

2022 Idaho 2-D Barcode Specifications

October 2022

September, 2022 Dear Developers:

2022 Summary of Form changes are:

Form 40:

- "Foreign country" has been added to address
- Form line 43, "Grocery Credit", new data order:
 Donation check box and Grocery Credit amount have switched positions
- Form line 53 has become "Nonrefundable credit from a prior year return"
- Form line 54 has become "Total Due"
- Form line 55 has become "Overpaid"
- Form line 56 has become a combination of "Refund" and "Apply to 2023"

Form 44:

- "Part III, Nonrefundable Credit From a Prior Year Return" has been added, to include:
 - o "Year" and "Nonrefundable Credit" table with columns "A-G"
 - o Form line 1, "Total nonrefundable credit"
 - o Form line 2, "Reserved for 2023"
 - o Form line 3, "Add lines 1 and 2"
 - o Form line 4, "Enter tax due"
 - o Form line 5, "Credit allowed"
 - o Form line 6, "Credit remaining"

2022 Summary of Index changes are:

Form 40:

Index 4: updated year

Index 10: updated year

Index 24: updated year

Index 25: updated year

Index 59: updated year

Indexes 72-73: adjustment to form line 43

Index 88: new element: Nonrefundable credit from prior year

Index 92: Apply to 2023

Indexes 88-102: updated index numbers

Form 39R:

Index 115: updated year

Index 116: updated year

Index 117: updated year

Index 118: updated year

Indexes 103-149: updates index numbers

Form 75:

Indexes 150-229: updated index numbers

Form 44:

Indexes 254-267: new element: Nonrefundable Year and Credit Table

Index 268: new element: Total nonrefundable credit

Index 269: new element: Reserved for TY23

Index 270: new element: Total Credit

Index 271: new element: Tax due, penalty, and interest

Index 272: new element: Credit allowed

Index: 273: new element: Credit Remaining

Indexes: 230-273: updated index numbers

Idaho 2D Specification Totals:

2440 Idaho Form 40 with all fields at maximum data length, this includes the Schedule 39R, Form 44 and the Form 75.

274 Idaho Form 40 field delimiters (carriage return)

2714 Total characters with field delimiters and all fields at maximum data length.

Version Descriptions and Header Sample

The **Header Version** follows the FTA header specification and should be "T1" in all cases. Specification Version follows ISTC's specifications, and will be zero (0) unless ISTC issues specification change. Software Version refers to the partner's test and authorized version, and should begin with "01" with no change occurring to the authorized software, or version number, unless requested by ISTC.

Header Example: Index 1 - Header Version Number "T1"

Index 2 - Developer Code "1234"

Index 3 - Taxing Jurisdiction "ID"

Index 4 - Tax Year "2022"

Index 5 - Idaho Form Type "40" Index 6 - Specification Version "0"

Index 7 - Software Version "01"

Alpha Characters

All alpha characters must be in upper case in the 2D barcode.

2D Barcode

The Idaho Form 40 is the only form with the 2D barcode printed on it, but the barcode will contain information from Forms 39R, 75, and 44 as defined in this publication.

Test Submission Requirements:

- Include a cover letter requesting 2D barcode approval with a contact person name, phone number, and email address with your submissions.
- Tests must be submitted in complete sets, consisting of all scenarios not yet approved, via email with PDF attachments to substituteforms@tax.idaho.gov
- The PDFs must contain accurately placed 2D and 1D barcodes, and must include accurate substitute forms and values.
- Initial approval will occur once we determine accuracy between your 2D barcode and our specifications and test plan. Final authorization will occur once your barcode accurately tests through our extract software.

Software developers agree to make changes to software until final authorization is granted.

Approval

- 2D barcode forms must be approved by the Idaho State Tax Commission (ISTC) before providing the software to your clients.
- The software that produces the 2D barcode that ISTC authorizes must be integrated into your production environment without change.

2D Program Contacts

Primary Contact Electronic Data Management Team PO Box 36 11321 W. Chinden Blvd Bldg 2 Boise, ID 83714-1021 substituteforms@tax.idaho.gov

Secondary Contact Bill Hofstra PO Box 36 11321 W. Chinden Blvd Bldg 2 Boise, ID 83714-1021 bill.hofstra@tax.idaho.gov 208-334-7782

		2-D Barcode Reco	ord Layout Sp	ecifications:	Idaho Form 40, October 2022 (All change in red)	
1	Header	Version Number	2	Alpha/Num eric	Required entry. "T1" (Standard FTA accepted header field)	
2	Header	Developer Code	4	Alpha/Num eric	Required entry. NACTP ASSIGNED CODE (Standard FTA accepted header field)	
3	Header	Taxing Jurisdiction	2	Alpha	Required entry. "ID"	
4	Header	Tax Year	4	NumericRequ	ired entry. "2022"	Year updated
5	Header	Idaho Form Type	3	Numeric	Required entry. "40"	
6	Header	Specification Version	1	Numeric	Draft versions of the specifications are not assigned version numbers. Final version = "0", revision thereafter will increase numerically. (Per FTA standard)	
7	Header	Software Version	2	Numeric	Required entry. Identify vendor changes to the software. (Per FTA standard)	
8	Header	Amended Return	1	Alpha	"X" = box is marked. Blank = box is not marked	
9	Header	Amended Reason	1	Numeric	Must be 1,2,3, or 4 if Amended Return box is marked	
10	Header	Calendar year 2022, or fiscal year beginning	8	Numeric	(MMDDYYYY)	Year Updated
11	Header	Fiscal year Ending	8	Numeric	(MMDDYYYY)	
12	Header	Primary First name	16	Alpha	Required entry, First Name	
13	Header	Primary Middle Initial	1	Alpha	Required entry	
14	Header	Primary Last Name	35	Alpha/Num eric	Required entry Last Name, and suffix if present (i.e. Sr., Jr.)	
15	Header	Primary SSN	9	Numeric	Required entry	
16	Header	Spouse First Name	16	Alpha	Required entry if married filing joint or married filing separate otherwise blank.	
17	Header	Spouse Middle Initial	1	Alpha	Required entry if married filing joint or married filing separate otherwise blank.	
18	Header	Spouse Last Name	35	Alpha/Num beric	Required entry if married filing joint or married filing separate otherwise blank.	
19	Header	Spouse SSN	9	Numeric	Required entry if married filing joint or married filing separate otherwise blank.	
20	Header	Mailing Address	35	Alpha/Num beric	Required entry	
21	Header	City	22	Alpha/Num beric	Required entry	
22	Header	State	2	Alpha	Required entry "Standard postal abbreviation"	
23	Header	Zip Code	9	Numeric	Required entry, left justified. Do not zero fill	
24	Header Prime	Prime Deceased in (2022)	1	Alpha	"X" = box is marked. Blank= box is not marked	Year updated
25	Header	Spouse Deceased in (2022)	1	Alpha	"X" = box is marked. Blank= box is not marked	Year updated
26	Return	Filing Status (Single)	1	Alpha	"X" = box is marked. Blank = box is not marked	
27	Return	Married Filing Joint	1	Alpha	"X" = box is marked. Blank = box is not marked	
28	Return	Married Filing Separate	1	Alpha	"X" = box is marked. Blank = box is not marked	
29	Return	Head of Household	1	Alpha	"X" = box is marked. Blank = box is not marked	
30	Return	Qualifying Widow	1	Alpha	"X" = box is marked. Blank = box is not marked	

