

For calendar year 2003, or fiscal year beginning _____, ending _____

Name(s) as shown on return	Social Security Number

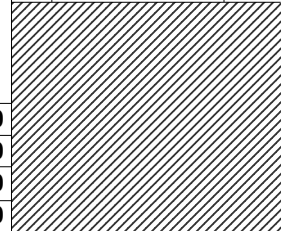
A. Additions. See instructions, page 17.

1. Federal net operating loss carryover included in line 9, Form 40	1		00
2. Capital loss carryover incurred outside the state before becoming an Idaho resident	2		00
3. Non-Idaho state and local bond interest and dividends	3		00
4. Idaho college savings account withdrawal	4		00
5. Other additions, including additions for bonus depreciation. Attach explanation.	5		00
6. Total additions. Add lines 1 through 5. Enter on line 10, Form 40.	6		00

B. Subtractions. See instructions, page 17.

1. Idaho net operating loss carryover <input type="checkbox"/> _____ Idaho net operating loss carryback <input type="checkbox"/> _____. Enter total here.	1		00
2. State income tax refund if included in federal income	2		00
3. Interest from U.S. Government obligations	3		00
4. Insulation of Idaho residence	4		00
5. Alternative energy devices deduction.			

	Year Acquired	Type of Device	Total Cost	Percent				
a.	2003		\$	X 40% =	5a			00
b.	2002		\$	X 20% =	5b			00
c.	2001		\$	X 20% =	5c			00
d.	2000		\$	X 20% =	5d			00



e. Add lines 5a through 5d.	5e		00
6. Child/dependent care. Attach federal Form 2441 or 1040A, Schedule 2.	6		00
7. Social security and railroad benefits, if included in federal income	7		00
8. Retirement benefits deduction. Complete Section E.	8		00
9. Technological equipment donation	9		00
10. Idaho capital gains deduction. Attach Form CG.	10		00
11. Adoption expenses	11		00
12. Idaho medical savings account. Contributions _____ Interest _____ Financial institution _____ Account number _____	12		00
13. Idaho college savings program	13		00
14. Maintaining a home for the aged and/or developmentally disabled	14		00
15. Idaho lottery winnings, less than \$600 per prize	15		00
16. Income earned on a reservation by an American Indian	16		00
17. Health insurance premiums	17		00
18. Long-term care insurance	18		00
19. Worker's compensation insurance	19		00
20. Other subtractions, including subtractions for bonus depreciation. Attach explanation.	20		00
21. Total subtractions. Add lines 1 through 4 and 5e through 20. Enter on line 12, Form 40.	21		00

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C. Credit for Income Tax Paid to Other States. See instructions, page 20.

1. Idaho tax, line 22, Form 40	1		00	Attach a copy of the income tax return and a separate Form 39R for each state for which a credit is claimed.		
2. Other state's adjusted income	2		00			
3. Idaho adjusted income from line 13, Form 40	3		00			
4. Divide line 2 by line 3. Enter percentage here.	4	%				
5. Multiply line 1 by line 4. Enter amount here.				5		00
6. Other state's tax due less its income tax credits				6		00
7. Enter the smaller of lines 5 or 6 here and on line 24, Form 40.				7		00

D. Maintaining a Home for a Family Member Age 65 or Older, or a Family Member With a Developmental Disability. See instructions, page 21.

1. Did you maintain a home for an immediate family member age 65 or older and provide more than one-half of his/her support? You and your spouse do not qualify. Yes No
2. Did you maintain a home for an immediate family member with a developmental disability and provide more than one-half of his/her support? You and your spouse may qualify. Yes No
If you answered YES to either question, complete lines 3 and 4.

3. List each family member you are claiming:

Name of Family Member	Social Security Number of Family Member	Relationship to Person Filing Return	Date of Birth of Family Member	Check here if developmentally disabled

4. Total amount claimed (\$100 for each qualifying member but not more than \$300). Enter on line 48, Form 40. (Credit cannot be claimed if you took \$1,000 deduction on Part B, line 14.)	4		00
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E. Retirement Benefits Deduction. See instructions, page 18, for qualified retirement benefits.

1. If single enter \$20,892, or if married filing jointly enter \$31,338.	1		00			
2. Federal Railroad Retirement benefits received	2		00			
3. Social Security benefits received	3		00			
4. Line 1 minus lines 2 and 3. If less than zero enter zero.	4		00			
5. Qualified retirement benefits included in federal income.	5		00			
6. Enter the smaller of line 4 or 5 here and on line 8, Part B.				6		00