2017 IA 1040 Iowa Individual Income Tax Return _/___ 2017 and ending _ For fiscal year beginning ___ Step 1: Fill in all spaces. You must fill in your Social Security Number (SSN). Your last name Your first name/middle initial Spouse's last name Spouse's first name/middle initial Current mailing address (number and street, apartment, lot, or suite number) or PO Box City, State, ZIP Spouse SSN Your SSN Step 2 Filing Status: Mark one box only Single: Were you claimed as a dependent on another person's lowa return? Email Address: 2 Married filing a joint return. (Two-income families may benefit by using status 3 or 4.) Check this box if you or your spouse was 65 or older as of 12/31/17. 3 Married filing separately on this combined return. Spouse use column B. Residence on 12/31/17: County No School District No. Net Income: \$ Married filing separate returns. **▲** SSN: 5 Head of household with qualifying person. If qualifying person is not claimed as a dependent on this return, enter the person's name and SSN below. 6 Qualifying widow(er) with dependent child. Step 3 Exemptions B. Spouse (Filing Status 3 ONLY) A. You or Joint Personal Credit: Col. A: Enter 1 (enter 2 if filing status 2 or 5); Col. B: Enter 1 if filing status 3............. X \$ 40 = Enter 1 for each taxpayer who is 65 or older and/or 1 for each taxpayer who is blind..... X \$ 20 = X \$ 20 =Dependents: Enter 1 for each dependent... X \$ 40 = X \$ 40 = Enter first names of dependents here e. Total \$ Step 4 Reportable Social Security Benefits as calculated on line 11 of lowa social security worksheet A. You or Joint A B. Spouse/Status 3 A B. Spouse/Status 3 A. You or Joint B. Spouse/Status 3 Step 5 1. Wages, salaries, tips, etc...... .00 Gross Income .00 Ordinary dividend income. If more than \$1,500, complete Sch. B........ Alimony received......4 ೧೧ Business income/(loss) from federal Schedule C or C-EZ......₅. NOTE: Use only .00 blue or black Capital gain/(loss), federal Sch. D if required for federal purposes....... 6. .00 ink, no pencils or red ink. Other gains/(losses) from federal form 4797......7. 7. .00 Taxable IRA distributions 8. .00 Taxable pensions and annuities9. 9. .00 Rents, royalties, partnerships, estates, etc.....10. 10. 11. Farm income/(loss) from federal Schedule F11. .00 Unemployment compensation. See instructions12. 12. .00 Gambling winnings......13. 13. 00 იი Other income, bonus depreciation, and section 179 adjustment₁₄. 14. 15. Gross Income. Add lines 1-14 15 00 იი Step 6 Adjust-Payments to an IRA, Keogh, or SEP......16. .00 Deductible part of self-employment tax.17. ments to Income Health insurance premium18. 18. .00 Penalty on early withdrawal of savings.....19. Alimony paid.....20. 20. Pension/retirement income exclusion.....21. 21. Moving expense deduction from federal form 390322. 22. .00 lowa capital gain deduction; certain sales only. Include IA 10023. 23. Other adjustments.....24. 24. Total adjustments. Add lines 16-24 25. .00 .00 Net Income. Subtract line 25 from line 15 Step 7 Federal income tax refund/overpayment received in 201727. 27. .00 🛦 Federal Self-employment/household employment/other federal taxes28. 28. Addition 29. and .00 .00 Deduc 30. tion .00 -----31. Federal tax withheld.... 31. Federal estimated tax payments made in 201732. 32. .00 🛦 Additional federal tax paid in 2017 for 2016 and prior years33. 33. .00



