

**2018 Idaho Individual
E-File (MeF) Test Packet**

October 2018

Schema Version ID_Mef2018v1.0



Dear Software Developers:

Enclosed is the Tax Year 2018 Idaho Individual e-File (MeF) Test Packet. This grid was developed by our audit staff and is relatively unchanged from last years' grid. You will use the federal test scenarios that best fit the Idaho test grid.

Enclosed are the test SSNs, names and addresses for the two tax types.

You may need to modify your test returns to the forms and schedules that your software will support as outlined in the Letter of Intent.

Send a PDF and Submission ID of each test return that you will be transmitting to:

Meftesting@tax.idaho.gov.

Please include a payment voucher that contains a scanline with any return that has an amount due. Idaho will follow the IRS testing calendar.

Our office hours are: Monday – Friday, 7:00 a.m. – 4:00 p.m. (MST)

Our offices will be closed on the dates below:

November 12 Veterans Day
November 22 Thanksgiving Day
December 25 Christmas Holiday
January 01 New Year's Holiday

If you have any testing questions, feel free to contact us.

We look forward to working with you this year.

Sincerely,

Electronic Data Management Team
Coordination & Automation Bureau
Idaho State Tax Commission
(208) 332-6632
MeFtesting@tax.idaho.gov

Auston Holmes
Idaho Income Tax eFile Coordinator
Idaho State Tax Commission
208-334-5360
efileCoordinator@tax.idaho.gov

Income Tax Rate Schedule for 2018

Single

At Least	Less Than	Tax	Rate	
1	1,504	0	plus 1.125% of the amount over	0
1,504	3,008	16.92	plus 3.125% of the amount over	1,504
3,008	4,511	63.91	plus 3.625% of the amount over	3,008
4,511	6,015	118.42	plus 4.625% of the amount over	4,511
6,015	7,519	187.97	plus 5.625% of the amount over	6,015
7,519	11,279	272.56	plus 6.625% of the amount over	7,519
11,279		521.63	plus 6.925% of the amount over	11,279

Married

At Least	Less Than	Tax	Rate	
1	3,008	0	plus 1.125% of the amount over	0
3,008	6,016	33.84	plus 3.125% of the amount over	3,008
6,016	9,022	127.82	plus 3.625% of the amount over	6,016
9,022	12,030	236.84	plus 4.625% of the amount over	9,022
12,030	15,038	375.94	plus 5.625% of the amount over	12,030
15,038	22,558	545.12	plus 6.625% of the amount over	15,038
22,558		1043.26	plus 6.925% of the amount over	22,558

Form 40 MeF Test Return Information - 2018

Test 1:

400005951
Timothy Smith
C/o Tom Jones
5000 W. State St.
Boise, ID 83702
Single
Claimed Dependent
Paid Preparer with PTIN and phone number

Test 2:

400005952
400005970
Frank Grey
Amber Grey
PO Box 342
Mackay ID, 83251
Married Filing Joint
No Dependents
Spouse was incarcerated for 6 months
Prime is 65
Spouse is blind

Test 3:

Amended Indicator
(If Supporting Amended Filings)
Amended Reason 3
(If Supporting Amended Filings)
400005953
David Klien
715 E Sherman Ave
Coeur D Alene, ID 83815
Qualifying widower (2016)
3 Dependent children
Additional Information:

- Taxpayers date of birth=Dec 17, 1979
- 1st dependent date of birth=June 1, 2000
- 2nd dependent date of birth=Oct 19, 2001
- 3rd dependent date of birth=Nov 8, 2009

Test 4: 400005954

400005977
Michael Pratt
Michelle Pratt
300 E Pine St
Pocatello, ID 83204
Married filing Separate
2 Dependent children
On public assistance for 3 months at the end of the tax year

Test 5:

400005955
Peter Piper
445 Highway 55
Horseshoe Bend, ID 83626
Deceased in 2018
Head of Household
1 Dependent Parent

Test 6:

400005956
400005975
Donald White
Margaret White
6951 Hastings
Boise, ID 83714
Spouse deceased in 2018
Married Filing Joint
AGI greater than \$350,000
6 Dependent children

Test 7:

400005957
Miguel Estrada
1832 South Pole Ln
Meridian, ID 83616
Head of Household
3 Dependent children
Carry Forward

Form 40 - Mef Test Data

"X" Indicates Yes - "O" Indicates Optional	Test 1	Test 2	Test 3	Test 4	Test 5	Test 6	Test 7
Authentication Header	Smith	Grey	Klien	Pratt	Piper	White	Estrada
Filing License Type Cd	X	X	X	X	X	X	X
Financial Resolution							
First Input			X				
Routing Transit Num			X				
Depositor Account Num			X				
Input Timestamp			X				
Submission							
No UBA Disbursement Cd Submit		X	X				
Refund Disbursement UBA Submit							
Refund Disbursement Cd Submit	X			X	X	X	X
Pending or Unavailable							
Pend Ind	X						
Proxy Acct Num	X						
UBA Submit							
UBA Routing and Transit Num Submit	X			X	X	X	X
UBA Depositor Account Num Submit	X			X	X	X	X
Refund Product Elect Cd Submit	X			X	X	X	X
Refund Product CIPCd	X			X	X	X	X
Prim Drvr Lcns Or State Issd Id Grp							
No Drvr Lcns Or State Issd Id	X						
Drvr Lcns Num		X	X	X	X	X	X
Drv Lcns St Cd		X	X	X	X	X	X
Drv Lcns Expr Dt		X	X	X	X	X	X
Drv Lcns Issue Dt		X	X	X	X	X	X
State Issd Id Num		X	X	X	X	X	X
State Issd Id St Cd		X	X	X	X	X	X
State Issd Id Expr Dt		X	X	X	X	X	X
Expr Dt		X	X	X	X	X	X
Non Expr							
State Issd Id Issue Dt		X	X	X	X	X	X
Sps Drvr Lcns Or State Issd Id Grp							
No Drvr Lcns Or State Issd Id		X					
Drv Lcns Num				X			
Drv Lcns St Cd				X			
Drv Lcns Expr Dt				X			

	Test 1	Test 2	Test 3	Test 4	Test 5	Test 6	Test 7
Authentication Header (cont.)	Smith	Grey	Klien	Pratt	Piper	White	Estrada
Drv Lcns Issue Dt				X			
State Issd Id Num				X			
State Issd ID St Cd				X			
State Issd id Expr Dt				X			
Expr Dt				X			
Non Expr							
State Issd Id Issue Dt				X			
Filing History							
Federal Original Submission id	X	X	X	X	X	X	X
Federal Original Submission id Dt	X	X	X	X	X	X	X
State Submission Id Current	X	X	X	X	X	X	X
State Submission Id Orig	X	X	X	X	X	X	X
State Submission Id Date Orig	X	X	X	X	X	X	X
Transmission Detail							
Initial Creation							
IP Address	X	X	X	X	X	X	X
IPTs	X	X	X	X	X	X	X
Device Id	X	X	X	X	X	X	X
Device Type Cd	X	X	X	X	X	X	X
User Agent Txt	X						
Browser Language Txt		X					
Platform Txt		X					
Time Zone Offset Num	X						
System Ts	X	X					
Email Adresst Txt				X		X	
Cell Phone Num				X		X	
Submission							
IP Address	X	X	X	X	X	X	X
IPTs	X	X	X	X	X	X	X
Device Id	X	X	X	X	X	X	X
Device Type Cd	X	X	X	X	X	X	X
User Agent Txt	X						
Browser Language Txt		X					
Platform Txt		X					
Time Zone Offset Num	X						
System Ts	X	X					
Email Adresst Txt		X					
Cell Phone Num		X					

