Form ES-40 State Form 46005 (R24/ 9-23)

2024

Indiana Department of Revenue Estimated Tax Payment Form

Your Social Security Number	Spouse's Social Security Number		
Your first name	nitial Last name	1	
If filing a joint return, spouse's first name Ir	nitial Last name		
Present address (number and street or rural route)			
City	State ZIP/Post	al code	
Estimated Tax Designation and Payment Are			
Complete the worksheet on the back of this form to figure 1. State tax due from line J of worksheet		1 .00	
From line K of worksheet: a. Enter your county code			
b. Enter county tax		2b .00	
From line L of worksheet: a. Enter spouse's county code (if different from your	rs)		
b. Enter spouse's county tax		3b .00	
4. Add lines 1, 2b and 3b		4 .00	
 Please make your check or money order payable t See instructions for other payment options. 	o: Indiana Department of Revenue.		
Installment Period Information			
Place an "X" in the appropriate box to show which payme	nt you are making:		
1 st Installment payment due April 15, 2024	2 nd Installment payment due June 17, 20	2 nd Installment payment due June 17, 2024	
3 rd Installment payment due Sept. 16, 2024	4 th Installment payment due Jan. 15, 20	25	

Mail entire form and payment to: Indiana Department of Revenue P.O. Box 6102 Indianapolis, IN 46206-6102