| 1 2 | D-400X-WS Web-Fill 12-10 | North Car | olina Depa | rtmei | ding a 201 Tax Return nt of Revenue copy of this form. Pencil or Red Ink. | | Social Security Numb | or. |
|--|---|---------------------|---------------------------------------|---------------------|---|------------|----------------------------|--|
| turn He | | + | You <u>must</u> en social security | | r J | Jouses | | ei |
| ded Ret | Your First Name (USE CAPITAL LETTERS FOR YOU) | R NAME AND ADDRESS) | М | .l. | Your Last Name | | | |
| r Amen | If a Joint Return, Spouse's First Name | | М | .I. | Spouse's Last Name | | | |
| s of You | Address | | | | | | | Apartment Number |
| Staple All Pages of Your Amended Return Here | City | | S | State | Zip Code | Со | untry <i>(If not U.S.)</i> | County (Enter first five letters |
| Staple | Is the address shown above different than the | e address shown o | , , | | O Yes | <u>О</u> N | 0 | |
| | Original return for this tax year has been pre- | viously audited | Fill in applica | ble cir | cles: | | | |
| 000 | Change of Filing Status (Note: You cannot cl Amended to report Net Operating Loss (Inc | hange from joint to | | | | | | f.) |
| C | Amended to report federal change Amended for other reasons | | (or as p | | y adjusted) | | Enter the amounts | nended s from your amended arough 9 of Column B. |
| | Reconciliation Stateme | ent | Enter the amount Lines 1 th | s from y rough 9 | our original D-400 on of Column A. | | ne amended D-40 | 0 must be attached to 2 of this form. |
| 1. | Enter the total income tax from D-400, Line 16 | 3 | 1. | | | | | |
| 2. | Enter tax credits from D-400, Line 17 | | 2. | | | | | |
| 3. | Subtract Line 2 from Line 1 | | 3. | | | | | |
| 4. | Consumer Use Tax from D-400, Line 19 | | 4. | | | | | |
| 5. | Add Line 3 and 4 | | 5. | | | | | |
| 6. | NC Tax Withheld - a. Your tax withheld | | 6a. | | | | | |
| | b. Spouse's tax withheld | | 6b. | | | | | |
| | Other tax payments (Estimated Tax, Payment with Extension, Partnership, S-Corporation) | | 7. | | | | | |
| | NC Earned Income Tax Credit from D-400, I | | 8. | | | | | |
| 9. | Tax Credit for Small Businesses That Pay N Unemployment Insurance from D-400, Line | | 9. | | | | 9. | |
| 10. | Amount paid with original return plus additio | nal tax paid after | return was filed | | | | 10. | |
| | Total payments. Add Lines 6a through 10 in | | | | | | 11. | |
| 12. | Total of all previous refunds received or exp (Do not include any interest you received or | | | | | | 12. | |
| 13. | Subtract Line 12 from Line 11 | Imn B. ekin Line - | 14 and complete | ling | | | 13. | |
| 14. | Tax Due If Line 13 is not negative and is less If Line 13 is negative, treat Line 13 | s than Line 5, Colu | mn B, subtract L | ine 13 | from Line 5, Column | n B | 14. | |
| 15. | Penalties and interest (See Page 2 of this for | orm and Page 6 c | of Form D-401 ir | nstructi | ons.) | | 15. | |
| 16. | Add Lines 14 and 15 and enter the total due | e - Pay This Amo | unt | | | 16. | \$ | |
| 17. | If Line 5, Column B is less than Line 13, enter | r the difference as | Amount to Be | Refund | led | | 17. | |

Last Name (First 10 Characters)

When to File - File Form D-400X-WS only after you have filed your original return. Generally, to receive a refund, your amended return must be filed within three years from the date the original return was due or within two years after the tax was paid, whichever date was later. If a valid extension was filed, a refund claimed on an amended return may be filed within three years from the extended due date.

How to File and Pay - Attach Form D400X-WS, Worksheet for Amending Individual Tax Return, to the front of the corrected Form D-400. Be sure to fill in the amended return indicator and complete all lines on the corrected Form D-400.