31	6a	Prime	1	Numeric	0" if claimed by someone else. Otherwise "1"	
32	6b	Spouse	1	Numeric	"0" if claimed by someone else. Otherwise "1"	
33	6c	Dependents	2	Numeric	"0" – "99"	
34	6d	Total Household	2	Numeric	"0" – "99"	
35	7	Federal Adjusted Gross Income	12	Numeric	9999999999 or -9999999999 (Significant digits only, no cents, do not zero fill.	
36	8	Additions	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill.	
37	9	Total	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill.	
38	10	Subtractions	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill.	
39	11	Total Adjusted Income	12	Numeric	9999999999 or -9999999999 (Significant digits only, no cents, do not zero fill.	
40	12a	Prime 65 or older	1	Alpha	"X" = box is marked. Blank = box is not marked	
41	12a	Spouse 65 or older	1	Alpha	"X" = box is marked. Blank = box is not marked	
42	12b	Prime Blind	1	Alpha	"X" = box is marked. Blank = box is not marked	
43	12b	Spouse Blind	1	Alpha	"X" = box is marked. Blank = box is not marked	
44	12c	Claimed dependent	1	Alpha	"X" = box is marked. Blank = box is not marked	
45	13	Itemized Deductions	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill. Schedule A, Line 17)	
46	14	State and local income taxes	12	Numeric	99999999999999999999999999999999999999	
47	15	Net Idaho itemized deductions	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
48	16	Standard Deduction	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
49	18	Qualified Business Income Deduction	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
50	19	Taxable Income	12	Numeric	9999999999 or -9999999999 (Significant digits only, no cents, do not zero fill.	
51	20	Tax	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
52	22	Income tax paid to other state	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
53	24	Business Credits from Form 44	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
54	25	Idaho Child Tax Credit	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
55	26	Total Credits	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
56	28	Fuels Tax due	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
57	29	Sales/Use tax due	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
58	31	Tax from recapture of qualified investments exemption	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
59	32	Public Assistance 2022	1	Alpha	"X" = box is marked. Blank = box is not marked. If box is marked they do not pay the $$10.00$ Permanent building fund tax.	Year Update
60	32a	Permanent Building fund	2	Numeric	(Significant digits only, no cents, do not zero fill) Only 10 is acceptable). The 10.00 is only applicable if the taxpayer has not marked the public assistance box and they meet the filing requirement	
61	33	Total Tax	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
62	34	Idaho Nongame Wildlife	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	

63	35	Children's Trust Fund	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
64	36	Special Olympics	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
65	37	Idaho Guard	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
66	38	American Red Cross	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
67	39	Veterans Support	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
68	40	Idaho Food Bank	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
69	41	Opportunity Scholarship Program	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
70	42	Total Tax plus donations	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
71	43	Grocery Credit computed	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
72	43a	Grocery Credit amount	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	New position in form
73	43b	Grocery Credit donation	1	Alpha	"X" = box is marked. Blank = box is not marked. If the box is marked X all the grocery credit will be donated and will not be refundable on an amended return.	New position in form
74	44	Maintaining home for family aged	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
75	45a	Special fuel tax refund	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
76	45b	Gasoline tax refund	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
77	46	Idaho withholding	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
78	47	Estimated Payment	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
79	48a	Paid by Entity	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
80	48b	Pass through Withheld	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
81	48c	Affected Business Entity (ABE)	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
82	49a	Reimbursement Incentive Act Credit	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
83	49b	Claim of Right Credit	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
84	51	Tax Due	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
85	52a	Penalty	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
86	52b	Interest	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
87	52c	Penalty withdraw from medical savings account	1	Alpha	"X" = box is marked. Blank = box is not marked	
88	53	Nonrefundable Credit	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	New element
89	54	Total Due	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	New position in form
90	55	Overpaid	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	New position in form
91	56a	Refund	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	New position in form
92	56b	Apply to 2023	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	New position in form
93	57a	IAT	1	Alpha	"X" = box is marked. Blank = box is not marked	Ongoing index # change
94	57b	Routing Number	9	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
95	57c	Account Number	17	Alpha/Num eric	Account number can be up to 17 characters left justify do not zero fill. Do not use hyphens, spaces or special symbols	
96	57d	Checking account box	1	Alpha	"X" = box is marked. Blank = box is not marked	

97	57e	Savings account box	1	Alpha	"X" = box is marked. Blank = box is not marked	Ongoing index # change
98	59	Refund from original return	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
99	60	Tax paid with original return	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
100		Authorize Preparer Check box	1	Alpha	"X" = box is marked. Blank = box is not marked	
101		Paid preparer EIN, SSN or PTIN	9	Alpha/Num eric		
102		Daytime Phone	10	Numeric	Left justified. Do not zero fill	