Balance. Subtract line 34 from line 30. Enter here and on line 36, page 2

2017	IA	. 1040, page 2	B. Spouse/	Status 3	A. You or Joint	B. Spouse/Status 3	3	A. You or Joint
Step 8	36.	BALANCE. From side 1, line 35						.00
Гахаblе ncome	37.					.00		.00
	38.	TAXABLE INCOME. SUBTRACT line 37 from line 36			38.	.00		00
Step 9 Fax,	39.	Tax from tables or alternate tax	39.	.00 🛦		.00		
Credits,	40.	lowa lump-sum tax. 25% of federal tax from form 4972	10	00	_	• * *		
and Check-	41.	lowa alternative minimum tax. Include IA 6251	.1	00		.00		
off Contri-	42.	Total tax. ADD lines 39, 40, and 41.				•	Λ	.00
outions	43.	Total exemption credit amount(s) from Step 3, side 14				.00	U	00
	44.	Tuition and textbook credit for dependents K-124				.00		
	45.	Volunteer firefighter/EMS/reserve peace officer credit4		00 ▲		.00		
	46.	Total credits. ADD lines 43, 44, and 45.	J	00 ▲	46		^	00
	47.	BALANCE. SUBTRACT line 46 from line 42. If less than zero, enter zer	n		46.		0 🛦	.00
	48.	Credit for nonresident or part-year resident. Include IA 126 and federal	return		47.			.00
	49.	BALANCE. SUBTRACT line 48 from 47. If less than zero, enter zero	etairi		48.	0	0 🔺	00
	50.	Out-of-state tax credit. Include IA 130.			49.	0	0 🛦	00
	51.	BALANCE. SUBTRACT line 50 from 49. If less than zero, enter zero			50.	0	0 🔺	
	52.							00
		Other nonrefundable lowa credits. Include IA 148 Tax Credits Schedule	······		52.	0	0 🛦	00
	53.	BALANCE. SUBTRACT line 52 from line 51. If less than zero, enter zer	U E2		53.	0	0 🛦	00
	54.	School district surtax or EMS surtax. Take percentage from table; multip	bly by line 53		54.	0	0 🔺	00
	55.	Total state and local tax. ADD lines 53 and 54						00
	56.	TOTAL state and local tax before contributions. Combine columns A an				56	S .	00
	57. Contributions will reduce your refund or add to the amount you owe. Amounts must be in whole dollars.							
		sh/Wildlife 57a: ▲ State Fair 57b: ▲ Firefighters/Veterans 5						
Step 10		TOTAL STATE AND LOCAL TAX, AND CONTRIBUTIONS. Add line 56					3. ▲	00
Credits	59.	lowa Fuel tax credit. Include IA 4136	59.	00 ▲		.00		
	60.							
						.00		
	61.	lowa earned income tax credit. 15.0% (.15) of federal credit	51.	00 🔺		.00		
	62.	Other refundable credits. Include IA 148 Tax Credits Schedule	52.	00 ▲		.00		
	63.	Total refundable lowa credits. ADD lines 59 - 62.	33. M 0			.00		
	64. 65	RESERVED FOR FUTURE USE	64.	00 ▲		.00		
	65. 66.		65. <u> </u>	.00 🛦		.00		
	67.	lowa income tax withheld	66	00 ▲		.00		
		TOTAL. ADD lines 63, 65, 66, and 67	57.	00 ▲		.00		
	69.	TOTAL CREDITS. ADD columns A and B on line 68 and enter here				.00 6	a	
Step 11 Refund	70.	If line 69 is more than line 58, Subtract line 58 from line 69. This is the a						00
		Amount of line 70 to be REFUNDED.				DEELIND		.00
				_			I. ▲	.00
	7	71a. Routing Number:		71b.	Type Checking	Sa	avings	5
	7	71c. Account Number:						
	72.	Amount of line 70 to be applied to your 2018 estimated tax	"2	00 🛦		.00		
Step 12 Pay	73.	If line 69 is less than line 58, Subtract line 69 from line 58. This is the Al					3. 🛦	.00
	74.	Penalty for underpayment of estimated tax from IA 2210, IA 2210S, or I.	A 2210F. Check if	annualized	income method is	unad A). <u> </u>	.00
	75.	Penalty and interest ▲ 75a. Penalty .00	▲ 75b. Interes	t	.00 ADD. E	Enter total 7		.00
	76.	TOTAL AMOUNT DUE. ADD lines 73, 74, and 75. Enter here			 PAY	THIS AMOUNT 7		.00
Step 13	(ou	/e), the undersigned, declare under penalty of perjury that I (we) have ex r) knowledge and belief, it is a true, correct, and complete return. Declara wledge.				chedules and statem	ents,	and, to the best of my
SIGN	KHO	····oago.						
HERE	_				<u> </u>			
	Υοι	ur Signature Date Check if D	Deceased D	ate of Death	Preparer'	s Signature		Date
SIGN HERE		▲ □						
	Spc	puse's Signature Date Check if D	Deceased D	ate of Death	Preparer'	s PTIN		Firm's FEIN

Daytime Telephone Number

This return is due April 30th, 2018. Sign, enclose W-2s, and verify SSNs. MAILING ADDRESS: Iowa Income Tax Document Processing, PO BOX 9187, Des Moines IA 50306-9187 Make check payable to Treasurer, State of Iowa

Daytime Telephone Number