	Test 1	Test 2	Test 3	Test 4	Test 5	Test 6	Test 7
Authentication Header (cont.)	Smith	Grey	Klien	Pratt	Piper	White	Estrada
Final IP Port Number Submit		X					
Tot Active Time Prep Submission Ts					X		
Total Preparation Submission Ts					X		
Trusted Customer							
Trusted Customer Cd	X	X	X	X	X	X	X
OOB Security Verification Cd	X	X	X	X	X	X	X
OOB Destination							
OOB Email	X	X		X	X	X	
OOB Cell Phone		X	X	X	X		X
Last Submission Rqr OOB Cd							X
Profile Change							
User Name Change Inc				X			
Password Change Inc				X			
Email Address Change Ind				X			
Cell Phone Number Change Ind				X			
Authentication Summary Cd						X	
Payment Decline Cd		X					
Authentication Review Cd						X	
Authentication Review Txt						X	
State Issued PIN							
Vendor Customer Number	O	O	O	O	O	O	O
Disaster Relief						X	
Note: Only populate Disaster Relief line if disaster occurred.							
Form 40							
Income							
Line 7 - Federal adjusted gross income	X	X	X	X	X	>350,000	X
Line11 -Qualified business income deduction	X	X	X	X	X	X	X
Line12 - Total Adjusted income	X	X	X	X	X	X	X
Tax Computation							
Line 13a - Age 65 or older		Prime is 65					
Line 13b - Blind		Spouse is blind					
Line 13c - Claimed dependent	X						
Line 14 - Itemized deductions		X	X				
Line 15 - State and local income taxes			X				
Line 17 - Standard deduction	X			X	X	X	X
Line 19 - Taxable Income	X	X	X	X	X	X	X
Line 20 - Tax from tables or rate schedule	X	X	X	X	X	X	X
Credits							
Line 22 - Credit for taxes paid to other states		X					
Line 25 - Idaho Child Tax Credit			X				

Form 40 - (Cont.)	Test 1	Test 2	Test 3	Test 4	Test 5	Test 6	Test 7
Other Taxes	Smith	Grey	Klien	Pratt	Piper	White	Estrada
Line 29 - Sales/use tax due		X					
Line 31 - Tax from recapture of QIE					X		
Line 32 - Permanent building fund	X	X	X	On Public Assistance	X	X	X
Line 33 - Total Tax	X	X	X	X	X	X	X
Donations							
Line 34 - Nongame Wildlife Conservation Fund					X		
Line 35 - Children's Trust Fund					X		
Line 36 - Special Olympics Idaho					X		
Line 37 - Idaho Guard and Reserve Family					X		
Line 39 - Veterans Support Fund					X		
Line 40 - Idaho Food Bank					X		
Line 41 - Opportunity Scholarship Program			X		X		
Payment and Other Credits							
Line 43 - Grocery credit computed	\$0	X	X	X	X	X	X
Line 43a - Irrevocable grocery credit donation					X		
Line 43b - Grocery credit received	\$0	X	X	X	\$0	X	X
Line 44 - Maintaining a home for aged or disabled					X		
Line 46 - Idaho income tax withheld	X	X		X	X	X	
Line 47 - Estimated payment & amount from 2017 return			X				
Line 48a - Pass-through income tax withheld					X		
Line 48b - Pass-through income tax paid by entity					X		
Line 49a - Tax Reimbursement Incentive Credit					X		
Line 49b - Claim of Right					X		
Tax Due or Refund							
Line 51 - Tax Due		X	X				
Line 52a - Penalty		X					
Line 52b - Interest		X					
Line 52 - Penalty and Interest Total		X					
Line 53 - Total Due		X	X				
Line 54 - Overpaid	X			X	X	X	X
Line 55 - Refund	X			X	X		X
Line 56 - Estimated Tax to 2019 Return						X	
Line 57 - IAT Question	X						
Line 57a - Routing and account number	X			X			
Line 57b - Checking				X			

