

- Do not send to the IRS. This is not a tax return.  
 ► Keep this form for your records. See instructions.

Declaration Control Number (DCN) ➤ [REDACTED]

Taxpayer's name

PETER P BUTTIGIEG

Social security number  
[REDACTED]

Spouse's name

Spouse's social security number  
[REDACTED]**Part I Tax Return Information — Tax Year Ending December 31, 2011 (Whole Dollars Only)**

1 Adjusted gross income (Form 1040, line 38; Form 1040A, line 22; Form 1040EZ, line 4) .....	1	7,115
2 Total tax (Form 1040, line 61; Form 1040A, line 35; Form 1040EZ, line 10) .....	2	
3 Federal income tax withheld (Form 1040, line 62; Form 1040A, line 36; Form 1040EZ, line 7) .....	3	621
4 Refund (Form 1040, line 74a; Form 1040A, line 43a; Form 1040EZ, line 11; Form 1040-SS, Part I, line 12a) .....	4	1,085
5 Amount you owe (Form 1040, line 76; Form 1040A, line 45; Form 1040EZ, line 12) .....	5	

**Part II Taxpayer Declaration and Signature Authorization (Be sure you get and keep a copy of your return)**

Under penalties of perjury, I declare that I have examined a copy of my electronic individual income tax return and accompanying schedules and statements for the tax year ending December 31, 2011, and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts from my electronic income tax return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my Federal taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. I further understand that this authorization may apply to future Federal tax payments that I direct to be debited through the Electronic Federal Tax Payment System (EFTPS). I authorize EFTPS to issue me a personal identification number (PIN) to access EFTPS. This authorization is to remain in full force and effect until I notify the U.S. Treasury Financial Agent to terminate the authorization. To request that my PIN be mailed to me, or to revoke (cancel) a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537. Payment cancellation requests must be received no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

I authorize \_\_\_\_\_ to enter or generate my PIN \_\_\_\_\_  
 ERO firm name \_\_\_\_\_  
 as my signature on my tax year 2011 electronically filed income tax return.

Enter five numbers, but  
do not enter all zeros

I will enter my PIN as my signature on my tax year 2011 electronically filed income tax return. Check this box only if you are  
 entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature ➤ \_\_\_\_\_

Date ➤ 04/11/12

Spouse's PIN: check one box only

I authorize \_\_\_\_\_ to enter or generate my PIN \_\_\_\_\_  
 ERO firm name \_\_\_\_\_  
 as my signature on my tax year 2011 electronically filed income tax return.

Enter five numbers, but  
do not enter all zeros

I will enter my PIN as my signature on my tax year 2011 electronically filed income tax return. Check this box only if you are  
 entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Spouse's signature ➤ \_\_\_\_\_

Date ➤ \_\_\_\_\_

**Practitioner PIN Method Returns Only—continue below****Part III Certification and Authentication — Practitioner PIN Method Only**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN.

[REDACTED]  
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2011 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method and Publication 1345, Handbook for Authorized IRS e-file Providers of Individual Income Tax Returns.

ERO's signature ➤ \_\_\_\_\_

Date ➤ 04/11/12

**ERO Must Retain This Form — See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**

Indiana Individual Income Tax  
**DECLARATION OF ELECTRONIC FILING**  
Income Tax For the tax year January 1 - December 31, 2011

**Do Not Mail  
This Form**

DCN [REDACTED]

Submission ID [REDACTED] - [REDACTED] - [REDACTED]

First Name(s) and Middle Initial(s) <b>PETER P</b>	Last Name <b>BUTTIGIEG</b>	Your Social Security Number [REDACTED]	Spouse's Social Security Number [REDACTED]
Spouse's First Name(s) and Middle Initial(s)	Spouse's Last Name	Street Address [REDACTED]	
City <b>SOUTH BEND</b>		State <b>IN</b>	Zip Code <b>46617</b>
Daytime Telephone Number [REDACTED]			

**Part I Tax Return Information (See Instructions on Next Page)**

1. Federal Adjusted Gross Income .....	1.	7115.00
2. Indiana taxable income .....	2.	.00
3. Total Indiana tax .....	3.	.00
4. Total state tax withheld .....	4.	190.00
5. Total county tax withheld .....	5.	.00
6. Total Indiana tax credits .....	6.	232.00
7. Refund .....	7.	232.00
8. Amount you owe .....	8.	.00

**Part II Direct Deposit**

► Attach W-2 Forms Here

9. Routing number [REDACTED]  
10. Account number [REDACTED]

Note: The first two digits of the routing number must be 01 - 12 or 21 - 32.

11. Type of account:  Checking  Savings  Hoosier Works MC

**Do Not Mail  
This Form**

My request for direct deposit of my refund includes my authorization for the Indiana Department of Revenue to furnish my financial institution with my routing number, account number, account type, and social security number to insure my refund is properly deposited.

**Part III Declaration of Taxpayer**

Under penalties of perjury, I declare that the information I have given my ERO and the amounts in Part I above agree with the amounts on the corresponding lines of the electronic portion of my income tax return. To the best of my knowledge and belief, my 2011 return is true, correct and complete. I consent to my ERO sending my return, this declaration, and accompanying schedules and statements to the IDOR. I also consent to the IDOR sending my ERO and/or transmitter an acknowledgement of receipt of transmission and an indication of whether or not my return is accepted, and, if rejected, the reason(s) for the rejection. If the processing of my return or refund is delayed, I authorize the IDOR to disclose to my ERO and/or transmitter the reason(s) for the delay of when the refund was sent.

**Taxpayer's PIN: check one box only**

I authorize \_\_\_\_\_ to enter my PIN \_\_\_\_\_ as my signature on my tax year 2011 electronically filed income tax return.

