



Instructions for Handwritten Forms

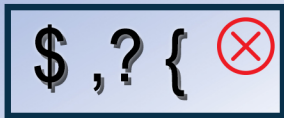
Guidelines



Do not use red ink
Use blue or black ink



Do not use dollar signs, commas, or other punctuation marks



Printing



Before printing select "actual size"



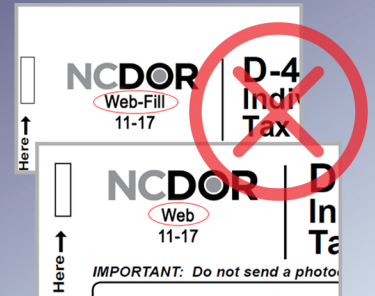
Do not select "print on both sides of paper"



Before Mailing



Do not mix form types



Do not submit photocopies of returns

Submit originals only



D-400 Individual Income Tax Return 2017

AMENDED RETURN Fill in circle (See instructions)

IMPORTANT: Do not send a photocopy of this form. Print in Black or Blue Ink Only. No Pencil or Red Ink.

For calendar year 2017, or fiscal year beginning (MM-DD) - - 1 7 and ending (MM-DD-YY) - - - - -

Your Social Security Number Spouse's Social Security Number You must enter your social security number(s)

Your First Name (USE CAPITAL LETTERS FOR YOUR NAME AND ADDRESS) M.I. Your Last Name
If a Joint Return, Spouse's First Name M.I. Spouse's Last Name
Mailing Address Apartment Number
City State Zip Code Country (If not U.S.) County (Enter first five letters)

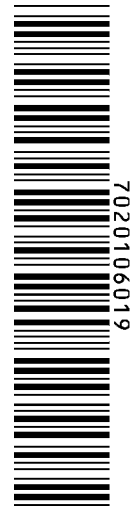
N.C. Education Endowment Fund: You may contribute to the N.C. Education Endowment Fund by making a contribution or designating some or all of your overpayment to the Fund. To make a contribution, enclose Form NC-EDU and your payment of \$
To designate your overpayment to the Fund, enter the amount of your designation on Page 2, Line 31. See instructions for information about the Fund.

Fill in circle if you or, if married filing jointly, your spouse were out of the country on April 15 and a U.S. citizen or resident.
Deceased Taxpayer Information Enter date of death of deceased taxpayer or deceased spouse.
Fill in circle if return is filed and signed by Executor, Administrator or Court-Appointed Personal Representative.
Residency Status Were you a resident of N.C. for the entire year of 2017? Yes No
Was your spouse a resident for the entire year? Yes No
Did you claim the standard deduction on your 2017 federal return? Yes No

Filing Status (Fill in one circle only) Veteran Information Are you a veteran? Yes No
Is your spouse a veteran? Yes No (See Instructions)

- 1. Single
2. Married Filing Jointly
3. Married Filing Separately (Enter your spouse's full name and Social Security Number)
4. Head of Household
5. Qualifying Widow(er) (Year spouse died:)

Table with 15 rows for income and tax calculations. Includes a box for negative amounts: 'If amount on Line 6, 8, 10, 12, or 14 is negative, fill in circle. Example: ●'



Staple All Pages of Your Return Here

Staple W-2s Here

16. Tax Credits (From Form D-400TC, Part 3, Line 20) ▶ 16. _____ .00

17. Subtract Line 16 from Line 15 ▶ 17. _____ .00

18. Consumer Use Tax (See instructions) ▶ 18. _____ .00

If you certify that no Consumer Use Tax is due, fill in circle.

19. Add Lines 17 and 18 ▶ 19. _____ .00

20. North Carolina Income Tax Withheld

a. Your tax withheld ▶ _____ .00	b. Spouse's tax withheld ▶ _____ .00
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21. Other Tax Payments

a. 2017 estimated tax ▶ _____ .00	b. Paid with extension ▶ _____ .00
c. Partnership ▶ _____ .00	d. S Corporation ▶ _____ .00

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 (See "Amended Returns" in instructions) ▶ 22. _____ .00

23. Total Payments - Add Lines 20a through 22 ▶ 23. _____ .00

24. Amended Returns Only - Previous refunds (See "Amended Returns" in instructions) ▶ 24. _____ .00

If amount on Line 25 is negative, fill in circle. Example:

25. Subtract Line 24 from Line 23 ▶ 25. _____ .00

26. a. Tax Due - If Line 19 is more than Line 25, subtract Line 25 from Line 19. (If Line 25 is negative, see instructions.) ▶ 26a. _____ .00

b. Penalties ▶ _____ .00	c. Interest ▶ _____ .00
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(Add Lines 26b and 26c and enter the total on Line 26d.)

e. Interest on the underpayment of estimated income tax (See instructions and enter letter in box, if applicable.) ▶ 26e. _____ .00

Exception to underpayment of estimated tax

27. Add Lines 26a, 26d, and 26e ▶ 27. \$ _____ .00

Pay This Amount - You can pay online. See instructions.

28. Overpayment - If Line 19 is less than Line 25, subtract Line 19 from Line 25. ▶ 28. _____ .00

When filing an amended return, see instructions.

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29. Amount of Line 28 to be applied to 2018 Estimated Income Tax ▶ 29. _____ .00

30. Contribution to the N.C. Nongame and Endangered Wildlife Fund ▶ 30. _____ .00

31. Contribution to the N.C. Education Endowment Fund ▶ 31. _____ .00

32. Contribution to the N.C. Breast and Cervical Cancer Control Program ▶ 32. _____ .00

33. Add Lines 29 through 32 ▶ 33. _____ .00

34. Subtract Line 33 from Line 28. This is the **Amount To Be Refunded.** ▶ 34. _____ .00

For direct deposit, file electronically.

Sign Here

I certify that, to the best of my knowledge, this return is accurate and complete.	If prepared by a person other than taxpayer, this certification is based on all information of which the preparer has any knowledge.
Your Signature _____ Date _____	Paid Preparer's Signature _____ Date _____
Spouse's Signature (If filing joint return, both must sign.) _____ Date _____	Preparer's FEIN, SSN, or PTIN ▶ _____
Home Telephone Number (Include area code) ▶ _____	Preparer's Telephone Number (Include area code) ▶ _____