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Do not handwrite any information



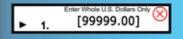
Do not use commas when entering amounts





Do not use brackets for negative numbers

Use a minus sign to show the amount is negative



-99999.00

Use the print icon on the form to ensure you have completed all required fields



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Do not mix form types



Do not submit photocopies of returns

Submit originals only





AMENDED RETURN	$\overline{}$
DOR Use Only	

1		9-24	Ind	come T	ax R				2024		DED RETURN
Ĭ E	[=	or calendar year 20		Do not send a		y or this r		2 4 :	and ending (MM-		ele (See instructions)
Retu	\subseteq	Social Security Number	24 , 01 listal ye	ear beginning (ММ-DD)				ouse's Social Security	-	
Your	Your	Social Security Number		←		<u>ıst</u> enter yo curity numb		→	buse's Social Security	Number	
jes of		Your First Name (USE CAP)	ITAL LETTERS FOR	YOUR NAME AND AD	DRESS)	M.I.	Your Las	st Name			
All Pages of Your Return Here		If a Joint Return, Spouse's	First Name			M.I.	Spouse'	's Last Name			
Staple /		Mailing Address									Apartment Number
o)		City				State	е	Zip Code	Country (If not U.S.)	County (Enter first five letters)
APC	all To	of your overpayment	t to the Fund. To ayment to the I	To make a contril Fund, enter the a	bution, enc mount of yo	lose Form our design	NC-ED	DU and you n Page 2, L	r payment of \$ _ ine 31. (<i>See instr</i>	ructions for inforn	or designating some or nation about the Fund.)
		sed Taxpayer Info		i ii iiiaiiled iiiilig j	Olituy, your	spouse we			death of decease		
0	Fill i	in circle if return is file ninistrator, or Court-A	ed and signed			Taxpayer (MM-DD-YY)			Spo	ouse M-DD-YY)	
Res	side	ency Status	•	esident of N.C. fo ouse a resident f		•		○ Ye	es No		ete and attach Schedule PN.
Vet	era	n Information	Are you a vete	eran?	Yes N	0	ls	your spous	se a veteran?	Yes No)
Fed	lera	al Extension	Were you gra	inted an automa	tic extension	on to file y	our 202	24 federal	ncome tax returr	n, e.g., Form 104	10? Yes No
Filing Status (Fill in one circle only)	1. 2. 3. 4.	Married Filing Head of Hous	Separately •	(Enter your spous full name and So Security Numbe	cial				Enter Whole U.S	S. Dollars Only	_
H		. O Qualifying Wi))		6.		- ,	
		. Additions to Feder (From Form D-400	ral Adjusted G	Gross Income			>	7.			
Here +	8.	. Add Lines 6 and 7						8.			
	9.	Deductions From (From Form D-400	Federal Adjus Schedule S, P	ted Gross Inco art B, Line 41)	me		>	9.			
	10.	Child Deduction children for whom y Line 10b, enter the a	(On Line 10a you were allow amount of the c	, enter the num red a federal ch child deduction.	nber of qua ild tax cred See instruc	alifying dit. On ctions.)	1 0	a.	▶ 10b.		7020
	11.	. N.C. Standard				ductions	>	11.			1040
Staple W-2s Here	12.	. a. Add Lines 9, 10b, and 11.			12	2b. Subtra Line 1 from I	2a				26
Stap	13.	Part-year Residen (From Form D-400	ts and Nonres	sidents Taxable	Percenta amount as	ge decimal.)	>	13.			
, , , , , , , , , , , , , , , , , , ,	14.	North Carolina Tar Full-year resident Part-year resident the decimal amoun	xable Income s enter the am ts and nonres	ount from Line 1	12b		_{oy} ►	14.			

15.

15. North Carolina Income Tax Multiply Line 14 by 4.5% (0.0450). If zero or less, enter a zero.

