

| | | | | |
|--|--|---|----|----|
| Donations | I want to donate to: | | | |
| | 54. Idaho Nongame Wildlife Fund | 55. Idaho Children's Trust Fund | | |
| | 56. Special Olympics Idaho | 57. Idaho Guard and Reserve Family ... | | |
| | 58. American Red Cross of Idaho Fund .. | 59. Veterans Support Fund | | |
| | 60. Idaho Food Bank Fund | 61. Opportunity Scholarship Program | | |
| 62. Total Tax Plus Donations. See instructions, page 22. Add lines 53 through 61 | | | 62 | 00 |
| Payments | 63. Grocery Credit. Computed amount from worksheet on page 23 | | 63 | 00 |
| | To receive your grocery credit , enter the computed amount on line 63 To donate your grocery credit to the Cooperative Welfare Fund, check the box and enter zero on line 63 <input type="checkbox"/> | | | |
| | 64. Maintaining a home for family member age 65 or older or developmentally disabled. Include Form 39NR | | 64 | 00 |
| | 65. Special fuels tax refund Gasoline tax refund Include Form 75 | | 65 | 00 |
| | 66. Idaho income tax withheld. Include Form W-2s and any 1099s that show Idaho withholding | | 66 | 00 |
| | 67. 2022 Form 51 estimated payments and amount applied from 2021 return | | 67 | 00 |
| | 68. Paid by entity <input type="checkbox"/> Withheld <input type="checkbox"/> ABE <input type="checkbox"/> See instructions. Include Form ID K-1s | | 68 | 00 |
| | 69. Tax Reimbursement Incentive credit <input type="checkbox"/> Claim of Right credit <input type="checkbox"/> See instructions | | 69 | 00 |
| 70. Total Payments and Other Credits. Add lines 63 through 69 | | | 70 | 00 |
| Tax Due | 71. Tax Due. If line 62 is more than line 70, subtract line 70 from line 62 | | 71 | 00 |
| | 72. Penalty <input type="checkbox"/> Interest from the due date <input type="checkbox"/> Enter total | | 72 | 00 |
| | Check the box if penalty is caused by an unqualified Idaho medical savings account withdrawal <input type="checkbox"/> | | | |
| | 73. Nonrefundable credit from a prior year return. See Form 44 instructions | | 73 | |
| 74. Total Due. Add lines 71 and 72, then subtract line 73. Pay online or make check payable to the Idaho State Tax Commission | | | 74 | 00 |
| Refund | 75. Overpaid. If line 62 is less than 70, subtract lines 62 and 72 from line 70 | | 75 | 00 |
| | 76. Refund Apply to 2023 | | | |

77. **Direct Deposit.** See instructions, page 25. ☐ Check if final deposit destination is outside of the U.S.

☐ Routing No.

☐ Account No.

Type of Account: ☐ Checking ☐ Savings

| | | | | |
|---------|--|--|----|----|
| Amended | 78. Total due (line 74) or overpaid (line 75) | | 78 | 00 |
| | 79. Refund from original return plus additional refunds | | 79 | 00 |
| | 80. Tax paid with original return plus additional tax paid | | 80 | 00 |
| | 81. Amended tax due or refund. Add lines 78 and 79 then subtract line 80 | | 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.

| | | | |
|--------------------|---------------------------|--|-------------------------|
| Sign Here | Your signature (required) | Spouse's signature (if a joint return, both must sign) | Taxpayer's phone number |
| | Paid preparer's signature | Preparer's EIN, SSN, or PTIN | Preparer's phone number |
| Preparer's address | | State | ZIP code |
| | | | Date |

MAIL TO: Idaho State Tax Commission, PO Box 56, Boise, ID 83756-0056

Include a complete copy of your federal return.

