☐	D-400 Web 11-10Individual Income Tax Return 2010Print in Black or Blue Ink Only. No Pencil or Red Ink.North Carolina Department of Revenue IMPORTANT: Do not send a photocopy of this form.							
n Her	For calendar year 2010 , or fiscal year beginning (MM-DD) = -10 and ending (MM-DD-YY) = -							
of Your Return Here	Your Social Security Number							
of You	Your First Name(USE CAPITAL LETTERS FOR YOUR NAME AND ADDR	ESS) M.I. Yo	pur Last Name					
Pages	If a Joint Return, Spouse's First Name	M.I. S	pouse's Last Name					
₹	Address			A	Apartment Number			
Staple	City	State	Zip Code Co	puntry (If not U.S.)	County (Enter first five letters)			
	← Fill in circle if you or your spouse we		Intry on April 15 a	nd a LLS citizen o	r resident			
0	Fill in circle if this is an AMENDED 2010 retur (Note: This form cannot be used for tax years other than 201	n. Important: You	must also complete Form	D-400X-WS, Worksheet f h it to the front of your amer	for Amending 2010			
De	ceased Taxpayer Information	N.C. Public Car	npaign Fund	N.C. Political Parties	Financing Fund			
	Fill in circle if return is filed and signed by Executor, Administrator or Court-Appointed Personal Representative. Taxpayer (MM-DD-YY) f return is for a eceased taxpayer r deceased spouse, nter date of death.	of taxes to this s education materia who accept spend does not change y	<u>Your Spouse</u> Yes O Yes	 Republican Libertarian 	remains the same			
Ent (For	deral Adjusted Gross Income er federal adjusted gross income from your federal retur m 1040, Line 37; Form 1040A, Line 21; or Form 1040EZ, Line	4)	tive					
Res S	sidency Were you a resident of N.C. for the entire year Was your spouse a resident for the entire year	of 2010? () Yes () ar? () Yes ()	No If No , complete Lin to Page 4 of Forn No information and con	es 1 through 11. Then go n D-400. Fill in residency nplete Lines 54 through 56.				
Г - ,	Filing StatusSame as federal. Fill in one circl Carolina taxable income in 2010, s indicate your filing status by filling1.Single2.Married Filing Jointly3.Married Filing Separately4.Head of Household5.Qualifying Widow(er) with Dependent Child	see the Line Instructions f in one of the circles, any _{se's} Name <i>cial</i> 27) SSN	or Lines 1 through 5. If you de refund due will be delayed.	o not Enter the Number of Exemptions claimed on your federal income tax return				
I ∐ I ♠	6. Taxable Income from Your Federal Income	Tax Return	Enter W	hole U.S. Dollars Only				
 Staple W-2s Here	Form 1040, Line 43; Form 1040A, Line 27; or Form (If zero, see the Line Instructions) 7. Additions to Federal Taxable Income	If amount on	► 6. ()					
	All taxpayers must complete Lines 33 through 43 on Page 3 and enter amount from Line 43	Line 6, 8, 10, 11, or 13 is negative, fill in circle.	▶ 7.)			
Stapl	8. Add Lines 6 and 79. Deductions from Federal Taxable Income	Example:	8. ())			
 	If applicable, complete Lines 44 through 53 on Page 3 and enter amount from Line 53		9.)			
	10. Line 8 minus Line 9		10. ())			

