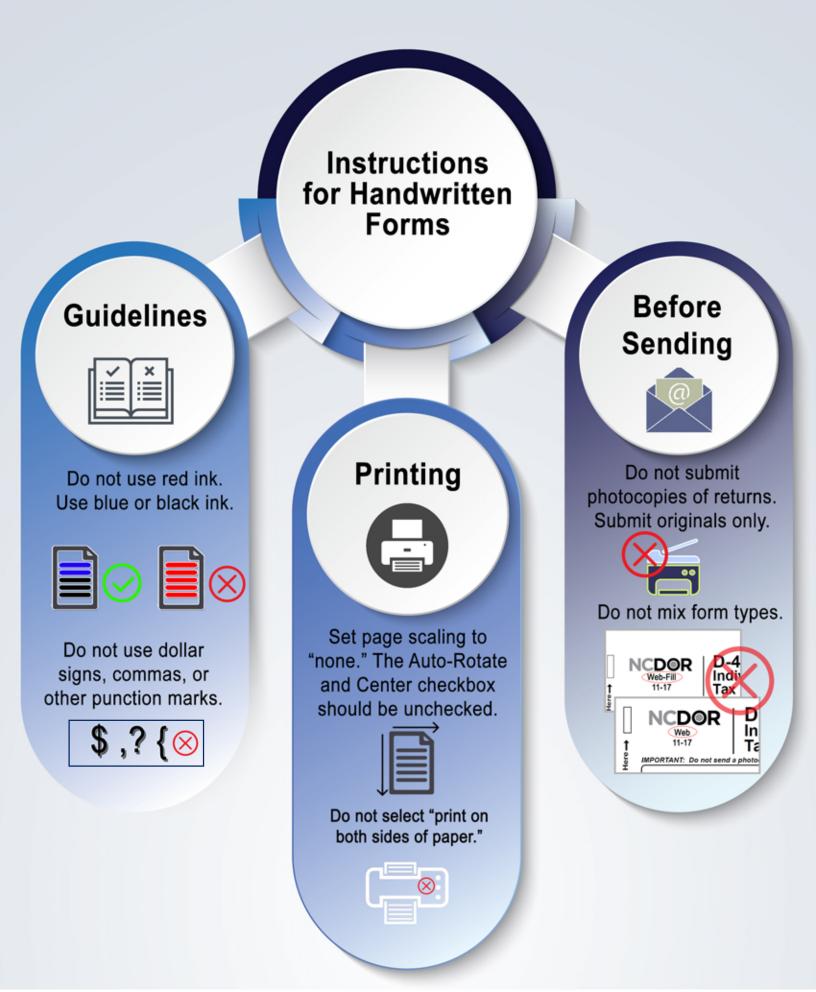
Do Not Include This Page





Here ↓	NCDOR       D-400         Web       2022 Individual         2022 Individual       Income Tax Return         IMPORTANT: Do not send a photocopy of this form. Print in Black or Blue Ink Only. No Pencil or Red Ink.			DOR Use	RETURN			
turn	For calendar year <b>2022</b> , or fiscal year beginning ( <i>MM-DD</i> ) = = 222 and ending ( <i>MM-DD-YY</i> ) = =							
Pages of Your Return Here	Your Social Security Number  Your Social Security Number  Spouse's Social Security Number  Spouse's Social Security Number							
jes of `	Your First Name (USE CAPITAL LETTERS FOR YOUR NAME AND ADDRESS) M.I. Your Last Name							
All Paç	If a Joint Return, Spouse's First Name	M.I. S	pouse's Last Name					
Staple	Mailing Address			Aparti	ment Number			
0)	City	State	Zip Code Country (If )	not U.S.) Count	ty (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.)								
Out of Country       Fill in circle if you, or if married filing jointly, your spouse were out of the country on April 15, 2023, and a U.S. citizen or resident.								
Deceased Taxpayer Information       Enter date of death of deceased taxpayer or deceased spouse.         O Fill in circle if return is filed and signed by Executor, Administrator, or Court-Appointed Personal Representative.       Taxpayer (MM-DD-YY)       Image: Comparison of the compari								
Residency Status       Were you a resident of N.C. for the entire year?       Yes       No       If No, complete and attach         Was your spouse a resident for the entire year?       Yes       No       Yes       No								
Veteran Information         Are you a veteran?         Yes         No         Is your spouse a veteran?         Yes         No								
Federal Extension         Were you granted an automatic extension to file your 2022 federal income tax return, e.g., Form 1040?         Yes         No								
Single         2.       Married Filing Jointly         3.       Married Filing Separately         Full name and Social Security Number)         SSN         4.       Head of Household         5.       Qualifying Widow(er) (Year spouse died:)								
<u> </u>	6. Federal Adjusted Gross Income	/	▶ 6. ○					
	7. Additions to Federal Adjusted Gross Income (From Form D-400 Schedule S, Part A, Line 16)	on Line 6, 8, 12b, or 14 is negative, fill in circle.	▶ 7.	,				
Γ_	8. Add Lines 6 and 7	Example:	8.					