Line 12 Instructions - Enter the amount of overpayment shown on Line 28 of your original return. This amount must be considered in preparing Form D-400X-WS because any refund you have not yet received from your original return will be sent to you separately from any additional refund you claim on Form D-400X-WS. If your original return was changed or audited by the Department of Revenue and as a result there was a change in the overpayment of tax, include the corrected overpayment on line 12. Do not include any interest you received on any refund.

Line 15 Instructions - If you owe additional tax, interest is due on that amount from the due date of the original return to the date of payment. Go to the Department of Revenue website at http://www.dornc.com/taxes/rate.html to determine the applicable interest rate. Include the accrued interest in your payment.

Mail all Amended returns, payment for the amount shown due on Line 16, and Form D-400V Amended to: N.C. DEPT. OF REVENUE, P.O. BOX 25000, RALEIGH, NC 27640-0640

Important: You must attach the corrected Form D-400 (with the amended indicator filled in and <u>all</u> lines completed) to the Form D-400X-WS.

Amended Return Payment Options

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

Payment Voucher - If you do not pay your tax online, use payment voucher (Form D-400V Amended). Go to our website at https://eservices.dor.nc.gov/vouchers/d400v_amended.jsp to generate a personalized D-400V Amended payment voucher. Complete the voucher and enclose it with your amended return and payment. Do not send cash. Write your name, address, and SSN on your payment. 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. Be sure to enter your social security number(s) in the boxes provided on the voucher. Please do not staple, tape, paper clip, or otherwise attach your payment or voucher to your amended return or to each other.

Explanation of Changes

Give the reason for each change. Attach all supporting forms and schedules for the items changed. Be sure to include your name and social security number on any attachments. If the changes are also applicable to your federal return, include a copy of **Federal Form 1040X**. If there was a change to wages or State withholding, be sure to include corrected Forms W-2 or 1099. **Refunds will not be processed without a complete explanation of changes and required attachments**.

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

| D-400 | |
|----------|--|
| Web-Fill | |
| 11-10 | |

Î

Individual Income Tax Return 2010

North Carolina Department of Revenue IMPORTANT: Do not send a photocopy of this form.

of Your Return Here For calendar year 2010, or fiscal year beginning (MM-DD-YY) 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.L Your Last Name Staple All Pages If a Joint Return, Spouse's First Name M.I. Spouse's Last Name Address Apartment Number City State Zip Code Country (If not U.S.) County (Enter first five letters) ○ ← Fill in circle if you or your spouse were out of the country on April 15 and a U.S. citizen or resident. Important: You must also complete Form D-400X-WS, Worksheet for Amending 2010 Fill in circle if this is an AMENDED 2010 return. (Note: This form cannot be used for tax years other than 2010.) Individual Income Tax Return, and attach it to the front of your amended return. **Deceased Taxpayer Information** N.C. Public Campaign Fund N.C. Political Parties Financing Fund Mark 'Yes' if you want to designate \$3 Fill in appropriate circle if you want to designate Fill in circle if return is filed and signed by Executor, of taxes to this special Fund for voter \$3 to this fund. Your tax remains the same Administrator or Court-Appointed Personal Representative. education materials and for candidates whether or not you make a designation. Taxpaver (MM-DD-YY) who accept spending limits. Marking 'Yes' You Your Spouse does not change your tax or refund. If return is for a O Democratic Democratic deceased taxpayer You Your Spouse Republican Republican Spouse (MM-DD-YY) or deceased spouse, Fill in O Yes Libertarian enter date of death. Yes Libertarian appropriate circle O No Unspecified Unspecified No Federal Adjusted Gross Income Enter federal adjusted gross income from your federal return (Form 1040, Line 37; Form 1040A, Line 21; or Form 1040EZ, Line 4) If **No**, complete Lines 1 through 11. Then go to Page 4 of Form D-400. Fill in residency Were you a resident of N.C. for the entire year of 2010? O Yes O No Residency Status Was your spouse a resident for the entire year? 🔿 Yes 🔿 No information and complete Lines 54 through 56 Same as federal. Fill in one circle only. If your spouse was a nonresident and had no North Carolina taxable income in 2010, see the Line Instructions for Lines 1 through 5. If you do not Filing Status Enter the Number of indicate your filing status by filling in one of the circles, any refund due will be delayed. 1. O Single Exemptions claimed on your federal 2. O Married Filing Jointly income tax return Name ← (Enter your spouse's full name and Social 3. O Married Filing Separately Security Number) SSN 4. O Head of Household 5. O Qualifying Widow(er) with Dependent Child (Year spouse died: Enter Whole U.S. Dollars Only 6. Taxable Income from Your Federal Income Tax Return Î Form 1040, Line 43; Form 1040A, Line 27; or Form 1040EZ, Line 6 6 Here (If zero, see the Line Instructions) 7. Additions to Federal Taxable Income W-2s All taxpayers must complete Lines 33 through 7 43 on Page 3 and enter amount from Line 43 aple 8. Add Lines 6 and 7 8. 5 9. Deductions from Federal Taxable Income 9 If applicable, complete Lines 44 through 53 on Page 3 and enter amount from Line 53 10. Line 8 minus Line 9 10.

