

FORM 41S IDAHO S CORPORATION INCOME TAX RETURN 2010

FORM 41S
EFO00028
06-16-10

State use only

AMENDED RETURN, check the box. See instructions, page 10 for the reasons for amending and enter the number. For calendar year 2010, or fiscal year beginning Mo Day Year **10** ending Mo Day Year

Business name _____ State use only _____ Federal employer identification number _____
 Business mailing address _____
 City, State and Zip Code _____

1. Did the corporation's name change? If yes, enter the previous name _____ Yes No
2. If a federal audit was finalized this year, enter the latest year audited _____ Yes No
3. Is this an inactive corporation or nameholder corporation? Yes No
4. a. Were federal estimated tax payments required? Yes No
 b. Were estimated tax payments based on annualized amounts? Yes No
5. Is this a final return? Yes No
 If yes, check the proper box below and enter the date the event occurred _____
 Withdrawn from Idaho Dissolved Merged or reorganized Enter new FEIN _____
6. Is this an electrical or telephone utility? Yes No
7. Did the ownership change during the year? Yes No
8. Enter the amount of credit for qualifying new employees earned this tax year..... ▪ _____
9. Enter the amount of investment tax credit earned this tax year..... ▪ _____
10. Enter the amount of broadband equipment investment credit earned this tax year..... ▪ _____
11. Enter the amount of credit for Idaho research activities earned this tax year..... ▪ _____
12. Enter the amount of biofuel infrastructure investment tax credit earned this year..... ▪ _____
13. Did you claim the property tax exemption for investment tax credit property acquired this tax year? Yes No

INCOME

14. Ordinary income (loss). Form 1120S, page 1	14
15. Net income (loss) from rental real estate activities. Form 1120S, Schedule K	15
16. Net income (loss) from other rental activities. Form 1120S, Schedule K.....	16
17. Portfolio income (loss). Form 1120S, Schedule K.....	17
18. Other income (loss). Form 1120S, Schedule K.....	18
19. Net distributable income. Add lines 14 through 18.....	19

ADDITIONS

20. Interest and dividends not taxable under Internal Revenue Code	20
21. State, municipal and local taxes measured by net income. Include a schedule	21
22. Other additions.....	22
23. Add lines 19 through 22.....	23

SUBTRACTIONS

24. Interest from Idaho municipal securities	24
25. Interest on U.S. Government obligations. Include a schedule	25
26. Interest and other expenses related to lines 24 and 25	26
27. Add lines 24 and 25, and subtract line 26.....	27
28. Technological equipment donation.....	28
29. Allocated income. Include a schedule.....	29
30. Interest and other expenses related to line 29. Include a schedule.....	30
31. Subtract line 30 from line 29	31
32. Bonus depreciation. Include computations	32
33. Other subtractions.....	33
34. Total subtractions. Add lines 27, 28, 31, 32, and 33	34
35. Net business income subject to apportionment. Subtract line 34 from line 23	35

MAIL TO: Idaho State Tax Commission, PO Box 56, Boise ID 83756-0056
 INCLUDE A COMPLETE COPY OF YOUR FEDERAL FORM 1120S.



36. Net business income subject to apportionment. Enter the amount from line 35.....	36	
37. Corporations with all activity in Idaho enter 100%. Multistate/multinational corporations complete and attach Form 42. Enter the apportionment factor from Form 42, Part I, line 21....	37	%
38. Net business income apportioned to Idaho. Multiply line 36 by the percent on line 37	38	
39. Income allocated to Idaho. See instructions	39	
40. Idaho compensation of individual officers, directors, and shareholders not reported to Idaho	40	
41. S corporation income reported to Idaho on shareholders' income tax returns	41	
42. Idaho taxable income. Add lines 38 through 40, and subtract line 41.....	42	
43. Idaho income tax. Multiply line 42 by 7.6%	43	

CREDITS

44. Credit for contributions to Idaho educational entities	44	
45. Credit for contributions to Idaho youth and rehabilitation facilities	45	
46. Total business income tax credits from Form 44, Part I, line 12. Include Form 44	46	
47. Total credits. Add lines 44 through 46	47	
48. Subtract line 47 from line 43. If line 47 is greater than line 43, enter zero	48	

OTHER TAXES

49. Minimum tax. See instructions if the S corporation owes federal tax.....	49	20
50. Permanent building fund tax. See instructions.....	50	
51. Total tax from recapture of income tax credits from Form 44, Part II, line 7. Include Form 44	51	
52. Fuels tax due. Include Form 75	52	
53. Sales/Use tax due on mail order, internet, and other nontaxed purchases	53	
54. Tax from recapture of qualified investment exemption (QIE). Include Form 49ER	54	
55. Total tax. Add lines 48 through 54	55	
56. Underpayment interest. Include Form 41ESR	56	
57. Donation to Opportunity Scholarship Program	57	
58. Add lines 55, 56, and 57	58	

PAYMENTS AND OTHER CREDITS

59. Estimated tax payments.....	59	
60. Special fuels tax refund _____ Gasoline tax refund _____ Include Form 75 ..	60	
61. Total payments and other credits. Add line 59 and line 60.....	61	

If line 58 is more than line 61, GO TO LINE 62. If line 58 is less than line 61, GO TO LINE 65.

REFUND OR PAYMENT DUE

62. Tax due. Subtract line 61 from line 58.....	62	
63. Penalty ▪ _____ Interest from due date ▪ _____ Enter total	63	
64. TOTAL DUE. Add line 62 and line 63		
65. Overpayment. Subtract line 58 from line 61	65	
66. REFUND. Amount of line 65 you want refunded to you		
67. ESTIMATED TAX. Amount you want credited to your 2011 estimated tax. Subtract line 66 from line 65	67	

AMENDED RETURN ONLY. Complete this section to determine your tax due or refund.

68. Total due (line 64) or overpayment (line 65) on this return	68	
69. Refund from original return plus additional refunds	69	
70. Tax paid with original return plus additional tax paid.....	70	
71. Amended tax due or refund. Add lines 68 and 69, and subtract line 70	71	

▪ 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	Signature of officer	Date
HERE	Title	Phone number
Paid preparer's signature		Preparer's EIN, SSN or PTIN
Address and phone number		



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