

Schedule IN-DEP-A:  
Adopted Dependent Information

2022

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

Your Social Security Number

Adopted Dependent's First Name

Adopted Dependent's Last Name

1A.

1B.

Adopted Dependent's Social Security Number Adopted Dependent's Date of Birth (mm dd yyyy)

1C.

1D.

1E. Place "X" in box if the first listed taxpayer is an adoptive parent of the child \_\_\_\_\_ 1E

1F. Place "X" in box if the spouse is an adoptive parent of the child \_\_\_\_\_ 1F

Adopted Dependent's First Name

Adopted Dependent's Last Name

2A.

2B.

Adopted Dependent's Social Security Number Adopted Dependent's Date of Birth (mm dd yyyy)

2C.

2D.

2E. Place "X" in box if the first listed taxpayer is an adoptive parent of the child \_\_\_\_\_ 2E

2F. Place "X" in box if the spouse is an adoptive parent of the child \_\_\_\_\_ 2F

Adopted Dependent's First Name

Adopted Dependent's Last Name

3A.

3B.

Adopted Dependent's Social Security Number Adopted Dependent's Date of Birth (mm dd yyyy)

3C.

3D.

3E. Place "X" in box if the first listed taxpayer is an adoptive parent of the child \_\_\_\_\_ 3E

3F. Place "X" in box if the spouse is an adoptive parent of the child \_\_\_\_\_ 3F

Adopted Dependent's First Name

Adopted Dependent's Last Name

4A.

4B.

Adopted Dependent's Social Security Number Adopted Dependent's Date of Birth (mm dd yyyy)

4C.

4D.

4E. Place "X" in box if the first listed taxpayer is an adoptive parent of the child \_\_\_\_\_ 4E

4F. Place "X" in box if the spouse is an adoptive parent of the child \_\_\_\_\_ 4F

Adopted Dependent's First Name

Adopted Dependent's Last Name

5A.

5B.

Adopted Dependent's Social Security Number Adopted Dependent's Date of Birth (mm dd yyyy)

5C.

5D.

5E. Place "X" in box if the first listed taxpayer is an adoptive parent of the child \_\_\_\_\_ 5E

5F. Place "X" in box if the spouse is an adoptive parent of the child \_\_\_\_\_ 5F

6. Add the number of adopted dependents list above (see instructions). Enter the total here and the box on line 6 of Schedule 3 (if filing Form IT-40) or Schedule D (if filing form IT-40PNR) ..... **Box 6**