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ended R	eturn	? Check th	e box.	• 8	Stat	te Us	e Only					
				• 9								
calendar y	ear 20/	22 or fiscal	year beginn	ing <u>10</u>	, endir	ng <u>1</u>	11					
Your first	name a	nd initial 13		14					15		24	Deceased in 2022
Spouse's	first na	me and initia	al	Spouse's 1	ast name				Spouse's Social Security nu 19	mber (SSN	11761	Deceased in 2022
	nailing a	address 20										at
City		21					ZIP code 23		Foreign country (if not U.S.)			
ng Statı	ıs. Ch	eck only or	ne box. If m	narried filin	g jointly o	or se	eparately,	enter s				
	-											
isehold.	See in	structions,	page 7. If so	omeone can	claim you a	as a	dependent,	leave li	ne 6a blank. Enter "1" on lin	es 6a and	6b, if they a	oply.
Sa. Yours	self _	<u>31 </u>	6b. Spo	use 32	6c.	Dep	pendents_	<u>33 </u>	6d. Total household <u></u>	<u> 84 </u>		
t your de	pende	nts below.	If you have	more than	four depe	ende	ents, contin	ue on l	Form 39R. Enter total nur	nber on li	ine 6c.	
С	epende	nt's first nan	ne		Dependent	i's las	st name		Dependent's SSN	De	•	
ome. Se	e insti	uctions,	page 7.									
Enter y	our fec	leral adjus	ted gross in	ncome from	n federal F	orm	1040 or 10	040-SF	R, line 11.		0.5	
										7		00
										8		00
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Compi	utatio	n. See ins	structions,	page 8.								
tandard eduction or Most		Γ	a. If age	65 or older			[-	40 You	rself • 41 Spouse			
People	12.	Check —					-	_	· <u> </u>			
ingle or ried Filina			•	•				•				
parately:		L	_ depen	dent, check	k here and	dent	ter zero on	line 43	3 ■ 44			
	13.	Itemized d	eductions.	Include fed	leral Sche	dule	A. Federa	l limits	apply	13	45	00
										-		00
19,400				-						15	47	00
ried Filing				•							48	00
ointly or ualifying.	17.	Subtract th	ne larger of	f line 15 or	16 from lir	ne 1	1. If less th	an zero	o, enter zero	17		00
idow(er): 625,900			_							1 8	49	00
	ended R page 7 of mend, and calendar y Your first 12 Spouse's 16 Current r City Sehold. Sa. Yours t your de t your de Addition Total A Subtract Total A Subtract Total A Compt Candard duction Total A Subtract Total A Compt Candard Compt	page 7 of the instruend, and enter the calendar year 20 Your first name at 12 Spouse's first name at 16 Current mailing at 16 City Total Single sehold. See instructions from Additions from Total. Add line Subtractions from Total Additions from Subtractions from Total Additions fro	ended Return? Check the page 7 of the instructions for the mend, and enter the number the calendar year 2022 or fiscal and the page 7 of the instructions for the mend, and enter the number the calendar year 2022 or fiscal and the page 7 of the instructions for the page 7 of the page 7 of the instructions for the page 7 of the instructions for the page 7 of the page 8 of the page 9 of	ended Return? Check the box. page 7 of the instructions for the reasons mend, and enter the number that applies. calendar year 2022 or fiscal year beginn Your first name and initial 12 13 Spouse's first name and initial 16 17 Current mailing address 20 City 21 Ing Status. Check only one box. If mailing address 20 City 21 Ing Status. Check only one box. If mailing address 31 Seehold. See instructions, page 7. If so a your dependents below. If you have been a complete copy of your few additions from Form 39R, Part A, limple of the page of the pa	ended Return? Check the box. page 7 of the instructions for the reasons mend, and enter the number that applies. calendar year 2022 or fiscal year beginning 10 Your first name and initial 12 13 14 Spouse's first name and initial 16 17 Current mailing address 20 City 21 Ing Status. Check only one box. If married filling jointly or great structions, page 7. If someone can be some from liclude a complete copy of your federal return Additions from Form 39R, Part A, line 7. Include a complete copy of your federal return Additions from Form 39R, Part A, line 7. Include Total. Add lines 7 and 8	ended Return? Check the box. page 7 of the instructions for the reasons mend, and enter the number that applies. calendar year 2022 or fiscal year beginning 10 , ending your first name and initial 12 13	ended Return? Check the box. page 7 of the instructions for the reasons mend, and enter the number that applies. calendar year 2022 or fiscal year beginning 10 , ending 12 13	ended Return? Check the box. page 7 of the instructions for the reasons nend, and enter the number that applies. calendar year 2022 or fiscal year beginning 10 , ending 11 Your first name and initial 12 13 Spouse's first name and initial 16 17 Current mailing address 20 City 21 State ZiP code 22 23 Ing Status. Check only one box. If married filling jointly or separately, or separately, or separately and separately are typically a separately and the separately are typically and separately and separately are typically and separately are typically and separately are typically and separately are typically and separately and separately are typically and separately are typic	ended Return? Check the box. page 7 of the instructions for the reasons mend, and enter the number that applies. 2	are Tax Commission Individual Income Tax Return anded Return? Check the box. State Use Only apage 7 of the instructions for the reasons and enter the number that applies. applies 12	are Tax Commission Individual Income Tax Return ended Return? Check the box.	ate Tax Commission Individual Income Tax Return ended Return? Check the box, page 7 of the instructions for the reasons mend, and enter the number that applies. State Use Only page 7 of the instructions for the reasons mend, and enter the number that applies. Page 11

Continue to page 2.

19. Idaho taxable income. Subtract line 18 from line 17.....

20. Tax from tables or rate schedule. See instructions, page 53

Page 1 of 2

MAIL TO: Idaho State Tax Commission, PO Box 56, Boise, ID 83756-0056 Include a complete copy of your federal return.

