	Form Indiana Part-Year or Full-Year Nonresident IT-40PNR Individual Income Tax Return 2023				
	State Form 472	il 15, 2024			
	from from to: from if amending				
	Your Social     Spouse's Social       Security Number     Security Number				
	Your first name       Initial       Last name       Place "X" in box if applying for ITIN	Suffix			
	If filing a joint return, spouse's first name     Initial     Last name     S	Suffix			
	Present address (number and street or rural route)	]			
	Place "X" in box if yo married filing separa				
	City State ZIP/Postal code				
	Foreign country 2-character code (see instructions)				
	Enter below the <b>2-digit county code</b> numbers (found on the back of Schedule CT-40PNR) for the county where you lived worked on Jan. 1, 2023.	and			
	County where Count				
	you lived you worked spouse lived spouse worked				
	Round all ent	ries			
1.	. Complete Schedule A first. Enter here the amount from Section 3, line 36B, and enclose	.00			
	Schedule A Indiana Income 1				
2.	. Enter amount from Schedule B, line 6, and enclose Schedule B Indiana Add-Backs 2	00			
3.	. Add line 1 and line 2 3	.00			
4	Enter amount from Schedule C. line 12, and enclose Schedule C Indiana Deductions 4	.00			
4.	. Enter amount from Schedule C, line 12, and enclose Schedule C Indiana Deductions 4				
5.	. Subtract line 4 from line 35	.00			
6.	. You must complete Schedule D. Enter amount from Schedule D, line 9,				
	and enclose Schedule D Indiana Exemptions 6	00			
7.	. Subtract line 6 from line 5 Indiana Adjusted Gross Income 7	.00			
	. State adjusted gross income tax: multiply line 7 by 3.15% (.0315)				
9.	(if answer is less than zero, leave blank) 8 00 . County tax. Enter county tax due from Schedule CT-40PNR				
	(if answer is less than zero, leave blank) 900				
10.	. Other taxes. Enter amount from Schedule E, line 5 (enclose sch.)				
11.	. Add lines 8, 9 and 10. Enter total here and on line 15 on the back Indiana Taxes 11	.00			

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12.	Enter credits from Schedule F, line 13 (enclose schedule)	12	.00					
13.	Enter offset credits from Schedule G, line 8 (enclose schedule)	13	.00	[]				
14.	Add lines 12 and 13		_ Indiana Credits	14	.00			
15.	Enter amount from line 11		_ Indiana Taxes	15	.00			
16.	If line 14 is equal to or more than line 15, subtract line 15 from line	e 14 (if smalle	er, skip to line 23)	16	.00			
17.	Enter donations from Schedule IN-DONATE (enclose schedule); c	cannot be gre	ater than line 16	17	.00			
18.	Subtract line 17 from line 16		_ Overpayment	18	.00			
19.	9. Amount from line 18 to be applied to your 2024 estimated tax account (see instructions).							
	Enter your county code county tax to be applied \$	а	.00					
	Spouse's county code county tax to be applied\$	b	.00					
	Indiana adjusted gross income tax to be applied\$	с	.00					
	Total to be applied to your estimated tax account (a + b + c; canno	ot be more th	an line 18)	19d	.00			
20.	Penalty for underpayment of estimated tax from Schedule IT-2210	) and IT-221(	)A	20	.00			
	a. Enter code A if annualizing. Enter Code F if Farmer or Fisherma	an	а					
21.	Refund: Line 18 minus lines 19d and 20. Note: If less than zero, see line	23 instructions	Your Refund	21	.00			
22.	Direct Deposit (see instructions)							
	a. Routing Number							
	b. Account Number							
	c. Type: Checking Savings Hoosier Works	s MC						
	d. Place an "X" in the box if refund will go to an account outside th	e United Sta	tes					
23.	If line 15 is more than line 14, subtract line 14 from line 15. Add to	•	ount on line 20					
	(see instructions)			23	.00			
24.	Penalty if filed after due date (see instructions)			24	.00			
25.	Interest if filed after due date (see instructions)			25	.00			
26.	Amount Due: Add lines 23, 24 and 25 Do not send cash. Please make your check or money order payak Indiana Department of Revenue. See instructions if paying by cred	ole to:	Amount You Owe	26	.00			
Sig	n and date this return after reading the Authorization statemen	nt on Schedu	ule H. You must end	close Schedule H	(both pages).			
You	r Signature Date	Spouse's	Signature		Date			
	enclosing payment mail to: Indiana Department of Revenue, P.O. E			-7224.				

Mail all other returns to: Indiana Department of Revenue, P.O. Box 40, Indianapolis, IN 46206-0040.