I will enter my PIN as my signature on my tax year 2011 electronically filed income tax return. Check this box **only** if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete part IV below.

Taxpayer's signature ► \_\_\_\_\_

Date **04/11/12**

**Spouse's PIN: check one box only**

I authorize \_\_\_\_\_ to enter my PIN \_\_\_\_\_ as my signature on my tax year 2011 electronically filed income tax return.  
do not enter all zeros

I will enter my PIN as my signature on my tax year 2011 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete part IV below.

Spouse's signature ► \_\_\_\_\_ Date \_\_\_\_\_

**Part IV Practitioner Certification and Authentication - Practitioner PIN Method ONLY**

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self selected PIN.

[REDACTED]  
do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2011 electronically filed income tax return for the taxpayer(s) indicated above. I confirm that I am submitting this return in accordance with the requirements of the Practitioner PIN method.

ERO's Signature ► \_\_\_\_\_ Date **04/11/12**

**ERO Must Retain This Form - See instructions. Do Not Submit this form to IDOR unless requested to do so.**

Form 1040

Department of the Treasury—Internal Revenue Service  
U.S. Individual Income Tax Return

(99)

2011

OMB No. 1545-0074

IRS Use Only—Do not write or staple in this space.

For the year Jan. 1-Dec. 31, 2011, or other tax year beginning

, 2011, ending , 20

See separate instructions.

Your first name and initial

**PETER P**

Last name

**BUTTIGIEG**

If a joint return, spouse's first name and initial

Last name

Your social security number

Spouse's social security number

Home address. Include city, state, and ZIP code. See instructions.

Apt. no.

Make sure the SSN(s) above and on line 6c are correct.

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).

**SOUTH BEND IN 46617**

Presidential Election Campaign

Check here if you, or your spouse, if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.

 You  Spouse

Foreign country name

Foreign province/county

Foreign postal code

Filing Status

1  Single4  Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here ►2  Married filing jointly (even if only one had income)3  Married filing separately. Enter spouse's SSN above and full name here ►5  Qualifying widow(er) with dependent child

Check only one box.

Exemptions

6a  Yourself. If someone can claim you as a dependent, do not check box 6ab  Spouse

c Dependents:

(1) First name \_\_\_\_\_ Last name \_\_\_\_\_

(2) Dependent's social security number

(3) Dependent's relationship to you

Boxes checked on 6a and 6b      1  
 No. of children on 6c who:  
 (4)  if child under age 17 qual. for child tax credit (see instr.)  
     • lived with you  
     • did not live with you due to divorce or separation (see instructions)

Dependents on 6c not entered above

Add numbers on lines above ► 1

d Total number of exemptions claimed

6,129

Income  
Attach Form(s)  
W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see instructions.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

7 Wages, salaries, tips, etc. Attach Form(s) W-2

7 6,129

8a Taxable interest. Attach Schedule B if required

8a 38

b Tax-exempt interest. Do not include on line 8a

8b

9a Ordinary dividends. Attach Schedule B if required

9a 121

b Qualified dividends

9b

116

10 Taxable refunds, credits, or offsets of state and local income taxes

10 30

11 Alimony received

11

12 Business income or (loss). Attach Schedule C or C-EZ

12

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ►

13 797

14 Other gains or (losses). Attach Form 4797

14

15a IRA distributions

15a

b Taxable amount

16a Pensions and annuities

16a

b Taxable amount

17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E

17

18 Farm income or (loss). Attach Schedule F

18

19 Unemployment compensation

19

20a Social security benefits

20a

b Taxable amount

21 Other income. List type and amount

21

22 Combine the amounts in the far right column for lines 7 through 21. This is your total income ►

22 7,115

Adjusted Gross Income

23 Educator expenses

23

24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ

24

25 Health savings account deduction. Attach Form 8889

25

26 Moving expenses. Attach Form 3903

26

27 Deductible part of self-employment tax. Attach Schedule SE

27

28 Self-employed SEP, SIMPLE, and qualified plans

28

29 Self-employed health insurance deduction

29

30 Penalty on early withdrawal of savings

30

31a Alimony paid b Recipient's SSN ►

31a

32 IRA deduction

32

33 Student loan interest deduction

33

34 Tuition and fees. Attach Form 8917

34

35 Domestic production activities deduction. Attach Form 8903

35

36 Add lines 23 through 35

36

37 Subtract line 36 from line 22. This is your adjusted gross income ►

37

7,115

**Tax and Credits****Standard Deduction for—**

- People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.

- All others:

Single or Married filing separately, \$5,800

Married filing jointly or Qualifying widow(er), \$11,600

Head of household, \$8,500

38	Amount from line 37 (adjusted gross income) .....	38	7,115
39a	Check { <input type="checkbox"/> You were born before January 2, 1947, <input type="checkbox"/> Blind. } Total boxes checked ► 39a		
	if: { <input type="checkbox"/> Spouse was born before January 2, 1947, <input type="checkbox"/> Blind. }		
b	If your spouse itemizes on a separate return or you were a dual-status alien, check here ► 39b		
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin) .....	40	7,828
41	Subtract line 40 from line 38 .....	41	-713
42	Exemptions. Multiply \$3,700 by the number on line 6d .....	42	3,700
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- .....	43	0
44	Tax (see instr.). Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/> 962 elec. ....	44	0
45	Alternative minimum tax (see instructions). Attach Form 6251 .....	45	
46	Add lines 44 and 45 .....	46	
47	Foreign tax credit. Attach Form 1116 if required .....	47	
48	Credit for child and dependent care expenses. Attach Form 2441 .....	48	
49	Education credits from Form 8863, line 23 .....	49	
50	Retirement savings contributions credit. Attach Form 8880 .....	50	
51	Child tax credit (see instructions) .....	51	
52	Residential energy credits. Attach Form 5695 .....	52	
53	Other credits from Form: a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/> ..... Add lines 47 through 53. These are your total credits .....	53	
54	Subtract line 53 from line 46. If line 54 is more than line 46, enter -0- .....	54	
55	..... Subtract line 54 from line 46. If line 54 is more than line 46, enter -0- .....	55	0

