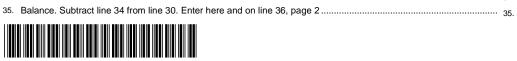
		A 1040 Iowa Individual Income Tax Retues beginning 2016 and ending	rn										
	-	n all spaces. You must fill in your Social Security Number (SSN).											
Your las	name	ne Your first name/middle initial											
Spouse's	s last n	name Spouse's first name/middle initial			•								
Current	mailing	ng address (number and street, apartment, lot, or suite number) or PO Box			-								
City, Sta	te, ZIP	IP			-								
Spouse					Email Add								
$\dot{-}$		Status: Mark one box only.	-			-	or your spo		or older a			•	
-++		le: Were you claimed as a dependent on another person's lowa return? Yes	No	▲			16: County				strict No.		
-+-		ied filing a joint return. (Two-income families may benefit by using status 3 or 4.)					en for wh ealth care						_•
3	Marrie	ied filing separately on this combined return. Spouse use column B.			How mai	ny do not	have healt	th care co	/erage?	<u> </u>			
4	Marrie	rried filing separate returns. Spouse's name: ▲SSN: Net Income: \$											
5	Head o	d of household with qualifying person. If qualifying person is not claimed as a depende	ent on this	return, ent	er the pers	on's name	and SSN be	low.					
6	Qualify	lifying Widow(er) with dependent child. Name:				SSN:							
Step 3 E	xemp	ptions		B. Spou	se (Filing S	Status 3 ON	ILY)		A. Yo	ou or Joint			
		al Credit: Col. A: Enter 1 (enter 2 if filing status 2 or 5); Col. B: Enter 1 if filing status 3	A	·		X \$ 40 =	· -		<u> </u>		X \$ 40 =	<u> </u>	
		for each taxpayer who is 65 or older and/or 1 for each taxpayer who is blind				X \$ 20 =			<u>*</u> —		X \$ 20 =	<u> </u>	
		ents: Enter 1 for each dependent	_	<u> </u>		X \$ 40 =			^		X \$ 40 =	<u> </u>	
		st names of dependents here				e. Tota					e. Tot	а ф	
Step 4 F	eporta	rtable Social Security Benefits as calculated on line 11 of Iowa social security w				se/Status 3				A. You or J			
Step 5		1. Wages calaries tips at		pouse/St		Α.	You or Joi		Spouse/	/Status 3	,	A. You or	Joint
Gross		1. Wages, salaries, tips, etc						00					
Income		2. Taxable interest income. If more than \$1,500, complete Sch. B						00					
	3.		3		00			00					
	4.	,	·· 4		00			00		N/	OTE: Use	only	
	5.	,	·· 5		00			00			olue or bla	-	
	6.	1 0 1 7	6		00			00		ir	nk, no per or red in		
	7.	9 ()	·· 7		00			00			or red in	Λ.	
	8.		8		.00			00					
	9.	•	·· 9		.00			00					
	10.		10		.00			00					
	11.							00					
	12.	- 1 1 3						00					
	13.	5 5	·13		.00			00					
	14.					-		00					
Step 6							1	5		.00			.00
Adjust- ments to Income	16.	, 5,	·16		.00			.00					
		, , ,	·17		.00								
	18. 19.		·18		00								
	20.	, ,	·19		00								
	21.		··20		00								
	22.		··21		00	^							
	23.		-22.		00	. —		00					
	24.		-23.		00								
	25.							00		00			00
	26.										-		00
Step 7 Federal Tax Addition and	27.												00
	28.		.09		.00	<u></u>		00					
		9. Addition for federal taxes. Add lines 27 and 28	<u></u>					00		00			.00
Deduc-	30.									.00			
tion	31.		21		00	<u> </u>	3			.00			.00
	32.		37.		.00	<u>^</u> —		00					
	33.		22.		.00	<u> </u>		.00					
		4. Deduction for federal taxes. Add lines 31, 32, and 33	JJ					34		.00			.00
		• •						→ T.		.00			.00