Staple W-2s Here →	9. Deductions From Federal Adjusted Gross Income (From Form D-400 Schedule S, Part B, Line 41)		▶ 9.	<b>.</b>				
	<ol> <li>Child Deduction (On Line 10a, enter the number or children for whom you were allowed a federal child tax Line 10b, enter the amount of the child deduction. See in</li> </ol>	credit. On structions.)	▶ 10a. ▶ 10b.	.00	70201			
	11. O N.C. Standard Deduction OR O N.C. Itemized (Fill in one circle only. See Form D-400 Schedule A.)	Deductions	▶ 11.		0602			
	<b>12. a. Add</b> Lines 9, 10b, and 11.	12b. Subtrac Line 12a from Lir	a ()	.00	4 			
Stap	13. Part-year Residents and Nonresidents Taxable Percentage (From Form D-400 Schedule PN, Line 24. Enter amount as decimal.)       ▶ 13.         14. North Opening Taxable Income       ■							
	<ol> <li>North Carolina Taxable Income Full-year residents enter the amount from Line 12b. Part-year residents and nonresidents multiply amoun the decimal amount on Line 13.</li> </ol>	nt on Line 12b by	▶ 14. ○	<b>.</b>				
	<ol> <li>North Carolina Income Tax Multiply Line 14 by 4.99% (0.0499). If zero or less, enter</li> </ol>	er a zero.	▶ 15.	.00				

Page 2   Last Name (First 10 Characters)     D-400 Web   8-22	<b>2022</b>	Your Social	Security Number				
16. Tax Credits (From Form D-400TC, Part 3, Line 20	))	▶ 16.	<b>_ _</b> 00				
17. Subtract Line 16 from Line 15		17.					
18. Consumer Use Tax (See instructions)	If you certify that no Consumer Use Tax is due, fill in circle.	▶ ○ ▶ 18.	<b>.</b> 00				
<b>19. Add</b> Lines 17 and 18							
20. North Carolina Income Tax Withheld	b. Spouse's	tax withheld					
<b>21. Other Tax Payments</b> a. 2022 estimated tax		extension	lf you claim a partnership payment				
c. Partnership		ation	on Line 21c or S corporation payment on Line 21d, you must attach a copy of the				
► <u> </u>			NC K-1.				
22. Additional Payments (Amended Returns Only. See	e instructions)	22.					
23. Add Lines 20a through 22		If amount on Line 25 is 23. negative, fill in circle.					
24. Previous Refunds (Amended Returns Only. See in	nstructions)	Example: 24.					
<b>25. Subtract</b> Line 24 from Line 23. (If less than zero,	see instructions.)	25.	⊃ <b>00</b>				
26. a. Tax Due - If Line 25 is less than Line 19, subtra	act Line 25 from Line 19. Otherwise,	go to Line 28. 🕨 26a.					
b. Penalties c. Interest	(Add Lines 26b and 26c and enter the total on Line 26d.)	26d.	<b>_</b> 00				
e. Interest on the Underpayment of Estimated In (See instructions and enter letter in box, if appli		<b>2</b> 6e.	00				
27. Amount Due - Add Lines 26a, 26d, and 26e Pay in U.S. Currency from a Domestic Bank - Y online at www.ncdor.gov.	of Estimated	27.	\$ <b></b>				
28. Overpayment - If Line 25 is more than Line 19, su 19 from Line 25.	ibtract Line	28.					
<i>When filing an amended return, see in</i> <b>29.</b> Amount of Line 28 to be applied to <b>2023 Estimate</b>		<b>70</b> 202 ► 29.					
30. Contribution to the N.C. Nongame and Endanger	ed Wildlife Fund	06024 ► 30.	<b>_</b> OC				
31. Contribution to the N.C. Education Endowment F	und	▶ 31.					
32. Contribution to the N.C. Breast and Cervical Can	cer Control Program	▶ 32.	<b>_</b>				
33. Add Lines 29 through 32		33.					
34. Subtract Line 33 from Line 28. This is the Amour For direct deposit, file electronically		▶ 34.	,				
I declare and certify that I have examined this return and accompanying	g schedules and statements, and to the best of r	ny knowledge and belief, they are	true, correct, and complete.				
Your Signature Contact Phone Number (Include area code)	Check her	e (If filing joint return, both mus e if you authorize the North is return and attachments	et sign.) Date Department of Revenue to with the paid preparer below.				
If prepared by a person other than taxpayer, this certification information of which the preparer has any knowledge.			s Contact Phone Number (Include area code)				
If REFUND, mail return to: N.C. DEPT. OF REVENUE, P.O. BOX R, RALEIGH, NC 27634-0001 If you ARE NOT due a refund, mail return, any payment, and D-400V to: N.C. DEPT. OF REVENUE, P.O. BOX 25000, RALEIGH, NC 27640-0640							