**Other Taxes**

56	Self-employment tax. Attach Schedule SE .....	56	
57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919 .....	57	
58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required .....	58	
59a	Household employment taxes from Schedule H .....	59a	
b	First-time homebuyer credit repayment. Attach Form 5405 if required .....	59b	
60	Other taxes. Enter code(s) from instructions .....	60	
61	Add lines 55 through 60. This is your total tax .....	61	0

**Payments**

If you have a qualifying child, attach Schedule EIC.

62	Federal income tax withheld from Forms W-2 and 1099 .....	62	621
63	2011 estimated tax payments and amount applied from 2010 return .....	63	
64a	Earned income credit (EIC) .....	64a	464
b	Nontaxable combat pay election .....	64b	
65	Additional child tax credit. Attach Form 8812 .....	65	
66	American opportunity credit from Form 8863, line 14 .....	66	
67	First-time homebuyer credit from Form 5405, line 10 .....	67	
68	Amount paid with request for extension to file .....	68	
69	Excess social security and tier 1 RRTA tax withheld .....	69	
70	Credit for federal tax on fuels. Attach Form 4136 .....	70	
71	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> 8839 c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885 .....	71	
72	Add lines 62, 63, 64a, and 65 through 71. These are your total payments .....	72	1,085

**Refund**

73	If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid .....	73	1,085
74a	Amount of line 73 you want refunded to you. If Form 8888 is attached, check here ► <input type="checkbox"/>	74a	1,085

Direct deposit?  
See instructions.

► b Routing number ► c Type:  Checking  Savings  
► d Account number

**Amount You Owe**

75	Amount of line 73 you want applied to your 2012 estimated tax ► 75	75	
76	Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions .....	76	
77	Estimated tax penalty (see instructions) .....	77	

**Third Party Designee**

Do you want to allow another person to discuss this return with the IRS (see instructions)?  Yes. Complete below.

Designee's name ►

Personal identification number (PIN) ►

Phone no. ►

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature

Date Your occupation

Daytime phone number

MAYOR OF SOUTH BEND

Spouse's signature. If a joint return, both must sign.

Date Spouse's occupation

If the IRS sent you an Identity Protection PIN, enter it here (see instr.)

Print/Type preparer's name

Date Check  if PTIN

04/15/12

self-employed

Paid

►

Date

Check  if PTIN

Preparer Firm's name ►

Firm's EIN ►

Use Only Firm's address ►

Phone no. ►

**SCHEDULE A**  
**(Form 1040)**

Department of the Treasury  
Internal Revenue Service  
(99)  
Name(s) shown on Form 1040.

**Itemized Deductions**

OMB No. 1545-0074

► Attach to Form 1040:

► See Instructions for Schedule A (Form 1040).

**2011**  
Attachment  
Sequence No. **07**

Your social security number [REDACTED]

**PETER P BUTTIGIEG**

<b>Medical and Dental Expenses</b>	Caution: Do not include expenses reimbursed or paid by others:		
	1 Medical and dental expenses (see instructions) .....	1	
	2 Enter amount from Form 1040, line 38	2	
	3 Multiply line 2 by 7.5% (.075) .....	3	
<b>Taxes You Paid</b>	4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-		4
	5 State and local (check only one box): a <input checked="" type="checkbox"/> Income taxes, or b <input type="checkbox"/> General sales taxes	5	527
	6 Real estate taxes (see instructions) .....	6	2,142
	7 Personal property taxes .....	7	
<b>Interest You Paid</b>  <b>Note.</b> <b>Your mortgage interest deduction may be limited (see instructions).</b>	8 Other taxes. List type and amount ►		
	<b>INDIANA EXCISE TAX</b>		
	9 Add lines 5 through 8	9	2,669
	10 Home mortgage interest and points reported to you on Form 1098 .....	10	4,666
<b>Gifts to Charity</b>  <b>If you made a gift and got a benefit for it, see instructions.</b>	11 Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ►		
	12 Points not reported to you on Form 1098. See instructions for special rules .....	12	
	13 Mortgage insurance premiums (see instructions) .....	13	
	14 Investment interest. Attach Form 4952 if required. (See instructions.) .....	14	
<b>Casualty and Theft Losses</b>	15 Add lines 10 through 14	15	4,666
	16 Gifts by cash or check. If you made any gift of \$250 or more, see instructions .....	16	
	17 Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500 .....	17	
	18 Carryover from prior year .....	18	
<b>Job Expenses and Certain Miscellaneous Deductions</b>	19 Add lines 16 through 18	19	
	20 Casualty or theft loss(es). Attach Form 4684. (See instructions.) .....	20	
	21 Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ►	21	
	<b>MILITARY UNIFORMS</b>		
<b>Other Miscellaneous Deductions</b>	22 Tax preparation fees .....	22	635
	23 Other expenses—investment, safe deposit box, etc. List type and amount ►	23	
	24 Add lines 21 through 23	24	635
	25 Enter amount from Form 1040, line 38	25	7,115
<b>Total Itemized Deductions</b>	26 Multiply line 25 by 2% (.02) .....	26	142
	27 Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27	493
	28 Other—from list in instructions. List type and amount ►	28	
	29 Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40 .....	29	7,828
30 If you elect to itemize deductions even though they are less than your standard deduction, check here ► <input type="checkbox"/>			

For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule A (Form 1040) 2011

## Foreign Tax Credit

(Individual, Estate, or Trust)

OMB No. 1545-0121

Department of the Treasury  
Internal Revenue Service (99)

► Attach to Form 1040, 1040NR, 1041, or 990-T.

