

AMENDED RETURN, check the box.
 See instructions, page 12 for the reasons for amending and enter the number.

State Use Only

For calendar year 2013, or fiscal year beginning _____, ending _____

PLEASE PRINT OR TYPE	Your first name and initial	Last name	Your Social Security Number (required)	<input type="checkbox"/> Deceased in 2013
	Spouse's first name and initial	Last name	Spouse's Social Security Number (required)	<input type="checkbox"/> Deceased in 2013
	Mailing address		Do you need Idaho income tax forms mailed to you next year? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	City, State, and Zip Code			

If you or your spouse are nonresident aliens for federal purposes, check here.

Residency status
 Check one for yourself and one for your spouse if a joint return.

Resident	Idaho Resident on Active Military Duty	Nonresident	Part-Year Resident	Military Nonresident
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
Yourselves	Spouse			

Full months in Idaho this year - Yourself _____ - Spouse _____ **Indicate current state of residence.** - Yourself _____ - Spouse _____

FILING STATUS. Check only one box.
 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)

Must match federal return.

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

c. List your dependents. If more than four dependents, continue on Form 39NR. Enter the total number here _____ c.

First name	Last name	Social Security Number

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

IDAHO INCOME. See instructions, page 13.	Idaho Amounts	
7. Wages, salaries, tips, etc. Include Form(s) W-2	7	00
8. Taxable interest income	8	00
9. Dividend income	9	00
10. Alimony received	10	00
11. Business income or (loss). Include federal Schedule C or C-EZ	11	00
12. Capital gain or (loss). If required, include federal Schedule D	12	00
13. Other gains or (losses). Include federal Form 4797	13	00
14. IRA distributions (taxable amount)	14	00
15. Pensions and annuities (taxable amount)	15	00
16. Rents, royalties, partnerships, S corporations, trusts, etc. Include federal Schedule E	16	00
17. Farm income or (loss). Include federal Schedule F	17	00
18. Unemployment compensation	18	00
19. Other income. Include explanation	19	00
20. TOTAL INCOME. Add lines 7 through 19	20	00

IDAHO ADJUSTMENTS. See instructions, page 13.		
21. Deductions for IRAs, health savings accounts, and IRC 501(c)(18)(D) retirement plan	21	00
22. Tuition and fees, moving expenses, alimony paid, and student loan interest	22	00
23. Deductions for self-employment tax, health insurance, and qualified retirement plans	23	00
24. Penalty on early withdrawal of savings	24	00
25. Other deductions. See instructions	25	00
26. TOTAL ADJUSTMENTS. Add lines 21 through 25	26	00
27. ADJUSTED GROSS INCOME. Subtract line 26 from line 20	27	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	Date
	Spouse's signature (if a joint return, BOTH MUST SIGN)	Daytime phone
Paid preparer's signature		Preparer's EIN, SSN, or PTIN
Address and phone number		

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

INCLUDE A COMPLETE COPY OF YOUR FEDERAL RETURN.



0 1 3 1 7 0 9 5

		Column A - Federal	Column B - Idaho
28. Enter amount from federal Form 1040, line 37, 1040A, line 21, or 1040EZ, line 4 in Column A. Enter amount from line 27 in Column B	28	00	00
29. Additions from Form 39NR, Part A, line 5. Include Form 39NR	29	00	00
30. Subtractions from Form 39NR, Part B, line 26. Include Form 39NR	30	00	00
31. TOTAL ADJUSTED INCOME. Add lines 28 and 29, less line 30	31	00	00