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Pa	ge 2 Last Name (Fir 00 Web	rst 10 Characters)	Tax Year 2010		Your Social Security Num	ber
	I-10	Be sure to sign	and date your return	rn on Page 4.		
	Enter amount from Part-year residents		ount from Line 56	If amount on Line 11 or 13 is negative, fill in circle.	0 11. 12.	.00
13.	North Carolina Tax Full-year residents er		l	Example:	0 13.	
14.	North Carolina Inco Table beginning on Pa	ome Tax - If the amount on Line 13 is less ge 21 of the instructions to determine your e the Tax Rate Schedule on Page 29 to ca	than \$68,000, use tax. If the amount	the Tax	14.	.00
15.		olina Taxable Income, Line 13, exceeds \$50 the amount to enter here.	,000, see instructio	ons on	▶ 15.	
16.	0	a Income Tax (Add Lines 14 and 15)			16.	
17.	Tax Credits (From Fo if you enter an amoun	orm D-400TC, Part 4, Line 36 - You must a nt on this line)	attach Form D-400		▶ 17.	.00
18.	Subtract Line 17 fro	om Line 16			18.	_ _ 00
19.	Consumer Use Tax	(See instructions on Page 8)		Ì	▶ 19.	. 00
20.	Add Lines 18 and 19	9			20.	
21.	North Carolina Inco (Staple original or con					
	the original State wage tax statement(s) in lowe	rleft-	21a.	_	∎ ∎00	
22.	hand corner of the return Other Tax Payment	(b. Spouse's tax withheld)	21b.		∎ ∎00	
	a. 2010 Estimated	Tax 🕨	22a.		. 00	
	b. Paid with Extens	sion	22b.			
	c. Partnership	If you claim a partnership payment on Line 22c or S corporation	22c.		. 00	
	d. S Corporation	payment on Line 22d, you must attach a copy of the NC K-1.	22d.		. 00	
23.	North Carolina Ear (From Form D-400TC,	ned Income Tax Credit	23.		.00	
24.	Tax Credit for Sma Pay N.C. Unemploy (From Form D-400TC,	/ment Insurance	24.		.00	
25.	Add Lines 21a throu	ugh 24 and enter the total on Line 25			25.	
26.	a. Tax Due - If Line	20 is more than Line 25, subtract and	enter the result		▶ 26a.	
	b. Penalties 🕨 _	c. Interest	▶			
		nd 26c and enter the total on Line 26d	Exception to		26d.	
		derpayment of estimated income tax ons and enter letter in box, if applicable)	underpayment of estimated tax		► 26e.	
27.		, and 26e and enter the total - Pay Thi s ine. Go to our website and click on <u>Elec</u>		or details.	27. \$	
28.		ne 20 is less than Line 25, subtract and			28.	
29.	Amount of Line 28 to	be applied to 2011 Estimated Incom	ie Tax)	> 29.	.00
30.	Contribution to the N	I.C. Nongame and Endangered Wild	life Fund	Ì	▶ 30.	.00
31.	Add Lines 29 and 30	0			31.	_
32.		om Line 28 and enter the Amount To E ile electronically. Go to our website and)	▶ 32.	.00

	age 3 400 Web 11-10	Last Name (First 10 Characters)	Tax Year 2010	Your Social Se	curity Number
_	Additio	ns to Federal Taxable Incor	ne (See Line Instructions beginr	ning on Page 11.)	
33	 Form 1 Form 1 Form 10 	itemized deductions or the standard 040, Line 40 040A, Line 24 40EZ SINGLE filers - enter \$5,700 OR the amount 040EZ MARRIED FILING JOINTLY filers - ent Form 1040EZ, whichever is less	from Line 5 of Form 1040EZ, whichever is I		Enter Whole U.S. Dollars Only
34	SingleHead of		ing jointly ing separately: pouse <u>does not</u> claim itemized deductions pouse claims itemized deductions	\$6,000 \$3,000 34	
		worksheet on Page 11 to determine the amou	int to enter on this line.		
	_	ine 34 from Line 33 and enter the re	· · · · · · · · · · · · · · · · · · ·	35	
36	on Line 30	imed the standard deduction on your fede b. Instead, skip Line 36 and go to Line 3 mized your deductions on your federal re s from Line 5 of Federal Schedule A, motor	7. turn, enter on this line the state and	▶ 36	
		A, and any foreign income taxes included	on Line 8 of Federal Schedule A.		
37 <u>/</u>	If you iten	med the standard deduction, enter the amounized your deductions, compare Line 35 with	h Line 36 and enter whichever is less.	7 02 37	•00
38	. Personal	exemption adjustment (See instructi	ons on Page 12)		
39	. Interest ir	ncome from obligations of states oth	er than North Carolina	601 ► 39	•••••••••••••••••••••••••••••••••••••••
40	. Adjustme	nt for Bonus Depreciation (See instru	uctions on Page 12)	▲ 40	
41	. Adjustme	nt for Section 179 Expense Deducti	on (See instructions on Page 12)	▶ 41	
42	. Other add	ditions to federal taxable income (At	ach explanation or schedule)	▶ 42	
43		litions - Add Lines 37 through 42 (E		43	,,
	Deduct	ions from Federal Taxable I	ncome (See Line Instructions	beginning on Page 13.,)
		ocal income tax refund if included o		▶ 44	
45	. Interest ir	come from obligations of the United	a States or United States' posses	sions 45	
	·	ortion of Social Security and Railroad I	-		•••••••••••••••••••••••••••••••••••••••
4/	federal go	nt benefits received from vested N.C. vernment retirees (<i>Bailey settlement</i>	- Important: See Line instruction	ns on Page 13)	
	Retireme	re retirement benefits not reported c Int Benefits Worksheet on Page 14	4 and enter the result here	▶ 48	
		e wages (See Line instructions on Pag		verance wages) 🕨 49	
50		nt for bonus depreciation added bac 50a and 50b and enter on Line 50c. So 108			, ,
	▶ .			. 00 ► 50c	
51		ions to North Carolina's National Co instructions on Page 14 for deduction lin	llege Savings Program (NC 529		
52		ductions from federal taxable incom-		► 52	
53		luctions - Add Lines 44 through 52	,	53	

