

**IDAHO INDIVIDUAL INCOME TAX RETURN**

**AMENDED RETURN**, check the box.   
See instructions, page 6 for the reasons for amending and enter the number.

State Use Only

For calendar year 2010, or fiscal year beginning \_\_\_\_\_, ending \_\_\_\_\_

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	

Your Social Security Number (required)

Spouse's Social Security Number (required)

Taxpayer deceased in 2010  
 Spouse deceased in 2010  
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)

Must match federal return

**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 ..... c.

First name	Last name	Social Security Number

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

**INCOME. See instructions, page 7.**

7. Enter your federal adjusted gross income from federal Form 1040, line 37; federal Form 1040A, line 21; or federal Form 1040EZ, line 4. Include a complete copy of your federal return .....	7	00
8. Additions from Form 39R, Part A, line 6. Include Form 39R .....	8	00
9. Total. Add lines 7 and 8 .....	9	00
10. Subtraction from Form 39R, Part B, line 23. Include Form 39R .....	10	00
11. TOTAL ADJUSTED INCOME. Subtract line 10 from line 9. If you have an NOL and are electing to forego the carryback period, check here <input type="checkbox"/>	11	00

**TAX COMPUTATION. See instructions, page 7.**

<b>Standard Deduction For Most People</b>  Single or Married filing Separately: \$5,700  Head of Household: \$8,400  Married filing Jointly or Qualifying Widow(er): \$11,400	12. CHECK —	a. If age 65 or older ..... <input type="checkbox"/> Yourself <input type="checkbox"/> Spouse b. If blind ..... <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 18 and 45. <input type="checkbox"/>		
	13. Itemized deductions. Include federal Schedule A .....	13	00	
	14. All state and local income or general sales taxes included on federal Schedule A, line 5 .....	14	00	
	15. Subtract line 14 from line 13. If you do not use federal Schedule A, enter zero .....	15	00	
	16. Standard deduction. See instructions page 7 to determine standard deduction amount if different than the Standard Deduction For Most People .....	16	00	
	17. Subtract the LARGER of line 15 or 16 from line 11. If less than zero, enter zero .....	17	00	
	18. Multiply <b>\$3,650</b> by the number of exemptions claimed on line 6d .....	18	00	
	19. Idaho taxable income. Subtract line 18 from line 17. If less than zero, enter zero .....	19	00	
	20. Tax from tables or rate schedule. See instructions, page 35 .....	20	00	

Continue to page 2.

MAIL TO: Idaho State Tax Commission, PO Box 56, Boise, ID 83756-0056  
INCLUDE A COMPLETE COPY OF YOUR FEDERAL RETURN.



21. Tax amount from line 20 .....	21		00
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**CREDITS. Limits apply. See instructions, page 8.**

22. Income tax paid to other states. Include Form 39R and a copy of other state return .....	22		00
23. Credit for contributions to Idaho educational entities .....	23		00
24. Credit for contributions to Idaho youth and rehabilitation facilities .....	24		00
25. Credit for live organ donation expenses .....	25		00
26. Total business income tax credits from Form 44, Part I, line 12. Include Form 44 .....	26		00
27. TOTAL CREDITS. Add lines 22 through 26 .....	27		00
28. Subtract line 27 from line 21. If line 27 is more than line 21, enter zero .....	28		00

**OTHER TAXES. See instructions, page 9.**

29. Fuels tax due. Include Form 75 .....	29		00
30. Sales/Use tax due on mail order, Internet, and other nontaxed purchases .....	30		00
31. Total tax from recapture of income tax credits from Form 44, Part II, line 7. Include Form 44 .....	31		00
32. Tax from recapture of qualified investment exemption (QIE). Include Form 49ER .....	32		00
33. Permanent building fund. Check the box if you are receiving Idaho public assistance payments .....	33	<input type="checkbox"/>	10 00
34. TOTAL TAX. Add lines 28 through 33 .....	34		00

**DONATIONS. See instructions, page 9. I wish to donate to:**

35. Nongame Wildlife Conservation Fund .....	36. Idaho Children's Trust Fund .....		
37. Special Olympics Idaho .....	38. Idaho Guard and Reserve Family ...		
39. American Red Cross of Greater Idaho Fund ..	40. Veterans Support Fund .....		
41. Idaho Foodbank .....	42. Opportunity Scholarship Program ...		
43. Enter total donations. Add lines 35 through 42 .....	43		00
44. TOTAL TAX PLUS DONATIONS. Add lines 34 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"/>			
To receive your grocery credit, enter the computed amount on line 45 .....	45		00
46. Maintaining a home for family member age 65 or older, or developmentally disabled. Include Form 39R .....	46		00
47. Special fuels tax refund _____ Gasoline tax refund _____ Include Form 75 .....	47		00
48. Idaho income tax withheld. Include Form(s) W-2 and any 1099(s) that show Idaho withholding .....	48		00
49. 2010 Form 51 payment(s) and amount applied from 2009 return .....	49		00
50. TOTAL PAYMENTS AND OTHER CREDITS. Add lines 45 through 49 .....	50		00

**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 <input type="checkbox"/> Interest from the due date <input type="checkbox"/> 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 2011 estimated tax .....	56		00

**57. DIRECT DEPOSIT. See instructions, page 12.  Check if final deposit destination is outside the U.S.**

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 due (line 53) or overpaid (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.

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