2011

Attachment  
Sequence No. 19

Name

Identifying number as shown on page 1 of your tax return:

**PETER P BUTTIGIEG**

Use a separate Form 1116 for each category of income listed below. See Categories of Income in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- a  Passive category income      c  Section 901(j) income      e  Lump-sum distributions  
 b  General category income      d  Certain income re-sourced by treaty

f Resident of (name of country) ► **UNITED STATES**

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

**Part I Taxable Income or Loss From Sources Outside the United States (for Category Checked Above)**

g	Enter the name of the foreign country or U.S. possession	Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
		A	B	C	
1a	Gross income from sources within country shown above and of the type checked above (see instructions):	<b>VARIOUS</b>			
b	Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, & you used an alternative basis to determine its source (see instructions) ► <input type="checkbox"/>	913			1a 913
2	Expenses definitely related to the income on line 1a (attach statement)				
3	Pro rata share of other deductions not definitely related:				
a	Certain itemized deductions or standard deduction (see instructions)	2,142			
b	Other deds. (attach stmt.)	2,142			
c	Add lines 3a and 3b	913			
d	Gross foreign-source income (see instructions)	7,115			
e	Gross income from all sources (see instructions)	0.1283			
f	Divide line 3d by line 3e (see instructions)	275			
g	Multiply line 3c by line 3f	599			
4	Pro rata share of interest expense (see instructions):				
a	Home mortgage interest (use worksheet on page 14 of the instructions)	599			
b	Other interest expense				
5	Losses from foreign sources				
6	Add lines 2, 3g, 4a, 4b, and 5	874			6 874
7	Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ►	39			7 39

**Part II Foreign Taxes Paid or Accrued (see instructions)**

Country	Credit is claimed for taxes (you must check one)	Foreign taxes paid or accrued									
		In foreign currency				In U.S. dollars				(r) Other foreign taxes paid or accrued	(s) Total foreign taxes paid or accrued (add cols. (o) through (r))
		(n) Paid	(o) Dividends	(p) Rents and royalties	(q) Interest	(n) Other foreign taxes paid or accrued	(o) Dividends	(p) Rents and royalties	(q) Interest		
A	1099 Tax					13					13
B											
C											
8	Add lines A through C, column(s). Enter the total here and on line 9, page 2 ►	8									13

For Paperwork Reduction Act Notice, see instructions.

Form 1116 (2011)

**Part III Figuring the Credit**

9 Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I .....	9	13	
10 Carryback or carryover (attach detailed computation) .....	10		
11 Add lines 9 and 10 .....	11	13	
12 Reduction in foreign taxes (see instructions) .....	12		
13 Taxes reclassified under high tax kickout (see instructions) .....	13		
14 Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit .....		14	
15 Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I (see instructions) .....	15	39	
16 Adjustments to line 15 (see instructions) .....	16		
17 Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.) .....	17	39	
18 Individuals: Enter the amount from Form 1040, line 41, or Form 1040NR, line 39. Estates and trusts: Enter your taxable income without the deduction for your exemption .....	18	-713	
Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.			
19 Divide line 17 by line 18. If line 17 is more than line 18, enter "1" .....	19	1.0000	
20 Individuals: Enter the amount from Form 1040, line 44. If you are a nonresident alien, enter the amount from Form 1040NR, line 42. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a, or the total of Form 990-T, lines 36 and 37 .....			
Caution: If you are completing line 20 for separate category e (lump-sum distributions), see instructions.			
21 Multiply line 20 by line 19 (maximum amount of credit) .....	21		
22 Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 27 and enter this amount on line 28. Otherwise, complete the appropriate line in Part IV (see instructions) .....			
► 22			

**Part IV Summary of Credits From Separate Parts III (see instructions)**

23 Credit for taxes on passive category income .....	23		
24 Credit for taxes on general category income .....	24		
25 Credit for taxes on certain income re-sourced by treaty .....	25		
26 Credit for taxes on lump-sum distributions .....	26		
27 Add lines 23 through 26 .....		27	
28 Enter the smaller of line 20 or line 27 .....		28	
29 Reduction of credit for international boycott operations. See instructions for line 12 .....		29	
30 Subtract line 29 from line 28. This is your foreign tax credit. Enter here and on Form 1040, line 47; Form 1040NR, line 45; Form 1041, Schedule G, line 2a; or Form 990-T, line 40a .....		30	0

**Paid Preparer's Earned Income Credit Checklist**

- For more information about Form 8867, see [www.irs.gov/form8867](http://www.irs.gov/form8867)
- To be completed by preparer and filed with Form 1040, 1040A, or 1040EZ.

Taxpayer name(s) shown on return

**PETER P BUTTIGIEG**

Taxpayer's social security number

For the definitions of the following terms, see Pub. 596.