This page must be filed with Pages 1 and 2 of this form.

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	Computation of North Carolina Taxable Income for Part-Year Residents and Nonresidents (See Line Instructions beginning on Page 14. Note: Do not complete Lines 54 through 56 if you were a full-year resident.)							
	- Fill in applicable circles —	ved into or out of North Carolina du	ing th	ne year and enter the dates of residenc		Spouse		
	You			Spouse				
	Date residency began	Date residency ended		Date residency began	Date residency ended			
	(<i>MM-DD-YY</i>)	(<i>MM-DD-YY</i>)		(<i>MM-DD-YY</i>)	(MM-DD-YY)			
	Fill in circle(s) if you or your spouse were <i>nonresidents of North Carolina</i> for the entire year.							
Part-year residents must read the instructions on Page 14 and complete the worksheet on Page 15 to determine the amounts to enter on Lines 54 and 55 below.								

- Enter the amount from Column B, Line 31 of the Part-Year Resident/Nonresident Worksheet on Page 15 of the Instructions.
- 55. Enter the amount from Column A, Line 31 of the Part-Year Resident/Nonresident Worksheet on Page 15 of the Instructions.
- If amount on Line 54 or 55 is negative, fill in circle. Example: • 55. 0

56

56. Divide Line 54 by Line 55 (Enter the result as a decimal amount here and on Line 12; round to four decimal places.)

\bigcap	I certify that, to the b accurate and comple	est of my knowledge, this return is ete.	If prepared by a person other than taxpayer, this certification is based on all information of which the preparer has any knowledge.		
Here	Your Signature	Date	Paid Preparer's Signature	n taxpayer, this certification is the preparer has any knowledge.	
Sign H	Spouse's Signature (If filing joint return, both must sign.) Date		Preparer's FEIN, SSN, or PTIN	▶	
	Home Telephon	e Number (Include area code.)	Preparer's Telephone Number	, , , , , , , , , , , , , , , , , , , ,	
	If REFUND mail	N.C. DEPT. OF REVENUE	If you ARE NOT due a	N.C. DEPT. OF REVENUE P.O. BOX 25000 RALEIGH, NC 27640-0640	
	return to:	P.O. BOX R RALEIGH, NC 27634-0001	refund, mail return, any payment, and D-400V to:	P.O. BOX 25000 RALEIGH, NC 27640-0640	

Original Return Payment Options

Online – You can pay your tax online by bank draft, credit, or debit card using Visa or MasterCard. Go to our website at **www.dornc.com** and click on **Electronic Services** for details.

Payment voucher – If you do not pay your tax online, go to our website and generate a personalized Form **D-400V.** Enclose the voucher with your return and payment, and mail to the address listed above. If you do not pay online or by payment voucher, mail a check or money order with your return for the full amount due. Please write "D-400", and your name, address, and social security number on the payment. If filing a joint return, write both social security numbers on your payment in the order that they appear on the return. **Note:** The Department will not accept a check, money order, or cashier's check unless it is drawn on a U.S. (domestic) bank and the funds are payable in U.S. dollars. Please do not staple, tape, paper clip, or otherwise attach your payment or voucher to your return or to each other.

Amended Returns

See Form D-400X-WS for the mailing address and payment options for amended returns.

Important: You must complete and attach the corrected Form D-400 behind Form D-400X-WS, Worksheet for Amending Individual Income Tax Return.

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D-400TC Web 11-10 If you claim a tax credit on Line 17, Line 23, or Line 24 of Form D-400, you must attach this form to the return. If you do not, the tax credit may be disallowed.