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EFO00089 09-16-2022v11

100

EFO00089

09-16-2022v11

IDAHO State Tax Commission	Form 4	40	2022	(continu	ied)
21. Tax amount from line 20		21			00
Credits. Limits apply. See instructions, page 9.					
22. Income tax paid to other states. Include Form 39R and a copy of other states' returns • 22 52	00)			
23. Total credits from Form 39R, Part D, line 4. Include Form 39R	00)			
24. Total business income tax credits from Form 44, Part I, line 10. Include Form 44 24 53	00)			
25. Idaho Child Tax Credit. Computed amount from worksheet on page 10 25 54	00)			
26. Total Credits. Add lines 22 through 25		26	55		00
27. Subtract line 26 from line 21. If line 26 is more than line 21, enter zero		27			00
Other Taxes. See instructions, page 10.					
28. Fuels use tax due. Include Form 75		28	56		00
29. Sales/use tax due on untaxed purchases (online, mail order, and other)		29	57		00
30. Total tax from recapture of income tax credits from Form 44, Part II, line 6. Include Form 44		30			00
31. Tax from recapture of qualified investment exemption (QIE). Include Form 49ER		31	58		00
32. Permanent building fund tax.					
Check the box if you received Idaho public assistance payments for 2022	59	32	60	10	00
33. Total Tax. Add lines 27 through 32		33	61		00
Donations. See instructions, page 10. I want to donate to:					
34. Idaho Nongame Wildlife Fund • 62 35. Idaho Children's Trust Fund • 6	3				
36. Special Olympics Idaho 37. Idaho Guard & Reserve Family 6					
38. American Red Cross of Idaho Fund • 66 39. Veterans Support Fund					
40. Idaho Food Bank Fund	_				
42. Total Tax Plus Donations. Add lines 33 through 41		42	T 70		00
Payments and Other Credits.		+	1		100
43. Grocery Credit. Computed amount from worksheet on page 11					
To receive your grocery credit, enter the computed amount on line 43		43	72		00
To donate your grocery credit to the Cooperative Welfare Fund, check the box and enter zero on line 43					100
44. Maintaining a home for family member age 65 or older or developmentally disabled. Include Form 39		44	74		00
		45			00
45. Special fuels tax refund 75 Gasoline tax refund 76 Include Form 7	-	46			00
46. Idaho income tax withheld. Include Form W-2s and any 1099s that show Idaho withholding					
47. 2022 Form 51 estimated payments and amount applied from 2021 return		47	10		00
48. Paid by entity • 79 Withheld • 80 ABE • 81 See instructions		48			00
49. Tax Reimbursement Incentive credit • 82 Claim of Right credit • 83 See instruction		49			00
50. Total Payments and Other Credits. Add lines 43 through 49		50			00
Tax Due or Refund. See instructions, page 12.			84		
51. Tax Due. If line 42 is more than line 50, subtract line 50 from line 42		150	- 04		00
52. Penalty • 85 Interest from the due date • 86 Enter total		52			00
Check box if penalty is caused by an unqualified Idaho medical savings account withdrawal			1 00		
53. Nonrefundable credit from a prior year return. See Form 44 instructions		53			00
54. Total Due. Add lines 51 and 52, then subtract line 53		54	89		00
55. Overpaid. If line 42 is less than line 50, subtract lines 42 and 52 from line 50	·····•	55	90		00
56. Refund • 91 Apply to 2023 • 92					
57. Direct Deposit. See instructions, page 13. • 93 Check if final deposit destination is outside	de the l	ıs			
• Routing No. 94 • Account No. 95				Check	
Amended Return Only. Complete this section to determine your tax due or refund. See instruct	ions	+	Т		\Box
58. Total due (line 54) or overpaid (line 55) on this return		58			00
59. Refund from original return plus additional refunds		59	98		00
		60	99		
60. Tax paid with original return plus additional tax paid61. Amended tax due or refund. Add lines 58 and 59 then subtract line 60		61	- 33		00
Within 180 days of receiving this return, the Idaho State Tax Commission may discuss this return with the			r identifie	d helow	00

57. Direct Deposit. See instructions, page 13. • 93 Check if final deposit destination is outside the U.	S.	Type of • Check	kina 🤇
Routing No. 94 - Account No. 95		Account: • Savin	
Amended Return Only. Complete this section to determine your tax due or refund. See instructions.			
58. Total due (line 54) or overpaid (line 55) on this return	58		00
59. Refund from original return plus additional refunds	59	98	00
60. Tax paid with original return plus additional tax paid	60	99	00
61. Amended tax due or refund. Add lines 58 and 59 then subtract line 60	61		00
Within 180 days of receiving this return, the Idaho State Tax Commission may discuss this return with the paid pre	pare	r identified below.	

	Within 180 days of receiving this return, the Ida	aho State T	ax Commission may	discuss this return with the p	oaid preparei	r identified below.	
	Under penalties of perjury, I declare that to the	e best of m	y knowledge and bel	lief this return is true, correct	, and comple	ete. See instructions.	
	Your signature (required)		Spouse's signature (if	a joint return, both must sign)		Date	
.	•		•				
Sign Here	Paid preparer's signature		Preparer's EIN, S	SN PTIN	Taynayer's	phone number	-
ilere	a dia proparer o dignature		101	514, 1 1114	102	priorie riumbei	
			• 101		102		
Prepa	rer's address	State	ZIP code	Preparer's phone number			

			2-D Barcod	e Record L	ayout Specifications Idaho. Form 39R	
103	1	Federal Net Operating loss carryover	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	Ongoing index # change
104	2	Capital loss carryover	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
105	3	Non-Idaho state and local bond interest and dividends	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
106	4	Idaho college savings account	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
107	5a	Current Year Loss Limitation	1	Alpha	"X" = box is marked. Blank = box is not marked	Updated Description
108	5b	Bonus Depreciation (Additions)	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
109	6	Other Additions	12	Numeric	9999999999999999 (Significant digits only, no cents, do not zero fill)	
				Form 3	BSR Section B. Subtractions	·
110	1a	Idaho net operating loss carryover	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	Ongoing index # change
111	1b	Idaho net operating loss carry back	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
112	2	State income tax refund	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
113	3	Interest from U.S, government obligations	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
114	4	Energy Efficiency Upgrades	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
115	5a	Alternative Energy 2022	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	Updated Year
116	5b	Alternative Energy 2021	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	Updated Year
117	5c	Alternative Energy 2020	12	Numeric	9999999999999999 (Significant digits only, no cents, do not zero fill)	Updated Year
118	5d	Alternative Energy 2019	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	Updated Year
119	5e	Alternative Energy Total	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
120	6	Child Care	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
121	7	Social Security	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
122	8a	Retirement Benefit	12	Numeric	9999999999999999 (Significant digits only, no cents, do not zero fill)	
123	8b	Federal railroad retired benefits	12	Numeric	9999999999999999 (Significant digits only, no cents, do not zero fill)	
124	8c	Social Security benefits received	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
125	8e	Qualified retirement benefits	12	Numeric	99999999999999999999999999999999999999	
126	8f	Retirement Benefits Deduction	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
127	9	Technological	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
128	10	Idaho capital gains deductions	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
129	11	Military Pay	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
130	12	Adoption Expense	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
131	13	Idaho Medical savings account	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
132	14	Idaho college savings program	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
133	15	Home for the aged	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	