- Investment Income     Qualifying Child     Earned Income     Full-time Student

**Part I All Taxpayers**

- 1 Enter preparer's name and PTIN ► [REDACTED] [REDACTED]
- 2 Is the taxpayer's filing status married filing separately?
  - If you checked "Yes" on line 2, stop; the taxpayer cannot take the EIC. Otherwise, continue.
- 3 Does the taxpayer (and the taxpayer's spouse if filing jointly) have a social security number (SSN) that allows him or her to work or is valid for EIC purposes? See the instructions before answering
  - If you checked "No" on line 3, stop; the taxpayer cannot take the EIC. Otherwise, continue.
- 4 Is the taxpayer filing Form 2555 or Form 2555-EZ (relating to the exclusion of foreign earned income)?
  - If you checked "Yes" on line 4, stop; the taxpayer cannot take the EIC. Otherwise, continue.
- 5a Was the taxpayer a nonresident alien for any part of 2011?
  - If you checked "Yes" on line 5a, go to line 5b. Otherwise, skip line 5b and go to line 6.
- b Is the taxpayer's filing status married filing jointly?
  - If you checked "Yes" on line 5a and "No" on line 5b, stop; the taxpayer cannot take the EIC. Otherwise, continue.
- 6 Is the taxpayer's investment income more than \$3,150? See Rule 6 in Pub. 596 before answering
  - If you checked "Yes" on line 6, stop; the taxpayer cannot take the EIC. Otherwise, continue.
- 7 Could the taxpayer, or the taxpayer's spouse if filing jointly, be a qualifying child of another person for 2011? If the taxpayer's filing status is married filing jointly, check "No." Otherwise, see Rule 10 (Rule 13 if the taxpayer does not have a qualifying child) in Pub. 596 before answering
  - If you checked "Yes" on line 7, stop; the taxpayer cannot take the EIC. Otherwise, go to Part II or Part III, whichever applies.

For Paperwork Reduction Act Notice, see page 4.

Form 8867 (2011)

**Part III Taxpayers Without a Qualifying Child**

- 16 Was the taxpayer's main home, and the main home of the taxpayer's spouse if filing jointly, in the United States for more than half the year? (Military personnel on extended active duty outside the United States are considered to be living in the United States during that duty period. See Pub. 596.)

Yes  No

► If you checked "No" on line 16, stop; the taxpayer cannot take the EIC. Otherwise, continue.

- 17 Was the taxpayer, or the taxpayer's spouse if filing jointly, at least age 25 but under age 65 at the end of 2011?

Yes  No

► If you checked "No" on line 17, stop; the taxpayer cannot take the EIC. Otherwise, continue.

- 18 Is the taxpayer, or the taxpayer's spouse if filing jointly, eligible to be claimed as a dependent on anyone else's federal income tax return for 2011? If the taxpayer's filing status is married filing jointly, check "No".

Yes  No

► If you checked "Yes" on line 18, stop; the taxpayer cannot take the EIC. Otherwise, continue.

- 19 Are the taxpayer's earned income and adjusted gross income each less than the limit that applies to the taxpayer for 2011? See Pub. 596 for the limit.

Yes  No

► If you checked "No" on line 19, stop; the taxpayer cannot take the EIC. If you checked "Yes" on line 19, the taxpayer can take the EIC. If the taxpayer's EIC was reduced or disallowed for a year after 1996, see Pub. 596 to find out if Form 8862 must be filed. Go to line 20.

**Part IV Due Diligence Requirements**

- 20 Did you complete Form 8867 based on current information provided by the taxpayer or reasonably obtained by you?

Yes  No

- 21 Did you complete the EIC worksheet found in the Form 1040, 1040A, or 1040EZ instructions (or your own worksheet that provides the same information as the 1040, 1040A, or 1040EZ worksheet)?

Yes  No

- 22 Did you comply with the knowledge requirements? (To comply with the knowledge requirements, you must not know or have reason to know that any information used to determine the taxpayer's eligibility for, and the amount of, the EIC is incorrect. You may not ignore the implications of information furnished to or known by you, and you must make reasonable inquiries if the information furnished appears to be incorrect, inconsistent, or incomplete. At the time you make these inquiries, you must document in your files the inquiries you made and the responses you received.)

Yes  No

- 23 Did you keep the following records?

- Form 8867,
- The EIC worksheet(s) or your own worksheet(s),
- A record of how, when, and from whom the information used to prepare the form and worksheet(s) was obtained, and
- Copies of any documents provided by the taxpayer and on which you relied to complete the form and the worksheet.

Yes  No

► If you checked "Yes" on lines 20, 21, 22, and 23, submit Form 8867 in the manner required, and keep the records described on line 23 for 3 years (see instructions), you have complied with all the due diligence requirements.

► If you checked "No" on line 20, 21, 22, or 23, you have not complied with all the due diligence requirements and may have to pay a \$500 penalty for each failure to comply.

**2011**

**Indiana Full-Year Resident  
Individual Income Tax Return**

Due April 17, 2012

If filing for a fiscal year, enter the dates (see instructions) (MM/DD/YYYY):

from

to:

Your Social  
Security Number

Spouse's Social  
Security Number

Your first name

Place "X" in box if applying for ITIN

Initial      Last name

Place "X" in box if applying for ITIN

Suffix

**PETER**

**P**

**BUTTIGIEG**

If filing a joint return, spouse's first name

Initial

Last name

Suffix

Present address (number and street or rural route)

City

State

Place "X" in box if you are  
married filing separately.

Zip/Postal code

**SOUTH BEND**

**IN**

**46611**

Foreign country 2-character code (see pg. 6)

School corporation number (see pages 55 and 56)

**7205**

Enter below the 2-digit county code numbers (found on the back of Schedule CT-40) for the county where you lived and worked on January 1, 2011.

