

AMENDED RETURN, check the box.

See instructions, page 5, for the reasons for amending and enter the number.

For calendar year 2015, or fiscal year beginning

Mo Day Year

15 ending

Mo Day Year

State use only

Name of estate or trust

State use only

Federal employer identification number (EIN)

Name and title of fiduciary

Current mailing address of fiduciary (number and street)

City, State, and Zip Code

Check all that apply: Resident Return Part-Year Resident Return Nonresident Return
 Composite Return Grantor Trust Electing Small Business Trust Qualified Funeral Trust (QFT)

1. If reporting for an estate:

- a. Decedent's Social Security number _____ b. Decedent's date of death _____
 c. Was the decedent a resident of Idaho? Yes No
 d. If no, indicate the state of residence _____

2. Does this estate or trust have any nonresident beneficiaries? Yes No

3. Is this a final return? Yes No

4. Idaho adjusted income. Enter the amount from Schedule B, page 2, line 11.....	4	
5. Income distribution deduction to beneficiaries	5	
6. Estate tax deduction.....	6	
7. Subtract lines 5 and 6 from line 4.....	7	
8. Exemption. See instructions.....	8	
9. Idaho taxable income. Subtract line 8 from line 7	9	
10. Idaho income tax. Use the Tax Computation Schedule. See instructions.....	10	
11. Donation to Opportunity Scholarship Program.....	11	
12. Credits. Enter the amount from Schedule C, page 2, line 6. See instructions	12	
13. Add lines 10 and 11 then subtract line 12. If less than zero, enter zero.....	13	
14. Income distribution reportable by beneficiaries. See instructions	14	
15. Tax on income distribution. Multiply line 14 by 7.4% * _____ less credits * _____	15	
16. Permanent building fund tax. See instructions. Enter zero if this is a QFT	16	
17. Total tax from recapture of income tax credits from Form 44, Part II, line 7. Include Form 44.....	17	
18. Fuels tax due. Include Form 75.....	18	
19. Sales/Use tax due on Internet, mail order, and other nontaxed purchases	19	
20. Tax from recapture of qualified investment exemption. Include Form 49ER.....	20	
21. Tax on Electing Small Business Trust or QFT composite return. See instructions.....	21	
22. Total tax. Add lines 13 and 15 through 21	22	
23. Estimated tax payments. If made under other EIN(s), provide EIN(s), amount(s), and rollforward(s).....	23	
24. Idaho income tax withheld. Include Form(s) W-2 or 1099.....	24	
25. Special fuels tax refund _____ Gasoline tax refund _____ Include Form 75.....	25	
26. Reimbursement Incentive Act credit. Include certificate	26	
27. Total payments and other credits. Add lines 23 through 26	27	

REFUND or PAYMENT DUE If line 22 is more than line 27, go to line 28. If line 22 is less than line 27, go to line 31.

28. Tax due. Subtract line 27 from line 22 28

29. Penalty * _____ Interest from due date * _____ Enter total 29

30. TOTAL DUE. Add line 28 and line 29 30

31. Overpayment. Subtract line 22 from line 27 31

32. REFUND. Amount of line 31 you want refunded to you 32

33. ESTIMATED TAX. Amount you want credited to your 2016 estimated tax.
 Subtract line 32 from line 31..... 33



Schedule A - Computation of the federal taxable income of the estate or trust derived from Idaho sources.

To be completed by all part-year resident and nonresident estates and trusts.

1. Total income from federal Form 1041, line 9.....		1	
2. Income derived from Idaho sources. Include a schedule.....	2		
3. Idaho capital gain or (loss). Include a schedule.....	3		
4. Add lines 2 and 3.....		4	
5. Percent of total federal income derived from Idaho sources. Divide line 4 by line 1.....		5	%
6. Deductions from federal Form 1041 not allocable to any specific income.....		6	
7. Prorated deductions. Multiply line 6 by line 5.....		7	
8. Federal taxable income derived from Idaho sources. Subtract line 7 from line 4. Enter here and on Schedule B, line 1.....		8	

Schedule B - Idaho Adjusted Income

1. Adjusted total income or (loss). Federal Form 1041, line 17 or Schedule A, line 8 if nonresident.....	1	
2. Interest and dividends not taxable under Internal Revenue Code. Include a schedule.....	2	
3. State, municipal, and local income taxes deducted on federal return.....	3	
4. Net operating loss deducted on federal return.....	4	
5. Addition for bonus depreciation. Include a schedule.....	5	
6. Other additions. Include a schedule.....	6	
7. Idaho net operating loss carryover ▪ _____ carryback ▪ _____ Enter total.....	7	
8. Income exempt from Idaho tax. Include a schedule.....	8	
9. Subtraction for bonus depreciation. Include a schedule.....	9	
10. Other subtractions. Include a schedule.....	10	
11. Idaho adjusted income. Add lines 1 through 6 and subtract lines 7 through 10. Enter here and on line 4, page 1.....	11	

Schedule C - Credits

1. Did you claim the qualified investment exemption for investment tax credit property acquired this tax year? <input type="checkbox"/> Yes ▪ <input type="checkbox"/> No		
2. Credit for income tax paid to other states - Nonresidents cannot claim this credit.		
a. Idaho income tax, line 10, page 1.....	2a	
b. Total income from federal Form 1041, line 9.....	2b	
c. Enter the portion of line b derived from sources in and taxed by the other state.....	2c	
d. Divide line c by line b. Enter percentage here.....	2d	%
e. Multiply line a by line d.....	2e	
f. Other state's tax due less its income tax credits.....	2f	
g. Credit for income tax paid to other states. Enter the smaller of line e or line f. A copy of the other state's return MUST accompany this return.....	2g	
3. Credit for contributions to Idaho educational entities.....	3	
4. Credit for contributions to Idaho youth and rehabilitation facilities.....	4	
5. Total business income tax credits from Form 44, Part I, line 12. Include Form 44.....	5	
6. Total credits. Add lines 2g through 5. Enter total here and on line 12, page 1.....	6	

▪ 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.

SIGN HERE	Signature of fiduciary		Paid preparer's signature		Preparer's EIN, SSN, or PTIN
	Date	Phone number	Address	Phone number	

MAIL TO: Idaho State Tax Commission, PO Box 56, Boise ID 83756-0056
INCLUDE A COMPLETE COPY OF YOUR FEDERAL FORM 1041.

Don't staple