Form ID: ID Idaho General Information	
Mark if: Taxpayer or spouse is a disabled veteran	[1]
Receiving Idaho Public Assistance	[1] [2]
Number of days eligible for grocery credit if less than full year or total time spent as part year resider	Taxpayer Spouse nt[3][4]
Use Tax	
Purchases subject to use tax	[5]
Contributions	
Amount of charitable contributions you wish to make to:	:
Nongame Wildlife Conservation Fund	[6]
Children's Trust Fund and Child Abuse Prevention	[7]
Special Olympics Idaho Idaho Guard and Reserve Family Support Fund	[8]
American Red Cross of Greater Idaho Fund	[9] [10]
Veterans Support Fund	[10] [11]
Idaho Food Bank	[12]
Opportunity Scholarship Program Fund	[13]
Donate grocery credit to the Cooperative Welfare Fund	[14]
Part-year Resident and Nonresident Information	
If you were a part-year resident during the tax year, enter the dates yo	ou lived in Idaho
	Taxpayer Spouse
Residency status (1 = Resident, 2 = Resident on active military, 3 = Nonresident, 4 = Part-year resident, 5 = Military nonresident) Part-year residency dates:	[15][16]
From _	[17][19]
To	[18][20]
State of residence	[21][22]
Adjustments and Credits	
Energy officiency ungrades	fact
Energy efficiency upgrades Adoption expenses	[23]
Mark if taxpayer or spouse has a developmental disability (T = Taxpayer, S = Spouse, B = Both)	[24] [25]

NOTES/QUESTIONS: