State Tax Commission

Form 43 2020 Part-year Resident and Nonresident Income Tax Return

See	ended Return? Check the box. page 15 of instructions for reasons to end and enter the number that applies		State	Use Only						
For calendar year 2020 or fiscal year beginning, ending										
'pe	Your first name and initial	Last name		Your Social Security numbe	Your Social Security number (required) Deceased					
Print or Type	Spouse's first name and initial	Last name		Spouse's Social Security nur	Spouse's Social Security number (required) Deceased in 2020 in 2020					
e Prin	Current mailing address				Forms and instru	Forms and instructions available at				
Please	City State ZIP Code				tax.idaho.gov					
If th	ne IRS considers you or your spo	use a nonr	esident ali	en, check here	e. • 🗌					
Residency Status Check one for yourself and one for your spouse, if a joint return. Resident Resident Active Military Duty Nonresident Active Military Duty Nonresident Active Military Duty Nonresident Active Military Nonresident Active M										
	Enter the full months in Idaho this year. Spouse S									
Filir	ng Status. Check only one box. If ma	rried filing j	ointly or se	parately, enter s	spouse's name and Social	Secu	rity number above.			
	Single 2. Married filing jointly	3.	Married filin separately		ead of 5. Qual with	ifying v qualifyi	vidow(er) ing dependents			
Household	See instructions, page 16. If some 6a. Yourself 6b. Spous List your dependents below. If you Dependent's first name	se have more t	6c. Depe	ndentsependents, conti	6d. Total Household	r total ı	number on line 6c. ependent's birthdate (mm/dd/yyyy)			
	See instructions, page 16.					Idaho Amounts				
	7. Wages, salaries, tips, etc. Include Form W-2s					 +	00			
	8. Taxable interest income					8	00			
	10. Alimony received					10	00			
Je	11. Business income or (loss). Include federal Schedule C or C-EZ						00			
Idaho Income	12. Capital gain or (loss). If required, include federal Schedule D					12	00			
n n	13. Other gains or (losses). Include federal Form 4797					13	00			
laho	14. IRA distributions (taxable amount)					-	00			
P	15. Pensions and annuities (taxable amount)					15	00			
	16. Rents, royalties, partnerships, S corporations, trusts, etc. Include federal Schedule E					16	00			
	18. Unemployment compensation						00			
	19. Other income. Include explanation					18	00			
	20. Total Income. Add lines 7 through 19					20	00			

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Idaho Adjustments	See instructions, page 17.		
	21. Deductions for IRAs, health savings accounts, and IRC 501(c)(18)(D) retirement plan	21	00
	22. Moving expenses, alimony paid, and student loan interest	22	00
	23. Deductions for self-employment tax, health insurance, and qualified retirement plans	23	00
	24. Penalty on early withdrawal of savings	24	00
ho /	25. Other deductions. See instructions	25	00
lda	26. Total Adjustments. Add lines 21 through 25	26	00
	27. Adjusted Gross Income. Subtract line 26 from line 20	27	00
	Column A - Federal	Column B - Idah	o
	28. Enter amount from federal Form 1040, line 8b. Enter amount from line 27 in Column B		
	Enter amount from line 27 in Column B		00
	Include Form 39NR		00
	30. Subtractions from Form 39NR, Part B, line 27. Include Form 39NR		00
	31. Qualified business income deduction 31 00	 -	00
	32. Total Adjusted Income. Add lines 28 and 29 minus	-	00
	lines 30 and 31	•	00
1	andard		
	duction a. If age 65 or older Vourself Laborated Spouse		
P	People 33. Check — b. If blind • Yourself • Spouse		
	ingle or c. If your parent or someone else can claim you as a dependent, check here and enter zero on line 63 •		
	parately: dependent, check here and enter zero on line os •		
'	34. Itemized deductions. Include federal Schedule A. Federal limits apply	34	00
Hou	usehold: 35. State and local income or general sales taxes included on federal Schedule A	35	00
'	36. Subtract line 35 from line 34. If you don't use federal Schedule A, enter zero	36	00
Jo	inity or 37. Enter the standard deduction for your filing status. See instructions, page 19, inlifying to determine amount if not standard	37	00
Wid	- dow(er): 38. Enter the larger of line 36 or line 37	38	00
Ψ2	39. Idaho percentage. Divide line 32, Column B, by line 32, Column A	 	%
	40. Multiply amount on line 38 by the percentage on line 39 and enter the result here	40	00
	41. Idaho taxable income. Subtract line 40 from line 32, Column B	41	00
	42. Tax from table or rate schedule. See instructions, page 52	42	00
	43. Income tax paid to other states. Include Form 39NR and other states' returns	43	00
र	44. Total credits from Form 39NR, Part E, line 4. Include Form 39NR	44	00
Credits	45. Total business income tax credits from Form 44, Part I, line 10. Include Form 44	45	00
င်	46. Idaho Child Tax Credit. Computed amount from worksheet on page 21	46	00
	47. Line 42 minus lines 43 through 46. If less than zero, enter zero	47	00
	48. Fuels use tax due. Include Form 75	48	00
Other Taxes	49 . Sales/use tax due on untaxed purchases (online, mail order, and other)	49	00
	50. Total tax from recapture of income tax credits from Form 44, Part II, line 6.	50	
	Include Form 44	50	00
	Include Form 49ER	51	00
ᅙ	52. Permanent building fund tax.	52 10	00
	Check the box if you received Idaho public assistance payments for 2020		
	53. Total Tax. Add lines 47 through 52	53	00

