

ADDITIONAL REQUIRED INFORMATION

Referred By: _____

Other Information Required:

Do you Rent or Own your home (For states providing Rent Credit ONLY)? Circle One

Rent Amount per Month \$ _____ How Long Rented? _____

Landlord's Name and Address:

School District-IN ONLY: _____

IN County Lived on January 1st: _____ IN County Worked on January 1st: _____

Are you a NEW Sate Resident to ANY State? Complete the next two questions:

1. Dates moved IN or OUT (circle one) of State: IN _____ OUT _____

2. State moved TO or FROM: TO: _____ FROM: _____

Please answer the following for INDIANA:

- Are you a retired Civil Servant
- Are you Retired Military or Receive Survivor Benefits from the Military? Taxpayer Spouse
- Are you Reserve National Guard?
- If yes, was any of your income from involuntary orders?
- Were you mobilized and deployed for full-time service; or was your unit federalized? Yes No
- How many eligible Children attending home school or Private School: Elem-High School Only _____
- Did you contribute to a College Choice 529 Plan?
- If yes, Did you provide statements with account numbers for each eligible student?
- Did you donate to a Private School or Indiana College?
- If yes, Did you provide statements with date, amounts, and name of institution?
- Are you and/or your Spouse Public School Teachers(s) in Indiana K-12? Taxpayer Spouse
- Do you pay Partnership Long Term Care Policy Premiums?