Last Name (First 10 Characters)	Your Social Security Number				
IMPORTANT: Do not send a photocopy of this form.					
Part 1. Credit for Income Tax Paid to Another State or Country - N.C. Residents Only You must a	attach a copy of the return filed with the other state or country				
and proof of payment. Important: If you claim a tax credit for tax paid to more than one state or country, do not fill in Line	es 1 through 6; instead, see instructions on Page 16.				
 Total income from all sources (combined for joint filers) from Federal Form 1040, Line 22; 1040A, Line 15; or 1040EZ, Line 4, while a resident of North Carolina, adjusted by the applicable additions shown on Lines 39, 40, 41 and 42 and deductions shown on Lines 44 through 50c and Line 52 of Form D-400. Do not make an adjustment for domestic production activities included on Line 42 or for any portion of Line 42 or 52 that does not relate to gross income. (If Line 1 is negative, fill in circle.) The portion of Line 1 that was taxed by another state or country. 	r_{s}				
3. Divide Line 2 by Line 1 and enter the result as a decimal amount. (Round to four decimal places.)	3.				
4. Total North Carolina income tax (From Form D-400, Line 16)	► 4 00				
5. Computed credit (Multiply Line 3 by Line 4)	5. 00				
6. Amount of net tax paid to the other state or country on the income shown on Line 2 (See instructions on Page 15. Net tax paid is the total taxes paid [withholding, estimated tax payme amount paid with extension, other payments] less any refunds received or expected to be received					
7a. Enter the lesser of Line 5 or Line 6 and include in the total on Line 19, Part 4.	► 7a 00				
7b. Enter in the box the number of states for which credits are claimed.	▶ 7b.				
Part 2. Credit for Child and Dependent Care Expenses					
 Enter the expenses from Line 3 of Federal Form 2441. (See Credit for Child and Dependent Care Expenses on Page 16 for additional information.) 	► ^{8.} 00				
 Enter the portion of Line 8 that was incurred for dependent(s) who were under the age of seven and dependent(s) who were physically or mentally incapable of caring for themselves. 	▶ 900				
 Credit (Use the Child and Dependent Care Credit Table on Page 16. Multiply the amount on Line 9 by the applicable decimal amount in Column A of the table and enter the result here.) 	▶ 1000				
11. Other qualifying expenses (Line 8 minus Line 9)					
12. Credit (Use the Child and Dependent Care Credit Table on Page 16 of the instructions. Multiply the amount on Line 11 by the applicable decimal amount in Column B of the table and enter the result here.)					
 Total credit for child and dependent care expenses. (Line 10 plus Line 12) Full-year residents enter this amount here and on Line 15 below. 	^{13.} . 00				
14. Part-year residents and nonresidents multiply the amount on Line 13 of this form by the decimal amount from Form D-400, Line 12 and enter the result here and on Line 15 below. If Line 12 of Form D-400 is more than 1.0000, enter the amount from Line 13 here and on Line 15 below.	1400				
15. Total credit for child and dependent care expenses from Line 13 or Line 14. (Include the amount on this line in the total on Line 19, Part 4.)	15 100				
Part 3. Credit for Children (Important: This credit can be claimed only for a dependent child who was u					
If you are entitled to claim the federal child tax credit and your federal adjusted gross income (Form 1040, Line amounts shown for your filing status (Married filing jointly/qualifying widow(er) - \$100,000; Head of H filing separately - \$50,000), complete Lines 16 through 18. Otherwise, do not complete Lines 16 throug	Household - \$80,000; Single - \$60,000; or Married				
16. Multiply the number of children for whom you are entitled to claim the federal child tax credit by \$1 enter the result here. (<i>Full-year residents enter this amount here and on Line 18 below.</i>)	100 and ► 16.				
17. Part-year residents and nonresidents multiply the amount on Line 16 by the decimal amount from D-400, Line 12 and enter the result here and on Line 18 below. If Line 12 of Form D-400 is more that 1.0000, enter the amount from Line 16 here and on Line 18 below.					
18. Credit for children (Include the amount on this line in the total on Line 19, Part 4.)	^{18.} •00				
Part 4. Other Tax Credits (Limited to the amount of tax)					
19. Total of Parts 1, 2, and 3 (Add Lines 7a, 15, and 18.)	^{19.} . 00				
20. Credit for charitable contributions by nonitemizers (Enter your total charitable contributions on Line 20a. ▶ 20a. Then complete the Worksheet for Determining Tax Credit	→ 20b. 00				
for Charitable Contributions on Page 17 of the instructions and enter the tax credit on Line 20b.	.)				