County where you lived	71	County where you worked	71	County where spouse lived	County where spouse worked
---------------------------	----	----------------------------	----	------------------------------	-------------------------------

**Round all entries**

- |     |   |                         |    |          |
|-----|---|-------------------------|----|----------|
| 1.  | Enter your federal adjusted gross income (AGI) from your federal tax return (from Form 1040, line 37; Form 1040A, line 21; or from Form 1040EZ, line 4) | Federal AGI             | 1  | 7115.00  |
| 2.  | Enter amount from Schedule 1, line 8; and enclose Schedule 1  | Indiana Add-Backs       | 2  | .00      |
| 3.  | Add line 1 and line 2   |                         | 3  | 7115.00  |
| 4.  | Enter amount from Schedule 2, line 12; and enclose Schedule 2   | Indiana Deductions      | 4  | 7172.00  |
| 5.  | Subtract line 4 from line 3   | Indiana Adjusted Income | 5  | -57.00   |
| 6.  | You must complete Schedule 3. Enter amount from Schedule 3, line 5; and enclose Schedule 3  | Indiana Exemptions      | 6  | 1000.00  |
| 7.  | Subtract line 6 from line 5   | State Taxable Income    | 7  | -1057.00 |
| 8.  | State adjusted gross income tax: multiply line 7 by 3.4% (.034)<br>(if answer is less than zero, leave blank)   |                         | 8  | .00      |
| 9.  | County tax. Enter county tax due from Schedule CT-40<br>(if answer is less than zero, leave blank)  |                         | 9  | .00      |
| 10. | Other taxes. Enter amount from Schedule 4, line 5 (enclose sch.)  |                         | 10 | .00      |
| 11. | Add lines 8, 9 and 10. Enter total here and on line 15 on the back  | Indiana Taxes           | 11 | 0.00     |

12. Enter credits from Schedule 5, line 9 (enclose schedule)	12	232 .00
13. Enter offset credits from Schedule 6, line 7 (enclose schedule)	13	.00
14. Add lines 12 and 13	Indiana Credits	14 232 .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 14 (if smaller, skip to line 23)	16	232 .00
17. Amount from line 16 to be donated to the Indiana Nongame Wildlife Fund	17	.00
18. Subtract line 17 from line 16	Overpayment	18 232 .00
19. Amount from line 18 to be applied to your 2012 estimated tax account (see instructions on page 10).		
Enter your county code	county tax to be applied \$	a .00
Spouse's county code	county tax to be applied \$	b .00
Indiana adjusted gross income tax to be applied	\$	c .00
Total to be applied to your estimated tax account (a + b + c; cannot be more than line 18)	19d	.00
20. Penalty for underpayment of estimated tax from Schedule IT-2210 or IT-2210A (enclose sch.)	20	.00
21. Refund: Line 18 minus lines 19d and 20. Note: If less than zero, see line 23	Your Refund	21 232 .00
22. Direct Deposit (see page 11)		
a. Routing Number	[REDACTED]	
b. Account Number	[REDACTED]	
c. Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Hoosier Works MC		
d. Place an "X" in the box if refund will go to an account outside the United States.	<input type="checkbox"/>	
23. If line 15 is more than line 14, subtract line 14 from line 15. Add to this any amount on line 20 (see instructions on page 11)	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	Amount You Owe	26 .00
Do not send cash. Please make your check or money order payable to: Indiana Department of Revenue. Credit card payers must see instructions.		

Sign and date this return after reading the Authorization statement on Schedule 7: You must enclose Schedule 7.

Your Signature	Date	Spouse's Signature	Date
----------------	------	--------------------	------

- If enclosing payment mail to: Indiana Department of Revenue, P.O. Box 7224, Indianapolis, IN 46207-7224.
- Mail all other returns to: Indiana Department of Revenue, P.O. Box 40, Indianapolis, IN 46206-0040.

Name(s) shown on Form IT-40

Your Social Security Number  
[REDACTED]

**PETER P BUTTIGIEG**

**1. Renter's deduction**

Address where rented if different from the one on the front page (enter below)

Landlord's name and address (enter below)	Amount of rent paid
	\$ .00

**Round all entries**

Number of months rented	Enter the lesser of \$3,000 or amount of rent paid	1	.00
-------------------------	--	---	-----

**2. Homeowner's residential property tax deduction**

Address where property tax was paid if different from front page (enter below)

**SAME**

Number of months lived there	12	Amount of property tax paid	\$ 2142.00
Enter the lesser of \$2,500 or the amount of property tax paid		2	2142.00
3. State tax refund reported on federal return		3	30.00
4. Interest on U.S. government obligations		4	.00
5. Taxable Social Security benefits		5	.00
6. Taxable railroad retirement benefits		6	.00
7. Military service deduction: \$5,000 maximum for qualifying person		7	5000.00
8. Non-Indiana locality earnings deduction: \$2,000 maximum per qualifying person		8	.00
9. Insulation deduction: \$1,000 maximum		9	.00
10. Nontaxable portion of unemployment compensation (from line 7 of Unemployment Comp. Worksheet)		10	.00
11. Other Deductions: See instructions (attach additional sheets if necessary)			
a. Enter deduction name		code no.	11a .00
b. Enter deduction name		code no.	11b .00
c. Enter deduction name		code no.	11c .00
12. Add lines 1 through 11. Enter total here and on line 4 of Form IT-40.	Total Deductions	12	7172.00

Name(s) shown on Form IT-40

Your Social Security Number  
[REDACTED]

**PETER P. BUTTIGIEG**

Round all entries

1. Number of exemptions claimed on your federal return    **1**    x \$1,000 \_\_\_\_\_    **1**    **1000 .00**  
• If you did not claim an exemption on your federal return, enter "1" in the box above.  
• See instructions on page 24 if you did not file a federal return.

2. Claim an additional exemption for each dependent child:  
• who is a son, stepson, daughter, stepdaughter and/or foster child,  
• who was under the age of 19 by Dec. 31, 2011, or a full-time student  
• who was under the age of 24 by Dec. 31, 2011, and  
• who you are eligible to claim as a dependent on your federal tax return.