Standard Deduction For Most People	32. a. Check if age 65 or older		b. Check if blind	
	<input type="checkbox"/> Yourself	<input type="checkbox"/> Spouse	<input type="checkbox"/> Yourself	<input type="checkbox"/> Spouse
	c. If your parent or someone else can claim you as a dependent, check here and enter zero on lines 37 and 61 <input type="checkbox"/>			
	33. Itemized deductions. Include federal Schedule A	33		00
	34. All state and local income or general sales taxes included on federal Schedule A, line 5	34		00
	35. Subtract line 34 from line 33	35		00
Single or Married filing Separately: \$6,100	36. Standard deduction. See instructions page 14 to determine standard deduction amount if different than the Standard Deduction For Most People	36		00
Head of Household: \$8,950	37. Multiply \$3,900 by the number of exemptions claimed on line 6d	37		00
Married filing Jointly or Qualifying Widow(er): \$12,200	38. Add line 37 and the LARGER of line 35 or line 36	38		00
	39. Idaho percentage. Divide line 31, Column B, by line 31, Column A	39		%
	40. Multiply amount on line 38 by the percentage on line 39 and enter the result here	40		00
	41. Idaho taxable income. Subtract line 40 from line 31, Column B	41		00
	42. TAX from tables or rate schedule. See instructions, page 36	42		00
	43. Income tax paid to other states. Include Form 39NR and other states returns	43		00
	44. Total credits from Form 39NR, Part E, line 4. Include Form 39NR	44		00
	45. Total business income tax credits from Form 44, Part I, line 12. Include Form 44	45		00
	46. Line 42 minus lines 43 through 45. If less than zero, enter zero	46		00

OTHER TAXES			
	47. Fuels tax due. Include Form 75	47	00
	48. Sales/Use tax due on nontaxed purchases (Internet, mail order, and other)	48	00
	49. Total tax from recapture of income tax credits from Form 44, Part II, line 7. Include Form 44	49	00
	50. Tax from recapture of qualified investment exemption (QIE). Include Form 49ER	50	00
	51. Permanent building fund. Check the box if you are receiving Idaho public assistance payments <input type="checkbox"/>	51	10 00
	52. TOTAL TAX. Add lines 46 through 51	52	00

DONATIONS			
	I want to donate to:	53. Opportunity Scholarship Program	
	54. Idaho Guard and Reserve Family	55. Idaho Children's Trust Fund	
	56. Special Olympics Idaho	57. Nongame Wildlife Conservation	
	58. American Red Cross of Greater Idaho	59. Idaho Foodbank	
	60. TOTAL TAX PLUS DONATIONS. Add lines 52 through 59	60	00

PAYMENTS			
	61. Grocery credit. See instructions, page 16. Computed Amount (from worksheet)	61	00
	To donate your grocery credit to the Cooperative Welfare Fund, check the box and enter zero on line 61 <input type="checkbox"/>		
	To receive your grocery credit, enter the computed amount on line 61		
	62. Maintaining a home for family member age 65 or older, or developmentally disabled. Include Form 39NR	62	00
	63. Special fuels tax refund Gasoline tax refund Include Form 75	63	00
	64. Idaho income tax withheld. Include Form(s) W-2 and any 1099(s) that show Idaho withholding	64	00
	65. 2013 Form 51 payment(s) and amount applied from 2012 return	65	00
	66. Pass-through income tax. Withheld Paid by entity Include Form(s) ID K-1	66	00
	67. Hire One Act credit for new employees. Include Form 72	67	00
	68. TOTAL PAYMENTS AND OTHER CREDITS. Add lines 61 through 67	68	00

TAX DUE			
	69. TAX DUE. Subtract line 68 from line 60		00
	70. Penalty Interest from the due date Enter total.		00
	Check box if penalty is due to an ineligible withdrawal from an Idaho medical savings account <input type="checkbox"/>	70	00
	71. TOTAL DUE. Add lines 69 and 70. Make check or money order payable to the Idaho State Tax Commission	71	00

REFUND			
	72. OVERPAID. Line 68 minus lines 60 and 70	72	00
	73. REFUND. Amount of line 72 to be refunded to you		00
	74. ESTIMATED TAX. Amount of line 72 to be applied to your 2014 estimated tax	74	00

75. DIRECT DEPOSIT. See instructions, page 18. Check if final deposit destination is outside of the U.S.

Routing No. Account No.

Type of Checking Account: Savings

AMENDED			
	76. Total due (line 71) or overpaid (line 72)	76	00
	77. Refund from original return plus additional refunds	77	00
	78. Tax paid with original return plus additional tax paid	78	00
	79. Amended tax due or refund. Add lines 76 and 77, less line 78	79	00