134	16	Idaho Lottery	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	Ongoing index # change
135	17	Income earned on a reservation by an American Indian	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
136	18	Health Insurance	12	Numeric	99999999999999999999999999999999999999	
137	19	Long-Term care Insurance	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
138	20	Worker's compensation	12	Numeric	9999999999999999 (Significant digits only, no cents, do not zero fill)	
139	21	Bonus Depreciation (Subtractions)	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
140	22a	First-time home buyer attestation	1	Alpha	"X" = box is marked. Blank = box is not marked	
141	22b	First-time home buyer savings account	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
142	23	Other Subtractions	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
	•		Form 39	R Section C. C	Credit for income tax paid to other states	
143	С	State Name credit for taxes paid	2	Alpha	Abbreviated state name of where taxes were paid, if more than one state you must attach additional 39R's. Example Idaho "ID"	Ongoing index # change
144	2	Other states adjusted income	12	Numeric	9999999999999999 (Significant digits only, no cents, do not zero fill)	
145	6	Other state's tax due less credits	12	Numeric	99999999999999999999999999999999999999	
146	7	Total Line	12	Numeric	99999999999999999999999999999999999999	
		Form 39R Sec	tion D. Credits fo	r Idaho educ	ational entity and Idaho Youth and rehabilitation contributions	
147	1	Education credit	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	Ongoing index # change
148	2	Youth and Rehab. Credit	12	Numeric	9999999999999999 (Significant digits only, no cents, do not zero fill)	
149	3	Live organ Don.	12	Numeric	9999999999999999 (Significant digits only, no cents, do not zero fill)	



Social Security number Names as shown on return A. Additions. See instructions, page 27. 103 1. Federal net operating loss deduction included on Form 40, line 7...... 00 104 2. Capital loss carryover incurred outside the state before becoming an Idaho resident...... 00 105 00 3. Non-Idaho state and local bond interest and dividends 106 4 00 4. Idaho college savings account withdrawal..... 5. Bonus depreciation. Include federal Form 4562s 108 Check the box if you have a current year loss limitation, see instructions •...... 5 00 109 6 00 6. Other additions. Include explanation..... 7. Total additions. Add lines 1 through 6. Enter here and on Form 40, line 8...... 00 B. Subtractions. See instructions, page 29. 110 Idaho net operating loss carryover • 00 Idaho net operating loss carryback • Enter total here 112 2 00 2. State income tax refund, if included in federal income 113 00 3. Interest from U.S. government obligations..... 114 00 4. Energy efficiency upgrades 5. Alternative energy device deduction Year Type of Device **Acquired** Total Cost Percentage 115 00 Χ 40% 5a 2022 \$ a. 116 2021 \$ Х 20% 5b 00 b. 117 00 Χ 20% 2020 \$ 5с C. 118 00 \$ Χ 20% 2019 5d d. 119 5e 00 e. Add lines 5a through 5d. Can't exceed \$5,000 120 00 6. Child/dependent care. Complete worksheet on page 30, and include federal Form 2441......... 121 00 7. Social Security and railroad benefits, if included in federal income......... 8. Retirement benefits deduction 8a 122 00 a. If single, enter \$40,140 or if married filing jointly, enter \$60,210 8b 123 00 b. Federal Railroad Retirement benefits received...... 124 00 8c c. Social Security benefits received 00 8d d. Line 8a minus lines 8b and 8c. If less than zero, enter zero e. Qualified retirement benefits included in federal income...... 8e 125 00 126 f. Enter the smaller of line 8d or 8e here..... 8f 00 127 00 9. Technological equipment donation.... 128 10. Idaho capital gains deduction. Include Form CG..... 10 00 129 00 11. Active duty military pay earned outside of Idaho 130 12 00 12. Adoption expenses 13. Idaho medical savings account. Contributions 131 Account number 13 00 Financial institution 132 00 14. Idaho college savings program..... 133 00 15. Home for the aged or developmentally disabled. Complete Part E, line 3...... 134 00 16. Idaho lottery winnings, less than \$600 per prize..... 16 135 00 17. Income earned on a reservation by an American Indian

Form 39R 2022 (continued)

Na	mes as shown on return						Social Sec	cu ity	numb	er		
	18. Health insurance	e premiums						•	18	136	5	00
	19. Long-term care	insurance							19	137		00
	20. Workers' compe	ensation insuran	ıce						20	138		00
	21. Bonus deprecia	tion. Include Fo	rm 4562s					•	21	139)	00
	22. First-time home	buyer savings	account. Con	tributions	Inte	erest		_				
	Financial instit	tution		Account number	er			_				
	140 _{By check}	king the box, I a	ttest that I am a	first-time home b	uyer. See	instruct	ions.	•	22	141		00
	23. Other subtractio	ns. Include exp	lanation					•	23	142	<u> </u>	00
	24. Total subtraction Enter here and o			rough 7, and 8f thr					24			00
C.	Credit for income to	ax paid to othe	r states. See ir	nstructions, page	37.							
	This credit is being c	laimed for taxes	s paid to: •	143					(Sta	ate na	me)	
	1. Idaho tax, For	m 40, line 20				1		00				
	2. Federal adjusted					4.4	4				copy of ax return	
						2 144	+	00			te Form	
	•					3		00			state for s claime	
	4. Divide line 2 by	•	ŭ		<u> </u>	1		%				
	5. Multiply line 1 by	y line 4. Enter a	mount here						5	4 4 1		00
	6. Other state's tax								6	14		00
	7. Enter the smalle			•				•	7	146	<u> </u>	00
D.	Credits for Idaho ed facility contribution					nage 3	37 .					
	Credit for Idaho			-					1	14	7	00
	Credit for Idaho		•						2	148		00
	Credit for live or	•	•						3	149		00
		-							4			00
<u>E.</u>	4. Total credits. Ad Maintaining a home								4			00
	developmental disa	ability. See inst	tructions, page	39.	,		-					
	 Did you maintain you and your sp 			ily member age 69 ne-half of that per			uding			Yes		No
	Did you maintai (including you a)	in a home for a	n immediate fa	mily member with ore than one-half	a develo	pmental	disability	,		Yes		No
	3. List each family		•									
	<u>_</u>	Member's Name		Family Member's	Relationsh	nip to Perso	n Fam	ily Me	ember	's	Check H	lere if
	First Name		Name	Social Security Number	Filing	Return		Birthd m/dd	ate ′yyyy)		Developn Disab	
							,		,,,,,			7
] _
											늗	
	Total amount cla Enter here and c	aimed (\$100 for on Form 40, line	each qualifying 44	member but not r	nore than	\$300).			4			00
F.	Dependents: (Conti	inued from For	m 40, page 1,	line 6)								
	First Name			Last Name		Socia	l Security Nu	ımber			Birthdate	
							,			(m	ım/dd/yyyy	<u>/)</u>