2016	IA	. 1040, page 2	B. Spo	use/Status 3	A. You or Joint	B. Spouse/Status	3	A. You or Joint		
Step 8 Taxable	36.	BALANCE. From side 1, line 35			36.		.00	.00		
Income	37.	Deduction. Check one box Itemized.(Include IA Schedule A)			37.		.00 ▲	.00		
	38.	TAXABLE INCOME. SUBTRACT line 37 from line 36			38.		.00			
Step 9 Tax,	39.	Tax from tables or alternate tax	39.	.00 🛦		00				
Credits, and	40.	lowa lump-sum tax. 25% of federal tax from form 4972	40.	.00 🛦		.00				
Check- off	41.	lowa alternative minimum tax. Include IA 6251	······41	.00 🛦		00				
orr Contribu -tions	42.				42.		.00	.00		
	43.	Total exemption credit amount(s) from Step 3, side 1	43.	.00		00				
	44.	Tuition and textbook credit for dependents K-12.				00				
	45.	Volunteer firefighter/EMS/reserve peace officer credit	·····45.	.00 🛦		00				
	46.	Total credits. ADD lines 43, 44, and 45.			46.		.00	.00		
	47.	BALANCE. SUBTRACT line 46 from line 42. If less than zero, e	nter zero		47.		.00 ▲	.00		
	48.	Credit for nonresident or part-year resident. Include IA 126 and	federal return		48.		.00 ▲	.00		
	49.	BALANCE. SUBTRACT line 48 from 47. If less than zero, enter	zero		49.		.00 🛦	.00		
	50.	Out-of-state tax credit. Include IA 130.			50.		.00 🛦	.00		
	51.	BALANCE. SUBTRACT line 50 from 49. If less than zero, enter	zero		51.		.00	.00		
	52.	Other nonrefundable Iowa credits. Include IA 148 Tax Credits S	chedule		52.		.00 🛦	.00		
	53.	BALANCE. SUBTRACT line 52 from line 51. If less than zero, e	nter zero		53.		.00 🛦	.00		
	54.	School district surtax or EMS surtax. Take percentage from table	e; multiply by line 53.		54.		.00 🛦	.00		
	55.	Total state and local tax. ADD lines 53 and 54			55.		.00 🛦	.00		
	56.	TOTAL state and local tax before contributions. Combine column						.00		
	57.	Contributions will reduce your refund or add to the amount you	owe. Amounts must b	e in whole dolla	ars.					
	Fis	sh/Wildlife 57a: ▲ State Fair 57b: ▲ Firefighters/V	eterans 57c: ▲	Child abuse P	revention 57d:	Enter here	57.	.00		
		TOTAL STATE AND LOCAL TAX, AND CONTRIBUTIONS. Add	l line 56 and line 57 a	nd enter here			58 ▲			
Step 10	59.	lowa Fuel tax credit. Include IA 4136				.00				
Credits	60.				-	00				
		▲ Early childhood development credit	60.	.00 🛦		.00				
	61.	lowa earned income tax credit. 15.0% (.15) of federal credit	61.	.00 🛦		.00				
	62.	Other refundable credits. Include IA 148 Tax Credits Schedule	·····62.	.00 🛦		.00				
	63.	Total refundable lowa credits. ADD lines 59 - 62	·····63.	.00 🛦		.00				
	64.	RESERVED FOR FUTURE USE	64. 0	.00 🛦	0	.00				
	65.	Taxpayers trust fund tax credit. The credit for 2016 is \$0	65.	.00 🛋	0	.00				
	66.	lowa income tax withheld.	66.	.00 🛦		.00				
	67.	Estimated and voucher payments made for tax year 2016	·····67.	.00 🛦		.00				
	68.	TOTAL. ADD lines 63, 65, 66, and 67			-	00				
	69.	TOTAL CREDITS. ADD columns A and B on line 68 and enter h					69.			
Step 11 Refund	70.	If line 69 is more than line 58, Subtract line 58 from line 69. This	s is the amount you ov	erpaid			70.	0.		
or Amount	71.	Amount of line 70 to be REFUNDED.				REFUND	71. 🛦			
Due		For a faster refund file electronically. Go to https://tax.iowa.gov f								
		Amount of line 70 to be applied to your 2017 estimated tax		.00 🛦	-	.00				
	73.	If line 69 is less than line 58, Subtract line 69 from line 58. This						·		
	74. 75	Penalty for underpayment of estimated tax from IA 2210, IA 221 Penalty and interest A 75a.Penalty .00								
	75. 76.	Penalty and interest	▲ 75b. Inte				75.			
	70.	TOTAL AMOUNT DOL. ADD lines 73, 74, and 73. Enter nete			FAI	THIS AWOUNT	76. ▲			
Step 12	D-		\$1.50 to Republican F	Party		\$1.50	to Rep	oublican Party		
		olitical Checkoff - This checkoff does not crease the amount of tax you owe or ▲ Spouse	self \$1.50) to Den	nocratic Party					
	de	crease your refund.	\$1.50 to Campaign I	Fund		\$1.5	50 to Ca	ampaign Fund		
Step 13	(ou	\$1.50 to Campaign Fund \$1.50 to Campaign Fund \$1.50 to Campaign Fund I (We), the undersigned, declare under penalty of perjury that I (we) have examined this return, including all accompanying schedules and statements, and, to the best of m (our) knowledge and belief, it is a true, correct, and complete return. Declaration of preparer (other than taxpayer) is based on all information of which the preparer has any knowledge.								
HERE			. 🗆							
SIC.	Yo	our Signature Date C	heck if Deceased	Date of Deat	h Prepare	's Signature	· <u>—</u>	Date		
SIGN HERE			. 🔲							
	Sp	ouse's Signature Date C	heck if Deceased	Date of Deat	h Prepare	's PTIN		Firm's FEIN		
		_	Daytime Telepho	one Number		Daytime Te	lephone	Number		
			= a, 10 1010p110			_ ay 10				



This return is due May 1, 2017. Please sign, enclose W-2s, and verify SSNs. You can pay online at https://tax.iowa.gov/

Make check payable to Treasurer, State of Iowa.

MAILING ADDRESS: Iowa Income Tax Document Processing,

PO BOX 9187, Des Moines IA 50306-9187.