P D-4	age 2 00TC Web 11-10	Last Name (First 10 Characters) Tax Year 2010	Your Social Security Number
Pa	-	Tax Credits (Limited to the amount of tax) (continued)	
	Credit for long	-term care insurance premiums (Complete the Worksheet for Determining Tax emiums Paid on Long-term Care Insurance Contracts on Page 18 of the instructions)▶ 2100
22.		nore than \$350 per contract. tion expenses (Complete the Adoption Tax Credit Worksheet on Page 18 of the instructions.)	▶ 2200
	the tax credit	lified Business Investments (See instructions on Page 18. You must attach a copy of approval letter that you received from the Department of Revenue.)	▶ 2300
24.	Credit for disa Determining enter the amo	bled taxpayer, dependent, or spouse (<i>Complete Form D-429, Worksheet for</i> the Credit for the Disabled Taxpayer, Dependent, or Spouse, and ount from Line 13 or 14, whichever is applicable.)	▶ 24 •00
25.		ain real property land donations (See instructions on Page 19.) enditures and expenses on Lines 26a, 27a, 28a, and 29a only in the first year the credit is taken	▶ 25 00
26.	Credit for reh	abilitating an income-producing historic structure (See instructions on Page 19.)	
	Enter qualifi		▶ 26b •00
27.	Credit for reh	abilitating a nonincome-producing historic structure (See instructions on Page 19.)	4 4
	Enter rehable expenses	► 27a.	▶ 27b 00
28.		nabilitating an income-producing historic mill facility (See instructions on Page 19.)	
20		n expenditures F 28a.	▶ ^{28b.} ∎00
29.		habilitating a nonincome-producing historic mill facility (See instructions on Page 19.) Enter installment	
	Enter rehable expenses	▶ 29a OO amount of credit	► 29b •00
30.		aneous income tax credits (See instructions on Page 19.) licable circles:	
	O Property	Taxes on Farm Machinery 🔘 Gleaned Crops	
	_	n credit \$1,000 10% of market value	b
		pped Dwelling Units Poultry Composting Maximum credit \$1,000 per installation	▶ 30.
	<u> </u>	ation Tillage Equipment Recycling Oyster Shells n credit \$2,500 \$1 per bushel donated	· ·
31.		rried over from previous year, if any. Do not include any ax credits claimed on Form NC-478.	▶ 31 00
32.	Total (Add Lin	es 19, 20b, 21, 22, 23, 24, 25, 26b, 27b, 28b, 29b, 30 and 31)	^{32.} 00
33.	Amount of tota	al North Carolina income tax (From Form D-400, Line 16)	^{33.} 00
34.	Enter the less	er of Line 32 or Line 33	3400
35.		ntive and energy tax credits (See	
	and any requi	n Page 20. Attach Form NC-478 red supporting schedules to the ncome tax return.)	▶ 35 •00
36.		and 35 (Enter the total here and on Form D-400, Line 17.) on this line may not exceed the tax shown on Form D-400, Line 16.	^{36.} 00
Ра	rt 5. Earned	d Income Tax Credit (Not limited to the amount of tax)	
		ed a credit equal to 5% of the Earned Income Tax Credit allowed on your federal return. prorated based on the ratio of income subject to North Carolina tax to total federal inco	
37.	Enter the amo	unt of your federal earned income tax credit.	▶ 37.
	Full-year res	37 by 5% (.05) idents enter this amount here and on Line 23 of Form D-400.	38 00
39.	D-400, Line 1	idents and nonresidents multiply the amount on Line 38 by the decimal amount from F 2 and enter the result here and on Line 23 of Form D-400. If Line 12 of Form D-400 is n enter the amount from Line 38 here and on Line 23 of Form D-400.	
Pa	rt 6. Tax Cr	edit for Small Businesses That Pay N.C. Unemployment Insurance (Not li	mited to the amount of tax)
		amount of qualified N.C. Unemployment Insurance Contributions	► 40a.
	b. Multiply Lir	ne 40a by 25% (.25) and enter the amount here and on Line 24 of Form D-400	► 40b •00