	_		2-D Barcod	e Record La	yout Specifications Idaho. Form 75	
150	1	Farming	1	Alpha	"X" = box is marked. Blank = box is not marked	Ongoing index # change
151	2	Logging	1	Alpha	"X" = box is marked. Blank = box is not marked	
152	3	Construction	1	Alpha	"X" = box is marked. Blank = box is not marked	
153	4	Trucking	1	Alpha	"X" = box is marked. Blank = box is not marked	
154	5	Manufacturing	1	Alpha	"X" = box is marked. Blank = box is not marked	
155	6	Landscaping, tree	1	Alpha	"X" = box is marked. Blank = box is not marked	
156	7	Well drilling	1	Alpha	"X" = box is marked. Blank = box is not marked	
157	8	Equipment Rental	1	Alpha	"X" = box is marked. Blank = box is not marked	
158	9	Concrete/Asphalt	1	Alpha	"X" = box is marked. Blank = box is not marked	
159	10	Excavating	1	Alpha	"X" = box is marked. Blank = box is not marked	
160	11	Golf course	1	Alpha	"X" = box is marked. Blank = box is not marked	
161	12	Outfitter	1	Alpha	"X" = box is marked. Blank = box is not marked	
162	13	Mining	1	Alpha	"X" = box is marked. Blank = box is not marked	
163	14	Other	1	Alpha	"X" = box is marked. Blank = box is not marked	
				Section	n III. Nontaxable Use	<u>.</u>
164	1	Stationery engines	1	Alpha	"X" = box is marked. Blank = box is not marked	Ongoing index change
165	2	Unregistered equip.	1	Alpha	"X" = box is marked. Blank = box is not marked	
166	3	Refrigeration unit	1	Alpha	"X" = box is marked. Blank = box is not marked	
167	4	Intrastate motor off highway	1	Alpha	"X" = box is marked. Blank = box is not marked	
168	5	IFTA power	1	Alpha	"X" = box is marked. Blank = box is not marked	
169	6	Intrastate Motor Power Takeoff/Aux Engine	1	Alpha	"X" = box is marked. Blank = box is not marked	
170	7	Federal, State	1	Alpha	"X" = box is marked. Blank = box is not marked	
171	8	Aircraft	1	Alpha	"X" = box is marked. Blank = box is not marked	
172	9	Other	1	Alpha	"X" = box is marked. Blank = box is not marked	
173	10	Stationary engines	1	Alpha	"X" = box is marked. Blank = box is not marked	
174	11	Unregistered equip.	1	Alpha	"X" = box is marked. Blank = box is not marked	
175	12	Refrigeration	1	Alpha	"X" = box is marked. Blank = box is not marked	
176	13	IFTA auxiliary	1	Alpha	"X" = box is marked. Blank = box is not marked	
177	14	Intrastate Motor Auxiliary Engine	1	Alpha	"X" = box is marked. Blank = box is not marked	
178	15	Aircraft	1	Alpha	"X" = box is marked. Blank = box is not marked	
179	16	Commercial boat	1	Alpha	"X" = box is marked. Blank = box is not marked	
180	17	Other	1	Alpha	"X" = box is marked. Blank = box is not marked	
				Section IV.	Total Refund or Tax Due	
181	1	Gasoline tax refund	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	Ongoing index change
182	2	Special fuel refund	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	

183	3	Gasoline tax due	12	Numeric	99999999999999999999999999999999999999	Ongoing index # change
184	4	Special fuel tax due	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
185	5	Use tax due	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
186	6	Refund	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
187	7	Tax Due	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
		·		Section	V. Fuels Tax Refund	·
188	1a	Total tax-paid gasoline	12		9999999999 (Significant digits only, no cents, do not zero fill)	Ongoing index # change
189	1b	Total tax-paid Av Gas	12		99999999999 (Significant digits only, no cents, do not zero fill)	
190	1c	Total tax-paid Jet Fuel	12		99999999999 (Significant digits only, no cents, do not zero fill)	
191	1d	Total tax-paid Undyed Diesel	12		99999999999 (Significant digits only, no cents, do not zero fill)	
192	1e	Total tax-paid Propane	12		99999999999 (Significant digits only, no cents, do not zero fill)	
193	1 f	Total tax-paid CNG	12		99999999999 (Significant digits only, no cents, do not zero fill)	
194	1g	Total tax-paid LNG	12		99999999999 (Significant digits only, no cents, do not zero fill)	
195	2a	Total Nontaxable Gasoline	12		99999999999 (Significant digits only, no cents, do not zero fill)	
196	2b	Total Nontaxable Av Gas	12		99999999999 (Significant digits only, no cents, do not zero fill)	
197	2c	Total Nontaxable Jet Fuel	12		99999999999 (Significant digits only, no cents, do not zero fill)	
198	2d	Total Nontaxable Undyed Diesel	12		99999999999 (Significant digits only, no cents, do not zero fill)	
199	2e	Total Nontaxable Propane	12		99999999999 (Significant digits only, no cents, do not zero fill)	
200	2f	Total Nontaxable CNG	12		99999999999 (Significant digits only, no cents, do not zero fill)	
201	2g	Total Nontaxable LNG	12		99999999999 (Significant digits only, no cents, do not zero fill)	
<u> </u>		·		Sectio	on VI. Fuels Tax Due	·
202	1a	Taxable gallons gasoline	12		99999999999 (Significant digits only, no cents, do not zero fill)	Ongoing index # change
203	1b	Taxable gallons Av gas	12		99999999999 (Significant digits only, no cents, do not zero fill)	
204	1c	Taxable gallons Jet fuel	12		99999999999 (Significant digits only, no cents, do not zero fill)	
205	1d	Taxable gallons Undyed diesel	12		99999999999 (Significant digits only, no cents, do not zero fill)	
206	1e	Taxable gallons Propane	12		99999999999 (Significant digits only, no cents, do not zero fill)	
207	1 f	Taxable gallons CNG	12		99999999999 (Significant digits only, no cents, do not zero fill)	
208	1g	Taxable gallons LNG	12		99999999999 (Significant digits only, no cents, do not zero fill)	
				Secti	on VII. Use Tax Due	
209	1a	Gasoline gallons	12		99999999999 (Significant digits only, no cents, do not zero fill)	Ongoing index # change
210	1b	Av gas gallons	12		99999999999 (Significant digits only, no cents, do not zero fill)	
211	1c	Jet Fuel gallons	12		99999999999 (Significant digits only, no cents, do not zero fill)	
212	1d	Undyed diesel gallons	12		9999999999 (Significant digits only, no cents, do not zero fill)	
213	1e	Propane gallons	12		99999999999 (Significant digits only, no cents, do not zero fill)	

