0.0.					
)					

ı	AMENDED RETURN, check the box. See instructions, page 12 for the reasons	State Use Only					
	for amending and enter the number.			Vour Social	I Security Number (required)		
For	calendar year 2012, or fiscal year beginning	, e	ending	Tour Social	Security Number (required)		
OR	Your first name and initial L	ast name					
	Spouse's first name and initial L	ast name		Spouse's S	Social Security Number (required)		
PRII PE							
PLEASE PRINT TYPE	Mailing address				. Do you need Idaho		
EAS	City, State, and Zip Code			Taxpayer deceased income tax forms			
Ы				Spouse decease	mailed to you next year?		
If yo	u or your spouse are nonresident aliens for federal	purposes, check	here.	in 2012	■ Yes ■ No		
	dency status Resident	t Idaho Resider	nt on Active Military Duty N	Ionresident Part-Year F	, , ,		
	k one for yourself and one for Yourself 1 • Spouse	2		3 <b>:</b>	5 📙		
_	. ,	Spouse	Indicate current state of	f residence. • Your	self spouse		
	NG STATUS. Check only one box.	<u> </u>		Today			
	ng married joint or separate return, enter	6. EXEMPTION	ii someone can ciaim yo		=		
spo	use's name and Social Security Number above.		dependent, leave box 6	a blank. and 6b, if the	ey apply. Spouse b.		
	1. Single		pendents. If more than fo				
	Married filing joint return		tal number here				
	Z. Married filling joint return	First name	La	st name	Social Security Number		
	Married filing separate return						
	4. Head of household						
	5. Qualifying widow(er)						
	Must match federal return.	d. Total exemp	otions. Add lines 6a through	gh 6c. Must match fed	leral return d.		
IDA	HO 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		
	Dividend income				9 00		
	Alimony received				10 00		
	Business income or (loss). Include federal Schedu			<u> </u>	11 <b>00</b> 12 <b>00</b>		
	Capital gain or (loss). If required, include federal S Other gains or (losses). Include federal Form 4797				13 00		
	IRA distributions (taxable amount)			-	14 00		
	Pensions and annuities (taxable amount)			<u> </u>	15 00		
	Rents, royalties, partnerships, S corporations, trust				16 00		
17.	Farm income or (loss). Include federal Schedule F	·			17 00		
18.	Unemployment compensation			······	18 00		
	Other income. Include explanation			_	19 00		
	TOTAL INCOME. Add lines 7 through 19				20 00		
	HO ADJUSTMENTS. See instructions, page 13.	LIDO 504/-\/40\/D	N == (*=================================		04		
	Deductions for IRAs, health savings accounts, and	. , . , ,		-	21 00		
	Moving expenses, alimony paid, and student loan in Deductions for self-employment tax, health insurant tax, health			<b> </b>	22 <b>00</b> 23 <b>00</b>		
	Penalty on early withdrawal of savings		_	24 00			
	Other deductions. See instructions	_	25 00				
26.	TOTAL ADJUSTMENTS. Add lines 21 through 25		26 00				
27.	ADJUSTED GROSS INCOME. Subtract line 26 from						
If you have an NOL and are electing to forgo the carryback period, check here							
•	Within 180 days of receiving this return, the Idaho State Under penalties of perjury, I declare that to the best of n						
	Your signature	Date		·	Box 56, Boise, ID 83756-0056		
SIGN HERE	Spouse's signature (if a joint return, BOTH MUST SIGN)	Daytime pho	INCLUDE A COMPLE	TE===			
	•		COPY OF YOUR				
Paid	rreparer's signature	reparer's EIN, SSN, or	PTIN FEDERAL RETURN.				
