NCDOR | D-400

15. North Carolina Income Tax
To calculate your tax, multiply Line 14 by 5.75% (0.0575). If Line 14 is negative, enter -0- on Line 15.

<u> </u>	Web-Fill Individual Income		O AMENDED	DETIIDN			
Je.	8-16 Tax Return 2016 IMPORTANT: Do not send a photocopy of this form.		Fill in circle. (See				
ırn He	For calendar year 2016 , or fiscal year beginning (MM-DD-YY)		and ending (MM-DD-YY)				
of Your Return Here	Your Social Security Number You must enter your social security number(s). Spouse's Social Security Number						
of Yo	Your First Name (USE CAPITAL LETTERS FOR YOUR NAME AND ADDRESS) M.I. Your L	Last Name					
Pages	If a Joint Return, Spouse's First Name M.I. Spous	se's Last Name					
Staple All	Mailing Address			Apartment Number			
Sta	City State	Zip Code	Country (If not U.S.)	County (Enter first five letters)			
	N.C. Education Endowment Fund: You may contribute to the N.C. Education En your overpayment to the Fund. To make a contribution, enclose Form NC-EDU ar To designate your overpayment to the Fund, enter the amount of your designation	nd your paym on Page 2, I	nent of \$ Line 31. See instructions for inform				
	Fill in circle if you or, if married filing jointly, your spouse were out of the country on A	-		accord angues			
O	Fill in circle if return is filed and signed by Executor, Administrator or Court-Appointed Personal Representative.	Enter date of	death of deceased taxpayer or de Spouse (MM-DD-YY)	ceaseu spouse.			
Re	esidency Status	Yes N	Part D of Schedule S. Fill in	residency information			
Die	d you claim the standard deduction on your 2016 federal return?	O Yes O N					
Ve	Are you a veteran? Is your spouse a veteran?	Yes N	(See Instructions.)				
Filing Status	 Single Fill in one circle only. (See instructions.) Married Filing Jointly Married Filing Separately In ame and Social Security Number.) Head of Household Qualifying Widow(er) with Dependent Child (Year spouse died:)	Enter Whole U.S. Dollars Only				
	6. Adjusted gross income from your federal return (If negative, see instructions.)	6.		702			
	7. Additions to federal adjusted gross income (From Line 6 of Form D-400 Schedule S, Part A)	7.					
Γ_	8. Add Lines 6 and 7.	8.		1401			
	9. Deductions from federal adjusted gross income (From Line 14 of Form D-400 Schedule S, Part B)	> 9.		∞			
🕇	10. Subtract Line 9 from Line 8.	10.					
وَ '	11. O N.C. standard deduction OR O N.C. itemized deductions						
s Here.	Fill in one circle only. (If itemizing, complete Part C of Form D-400 Schedule S, and enter the amount from Line 23.)	1 1.					
%	12. Subtract Line 11 from Line 10.	12.					
Staple W-2s	13. Part-year residents and nonresidents (From Line 26 of Form D-400 Schedule S, Part D)	1 3.					
"	14. North Carolina Taxable Income Full-year residents enter the amount from Line 12. Part-year residents and nonresidents multiply amount on Line 12 by the decimal amount on Line 13.	1 4.					

15.

2016

se sure to sign and date your return below

	0-10	De sale to sign and date	your return below.		
16.	Tax Credits (From Form D-400TC, Part 3, Line 20 Form D-400TC if you enter an amount on this line			1 6.	
17.	Subtract Line 16 from Line 15.			17.	
18.	Consumer Use Tax (See instructions.)	If you certify that no Cor Use Tax is due, fill in c		1 8.	
19.	Add Lines 17 and 18.			19.	
20.	North Carolina a. Your tax withheld b.	b. Spo	ouse's tax withheld		
21.	Other Tax Payments a. 2016 estimated tax c. Partnership	>	d with extension		If you claim a partnership payment on Line 21c or S corporation payment on Line 21d, you must attach a copy of the NC K-1.
	>	>			
22.	Amended Returns Only - Previous payments (Se	e Amended Returns in instr	uctions.)	22.	
23.	Total Payments - Add Lines 20a through 22.			23.	
24.	Amended Returns Only - Previous refunds (See	Amended Returns in instruc	tions.)	24.	
25.	Subtract Line 24 from Line 23.			25.	
26.	a. Tax Due - If Line 19 is more than Line 25, subtr (If Line 25 is negative, see instructions.)	act Line 25 from Line 19.		➤ 26a.	
	b. Penaltiesc. Interest	(Add Lines 26 and 26c and enter the tota on Line 26d.)	<u> </u>	26d.	
27.	 e. Interest on the underpayment of estimated in (See instructions and enter letter in box, if applied). Add Lines 26a, 26d, and 26e. Pay This Amount - You can pay online. See instructions. 	underpayment		▶ 26e.	
28.	Overpayment - If Line 19 is less than Line 25, subtract Line 19 from Line 25.	•		28.	
29.	When filing an amended return, see inst. Amount of Line 28 to be applied to 2017 Estimated.		20401	> 29.	
30.	Contribution to the N.C. Nongame and Endanger	ed Wildlife Fund	■	> 30.	
31.	Contribution of overpayment to the N.C. Education	ı Endowment Fund		3 1.	
32.	Add Lines 29, 30, and 31.			32.	
33.	Subtract Line 32 from Line 28. This is the Amoun For direct deposit, file electronically.	t To Be Refunded.		> 33.	
	I certify that, to the best of my knowledge, this return is	accurate and complete. If prints	repared by a person other ormation of which the prep	than taxpayer, thi arer has any know	s certification is based on all vledge.
Sign Here	Your Signature	Date Paid	d Preparer's Signature		Date
Sig	Spouse's Signature (If filing joint return, both must sign.)	Date Pre	parer's FEIN, SSN, or PTIN	>	
	Home Telephone Number (Include area code.)	•	Preparer's Telephone Nu	mber (Include area	code.)
	REFUND mail N.C. DEPT. OF REVENUE P.O. BOX R FO RALEIGH, NC 27634-0001	R ORIGINAL RETURNS	If you ARE ONLY refund, ma payment, a	NOT due a il return, any nd D-400V to:	N.C. DEPT. OF REVENUE P.O. BOX 25000 RALEIGH, NC 27640-0640