214	1f	CNG gallons	12	99999999999 (Significant digits only, no cents, do not zero fill)	
215	1g	LNG gallons	12	99999999999 (Significant digits only, no cents, do not zero fill)	
216	2a	Average price per gallon of gas	5	9.999 (decimal between 1st and 2nd) This is a price per gallon field. Right justify zero fill	Ongoing index # change
217	2b	Average price per gallon AV gas	5	9.999 (decimal between 1st and 2nd) This is a price per gallon field. Right justify zero fill	
218	2c	Average price per gallon jet fuel	5	9.999 (decimal between 1st and 2nd) This is a price per gallon field. Right justify zero fill	
219	2d	Average price per gallon undyed diesel	5	9.999 (decimal between 1st and 2nd) This is a price per gallon field. Right justify zero fill	
220	2e	Average price per gallon propane	5	9.999 (decimal between 1st and 2nd) This is a price per gallon field. Right justify zero fill	
221	2f	Average price per gallon CNG	5	9.999 (decimal between 1st and 2nd) This is a price per gallon field. Right justify zero fill	
222	2g	Average price per gallon LNG	5	9.999 (decimal between 1st and 2nd) This is a price per gallon field. Right justify zero fill	
223	4a	Federal tax per gallon gas	5	9.999 (decimal between 1st and 2nd) This is a price per gallon field. Right justify zero fill	
224	4b	Federal tax per gallon AV gas	5	9.999 (decimal between 1st and 2nd) This is a price per gallon field. Right justify zero fill	
225	4c	Federal tax per gallon jet fuel	5	9.999 (decimal between 1st and 2nd) This is a price per gallon field. Right justify zero fill	
226	4d	Fed. tax per gallon undyed diesel	5	9.999 (decimal between 1st and 2nd) This is a price per gallon field. Right justify zero fill	
227	4e	Federal tax per gallon propane	5	9.999 (decimal between 1st and 2nd) This is a price per gallon field. Right justify zero fill	
228	4f	Federal tax per gallon CNG	5	9.999 (decimal between 1st and 2nd) This is a price per gallon field. Right justify zero fill	
229	4g	Federal tax per gallon LNG	5	9.999 (decimal between 1st and 2nd) This is a price per gallon field. Right justify zero fill	



Form 75 Fuels Use Report

_			Name		Social Socurity Number				
							Social Security Number		
	PLEA	-	Assumed Business Name (DBA)						
	PRII		Address			<u>'</u>	Federal Employer Identification Number		
	TYF		-						
		_	City	e Z	IP Code				
-	Section	on I	FILING PERIOD Beginning	and ending	g		State use only		
				YY	MM Y	Y			
			eady claimed a refund of this tax from the this period, don't complete this form	Tax Commissio	on on another				
	Section		tivities of your company.						
	1.	_			ee service 155	11.	Golf course 160		
	2. 3.	_	_	ell drilling	lla a aire a	12.	☐ Outfitter 161		
	3. 4.	_		quipment rental/ oncrete/asphalt/	aravel 137	13. 14.	☐ Mining 162 ☐ Other (descr be) 163		
	5.	=	Manufacturing 154 10.						
	Section	on III.	NONTAXABLE USE. Check each box b	pelow that descr	ribes the nontaxa	able use	e to claim a refund of fuels taxes		
			IDAHO TAX-PAID special fuels used in	n:	ID	АНО Т	AX-PAID gasoline* used in:		
164	1.		Stationary engines	173	10. Static	onary er	ngines		
165	2.	Unregistered equipment (list) 11. Unregistered equipment					l equipment (list)		
166	3.	П	Refrigeration unit with separate tank	n unit with separate tank					
167	4.		Intrastate motor vehicles off-highway mile	175 s 176	13 IFTA	auxiliar	y engine allowance		
460	5		(include Form 75-NM) IFTA power take-off (PTO) and auxiliary er		(inclu		n 75-PTO) otor vehicle auxiliary engine allowance		
168	5.	_	allowances (include Form 75-PTO)		(inclu	de Forr	n 75-PTO)		
169	6.		Intrastate motor vehicle PTO and auxiliary allowances (include Form 75-PTO)		16.	`	instructions) motorboat		
170	7.		Federal, state, and local government moto	r vehicles ₁₈₀		(descr	,		
171 172	8. 9.	_	Aircraft (see instructions) Other (describe)				istered motor vehicle (government or i't qualify for a refund of the gasoline tax.		
_			, , ,		. ,	<u> </u>			
			TOTAL REFUND OR TAX DUE. Compl						
			line tax refund from page 2, Section V, line						
	2.	Speci	al fuels tax refund from page 2, Section V	, line 6			182 00		
	3.	Gaso	line use tax due from page 2, Section VI, I	line 4					
	4.	Speci	al fuels use tax due from page 2, Section	VI, line 5					
	5.		of sales use tax due from page 2, Section I paid the sales use tax with my sales/use				185 00		
	6.	_	nd If the total of lines 1 and 2 is greater the				100		
		enter	the difference				186 00		
	7. Tax Due If the total of lines 1 and 2 is less than the total of lines 3, 4, and 5, enter the difference					187 00			
			this form, I certify that the statements I	made on this for	rm are true and o	correct.	I know that submitting false information		
			n criminal and civil penalties.	no Stato Tay Ca	mmission may a	ontoot :	my paid proparer to discuss it		
-	\ \		180 days of receiving this return, the Idah orized Signature	io State Tax C0	mmission may co	ontact f	1		
!	SIGN toll-free at (Call (208) 334-7660 in the Boise area or toll-free at (800) 972-7660.				
	IERE	Title			Daytime Phone		MAIL TO		
					Idaho State Tax Commission				
,	. GIGII	-paioi		i Toparoi o Eliv	, 2311, 317 1111		PO Box 76 Boise ID 83707-0076		
-	Address	3			Phone		20136 12 00101-0010		

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Se	ction V. FUELS TAX REFUND	A Gasoline	B Av Gas	C Jet Fuel	D Undyed Diesel**	E Propane	F CNG	G LNG	H Totals
1.	Total tax-paid gallons purchased from all sources (whole gallons)	188	189	190	191	192	193	194	
2.	Total nontaxable gallons (whole gallons)	195	196	197	198	199	200	201	
3.	Tax rate	32	.07	.06	.32	.232	.32	.349	
4.	Fuels tax refund								
5. Gasoline tax refund. Add line 4, columns A, B, and C. Enter here and on page 1, Section IV, line 1									
6.	Special fuels tax refund. Add line 4, co	olumns D, E,	F, and G.	Enter here	and on pag	e 1, Section	ı IV, line 2		