Addre	ss and phone number	•		<b>    </b>	1 7 0 9 5		

	_	Form 43 - 2012 EF000091p2 07-20-12 Column A - Total					Column B	- Idaho	ס		
		28.		r amount from federal Form 1040, line 37, 1040A, line 21, or 1040E				•			
				in Column A. Enter amount from line 27 in Column B		28		00			00
		l		tions from Form 39NR, Part A, line 5. Include Form 39NR		29		00			00
				ractions from Form 39NR, Part B, line 26. Include Form 39NR		30		00			00
_		31.	1017	AL ADJUSTED INCOME. Add lines 28 and 29, less line 30		31		00	•		00
	Stand	dard	32.	a. Check if age 65 or older •  Yourself •  Spouse	e b.	Check i	f blind 🛚 🗀	] Yo	ourself 🛮 🗌 S	Spouse	
	Deduc	ction		c. If your parent or someone else can claim you as a dependent,	check	here an	d enter zero on line	es 37	7 and 61 • 🗌		
	For N		33.	Itemized deductions. Include federal Schedule A				. [	33		00
	Peo	pie	34.	All state and local income taxes included on federal Schedule A,	line 5			. :	34		00
	Singl		_	Subtract line 34 from line 33					35		00
		larried filing 36. Standard deduction. See instructions page 14 to determine standard deduction amount Separately:						F			
	\$5,9			if different than the Standard Deduction For Most People				-	36		00
				Multiply \$3,800 by the number of exemptions claimed on line 6d					37		00
	Head			Add line 37 and the LARGER of line 35 or line 36					38		00
		\$8,700 39. Idaho percentage. Divide line 31, Column B, by line 31, Column A						ŀ	39	%	0
	Marriac	40. Multiply amount on line 38 by the percentage on line 39 and enter the result here							40		00
		ointly or 41. Idaho taxable income. Subtract line 40 from line 31, Column B						•	41		00
		ualifying 42. TAX from tables or rate schedule. See instructions, page 36						• [	42		00
	Widov \$11,9			Income tax paid to other states. Include Form 39NR and other s				- ⊢	43		00
	****		44.	Total credits from Form 39NR, Part E, line 4. Include Form 39NR	₹			Ŀ	44		00
			45.	Total business income tax credits from Form 44, Part I, line 12. In	nclude	Form 4	4	Ŀ	45		00
			46.	Line 42 minus lines 43 through 45. If less than zero, enter zero					46		00
	47.	Fuels	tax du	ue. Include Form 75				ŀ	47		00
XES	48.	Sales	/Use t	tax due on Internet, mail order, and other nontaxed purchases				• [	48		00
¥	49.	Total t	ax fro	om recapture of income tax credits from Form 44, Part II, line 7. Inc	clude F	orm 44		Ŀ	49		00
OTHER TAXES	50.	Tax fr	om re	capture of qualified investment exemption (QIE). Include Form 49f	ER		<u></u>	• [	50		00
Ь	51. Permanent building fund. Check the box if you are receiving Idaho public assistance payments						:	51	10	00	
	52.	TOTA	L TAX	Add lines 46 through 51				•	52		00
DONATIONS	56. 5 58. 7	Specia Ameri	al Olyı can R	d and Reserve Family	ildlife C ank	onserva	ation •		00		
	+			( PLUS DONATIONS. Add lines 52 through 59				- 1	60		00
			-	edit. See instructions, page 16. Computed Amount (from workshee	,						
	To donate your grocery credit to the Cooperative Welfare Fund, check the box and enter zero on line 61 •  To receive your grocery credit, enter the computed amount on line 61							. [	61		00
								- 1			
		62. Maintaining a home for family member age 65 or older, or developmentally disabled. Include Form 39NR							62		00
'n		63. Special fuels tax refund Include Form 75						- 1	63		00
<b>PAYMENTS</b>	64.	64. Idaho income tax withheld. Include Form(s) W-2 and any 1099(s) that show Idaho withholding						⊢	64		00
ΜX	65.	65. 2012 Form 51 payment(s) and amount applied from 2011 return							65		00
9	00	66. Pass-through income tax. Withheld Paid by entity Include Form(s) ID K-1							66		00
	67. Hire One Act credit for new employees. Include Form 72							67		00	
	68.	68. TOTAL PAYMENTS AND OTHER CREDITS. Add lines 61 through 67							68		00
	69	ТДХГ	OUF	Subtract line 68 from line 60						$\neg  $	
핑		70. Penalty • Interest from the due date • Enter total.									00
TAX DUE		Check box if penalty is due to an ineligible withdrawal from an Idaho medical savings account						Ι [.	70	=	
F		71. TOTAL DUE. Add lines 69 and 70. Make check or money order payable to the Idaho State Tax Commission					· -	70		00	
_	_							$\rightarrow$	71		00
_	72. OVERPAID. Line 68 minus lines 60 and 70						١.	72	<del></del>	00	
REFUND	73.	73. REFUND. Amount of line 72 to be refunded to you									
R											00
	74.	74. ESTIMATED TAX. Amount of line 72 to be applied to your 2013 estimated tax						. [	74		00
				EPOSIT. See instructions, page 18. • Check if final deposit					Time = # -	<u></u>	
R	outing			Account No.					Type of •	Chec	
									Account: •	Savir	ngs
AMENDED	76.	Total	due (li	ine 71) or overpaid (line 72)			00				
	77.	Refun	nd fron	n original return plus additional refunds			00	$\prod$			
	78.	Tax pa	aid wit	th original return plus additional tax paid			00	$\ \ $			
	79.	Amen	ded ta	ax due or refund. Add lines 76 and 77, less line 78 79			00			ll .	