contributions Amount of contribution you wis              | h to mako to:                                  |                        |
| Nongame Wildlife Fund<br>Public K-12 Education Fund  | Amount of contribution you wis                            | ii to make to.                                 | [8]<br>[9]             |
| Credit for Donation to an Indiana College or University  |   |  |                        |
| Mark this field if you made a cash or noncash contribution to an Indiana college or university[10]             |   |  |                        |
| Renter's Information   |   |  |                        |
| Taxpayer, Spouse, Joint (τ,s,ı)  | City, state, zip code                                     |  | [11]                   |
| Number of months rented  | Total rent paid   |  |                        |
| Landlord name<br>Landlord address<br>Landlord city, state, zip code  | _   |  | [12]                   |
| Landiord Gry, State, Zip code  |   |  |                        |
| Part-year Resident and Nonresident Information   |   |  |                        |
| Er   | nter the dates you lived in Indiana                       | or in other states.                            | ayer Spouse            |
| State of residency (Use these fields if you or your spouse   | had only one state of residency)                          | <u>.                                      </u> | [13][14]               |
| States of residency (Use these fields if you or your spous Taxpayer, Spouse(T,S)                               | se had more than one state of residency) tate Postal Code | From Date                                      | To Date                |
| <u> </u>   | <u> </u>  |  | [15]                   |
| _  |   |  |                        |
| <del>-</del>   |   |  |                        |
| NOTES/QUESTIONS:   |   |  |                        |