


- 29. Enter the Total Tax from line 20 on the front of this form
- 30. Enter the Total Credits from line 28 on the front of this form
- 31. If line 30 is more than line 29, subtract line 29 from line 30 (if smaller, skip to line 38)
- 32.  Amount of line 31 to be donated to the Indiana Nongame Wildlife Fund (see instructions on page 30)
- 33. Subtract line 32 from line 31 **SUBTOTAL**
- 34. Amount to be applied to your 2005 estimated tax account (see instructions on page 30)
- 35. Penalty for Underpayment of Estimated Tax for 2004: Attach Schedule IT-2210 or IT-2210A
- 36. **Refund:** Line 33 minus lines 34 and 35 (if less than zero see instructions on page 31).....**YOUR REFUND**


29		
30		
31		
32		
33		
34		
35		
36		
38		
39		
40		
41		



37a. Routing Number

b. Account Number

c. Type of Account  Checking  Savings  Hoosier Works MC

 **Direct Deposit**  
If you want to DIRECT DEPOSIT your refund, see instructions on page 31.

- 38. If line 29 is more than line 30, subtract line 30 from line 29. **Add to this any amounts from lines 34 and 35, and enter total here** (see instructions on page 32) **SUBTOTAL**
- 39. Penalty if filed after due date (see instructions on page 32)
- 40. Interest if filed after due date (see instructions on page 32)
- 41. **Amount Due:** Add lines 38, 39 and 40 **AMOUNT YOU OWE**

▶ No payment is due if you owe less than \$1.00. **Do Not Send Cash.** Please make your check or money order payable to: **Indiana Department of Revenue.** Credit card payers must see page 32 for instructions.

**Out-of-State Income Information**

• Enter any salary, wage, tip &/or commission received from Illinois, Kentucky, Michigan, Ohio, Pennsylvania and/or Wisconsin:

Taxpayer \$ T

Spouse \$ U

- V **Taxpayer** - Check box if you filed federal Schedule C or C-EZ for 2004.
  - W **Spouse** - Check box if you filed federal Schedule C or C-EZ for 2004.
  - X • If two-thirds of your gross income was made from farming or fishing, please check here.
- Important:** If you checked the box, you must attach Schedule IT-2210 or IT-2210A.

If any individual listed at the top of the IT-40 died *during* 2004, enter date of death below.

Taxpayer's EE date of death       **2004**

Spouse's date of death FF       **2004**

**Authorization**

Under penalty of perjury, I have examined this return and all attachments and to the best of my knowledge and belief, it is true, complete and correct. I understand that if this is a joint return, any refund will be made payable to us jointly and each of us is liable for all taxes due under this return. Also, my request for direct deposit of my refund includes my authorization to the Indiana Department of Revenue (Department) to furnish my financial institution with my routing number, account number, account type, and social security number to ensure my refund is properly deposited. I give permission to the Department to contact the Social Security Administration in order to confirm the social security number(s) used on this return are correct.

TT **Are you filing a federal income tax return for 2004?** Yes  No

GG **I authorize the Department to discuss my return with my tax preparer.** Yes  No

Your Daytime Telephone Number

HH


Spouse's Daytime Telephone Number

II

Your Signature  Date



Spouse's Signature  Date



**Paid Preparer's name**  KK  Federal I.D. Number,  PTIN OR  Social Security Number

MM

**Address**

NN

**City**

OO

**State**  **Zip Code + 4**


PP  QQ

LL

Preparer's daytime telephone number

RR

Preparer's Signature  Date



**Please mail to: Indiana Department of Revenue, P.O. Box 40, Indianapolis, IN 46206-0040. Keep a copy for your records.**