Page 2 D-400 Web-Fill

25.

26a.

26d.

26e.

\$

28.

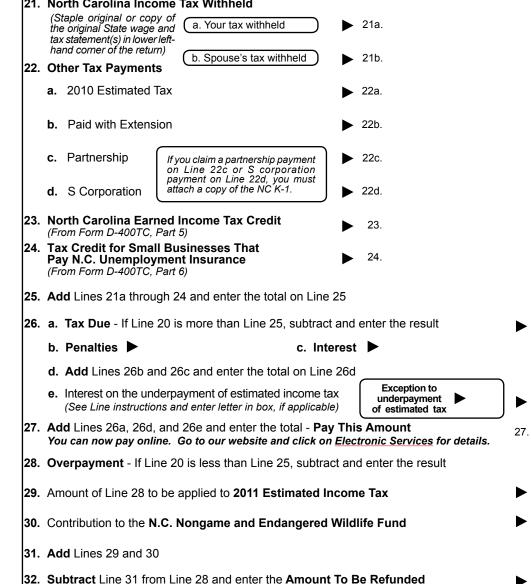
29.

30.

31.

32.

| | Be sure to sign and date your return on Page 4. | |
|-----|---|-----|
| 11. | Enter amount from Line 10 | 11. |
| 12. | Part-year residents and nonresidents Complete Lines 54 through 56 on Page 4 and enter decimal amount from Line 56 | 12. |
| 13. | North Carolina Taxable Income Full-year residents enter the amount from Line 11 Part-year residents and nonresidents multiply amount on Line 11 by the decimal amount on Line 12 | 13. |
| 14. | North Carolina Income Tax - If the amount on Line 13 is less than \$68,000, use the Tax Table beginning on Page 21 of the instructions to determine your tax. If the amount on Line 13 is \$68,000 or more, use the Tax Rate Schedule on Page 29 to calculate your tax. | 14. |
| 15. | Surtax - If North Carolina Taxable Income, Line 13, exceeds \$50,000, see instructions on Page 32 to determine the amount to enter here. | 15. |
| 16. | Total North Carolina Income Tax (Add Lines 14 and 15) | 16. |
| 17. | Tax Credits (From Form D-400TC, Part 4, Line 36 - You must attach Form D-400TC if you enter an amount on this line) | 17. |
| 18. | Subtract Line 17 from Line 16 | 18. |
| 19. | Consumer Use Tax (See instructions on Page 8) | 19. |
| 20. | Add Lines 18 and 19 | 20. |
| 21. | North Carolina Income Tax Withheld | |



For a faster refund, file electronically. Go to our website and click on efile.

 \sim č 40 N

| Page 3 D-400 Web-Fill 11-10 | Last Nar |
|-----------------------------------|----------|
| | |

Last Name (First 10 Characters)