Form 40 - Cont)	Test 1	Test 2	Test 3	Test 4	Test 5	Test 6	Test 7
Tax Due or Refund	Smith	Grey	Klien	Pratt	Piper	White	Estrada
Line 57c - Savings	X						
Line 59 - Refund from original (Amended Returns only)			X				
Line 60 - Tax paid with original return (Amended Returns only)			X				
Line 61 - Amended tax due or refund (Amended Returns only)			X				
Form 39R							
Part A - Additions							
Line 1 - Federal net operation loss carryover							X
Line 2 - Capital loss carryover incurred outside the state			X				
Line 3 - Non-Idaho state and local bond interest and dividends			X				X
Line 4 - Idaho college savings account withdrawal			X			X	
Line 5 - Bonus depreciation			X				
Line 6 - Other additions			X				
Line 7 - Total additions			X			X	X
Part B - Subtractions							
Line 1 - Idaho net operation loss carryover							X
Line 2 - State income tax refund if included in federal income			X				
Line 3 - Interest from U.S. Government obligations					X		
Line 4 - Energy efficiency upgraded					X		
Line 5a - Year 2018					X		
Line 5b - Year 2017					X		
Line 5c - Year 2016					X		
Line 5d - Year 2015					X		
Line 5e - Alternative energy devices total					X		
Line 6 - Child dependent care					X		
Line 7 - Social Security and railroad benefits		X					
Line 8 - Retirement benefits deduction		X					
Line 9 - Technological equipment donation			X				
Line 10 - Idaho capital gains deduction			X				
Line 11 - Active duty military pay earned outside of Idaho					X		
Line 12 - Adoption expenses			X				
Line 13 - Idaho medical savings account (Include Med Savings Acct)					X		
Line 14 - Idaho college saving program						X	
Line 15 - Maintaining home for the aged or disabled		X					
Line 16 - Idaho lottery winnings					X		
Line 17 - Income earned on a reservation by an American Indian			X				
Line 18 - Health insurance premiums					X		
Line 19 - Long-term health care insurance					X		
Line 20 - Worker's Compensation						X	
Line 21 - Bonus depreciation						X	

	Test 1	Test 2	Test 3	Test 4	Test 5	Test 6	Test 7
Form 39R (cont.)	Smith	Grey	Klien	Pratt	Piper	White	Estrada
Line 22 - Other subtractions			X		X		
Line 23 - Total subtractions		X	X		X	X	X
Part C - Retirement Benefits Deduction							
Line 1 - If single enter \$33,456; if married filing jointly enter \$50,184		X					
Line 2 - Federal Railroad Retirement benefits received		X					
Line 3 - Social Security benefits received		X					
Line 5 - Qualified retirement benefits included in federal income		X					
Part D - Credit for Income Tax Paid to Other States							
Line 1a - Other state's 2-letter abbreviation		MI & OR					
Line 1 - Idaho tax, Form 40 - Line 20		X					
Line 2 - Other state's adjusted income		X					
Line 3 - Idaho adjusted income, Form 40 - Line 11		X					
Line 4 - Divide line 2 by line 3		X					
Line 5 - Multiply line 1 by line 4		X					
Line 6 - Other state's tax due less income tax credits		X					
Line 7 - Smaller of line 5 or 6		X					
Part E - Credit for Contributions to Idaho Educational, Youth Rehabilitation, Live Organ Donation							
Line 1 - Credit for contributions to Idaho Educational Entities		X		X			
Line 2 - Credit for contributions to Idaho Youth and Rehabilitation		X		X			
Line 3 - Credit for live organ donation expenses		X		X			
Part F - Maintaing a Home for Family Member Age 65 or Older							
Line 1a - Yes					X		
Line 1b - No							
Line 2a - Yes					X		
Line 2b - No							
Line 3a - FirstName,LastName,SSN,Relationship,DOB, X if disabled					X		
Line 3b - FirstName,LastName,SSN,Relationship,DOB, X if disabled							
Line 3c - FirstName,Last Name,SSN,relationship,DOB, X if disabled							
Line 4 - Total amount claimed					X		
Part G - Dependents							
First Name, Last Name, SSN, Date of Birth						X	
First Name, Last Name, SSN, Date of Birth						X	
First Name, Last Name, SSN, Date of Birth							
First Name, Last Name, SSN, Date of Birth							
First Name, Last Name, SSN, Date of Birth							
First Name, Last Name, SSN, Date of Birth							

	Test 1	Test 2	Test 3	Test 4	Test 5	Test 6	Test 7
	Smith	Grey	Klien	Pratt	Piper	White	Estrada
Form 44							
Part I							
Line 1 - ITC (Form 49)		X					
Line 2 - Production equipment using postconsumer waste		X					
Line 3 - Promoter sponsored event		X					
Line 4 - Idaho research activities (Form 67)		X					
Line 5 - Broadband equipment investment credit (Form 68)		X					
Line 9 - Total business income tax credits allowed		X					
Part II							
Line 1 - ITC (Form 49R)		X					
Line 2 - Broadband (Form 68R)			X				
Line 6 - Total Tax from recapture		X	X				
Additional Schemas							
Form 49		X					
Form 49C		X					
Form 49R		X					
Form 56							
Form 67		X					
Form 68		X					
Form 68R			X	X			
Form 75		X					
Form CG			X				
Form ID-K1					X		
Form 1099R with Idaho withholding		X					
ITC Equipment List		X					
PDF Attachments	Attachment Name						
Form 49E	Form_49E_01						
Form 49ER	Form_49ER_01						
Form 70	Form_70_01						
Reimbursement Act Credit	Reimburse_Credit_01						
Non-Idaho Income Tax Return	OtherState_Return_01						
Non-Idaho Income Tax Return	OtherState_Return_02						
Miscellaneous Statements	Misc_Stmt_01						

