

AMENDED RETURN, check the box. ☐
See instructions, page 12 for the reasons
for amending and enter the number. ☐

State Use Only

Your Social Security Number (required)

For calendar year 2011, or fiscal year beginning _____, ending _____

PLEASE PRINT OR
TYPE

Your first name and initial

Last name

Spouse's first name and initial

Last name

Mailing address

City, State, and Zip Code

Spouse's Social Security Number (required)

☐ Taxpayer deceased
in 2011
☐ Spouse deceased
in 2011

Do you need Idaho
income tax forms
mailed to you next year?

☐ Yes ☐ No

If you or your spouse are nonresident aliens for federal purposes, check here. ☐

Residency status

Check one for yourself and one for
your spouse if a joint return.

Resident
Yourself
Spouse

1 ☐
2 ☐

Idaho Resident on Active Military Duty

3 ☐
4 ☐

Nonresident

5 ☐
6 ☐

Part-Year Resident

7 ☐
8 ☐

Military Nonresident

9 ☐
10 ☐

Full months in Idaho this year ☐ Yourself ☐ Spouse ☐ Indicate current state of residence. ☐ Yourself ☐ Spouse ☐

FILING STATUS. Check only one box.

If filing married joint or separate return, enter
spouse's name and Social Security Number above.

1. ☐ Single
2. ☐ Married filing joint return
3. ☐ Married filing separate return
4. ☐ Head of household
5. ☐ Qualifying widow(er)

Must match federal return.

6. EXEMPTIONS.

If someone can claim you as a
dependent, leave box 6a blank.

Enter "1" in boxes 6a,
and 6b, if they apply.

Yourself a. ☐
Spouse b. ☐

c. List your dependents. If more than four dependents, continue on Form 39NR.
Enter the total number here _____ c. ☐

First name	Last name	Social Security Number

d. Total exemptions. Add lines 6a through 6c. Must match federal return d. ☐

IDAHO INCOME. See instructions, page 13.

	Idaho Amounts
7. Wages, salaries, tips, etc. Include Form(s) W-2	7 00
8. Taxable interest income	8 00
9. Dividend income	9 00
10. Alimony received	10 00
11. Business income or (loss). Include federal Schedule C or C-EZ	11 00
12. Capital gain or (loss). If required, include federal Schedule D	12 00
13. Other gains or (losses). Include federal Form 4797	13 00
14. IRA distributions (taxable amount)	14 00
15. Pensions and annuities (taxable amount)	15 00
16. Rents, royalties, partnerships, S corporations, trusts, etc. Include federal Schedule E	16 00
17. Farm income or (loss). Include federal Schedule F	17 00
18. Unemployment compensation	18 00
19. Other income. Include explanation	19 00
20. TOTAL INCOME. Add lines 7 through 19	20 00

IDAHO ADJUSTMENTS. See instructions, page 13.

21. Deductions for IRAs, health savings accounts, and IRC 501(c)(18)(D) retirement plan	21 00
22. Tuition and fees, moving expenses, alimony paid, and student loan interest	22 00
23. Deductions for self-employment tax, health insurance, and qualified retirement plans	23 00
24. Penalty on early withdrawal of savings	24 00
25. Other deductions. See instructions	25 00
26. TOTAL ADJUSTMENTS. Add lines 21 through 25	26 00
27. ADJUSTED GROSS INCOME. Subtract line 26 from line 20	27 00

If you have an NOL and are electing to forego the carryback period, check here ☐

☐ Within 180 days of receiving this return, the Idaho State Tax Commission may discuss this return with the paid preparer identified below.
☐ Under penalties of perjury, I declare that to the best of my knowledge and belief this return is true, correct and complete. See instructions.

SIGN HERE	Your signature	Date
	Spouse's signature (if a joint return, BOTH MUST SIGN)	Daytime phone
	Paid preparer's signature	Preparer's EIN, SSN, or PTIN
	Address and phone number	

MAIL TO: Idaho State Tax Commission, PO Box 56, Boise, ID 83756-0056

INCLUDE A COMPLETE COPY
OF YOUR FEDERAL RETURN.