Tax Year 2010

| | Additions to Federal Taxable Income (See Line Instructions beginning on Page 11 | .) | |
|-----------------|---|-----|-----------------------------------|
| 33. | Enter the itemized deductions or the standard deduction from your federal return | | |
| | Form 1040, Line 40 Form 1040A, Line 24 Form 1040EZ SINGLE filers - enter \$5,700 OR the amount from Line 5 of Form 1040EZ, whichever is less Form 1040EZ MARRIED FILING JOINTLY filers - enter \$11,400 OR the amount from Line 5 of Form 1040EZ, whichever is less | | Enter Whole U.S. Dollars Only 33. |
| 34. | Enter your N.C. standard deduction (The standard deduction for most people is shown below.) Single\$3,000 Head of household\$4,400 Qualifying widow(er)\$6,000 Married filing separately: If your spouse does not claim itemized deductions\$3,000 If your spouse claims itemized deductions | ► | 34. |
| | Note: If 65 or older or blind <u>OR</u> if someone can claim you as a dependent, see the applicable chart or worksheet on Page 11 to determine the amount to enter on this line. |] | |
| 35. | Subtract Line 34 from Line 33 and enter the result here, but not less than zero | - | 35. |
| 36. | If you claimed the standard deduction on your federal return, do not enter any amount on Line 36. Instead, skip Line 36 and go to Line 37. | | |
| Â | If you itemized your deductions on your federal return, enter on this line the state and local taxes from Line 5 of Federal Schedule A, motor vehicle taxes from Line 7 of Federal Schedule A, and any foreign income taxes included on Line 8 of Federal Schedule A. | ► | 36. |
| 37. <u>/</u> | If you claimed the standard deduction, enter the amount from Line 35 above. If you itemized your deductions, compare Line 35 with Line 36 and enter whichever is less. | ► | 37. |
| 38. | Personal exemption adjustment (See instructions on Page 12) | | 38. |
| 39. | Interest income from obligations of states other than North Carolina | | 39. |
| 40. | Adjustment for Bonus Depreciation (See instructions on Page 12) | | 40. |
| 41. | Adjustment for Section 179 Expense Deduction (See instructions on Page 12) | | 41. |
| 42. | Other additions to federal taxable income (Attach explanation or schedule) | | 42. |
| 43. | Total additions - Add Lines 37 through 42 (Enter the total here and on Line 7) | | 43. |
| | Deductions from Federal Taxable Income (See Line Instructions beginning on Pa | age | 13.) |
| 44. | State or local income tax refund if included on Line 10 of Federal Form 1040 | ► | 44. |
| 45. | Interest income from obligations of the United States or United States' possessions | ► | 45. |
| 46. | Taxable portion of Social Security and Railroad Retirement Benefits included on your federal return | ► | 46. |
| 47. | Retirement benefits received from vested N.C. State government, N.C. local government, or federal government retirees (<i>Bailey settlement - Important: See Line instructions on Page 13</i>) | ► | 47. |
| 48. | If you have retirement benefits not reported on Lines 46 or 47, complete the <i>Retirement Benefits Worksheet</i> on Page 14 and enter the result here | ► | 48. |
| 49. | Severance wages (See Line instructions on Page 14 for explanation of qualifying severance wages) | | 49. |
| 50. | Adjustment for bonus depreciation added back in 2008 and 2009 (Add Lines 50a and 50b and enter on Line 50c. See Line instructions on Page 14) | | |
| | 50a. 2008 50b. 2009 | | |
| | | • | 50c. |
| 51. | Contributions to North Carolina's National College Savings Program (NC 529 Plan) (See Line instructions on Page 14 for deduction limitations) | ► | 51. |
| 52. | Other deductions from federal taxable income (Attach explanation or schedule. Do not include any deduction for retirement benefits on this line.) | ► | 52. |
| 53. | Total deductions - Add Lines 44 through 52 (Enter the total here and on Line 9) | | 53. |

