

IDAHO INDIVIDUAL INCOME TAX RETURN

AMENDED RETURN, check the box. []

State Use Only

See instructions, page 6 for the reasons for amending and enter the number. []

For calendar year 2008, or fiscal year beginning [] , ending []

Your Social Security Number (required)

[]

Spouse's Social Security Number (required)

[]

PLEASE PRINT OR TYPE

Your first name and initial [] Last name []

Spouse's first name and initial [] Last name []

Mailing address []

City, State, and Zip Code []

[] Taxpayer deceased in 2008

[] Spouse deceased in 2008

Do you need Idaho income tax forms mailed to you next year?

[] Yes [] No

FILING STATUS. If filing married joint or separate return, enter spouse's name and Social Security number above.

- 1. [] Single 2. [] Married filing joint return 3. [] Married filing separate return 4. [] Head of household 5. [] Qualifying widow(er)

6. EXEMPTIONS. If someone can claim you as a dependent, leave box 6a blank. Enter "1" in boxes 6a, Yourself a. [] and 6b, if they apply. Spouse b. []

c. List your dependents. If more than four dependents, continue on Form 39R. Enter the total number here []

Table with columns: First name, Last name, Social Security Number

Election campaign fund

I want \$1 of my income tax to go to the Idaho Election Campaign Fund (\$2 on joint return).

7. Yourself 8. Spouse

Constitution [] [] Democratic [] [] Libertarian [] []

7. Yourself 8. Spouse

Republican [] [] No Specific [] [] None [] []

d. Total exemptions. Add lines 6a through 6c. Must match federal return []

ATTACH PAYMENT HERE

INCOME. See instructions, page 7.

Table with columns: Description, Line Number, Amount

ATTACH STATE W-2 COPIES HERE

TAX COMPUTATION. See instructions, page 7.

Table with columns: Description, Line Number, Amount

Continue to page 2.

MAIL TO: Idaho State Tax Commission, PO Box 56, Boise, ID 83756-0056

ATTACH A COMPLETE COPY OF YOUR FEDERAL RETURN.



8 1 5 0 9 5

23. Tax amount from line 22	23		00
CREDITS. Limits apply. See instructions, page 8.			
24. Income tax paid to other states. Attach Form 39R and a copy of the other state returns	24		00
25. Credit for contributions to Idaho educational entities	25		00
26. Credit for contributions to Idaho youth and rehabilitation facilities	26		00
27. Credit for live organ donation expenses	27		00
28. Total business income tax credits from Form 44, Part I, line 12. Attach Form 44	28		00
29. TOTAL CREDITS. Add lines 24 through 28	29		00
30. Subtract line 29 from line 23. If line 29 is more than line 23, enter zero	30		00

OTHER TAXES. See instructions, page 9.			
31. Fuels tax due. Attach Form 75	31		00
32. Sales/Use tax due on mail order, Internet, and other nontaxed purchases	32		00
33. Total tax from recapture of income tax credits from Form 44, Part II, line 7. Attach Form 44	33		00
34. Tax from recapture of qualified investment exemption (QIE). Attach Form 49ER	34		00
35. Permanent building fund. Check the box if you are receiving Idaho public assistance payments	35	<input type="checkbox"/>	10 00
36. TOTAL TAX. Add lines 30 through 35	36		00

DONATIONS. See instructions, page 9. I wish to donate to:			
37. Nongame Wildlife Conservation Fund	38. Children's Trust Fund		
39. Special Olympics Idaho	40. Idaho Guard and Reserve Family ...		
41. American Red Cross of Greater Idaho Fund .	42. Veterans Support Fund		
43. Enter total donations. Add lines 37 through 42	43		00
44. TOTAL TAX PLUS DONATIONS. Add lines 36 and 43	44		00

PAYMENTS and OTHER CREDITS. Complete the grocery credit refund worksheet on page 10.			
45. Grocery credit. Computed Amount (from worksheet)			
To donate your grocery credit to the Cooperative Welfare Fund, check the box and enter zero on line 45. <input type="checkbox"/>	45		00
To receive your grocery credit, enter the computed amount on line 45.	46		00
46. Maintaining a home for family member age 65 or older, or developmentally disabled. Attach Form 39R	47		00
47. Special fuels tax refund _____ Gasoline tax refund _____ Attach Form 75 .	48		00
48. Idaho income tax withheld. Attach Form(s) W-2	49		00
49. 2008 Form 51 payment(s) and amount applied from 2007 return	50		00
50. TOTAL PAYMENTS AND OTHER CREDITS. Add lines 45 through 49			

TAX DUE or REFUND. See instructions, page 11. If line 44 is more than line 50, GO TO LINE 51. If line 44 is less than line 50 GO TO LINE 54.			
51. TAX DUE. Subtract line 50 from line 44			00
52. Penalty _____ Interest from the due date _____ Enter total	52		00
Check box if penalty is due to an ineligible withdrawal from an Idaho medical savings account		<input type="checkbox"/>	
53. TOTAL DUE. Add lines 51 and 52. Make check or money order payable to the Idaho State Tax Commission	53		00
54. OVERPAID. Line 50 minus lines 44 and 52. This is the amount you overpaid	54		00
55. REFUND. Amount of line 54 to be refunded to you			00
56. ESTIMATED TAX. Amount of line 54 to be applied to your 2009 estimated tax	56		00

57. **DIRECT DEPOSIT. See instructions, page 12.**

•Routing No. • Account No. Type of Checking Account: Savings

AMENDED RETURN ONLY. Complete this section to determine your tax due or refund. See instructions.			
58. Total tax due (line 53) or overpayment (line 54) on this return	58		00
59. Refund from original return plus additional refunds	59		00
60. Tax paid with original return plus additional tax paid	60		00
61. Amended tax due or refund. Add lines 58 and 59 and subtract line 60	61		00

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 HERE	Your signature	Spouse's signature (if a joint return, BOTH MUST SIGN)	Date	Daytime phone
	Paid preparer's signature	Preparer's EIN, SSN, or PTIN		
Address and phone number				