1 1 7 0 9 5

		Column A - Total		Column B - Idaho	
28. Enter amount from federal Form 1040, line 37, 1040A, line 21, or 1040EZ, line 4 in Column A. Enter amount from line 27 in Column B		28	00	00	00
29. Additions from Form 39NR, Part A, line 5. Include Form 39NR		29	00	00	00
30. Subtractions from Form 39NR, Part B, line 26. Include Form 39NR		30	00	00	00
31. TOTAL ADJUSTED INCOME. Add lines 28 and 29, less line 30		31	00	.	00

Standard Deduction For Most People Single or Married filing Separately: \$5,800 Head of Household: \$8,500 Married filing Jointly or Qualifying Widow(er): \$11,600	32. a. Check if age 65 or older <input type="checkbox"/> Yourself <input type="checkbox"/> Spouse b. Check if blind <input type="checkbox"/> Yourself <input type="checkbox"/> Spouse c. If your parent or someone else can claim you as a dependent, check here and enter zero on lines 37 and 61 <input type="checkbox"/>					
	33. Itemized deductions. Include federal Schedule A		33		00	
	34. All state and local income or general sales taxes included on federal Schedule A, line 5		34		00	
	35. Subtract line 34 from line 33		35		00	
	36. Standard deduction. See instructions page 14 to determine standard deduction amount if different than the Standard Deduction For Most People		36		00	
	37. Multiply \$3,700 by the number of exemptions claimed on line 6d		37		00	
	38. Add line 37 and the LARGER of line 35 or line 36		38		00	
	39. Idaho percentage. Divide line 31, Column B, by line 31, Column A		39		%	
	40. Multiply amount on line 38 by the percentage on line 39 and enter the result here		40		00	
	41. Idaho taxable income. Subtract line 40 from line 31, Column B		41		00	
42. TAX from tables or rate schedule. See instructions, page 36		42		00		
43. Income tax paid to other states. Include Form 39NR and other states returns		43		00		
44. Total credits from Form 39NR, Part E, line 4. Include Form 39NR		44		00		
45. Total business income tax credits from Form 44, Part I, line 11. Include Form 44		45		00		
46. Line 42 minus lines 43 through 45. If less than zero, enter zero		46		00		

OTHER TAXES	47. Fuels tax due. Include Form 75	47		00	
	48. Sales/Use tax due on Internet, mail order, and other nontaxed purchases	48		00	
	49. Total tax from recapture of income tax credits from Form 44, Part II, line 7. Include Form 44	49		00	
	50. Tax from recapture of qualified investment exemption (QIE). Include Form 49ER	50		00	
	51. Permanent building fund. Check the box if you are receiving Idaho public assistance payments <input type="checkbox"/>	51		10	00
	52. TOTAL TAX. Add lines 46 through 51	52		00	

DONATIONS	I wish to donate to:		53. Opportunity Scholarship Program		
	54. Idaho Guard and Reserve Family		55. Idaho Children's Trust Fund		
	56. Special Olympics Idaho		57. Nongame Wildlife Conservation		
	58. American Red Cross of Greater Idaho		59. Idaho Foodbank		
	60. TOTAL TAX PLUS DONATIONS. Add lines 52 through 59		60		00

PAYMENTS	61. Grocery credit. See instructions, page 16. Computed Amount (from worksheet)		61		00
	To donate your grocery credit to the Cooperative Welfare Fund, check the box and enter zero on line 61 <input type="checkbox"/>				
	To receive your grocery credit, enter the computed amount on line 61				
	62. Maintaining a home for family member age 65 or older, or developmentally disabled. Include Form 39NR		62		00
	63. Special fuels tax refund Gasoline tax refund Include Form 75		63		00
	64. Idaho income tax withheld. Include Form(s) W-2 and any 1099(s) that show Idaho withholding		64		00
	65. 2011 Form 51 payment(s) and amount applied from 2010 return		65		00
	66. Pass-through income tax withheld. Include Form(s) ID K-1		66		00
67. Hire One Act credit for new employees. Include Form 72		67		00	
68. TOTAL PAYMENTS AND OTHER CREDITS. Add lines 61 through 67		68		00	

TAX DUE	69. TAX DUE. Subtract line 68 from line 60		70		00
	70. Penalty Interest from the due date Enter total.				
	Check box if penalty is due to an ineligible withdrawal from an Idaho medical savings account <input type="checkbox"/>		70		00
71. TOTAL DUE. Add lines 69 and 70. Make check or money order payable to the Idaho State Tax Commission		71		00	

REFUND	72. OVERPAID. Line 68 minus lines 60 and 70		72		00
	73. REFUND. Amount of line 72 to be refunded to you		74		00
	74. ESTIMATED TAX. Amount of line 72 to be applied to your 2012 estimated tax		74		00

75. DIRECT DEPOSIT. See instructions, page 18. <input type="checkbox"/> Check if final deposit destination is outside of the U.S.		Type of <input type="checkbox"/> Checking
Routing No. <input type="text"/>	Account No. <input type="text"/>	Account: <input type="checkbox"/> Savings

AMENDED	76. Total due (line 71) or overpaid (line 72)	76		00
	77. Refund from original return plus additional refunds	77		00
	78. Tax paid with original return plus additional tax paid	78		00
	79. Amended tax due or refund. Add lines 76 and 77, less line 78	79		00



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