Enter number you are eligible to claim    **x \$1500**: you **MUST** enclose Schedule IN-DEP    **2**    **.00**

3. Place "X" in box(es) below if, by December 31, 2011

You were age 65 or older    and/or blind

Spouse was 65 or older    and/or blind

Total number of boxes with Xs    **x \$1000** \_\_\_\_\_    **.3**    **.00**

4. If age 65 or older, enter amount from Form IT-40, line 1 \$  
If this amount is less than \$40,000, place "X" in box(es) below if:

You were age 65 or older

Spouse was 65 or older

Total number of boxes with Xs    **x \$500** \_\_\_\_\_    **4**    **.00**

5. Add lines 1, 2, 3 and 4. Enter here and on Form IT-40, line 6.      **Total Exemptions**    **5**    **1000 .00**

**Schedule 4: Other Taxes**

Instructions begin on page 25.

1. Use tax on out-of-state purchases from line 4 of Sales/Use Tax Worksheet \_\_\_\_\_    **1**    **.00**  
2. Household employment taxes. Enclose Schedule IN-H \_\_\_\_\_    **2**    **.00**  
3. Indiana advance earned income credit payments from W-2s \_\_\_\_\_    **3**    **.00**  
4. Recapture of Indiana's CollegeChoice 529 credit. Enclose Schedule IN-529R \_\_\_\_\_    **4**    **.00**  
5. Add lines 1 through 4. Enter here and on Form IT-40, line 10.      **Total Other Taxes**    **5**    **0 .00**

Name(s) shown on Form IT-40

**PETER P BUTTIGIEG**

Your Social Security Number  


Round all entries

1. Indiana state tax withheld: enclose W-2s, 1099s showing state tax withholding amounts _____	1	190 .00
2. Indiana county tax withheld: enclose W-2s, 1099s showing county tax withholding amounts _____	2	.00
3. Estimated tax paid for 2011: include any extension payment made with Form IT-9 _____	3	.00
4. Unified tax credit for the elderly _____	4	.00
5. Earned income credit: enclose Schedule IN-EIC and enter amount from line A-3 _____	5	42 .00
6. Lake County residential income tax credit _____	6	.00
7. Economic development for a growing economy credit _____	7	.00
8. Media production expenditure credit _____	8	.00
9. Add lines 1 through 8. Enter total here and on Form IT-40, line 12 _____ Total Credits	9	232 .00

Name(s) shown on Form IT-40:

Your Social Security Number:

PETER P BUTTIGIEG

**1. Federal filing information**

Are you filing a federal income tax return for 2011? Place "X" in appropriate box. Yes  No

**2. Out-of-state income** Complete if you and/or your spouse (if filing a joint return) received any salary, wage, tip and/or commission income from Illinois, Kentucky, Michigan, Ohio, Pennsylvania or Wisconsin. Enter two-digit code number from the back of Schedule CT-40 for state where you and/or your spouse worked.

State where you worked	Your income	State where spouse worked	Spouse's income
	\$ .00		\$ .00

**3. Extension of time to file**

- Place "X" in box if you have filed a federal extension of time to file, Form 4868.
- Place "X" in box if you have filed an Indiana extension of time to file, Form IT-9, or online via ePay.

**4. Farm / Fishing income**

Place "X" in box if at least two-thirds of your gross income was made from farming or fishing.

Important: If you placed an "X" in the box, you MUST attach Schedule IT-2210.

**5. Date of death**

If any individual listed at the top of the IT-40 died during 2011, enter date of death (MM/DD) (see instructions on page 50).

Taxpayer's date of death	2011	Spouse's date of death	2011
--------------------------	------	------------------------	------

**Authorization Sign Form IT-40 after reading the following statement.**

Under penalty of perjury, I have examined this return and all attachments and to the best of my knowledge and belief, it is true, complete and correct. I understand that if this is a joint return, any refund will be made payable to us jointly and each of us is liable for all taxes due under this return. Also, my request for direct deposit of my refund includes my authorization to the Indiana Department of Revenue to furnish my financial institution with my routing number, account number, account type and Social Security number to ensure my refund is properly deposited. I give permission to the Department to contact the Social Security Administration to confirm that the Social Security number(s) used on this return is correct.

**6. Your daytime telephone number**

Your e-mail address

I authorize the Department to discuss my return with my personal representative (see page 50).

Paid Preparer: Firm's Name (or yours if self-employed)

Yes  No  If yes, complete the information below.

Personal Representative's Name (please print)

IN-OPT on file with paid preparer if not filing electronically

Federal I.D. Number  PTIN OR  Social Security No.

Telephone number

Address

City SOUTH BEND

City SOUTH BEND

State IN

State IN

Zip Code 4661

Zip Code 4661

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

Your Social Security Number

**PETER P BUTTIGIEG**

**Section A: Figure Your Indiana Earned Income Credit**

- |   |                              |                |
|---|------------------------------|----------------|
| A-1 Enter the earned income credit from your federal income tax return Form 1040 line 64a,<br>Form 1040A line 38a, or Form 1040EZ line 8a _____                             | A-1                          | <b>464.00</b>  |
| A-2 Enter your earned income (see instructions) _____   | A-2                          | <b>6129.00</b> |
| A-3 Enter your Indiana earned income credit (see instructions).<br>Carry this total to Form IT-40, Schedule 5, line 5, or<br>Form IT-40PNR, Schedule F, line 5, Box A _____ | Indiana Earned Income Credit | <b>42.00</b>   |

**Section B: Complete if you claimed one or more children on your federal Schedule EIC. See Instructions.**

Enter each child's information

**Child 1**

**Child 2**

First name  
Last name

First name  
Last name

Child's Social Security Number(s)

Enter letter (e.g. A, B, C, etc.) in boxes below that describes each child's relationship, age and location to you.

