



Your Social Security Number [] [] [] Spouse's Social Security Number [] [] []

Check if applying for ITIN [] Check if applying for ITIN []

Form with fields for: Your first name, Initial, Last name, Suffix; Present address; City, State, Zip/Postal code; School Corporation Number; Foreign country 2-character code; County where you lived/worked.

Round all entries

Table with 3 columns: Line number, Description, Amount. Lines 1-21 including State Taxable Income, Total Tax, Total Credits, and Amount You Owe.