FORM **PTE-12**
EFO00241
07-24-14

Idaho Schedule For Pass-Through Owners

(Required with Forms 41S, 65 or 66)

Pass-through entity (PTE) name	PTE EIN	PTE tax year ending	Date of payment

Contact name	Contact telephone	Contact email

Owner's Name (one owner per line)	EIN or Social Security Number	Owner's Address City, State, ZIP Code	(a) Filing Code	Other (b) Idaho Distributable Income	Withholding (c) Idaho Distributable Income	Withholding (d) Income Tax Withheld By Entity	Composite (e) Idaho Distributable Income	Composite (f) Income Tax Paid By Entity
Total Columns (b), (c), (d), (e), and (f) ➔								

If you have more than one schedule, enter the total amounts on last page only.