

M EFO00091 09-07-2018

AMENDED RETURN? Check the box. See page 13 of instructions for reasons to amend, and enter the number that applies

State Use Only

For calendar year 2018 or fiscal year beginning, ending

Your Social Security number (required)

PLEASE PRINT OR TYPE

Your first name and initial, Last name, Spouse's first name and initial, Last name, Current mailing address, City, state, and ZIP Code

Deceased in 2018

Deceased in 2018

Forms available at tax.idaho.gov

If the IRS considers you or your spouse a nonresident alien, 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

Full months in Idaho this year. Yourself, Spouse. Current state abbreviation. Yourself, Spouse

FILING STATUS. Check only one box. If married filing jointly or separately, enter spouse's name and Social Security number above.

1. Single, 2. Married filing jointly, 3. Married filing separately, 4. Head of Household, 5. Qualifying widow(er)

HOUSEHOLD. See instructions, page 14. If someone can claim you as a dependent, leave line 6a blank. Enter "1" on lines 6a, and 6b, if they apply.

List your dependents below. If you have more than four, continue on Form 39NR. Enter total number on line 6c.

Table with columns: First Name, Last Name, Social Security Number, Birthdate. Rows for Yourself, Spouse, and Total.

IDAHO INCOME. See instructions, page 14.

Table with 3 columns: Line number, Description, Amount. Lines 7-20.

IDAHO ADJUSTMENTS. See instructions, page 14.

Table with 3 columns: Line number, Description, Amount. Lines 21-27.

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, Taxpayer's phone, Paid preparer's signature, Preparer's EIN, SSN, or PTIN, Preparer's 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.



DON'T STAPLE

