

IDAHO GROCERY CREDIT REFUND

You or Your Spouse Must Be Age 65 or Older

10-29-08	•	J		
Your first name and initial	Last name		S	tate Use Only
If a joint return, spouse's first name and initial	Last name	You	ır Social Securi	ity Number
Mailing address		Spo	ouse's Social S	ecurity Number
City, State, and Zip Code			Taxpayer ✓ deceased in 2008	Spouse √ deceased in 2008
A. INCOME		I	111 2000	111 2000
Enter your gross income. Include self-employment income before e rental income before expenses, a Security benefits or Veterans Adn	expenses, farm income beforand pensions. <i>Do NOT inclu</i>	re expenses, ude Social		1
Enter the amount for your filing s See instructions	_			2
 3. Compare lines 1 and 2. If line 1 is equal to or larger the must file an income tax return If line 1 is less than line 2, cor 	, Form 40 to receive your gr			
B. REFUND CLAIMED		YOU	JRSELF	SPOUSE
1. Enter the date of birth		Month Day	Year	Month Day Year
2. Check the boxes that apply.				
■ Under age 65	\$50	per person		• 🗆
Age 65 or older	\$70	per person		•
Check the box if you wish to make to the Cooperative Welfare Fund			credit • 50	√ \$70 \$120 \$140
4. Total refund claimed (Check one	box)		•	
5. DIRECT DEPOSIT. See instruc	tions.			Type of Check
■ Routing No.	■ Account No.			Account: Saving
C. SIGNATURE(S) REQUIRED If you or your spouse are unable representative must write "unable the signature space(s) and entername, address and relationship	ole to sign" in er his or her		ceased pers	urviving spouse signs on son, IRS Form 1310 must ed.
Your signature • X		Date	Pi	hone number
Spouse's signature (if a joint return, BOTH MU	IST SIGN)			
·X			III	
MAIL TO: Idaho State Tax Commiss	sion			

PO Box 56 Boise, ID 83756-0056



Instructions for Idaho Form 24

Who Qualifies to Use This Form

You may use this form if you were a resident of Idaho for all of 2008, you are not required to file an Idaho income tax return, and you (or your spouse) were 65 or older on 12/31/2008.

You may **not** use this form if for any part of the year you or your spouse:

- received assistance under the federal food stamp program;
- · were incarcerated:
- resided illegally in the United States;
- had dependents.

If you are a resident or part-year resident and don't meet the requirements to use Form 24, you may claim the grocery credit on Form 40 or 43.

You cannot claim the grocery credit on more than one form.

PART A. INCOME

LINE 2 FILING STATUS

LINE 21 ILING STATOS	
<u>Status</u>	Gross Income
If you are Married:	
filing separate return	\$ 3,500
 filing jointly, one spouse 65 or older 	\$18,950
• filing jointly, both spouses 65 or older	\$20,000

If you are Single:

•	65 or older	\$10,300

PART B. REFUND CLAIMED

LINE 3 GROCERY CREDIT DONATION

You may donate your entire grocery credit to the Cooperative Welfare Fund. The Cooperative Welfare Fund is established under Idaho Title 56. Public Assistance and Welfare. It is a trust fund in the state treasury, and all money in the fund is appropriated for public assistance and welfare purposes. The election is made by checking the box on line 3, and checking the zero (\$0) box on line 4, total refund claimed.

The election is **irrevocable** and may not be changed on an amended return.

LINE 5 DIRECT DEPOSIT

Complete line 5 if you want us to deposit your refund directly into your bank account instead of mailing you a check.

Contact your bank to make sure your deposit will be accepted and that you have the correct routing and account numbers.

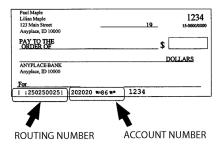
Enter your nine-digit routing number. The routing number must begin with 01 through 12, or 21 through 32.

Enter the account number of the account into which you want your refund deposited. The account number can be up to 17 characters (both numbers and letters). Don't include hyphens, spaces, or special symbols. Enter the number left to right and leave any unused boxes blank.

Check the appropriate box for account type. Check either checking or savings, but not both.

The check example indicates where the proper banking information is located. You are responsible for the accuracy of this information.

If your financial institution rejects your request for direct deposit, you will receive a check by mail instead.



IF YOU NEED HELP

Visit your nearest Tax Commission office or call:

(208) 334-7660 in the Boise area

(800) 972-7660 toll free

Hearing Imparied (TDD) (800) 377-3529

Web at tax.idaho.gov

Questions

Boise 800 Park Blvd., Plaza IV

Coeur d'Alene 1910 Northwest Blvd., Ste. 100

Idaho Falls 150 Shoup Ave., Ste. 16

1118 F St. Lewiston

Pocatello 611 Wilson Ave., Ste. 5

Twin Falls 440 Falls Ave.

(New address)