Form 43 MeF Test Return Information 2018

Test 8:

400005958
400005962
Luke Larson
Laura Larson
9430 SW Coral St. #100
Portland, OR 97223
Married filing joint
Residency Status- Nonresidents
Current state of residence - OR

Test 12:

Paws Tiger
400005973
2100 Woodward Ave
Detroit, MI 48201
Check the nonresident aliens for federal
purposes box
Single
Residency Status - Nonresident

Test 9:

400005959
400005974
Cindy Mac
Trent Mac
847 11th Ave
Helena, MT 59601
Married filing joint
Residency Status- Resident taxpayer Part-year spouse
Full months in Idaho- Resident 12 months Spouse 6 months Current state
of residence - Taxpayer ID Spouse MT

Test 10:

Amended Indicator (If Supporting Amended Filings)
Amended Reason 3 (If Supporting Amended Filings)
400005960
Scott Squidly
USS Michigan (SSBN 727)
FPO AP 96222
Head of Household
Residency Status- Military Nonresident
Current state of residence- NV 5
dependent children

Test 11:

400005961
400005976
Buck Deer
Debbie Deer
1123 Cleveland Blvd
Caldwell, ID 83607
Married Filing Joint
Residency Status- Taxpayer Idaho Resident on Active Military Duty
Current state of residence- Taxpayer ID Spouse OR
3 dependent children
AGI greater than \$313,800
Additional Information:

- Taxpayers date of birth=Dec 17,1979
- 1st dependent date of birth=June 1, 2000
- 2nd dependent date of birth=Oct 19, 2001
- 3rd dependent date of birth=Nov 8, 2009

Form 43 - MeF Test Data

"X" Indicates Yes - "O" Indicates Optional	Test 8	Test 9	Test 10	Test 11	Test 12
Authentication Header	Larson	Mac	Squidly	Deer	Tiger
Filing License Type Cd	X	X	X	X	X
Financial Resolution					
First Input			X		
Routing Transit Num			X		
Depositor Account Num			X		
Input Timestamp			X		
Submission					
No UBA Disbursement Cd Submit		X		X	
Refund Disbursement UBA Submit					
Refund Disbursement Cd Submit	X		X		X
Pending or Unavailable					
Pend Ind			X		
Proxy Acct Num			X		
UBA Submit					
UBA Routing and Transit Num Submit	X				X
UBA Depositor Account Num Submit	X				X
Refund Product Elect Cd Submit	X		X		X
Refund Product CIP Cd	X		X		X
Prim Drvr Lcns Or State Issd Id Grp					
No Drvr Lcns Or State Issd Id					X
Drvr Lcns Num	X		X	X	
Drv Lcns St Cd	X		X	X	
Drv Lcns Expr Dt -NOTE- THIS IS ON 40	X		X	X	
Drv Lcns Issue Dt	X		X	X	
State Issd Id Num	X		X	X	
State Issd Id St Cd	X		X	X	
State Issd Id Expr Dt	X		X	X	
Expr Dt	X		X	X	
Non Expr					
State Issd Id Issue Dt	X		X	X	
Sps Drvr Lcns Or State Issd Id Grp					
No Drvr Lcns Or State Issd Id	X		X	X	
Drvr Lcns Num	X		X	X	
Drv Lcns St Cd NOTE: THIS IS ON FORM 40	X		X	X	
Drv Lcns Expr Dt	X		X	X	
Drv Lcns Issue Dt	X		X	X	
State Issd Id Num	X		X	X	
State Issd ID St Cd	X		X	X	
State Issd Id Expr Dt	X		X	X	
Expr Dt	X		X	X	
Non Expr					
State Issd Id Issue Dt	X		X	X	
Filing History					
Federal Original Submission Id	X		X		X
Federal Original Submission Id Dt	X		X		X
State Submission Id Current	X		X		X
State Submission Id Orig	X		X		X
State Submission Id Date Orig	X		X		X

