Form

North Dakota Office of State Tax Commissioner



Individual income tax return for full-year residents with no adjustments or credits

WEB

Your name (First, MI, Last name)			Deceased O	Your social security number*	
If joint return, spouse's name (First, MI, Last name)			Deceased O	Spouse's social security number*	
Mailing address		Apt No.	·!	► Fill in if you	
City State		Zip code		extension of time to file your return: (See page 9) Extension O	
A. Filing status used on federal return: (Fill in only one) O 1. Single O 2. Married filing jointly O 3. Married filing separately with dependent chi		ow(er)	B. School (See pag	district code: ge 19)	C. Income source code: (See page 9)
Federal adjusted gross income For a comp	olete reti	urn, you mu	ıst complete L	ine D. If zero, e	nter 0.
D. Federal adjusted gross income from line line 21 of Form 1040A, or line 4 of Form 1040E.				(SX)	D
Tax calculation					
1. Federal taxable income from line 43 of F or line 6 of Form 1040EZ. This is your Not	rth Dak	ota taxable	e income		
2. Tax - Enter amount from Tax Table on page 20 of instructions (SB) 2					
Tax paid					
3. North Dakota withholding (Attach W-2s, 1099s, and/or North Dakota K-1s) (SF) 3					
Refund					
4. Overpayment - If line 3 is MORE than line otherwise, go to line 7. If less than \$5.00,				(SG)	4
5. Voluntary Watchable contribution to: Wildlife Fund (SP)	Watchable Trees For ND Wildlife Fund (SP) Program Trust		nd(sw)	Enter total	5
6. Refund. Subtract line 5 from line 4. If less	than \$	5.00, ente	r 0	(SR)	6
To direct deposit a. Routing number:					
refund, complete items a, b, and c. (See page 9) b. Account number:				CheckingSavings	
Tax due				— C Savin	gs
7. Tax due - If line 3 is LESS than line 2, subtract line 3 from line 2. If less than \$5.00, enter 0				(SZ)	7
8. Voluntary Watchable Trees For ND contribution to: Wildlife Fund (SU) Program Trust Fun				Enter	
9. Balance due. Add lines 7 and 8. Pay to: NE	_				
► For a complete return, you					
I declare that this return is correct and complete to the best	of my kno	wledge and be	oliaf * B	rivany Act Coc :-	side front cover of backlet
		Phone number (land line)		Privacy Act - See inside front cover of booklet. I authorize the ND Office of State Tax Commissioner	
Spouse's signature Dat	te	Cell phone no.			n with the paid preparer. or Tax Department Use Only
	PTIN	In	ato	•	•
Paid preparer signature F	PTIN Date		ate		
Print name of paid preparer		Phone no.			