Se	ction VI. FUELS USE TAX DUE	A Gasoline	B Av Gas	C Jet Fuel	D Diesel**	E Propane	F CNG	G LNG	H Totals
1.	Total taxable gallons (whole gallons)	202	203	204	205	206	207	208	
2.	Tax rate	32	.07	.06	.32	.232	.32	.349	
3.	Fuels tax due								
4.	4. Gasoline tax due. Add line 3, columns A, B and C. Enter here and on page 1, Section IV, line 3								
5.	5. Special fuels tax due. Add line 3, columns D, E, F, and G. Enter here and on page 1, Section IV, line 4								

Section VII. SALES USE TAX DUE	A Gasoline	B Av Gas	C Jet Fuel	D Undyed Diesel**	E Propane	F CNG	G LNG	H Totals
Number of gallons from Section V, line 2	209	210	211	212	213	214	215	
Average price per gallon (carry 4 decimal places x.xxxx)	216	217	218	219	220	221	222	
State fuels tax per gallon								
Federal fuels tax per gallon	223	224	225	226	227	228	229	
5. The base cost per gallon (subtract 3 & 4 from line 2)								
6. Total amount subject to sales use tax (multiply line 1 by line 5)								
7. Sales use due (multiply line 6 by 6%)								
8. Sales use tax due. Add line 7, columns A through G. Enter here and on page 1, Section IV, line 5								

^{**} Includes biodiesel and biodiesel blends

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		2-D Barcode Recor	d Layout Spe	cifications	Idaho Form 44	
230	1a	Investment tax credit Allowed	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	Ongoing index # change
231	1b	Investment tax credit Carryover	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
232	2a	Credit for production equipment using post-consumer waste Allowed	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
233	2b	Credit for production equipment using post-consumer waste Carryover	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
234	3	Promoter sponsored event credit	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
235	4a	Credit for Idaho research activities Allowed	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
236	4b	Credit for Idaho research activities Carryover	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
237	5a	Broadband equipment investment credit Allowed	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
238	5b	Broadband equipment investment credit Carryover	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
239	6a	Small employer investment tax credit Allowed	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
240	6b	Small employer investment tax credit Carryover	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
241	7a	Small employer real property improvement tax credit Allowed	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
242	7b	Small employer real property improvement tax credit Carryover	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
243	8a	Small employer new jobs tax credit Allowed	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
244	8b	Small employer new jobs tax credit Carryover	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	
245	9a	Credit for employer contributions to employee's Idaho college savings account Allowed	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
246	9b	Credit for employer contributions to employee's Idaho college savings account Carryover	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
247	10	Total business credits	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
	•	Form 44 Part II - Tax fro	m Recapture	of Busines	ss Income Tax Credits	1
248	1	Recapture of investment tax credit	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	Ongoing index # change
249	2	Recapture of broadband equipment investment credit	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
250	3	Recapture of small employer investment tax credit	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
251	4	Recapture of small employer real property improvement	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
252	5	Recapture of small employer new jobs tax credit	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	
253	6	Total Tax from Recapture	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	

		Form 44 Part III – Nonre	efundable Cı	redit From	a Prior Year Return	
254	1a	Year (A)	4	Numeric	(YYYY)	New element
255	1b	Nonrefundable Credit (A)	12	Numeric	9999999999 (Significant digits only, no cents, do not zero fill)	New element
256	2a	Year (B)	4	Numeric	(YYYY)	New element
257	2b	Nonrefundable Credit (B)	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	New element
258	3a	Year (C)	4	Numeric	(YYYY)	New element
259	3b	Nonrefundable Credit (C)	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	New element
260	4a	Year (D)	4	Numeric	(YYYY)	New element
261	4b	Nonrefundable Credit (D)	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	New element
262	5a	Year (E)	4	Numeric	(YYYY)	New element
263	5b	Nonrefundable Credit (E)	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	New element
264	6a	Year (F)	4	Numeric	(YYYY)	New element
265	6b	Nonrefundable Credit (F)	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	New element
266	7a	Year (G)	4	Numeric	(YYYY)	New element
267	7b	Nonrefundable Credit (G)	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	New element
268	1	Total nonrefundable credit	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	New element
269	2	Reserved for TY23	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	New element
270	3	Total credit	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	New element
271	4	Tax due, penalty, and interest	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	New element
272	5	Credit allowed	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	New element
273	6	Credit remaining	12	Numeric	99999999999 (Significant digits only, no cents, do not zero fill)	New element
274	Static	End of Record Ind.	5	Alpha	"*EOD* (Standard FTA accepted trail field.)	Ongoing index # change



Form 44 Business Income Tax Credits, Credit Recapture, and Nonrefundable Credit From a Prior Year Return

2022

Names as shown on return

Social Security number or EIN

Part I — Business Income Tax Credits

	C	Credit Allowed	Carryover		
1. Investment tax credit. Include Form 49	1	230	•	231	
2. Credit for production equipment using post-consumer waste	2	232	-	233	
3. Promoter-sponsored event credit	3	234			
4. Credit for Idaho research activities. Include Form 67	4	235	-	236	
5. Broadband equipment investment credit. Include Form 68	5	237	-	238	
6. Small employer investment tax credit. Include Form 83	6	239	-	240	
7. Small employer real property improvement tax credit. Include Form 84	7	241		242	
8. Small employer new jobs tax credit. Include Form 85	8	243	-	244	
9. Credit for employer contributions to employee's Idaho college savings account. Include Form ID-529	9	245	•	246	
10. Total business income tax credits allowed. Add lines 1 through 9•	10	247			

Part II — Tax from Recapture of Business Income Tax Credits

Tax from recapture of:		
1. Investment tax credit. Include Form 49R	1	248
2. Broadband equipment investment credit. Include Form 68R	2	249
3. Small employer investment tax credit. Include Form 83R	3	250
4. Small employer real property improvement tax credit. Include Form 84R	4	251
5. Small employer new jobs tax credit. Include Form 85R	5	252
6. Total tax from recapture of business income tax credits. Add lines 1 through 5	6	253

Part III — Nonrefundable Credit From a Prior Year Return

	A	B	C	ע ן			Г	G
Year	254	256	258	260	262	26	4	266
Nonrefundable Credit	255	257	259	261	263	26	5	267
1. Total nonrefur	ndable credit. A	dd columns A	through G			•	1	268
2. Reserved for tax year 2023							2	269
3. Add lines 1 ar	nd 2. This is you	ur total credit				. •	3	270
4. Enter tax due	plus penalty a	nd interest fror	n applicable fo	orm		•	4	271
5. Credit allowed. If line 4 is less than line 3, this is your allowed credit. If line 4 is more than line 3, enter the amount from line 3							5	272
6. Credit remaining for future years. Subtract line 5 from line 3. If the result is less than zero, enter zero						. •	6	273