Yes - "O" Indicates Optional	Test 8	Test 9	Test 10	Test 11	Test 12
Authentication Header (cont.)	Larson	Mac	Squidly	Deer	Tiger
Transmission Detail					
Initial Creation	X	X	X	X	X
IP Address	X	X	X	X	X
IPTs	X	X	X	X	X
Device Id	X	X	X	X	X
Device Type Cd	X	X	X	X	X
User Agent Txt	X				
Browser Language Txt		X			
Platform Txt		X			
Time Zone Offset Num		X			
System Ts		X			
Email Address Txt		X			
Cell Phone Num		X			
Submission					
IP Address	X	X	X	X	X
IPTs	X	X	X	X	X
Device ID	X	X	X	X	X
Device Type CD	X	X	X	X	X
User Agent Txt			X		
Browser Language Txt	X				
Platform Txt	X				
Time Zone Offset Num	X				
System Ts			X		
Email Address Txt			X		
Cell Phone Num			X		
Final IP Port Number Submit			X		
Tot Active Time Prep Submission Ts	X	X	X	X	X
Total Preparation Submission Ts	X	X	X	X	X
Trusted Customer					
Trusted Customer Cd					X
OOB Security Verification Cd					X
OOB Destination					
OOB Email	X	X	X		
OOB Cell Phone		X		X	X
Last Submission Rqr OOB Cd					X
Profile Change					
User Name Change Inc				X	
Password Change Inc				X	
Email Address Change Ind				X	
Cell Phone Number Change Ind				X	
Authentication Summary Cd				X	
Payment Decline Cd		X			
Authentication Review Cd			X		
Authentication Review Txt			X		
State Issued PIN					
VendorCustomerNumber					
DisasterRelief	X	O	O	O	O
Only populate Disaster Relief line if disaster occurred.					

Form 43	Test 8	Test 9	Test 10	Test 11	Test 12
Line Number	Larson	Mac	Squidly	Deer	Tiger
Line 7 - Wages, salaries, tips etc.	X	X	X	X	X
Line 8 - Taxable interest income		X	X		
Line 9 - Dividend income			X		
Line 10 - Alimony received			X		
Line 11 - Business income or loss			X		
Line 12 - Capital gain or loss			X		
Line 13 - Other gains or losses	X				
Line 14 - IRA distributions		X			
Line 15 - Pensions and annuities			X	X	
Line 16 - Rents, royalties, partnerships, S corporations, trusts, etc			X		
Line 17 - Farm income or loss	X				
Line 18 - Unemployment compensation		X			
Line 19 - Other income	X				
Line 20 - Total income	X	X	X	X	X
Idaho Adjustments					
Line 21 - Deductions for IRA and health savings account		X			
Line 22 - Moving expenses, Alimony Paid, and Student Loan Interest	X				
Line 23 - Deductions for self-employment tax, health insurance, etc.	X				
Line 24 - Penalty on early withdrawal of savings			X		
Line 25 - Other deductions		X	X		
Line 27 - Idaho adjusted gross income	X	X	X	X	X
Column A					
Line 28a - Federal adjusted gross income	X	X	X	X	X
Line 31a - Qualified business income deduction.	X	X	X	X	X
Line 32a - Total Adjusted income Add lines 28 and 29, minus line 30 & 31.	X	X	X	X	X
Column B					
Line 31b - Qualified business income deduction	X	X	X	X	X
Line 32b - Total adjusted income. Add Lines 28 and 29, less line 30 and 31.	X	X	X	X	X
Line 33a - Age 65 or older					
Line 33b - Blind					
Line 33c - Claimed dependent					
Line 34 - Itemized deductions	X	X			X
Line 35 - State and local income or general sales taxes	X	X			X
Line 36 - Standard deduction			X	X	
Line 38 - Idaho percentage	X	X	X		X
Line 40 - Idaho taxable income	X	X	X		X
Line 41 - Tax from tables or rate schedule	X	X	X		X
Line 42 - Income tax paid to other states		X			
Line 45 - Idaho Child Tax Credit				X	
Other Taxes					
Line 48 - Sales/use tax due		X	X		
Line 50 - Tax from recapture of qualified investment exemption OIE			X		
Line 51 - Permanent building fund	X	X	X	X	X
Line 52 - Total tax	X	X	X	X	X
Donations					
Line 53 - Veterans Support Fund	X				
Line 54 - Opportunity Scholarship Program	X				
Line 55 - Idaho Guard and Reserve Family	X				
Line 56 - Idaho Children's Trust Fund	X				

