

Name(s) shown on Form IT-40/IT-40PNR

Your Social Security Number

Enter information about contributions made by you and/or your spouse to Indiana's CollegeChoice 529 Education Savings Plan(s) during 2023.

Column A	Column B	Column C	Column D
Place "X" in box if you or your spouse <u>do not</u> own the account.	Enter Account #	Higher Education. Enter the amount contributed this year to offset current or future higher education expenses.	K-12 Education. Enter the amount contributed this year to offset current or future K-12 education expenses.
1. <input type="checkbox"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/> .00	<input style="width: 100%; height: 20px;" type="text"/> .00
2. <input type="checkbox"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/> .00	<input style="width: 100%; height: 20px;" type="text"/> .00
3. <input type="checkbox"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/> .00	<input style="width: 100%; height: 20px;" type="text"/> .00
4. <input type="checkbox"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/> .00	<input style="width: 100%; height: 20px;" type="text"/> .00
5. <input type="checkbox"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/> .00	<input style="width: 100%; height: 20px;" type="text"/> .00
6. <input type="checkbox"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/> .00	<input style="width: 100%; height: 20px;" type="text"/> .00
7. <input type="checkbox"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/> .00	<input style="width: 100%; height: 20px;" type="text"/> .00
8. <input type="checkbox"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/> .00	<input style="width: 100%; height: 20px;" type="text"/> .00
9. <input type="checkbox"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/> .00	<input style="width: 100%; height: 20px;" type="text"/> .00
10. Add lines 1C through 9C _____		<input style="width: 100%; height: 20px;" type="text"/> .00	
11. Add lines 1D through 9D _____			<input style="width: 100%; height: 20px;" type="text"/> .00
12. Add lines 10 and 11 _____			<input style="width: 100%; height: 20px;" type="text"/> .00
13. Multiply line 12 by .20 _____			<input style="width: 100%; height: 20px;" type="text"/> .00
14. Enter the lesser of the amount on line 13, 1500, or 750 if married filing separately _____			<input style="width: 100%; height: 20px;" type="text"/> .00
15. Enter the amount from Form IT-40 or Form IT-40PNR, line 8 _____			<input style="width: 100%; height: 20px;" type="text"/> .00
16. Allowable credit. Enter the lesser of line 14 or line 15. Also enter under line 6 of Schedule 6 (if filing Form IT-40), or under line 6 of Schedule G (if filing Form IT-40PNR) Total Credit			<input style="width: 100%; height: 20px;" type="text"/> .00