**Child 1**

**Child 2**

**B-1 Relationship:**

- A** Your Child
- B** Grandchild
- C** Stepchild
- D** Foster Child (not related)
- E** Other (related foster child, or other related child - see instructions)

**B-2 Age:**

- A** Under age 18
- B** Age 18
- C** Age 19 - 24 and full-time student
- D** Age 19 or older and totally disabled

**B-3 Location:**

- A** Child lived with you at least  $\frac{1}{2}$  of the year
- B** Child was born or died in 2011, and lived with you while alive in 2011.

**Important:** You must complete and attach this schedule to your Form IT-40 or IT-40PNR when claiming the earned income credit.

Name:

PETER P BUTTIGIEG

Taxpayer Identification Number  
[REDACTED]

State or Foreign Country \_\_\_\_\_

**Credit for Tax Paid to State with Regular Agreement**

Credit for tax paid to other states (other than AZ, CA, DC, or OR) or foreign country attributable to Indiana residency period

1. Tax paid to other state (or foreign country) on source income of other state (or foreign country) received during Indiana residency period .....
  2. Source income from other state (or foreign country) received during Indiana residency period (subject to Indiana tax) .....
  3. Multiply line 2 by 3.4% (.034) .....
  4. Tentative credit for taxes paid to other state (or foreign country). Lesser of line 1 or line 3 .....
1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_

**Credit for Tax Paid to State with Reverse Agreement**

Credit for tax paid on Indiana nonresident income taxable to Arizona, California, District of Columbia, or Oregon residency period

- A. Tax paid to other state on income attributable to residency period of other state .....
  - B. Other state equivalent of Indiana adjusted gross income received during residency period of other state .....
  - C. Indiana source income (subject to tax) attributable to residency period of other state .....
  - D. Proportion of other state income received during residency period of other state attributable to Indiana sources.  
Divide line C by line B. ....
  - E. Portion of tax paid to other state on income received during other state residency period attributable to Indiana sources.  
Multiply line A by line D. ....
  - F. Indiana state income tax attributable to Indiana source income received during residency period of other state .....
  - G. Tentative credit for taxes paid to other state. Lesser of line E or line F. ....
- A. \_\_\_\_\_  
B. \_\_\_\_\_  
C. \_\_\_\_\_  
D. \_\_\_\_\_  
E. \_\_\_\_\_  
F. \_\_\_\_\_  
G. \_\_\_\_\_

**Summary**

Total Credit for Taxes Paid to Other States or Foreign Countries

- i. Sum of tentative credits for taxes paid to other states and foreign countries from line 4 and line G .....
  - ii. Sum of tentative credits for taxes paid to foreign countries from Indiana Foreign Tax Credit Worksheet, line D1 .....
  - iii. Total tentative credits for taxes paid to other states and foreign countries. Add line i and line ii. ....
  - iv. State adjusted gross income tax from Form IT-40, Line 8 or Form IT-40PNR, Line 8 .....
  - v. Credit from Schedule CC-40 .....
  - vi. Tentative net adjusted gross income tax. Subtract line v from line iv. ....
  - vii. Total credit. Lesser of line iii or line vi. Enter on Schedule 6, Line 5 or Schedule G, Line 5. ....
- i. \_\_\_\_\_ 13  
ii. \_\_\_\_\_ 13  
iii. \_\_\_\_\_  
iv. \_\_\_\_\_  
v. \_\_\_\_\_  
vi. \_\_\_\_\_  
vii. \_\_\_\_\_

Name

PETER P BUTTIGIEGTaxpayer Identification Number  
Foreign Country VARIOUS

- |   |                |
|---|----------------|
| A1. Tax paid to foreign country on foreign income received during Indiana residency period .....        | A1. <u>13</u>  |
| A2. Income from foreign country received during Indiana residency period (subject to Indiana tax) ..... | A2. <u>913</u> |
| A3. Multiply line A2 by 3.4% (.034) .....   | A3. <u>31</u>  |
| A4. Tentative credit for tax paid to foreign country. Lesser of line A1 or line A3 .....                | A4. <u>13</u>  |

## Foreign Country \_\_\_\_\_

- |   |           |
|---|-----------|
| B1. Tax paid to foreign country on foreign income received during Indiana residency period .....        | B1. _____ |
| B2. Income from foreign country received during Indiana residency period (subject to Indiana tax) ..... | B2. _____ |
| B3. Multiply line B2 by 3.4% (.034) .....   | B3. _____ |
| B4. Tentative credit for tax paid to foreign country. Lesser of line B1 or line B3 .....                | B4. _____ |

## Foreign Country \_\_\_\_\_

- |   |           |
|---|-----------|
| C1. Tax paid to foreign country on foreign income received during Indiana residency period .....        | C1. _____ |
| C2. Income from foreign country received during Indiana residency period (subject to Indiana tax) ..... | C2. _____ |
| C3. Multiply line C2 by 3.4% (.034) .....   | C3. _____ |
| C4. Tentative credit for tax paid to foreign country. Lesser of line C1 or line C3 .....                | C4. _____ |

- D1. Total tentative credit for taxes paid to foreign countries. Sum of the tentative credits for taxes paid to foreign countries from lines A4, B4, and C4. Report on Indiana Other State Credit Worksheet, line ii.
- |           |    |
|-----------|----|
| D1. _____ | 13 |
|-----------|----|