Form 43 (cont.)	Test 8	Test 9	Test 10	Test 11	Test 12
Line Number	Larson	Mac	Squidly	Deer	Tiger
Line 57 - Special Olympics Idaho	X				
Line 58 - Nongame Wildlife Conservation	X				
Line 60 - Idaho Food Bank	X				
Payments					
Line 62 - Grocery credit computed		X		X	
Line 62a - Irrevocable grocery donation				X	
Line 62b - Grocery credit received		X		\$0	
Line 63 - Maintaining a home for aged or disabled				X	
Line 65 - Idaho income tax withheld	X	X	X	X	X
Line 66 - Estimated payments and amount from 2017 return				X	
Line 67a - Pass-through income tax withheld			X		
Line 67b - Pass-through income tax paid			X		
Line 68a - Tax Reimbursement Incentive Credit			X		
Line 68b - Claim of Right			X		
Tax Due					
Line 70 - Tax Due		X		X	
Line 71a - Penalty		X			
Line 71b - Interest		X			
Line 72 - Total Due		X		X	
Refund					
Line 73 - Overpaid	X		X		X
Line 74 - Refund	X		X		X
Line 75 - Estimated tax to 2019 return	X				
Line 76 - IAT question	X				
Line 76a - Routing and account number	X		X		
Line 76b - Checking	X				
Line 76c - Savings			X		
Line 78 - Refund from original return (Amended Returns Only)			X		
Line 79 - Tax paid with original return (Amended Returns Only)			X		
Line 80 - Amended tax due or refund (Amended Returns Only)			X		
Form 39NR					
Part A - Additions					
Line 1a - Non-Idaho state and local bond interest and dividends			X		
Line 1b - Non-Idaho state and local bond interest and dividends			X		
Line 2b - Idaho college savings account withdrawal	X				
Line 3a - Bonus depreciation			X		
Line 3b - Bonus depreciation			X		
Line 4a - Other additions				X	
Line 4b - Other additions			X		
Line 5b Total additions	X		X		
Part B - Subtractions					
Line 1a - Idaho net operation loss carryover (Original Return Only)			X		
Line 1b - Idaho net operating loss carryback (Amended Prior Year Return Or			X		
Line 3a - Interest from U.S. Government obligations			X		
Line 3b - Interest from U.S. Government obligations			X		
Line 4a - Child/dependent care			X		
Line 4b - Child/dependent care				X	
Line 6a - Idaho capital gains deduction			X		
Line 6b - Idaho capital gains deduction			X		
Line 7a - Idaho resident - Active duty military pay earned outside Idaho				X	
Line 7b - Idaho resident - Active duty military pay earned outside Idaho				X	

