41 IDAHO CORPORATION INCOME TAX RETURN 2013

	05-28-13									State	use or	nly
	AMENDED RETURN, check the box. See instructions, page 6 for the reasons	For calendar year Mo	Day	Year		Мо	Day	Year				
	for amending and enter the number.	year beginning		13	endin	ıg						
Busi	ness name		State	use only			Federa	l employ	yer identi	ification numb	er	
Busi	ness mailing address											
	3											
City,	State and Zip Code											
1.	If a federal audit was finalized this year, ente	r the latest year audite	ed									
2.	Is this an inactive corporation or nameholder	corporation?								Yes	• [No
3.	a. Were federal estimated tax payments required?										•	No
	b. Were estimated tax payments based on annualized amounts?									Yes	• [No
4.	. Is this a final return?										•	No
If yes, check the proper box below and enter the date the event occurred												
				_			Enter no		Ν_			
	Enter the extended federal due date if this is	•								_		
	Is this an electrical or telephone utility?									∐ Yes	•	No
7.	Did you use the combined reporting method?									∐ Yes	• [No
	a. Does this corporation own more than 50%									∐ Yes	• [No
	b. Does another corporation own more than	•								∐ Yes	• [No ا
	c. Are more than 50% of this corporation and	=		-						∐ Yes	• [No
_	d. Are two or more corporations in this report						s in Ida	10?			•	No
8.	If you are a multinational unitary group, answ	•		-								
	a. Check the box for your filing method: •				-						г	
	b. If a water's edge return is filed, do you ele		-							∐ Yes	• [⊣ No
^	c. If a worldwide return is filed, is foreign inco	•	_			-				∐ Yes	• [No
	Did you claim the property tax exemption for			-	-		-			∐ Yes	• [No No
	Is one or more corporations in this report pay	ying the laano premiur	II lax?					<u>-</u>			•	No
	DITIONS Foderal tayable income						_	11				
	Federal taxable income Interest and dividends not taxable under Inte							11				
	State, municipal and local taxes measured b											
	Net operating loss deducted on federal return	·						14				
	Dividends received deduction on federal return							15				
	Bonus depreciation. Include computations							16				
	Other additions, including additions from For							17				
	Add lines 11 through 17							18				
	BTRACTIONS							1.0				
	Foreign dividend gross-up (Sec. 78, Internal	Revenue Code)						19				
	Interest from Idaho municipal securities							10				
	Interest on U.S. Government obligations. Inc											
	Interest and other expenses related to lines 2											
	Add lines 20 and 21, and subtract line 22							23				
	Technological equipment donation							24				
	Allocated income. Include a schedule											
	Interest and other expenses related to line 29											
	Subtract line 26 from line 25							27				
	Bonus depreciation. Include computations							28				
	Other subtractions, including subtractions fro							29				
	Total subtractions. Add lines 19, 23, 24, 27,							30				
	Net business income subject to apportionme							31				

MAIL TO: Idaho State Tax Commission, PO Box 56, Boise ID 83756-0056 INCLUDE A COMPLETE COPY OF YOUR FEDERAL FORM 1120 OR 1120A.



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	32. Net business income subject to apportionment. Enter the amount from line 31	
	33. Corporations with all activity in Idaho enter 100%. Multistate/multinational corporations	
	complete and attach Form 42. Enter the apportionment factor from Form 42, Part I, line 21	- 33 %
	34. Net business income apportioned to Idaho. Multiply line 32 by the percent on line 33	• 34
	35. Income allocated to Idaho. See instructions	
	36. Idaho net operating loss carryover • carryback • Enter total	36
	37. Idaho taxable income. Add lines 34 and 35, and subtract line 36	• 37
00	Idala in anno tao Maltinla lina 27 ha 7 40/ Minimum (200 fan anh anno ating (an instructions)	
	Idaho income tax. Multiply line 37 by 7.4%. Minimum \$20 for each corporation (see instructions)	• 38
	EDITS	
	Credit for contributions to Idaho educational entities	
	Credit for contributions to Idaho youth and rehabilitation facilities	
	Total business income tax credits from Form 44, Part I, line 12.	
	Include Form 44	40
	Total credits. Add lines 39 through 41	42
	Subtract line 42 from line 38. If line 42 is greater than line 38, enter zero	43
_	IER TAXES	
	Permanent building fund tax. Enter \$10. Combined reports include \$10 for	
	each corporation operating or authorized to do business in Idaho	
	Total tax from recapture of income tax credits from Form 44, Part II, line 7. Include Form 44	
	Fuels tax due. Include Form 75	
	Sales/Use tax due on Internet, mail order, and other nontaxed purchases	
	Tax from recapture of qualified investment exemption (QIE). Include Form 49ER	
	Total tax. Add lines 43 through 48	
	Underpayment interest. Include Form 41ESR Donation to Opportunity Scholarship Program	
	Add lines 49 through 51	52
	<u> </u>	32
	MENTS AND OTHER CREDITS	52
	Estimated tax payments	
	Special fuels tax refund Gasoline tax refund Include Form 75 Hire One Act credit. Include Form 72	
50.	Total payments and other credits. Add lines 53 through 55	56
	If line 52 is more than line 56, GO TO LINE 57. If line 52 is less than line 56, GO TO LINE 60.	
REF	UND OR PAYMENT DUE	
57.	Tax due. Subtract line 56 from line 52	• 57
58.	Penalty • Interest from due date • Enter total	58
59.	TOTAL DUE. Add line 57 and line 58	
60	Overpayment. Subtract line 52 from line 56	• 60
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61.	REFUND. Amount of line 60 you want refunded to you	
	ESTIMATED TAX. Amount you want credited to your 2014 estimated tax.	
	Subtract line 61 from line 60	• 62
	ENDED RETURN ONLY. Complete this section to determine your tax due or refund.	
	Total due (line 59) or overpayment (line 60) on this return	63
	Refund from original return plus additional refunds	64
	Tax paid with original return plus additional tax paid	65
66.	Amended tax due or refund. Add lines 63 and 64, and subtract line 65	66
•	Within 180 days of receiving this return, the Idaho State Tax Commission may discuss this return with the paid	
	Under penalties of perjury, I declare that to the best of my knowledge and belief this return is true, correct and Signature of officer	complete.
SIGN		
HERE	Title Phone number	
Deid	Deposed Singles	
Paid p	oreparer's signature Preparer's EIN, SSN or PTIN ■	
Addre	ss and phone number	
		2 0 2 9 5