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2020

(continued)

	I want to donate to:							
Donations	- 3	5. Idaho Children's Trust Fun						
	56. Special Olympics Idaho 5	7. Idaho Guard and Reserve	Family					
		9. Veterans Support Fund						
	60. Idaho Foodbank Fund 6							
	62. Total Tax Plus Donations. See instructions,	page 22. Add lines 53 thr	ough 61	62	00			
	63. Grocery Credit. Computed amount from work							
	To donate your grocery credit to the Coopera							
	check the box and enter zero on line 63							
	To receive your grocery credit, enter the co	- 63	00					
S	 Maintaining a home for family member age 6 developmentally disabled. Include Form 39N 	 Maintaining a home for family member age 65 or older or developmentally disabled. Include Form 39NR 						
ent	65. Special fuels tax refund Gasolin	65	00					
Payments	66. Idaho income tax withheld. Include Form W-2 show Idaho withholding	. 66	00					
ш	67. 2020 Form 51 payments and amount applied	from 2019 return		• 67	00			
	68. Pass-through income tax. Paid by entity •	8. Pass-through income tax. Paid by entity • Withheld •						
	Include Form ID K-1s			68	00			
	69. Tax Reimbursement Incentive credit • See instructions			69	00			
	70. Total Payments and Other Credits. Add line			- - - - - - - - - - 	00			
	71. Tax Due. If line 62 is more than line 70, subtr	-			00			
	72. Penalty • Interest from the du			72	00			
Tax Due	Check the box if penalty is caused by an unq savings account withdrawal	12	100					
ř	73. Total Due. Add lines 71 and 72. Pay online of	72	00					
		Idaho State Tax Commission						
nd	74. Overpaid. If line 62 is less than 70, subtract line	Τ' '	00					
Refund	75. Refund. Amount of line 74 to be refunded to	Refund. Amount of line 74 to be refunded to you						
<u>"</u>	76. Estimated Tax. Amount of line 74 to be appli	• 76	00					
	77. Direct Deposit. See instructions, page 25.	• Check if final de	eposit destination is	outside of the U.S.				
	Routing No.			Checking				
		t:						
	Account No.			■ Savings				
eq	78. Total due (line 73) or overpaid (line 74)	8. Total due (line 73) or overpaid (line 74)						
Amended	79. Refund from original return plus additional refur	- 79	00					
Ĭ,	80. Tax paid with original return plus additional ta	• 80	00					
_	81. Amended tax due or refund. Add lines 78 and			81	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.								
	Your signature	Taxpayer's phone number						
Sig Her		Preparer's EIN, SSN or PTIN	reparer's phone number					
		•						
Prep	arer's address	State ZIF	Code [Date				
MAIL TO: Idaho State Tax Commission, PO Box 56, Boise, ID 83756-0056								

Include a complete copy of your federal return.