Form 39NR Cont.	Test 8	Test 9	Test 10	Test 11	Test 12
Line Number	Larson	Mac	Squidly	Deer	Tiger
Line 8a - Idaho medical savings account			X		
Line 8b - Idaho medical savings account			X		
Line 9b - Idaho college savings program			X		
Line 10b - Adoption expenses		X			
Line 11b - Maintaining a home for the aged or disabled			X		
Line 12b - Idaho lottery winnings			X		
Line 13b - Income earned on a reservation by an American Indian					
Line 14b - Worker's Compensation			X		
Line 15a - Partner's and shareholder's pass-through subtractions			X		
Line 16a - Energy Efficiency Upgrades			X		
Line 16b - Energy Efficiency Upgrades			X		
Line 17a - Technological equipment donation			X		
Line 17b - Technological equipment donation			X		
Line 18a - Health insurance premiums			X		
Line 18b - Health insurance premiums			X		
Line 19a - Long-term health care insurance			X		
Line 19b - Long-term health care insurance			X		
Line 20a - Year 2018			X		
Line 20b - Year 2017			X		
Line 20c - Year 2016			X		
Line 20d - Year 2015			X		
Line 22a - Column A - If single enter \$33,456; if married jointly enter \$50,184			X	X	
Line 22b - Column A - Federal Railroad Retirement received				X	
Line 22c - Column A - Social Security benefits received				X	
Line 22e - Column A - Qualified retirement benefits included in federal gross income				X	
Line 22f - Column A Benefits. Lesser of line 22d and line 22e.				X	
Line 22g - Column B - Qualified retirement benefits included in ID gross income				X	
Line 22h - Column B - divide line 22g by line 22e				X	
Line 22i - Column B benefits deduction				X	
Line 23a - Nonresident military pay included in line 28 - Column A			X		
Line 24a - Bonus depreciation			X		
Line 24b - Bonus depreciation			X		
Line 25a - Other subtractions			X		
Line 25b - Other subtractions			X		
Line 26b - Total subtractions			X		
Part C - Credit for Income Tax Paid to Other States					
Enter states 2-Letter abbreviation		MT & OR			
Line 2 - Other state's adjusted income		X			
Line 3 - Amount of income taxed by Idaho and also taxed by another state		X			
Line 7 - Other state's tax due less its income tax credits		X			
Line 10 - Enter the smaller of line 6 or line 9		X			
Part D - Credit for Income Tax Paid to Other States by Idaho Residents					
Enter state 2-letter abbreviation				X	
Line 2 - Other state's adjusted income				X	
Line 6 - Other state's tax due less income tax credits				X	
Line 7 - Smaller of line 5 or 6				X	

	Test 8	Test 9	Test 10	Test 11	Test 12
FORM 39NR (Cont.)	Larson	Mac	Squidly	Deer	Tiger
Part E - Credit for contributions to Educational, Youth Rehabilitation and Live Organ Donations					
Line 1 - Education Contribution Credit		X			
Line 2 - Youth Rehab Contribution Credit		X			
Line 3 - Live Organ donation expenses		X			
Part F - Maintaining a home for Family Member Age 65 or Older					
Line 1a - Yes				X	
Line 1b - No					
Line 2a - Yes				X	
Line 2b - No					
Line 3a - First Name, Last Name, SSN, Relationship, DOB, Check if Disabled				X	
Line 3b - First Name, Last Name, SSN, Relationship, DOB, Check if Disabled				X	
Line 4 - Total amount claimed				X	
Part G - Dependents					
First Name, Last Name, SSN, Date of birth			X		
First Name, Last Name, SSN, Date of birth					
First Name, Last Name, SSN, Date of birth					
First Name, Last Name, SSN, Date of birth					
First Name, Last Name, SSN, Date of birth					
First Name, Last Name, SSN, Date of birth					
FORM 44					
Part I - BUSINESS INCOME TAX CREDITS - CREDIT ALLOWED					
Line 1 - ITC			X		
Line 2 - Production equipment using postconsumer waste			X		
Line 3 - Promoter sponsored event			X		
Line 4 Idaho research activities (Form 67)			X		
Line 5 - Broadband Equipment Investment Credit (Form 68)			X		
Line 9 - Total business tax credits allowed			X		
Part II - TAX FROM RECAPTURE OF BUSINESS INCOME TAX CREDITS					
Line 1 - ITC (Form 49R)			X		
Line 2 - Broadband (Form 68R)			X		
Line 6 - Total Tax from Recapture			X		
ADDITIONAL SCHEMAS					
Form 49			X		
Form 49C			X		
Form 49R			X		
Form 56			X		
Form 67			X		
Form 68			X		
Form 68R			X		
Form 75			X		
Form ID-K1			X	X	
Form 1099R with Idaho Withholding		X		X	
ITC Equipment List			X		
PDF Attachments		Attachment Name			
Form 49E	Form_49E_01		X		
Form 49ER	Form_49ER_01		X		
Form 70	Form_70_01		X		
Form 402	Form_402_01		X		
Reimbursement Act Credit	Reimburse_Credit_01		X		
Miscellaneous Statements	Misc_Stmt_01		X		
Non-Idaho Income Tax Return	OtherState_Return_01		X		