Tax Year **2010**

| <i>— Fill in applicable circles</i> | | | | | You | Spouse |
|---|--|--|--|----------------|----------|--------------|
| Fill in circle(s) if you or your spous | e moved into or out of North C | Carolina during the year and enter the dates | s of residency in the b | oxes. 🗕 | 0 | <u>opous</u> |
| | You | | Spouse | | | |
| Date residency began | Date residency ended | Date residency began | Date | e residency er | ided | |
| (MM-DD-YY) | (MM-DD-YY) | (MM-DD-YY) | | (MM-E | D-YY) | |
| Fill in circle(s) if you or your | spouse were <i>nonresidents</i> of | of North Carolina for the entire year. | | \rightarrow | 0 | 0 |
| . Enter the amount from Col | umn B, Line 31 of the Pa | | | Whole U.S | 5. Dolla | rs Only |
| I. Enter the amount from Col Resident/Nonresident Wo | umn B, Line 31 of the Pa | rt-Year | Enter | Whole U.S | . Dolla | rs Only |
| Enter the amount from Col Resident/Nonresident Wo Enter the amount from Col Resident/Nonresident Wo | umn B, Line 31 of the Par orksheet on Page 15 of the umn A, Line 31 of the Par orksheet on Page 15 of the | rt-Year e Instructions. rt-Year | Enter 54. 55. | Whole U.S | 5. Dolla | rs Only |
| . Enter the amount from Col Resident/Nonresident Wo . Enter the amount from Col Resident/Nonresident Wo | umn B, Line 31 of the Par orksheet on Page 15 of the umn A, Line 31 of the Par orksheet on Page 15 of the | rt-Year e Instructions. rt-Year e Instructions. | Enter ▶ 54. ▶ 55. | Whole U.S | . Dolla | rs Only |
| . Enter the amount from Col Resident/Nonresident Wo . Enter the amount from Col Resident/Nonresident Wo . Divide Line 54 by Line 55 (| umn B, Line 31 of the Par orksheet on Page 15 of the umn A, Line 31 of the Par orksheet on Page 15 of the Enter the result as a decima | rt-Year e Instructions. rt-Year e Instructions. | Enter 54. 55. 56. yer, this certification is | <u>,</u> | 5. Dolla | rs Only |

 Spouse's Signature (If filing joint return, both must sign.)
 Date

 Home Telephone Number (Include area code.)
 Preparer's Telephone Number (Include area code.)

 If REFUND mail
 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

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.

| Web-Fill |
|----------|
| 11-10 |

2010 Individual Tax Credits North Carolina Department of Revenue See instructions beginning on Page 15.

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. Your Social Security Number

Last Name (First 10 Characters)

IMPORTANT: Do not send a photocopy of this form.

| | rt 1. Credit for Income Tax Paid to Another State or Country - N.C. Residents Only You must atta- I proof of payment. Important: If you claim a tax credit for tax paid to more than one state or country, do not fill in Lines 1 | | | |
|-----|--|-------------------|-----------------|-------------------------------------|
| | 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. <i>(If Line 1 is negative, fill in circle.)</i> The portion of Line 1 that was taxed by another state or country. | • | Ent 1. 2. | er Whole U.S. Dollars Only |
| 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. | |
| 5. | Computed credit (Multiply Line 3 by Line 4) | | 5. | |
| | 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 payment amount paid with extension, other payments] less any refunds received or expected to be received.) | s, 🕨 | 6. | |
| 7a. | Enter the lesser of Line 5 or Line 6 and include in the total on Line 19, Part 4. | | 7a. | |
| 7b. | Enter in the box the number of states for which credits are claimed. | ► | 7b. | |
| Ра | rt 2. Credit for Child and Dependent Care Expenses | | | |
| 8. | 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. |
| 9. | 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. | | | ▶ 9. |
| 10. | 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.) | | | ▶ 10. |
| 11. | Other qualifying expenses (Line 8 minus Line 9) | | 702 | 11. |
| 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.) | | 050401 | ▶ 12. |
| 13. | 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. | | N | 13. |
| 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. | | | 14. |
| 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. |
| Pa | rt 3. Credit for Children (Important: This credit can be claimed only for a dependent child who was und | l er 17 ye | ears of age | e on the last day of the tax year.) |
| | If you are entitled to claim the federal child tax credit and your federal adjusted gross income (Form 1040, Line 3 amounts shown for your filing status (Married filing jointly/qualifying widow(er) - \$100,000; Head of Hor filing separately - \$50,000), complete Lines 16 through 18. Otherwise, do not complete Lines 16 through 18. | usehold | 1 - \$80,00 | 0; Single - \$60,000; or Married |
| 16. | Multiply the number of children for whom you are entitled to claim the federal child tax credit by \$100 enter the result here. (<i>Full-year residents enter this amount here and on Line 18 below.</i>) | 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 than 1.0000, enter the amount from Line 16 here and on Line 18 below. | | | 17. |
| 18. | Credit for children (Include the amount on this line in the total on Line 19, Part 4.) | | | 18. |
| Pa | rt 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. | |
| 20. | Credit for charitable contributions by nonitemizers — (Enter your total charitable contributions on Line 20a. ▶ 20a. — | ▶ 20 | 0b. | |
| | Then complete the Worksheet for Determining Tax Credit for Charitable Contributions on Page 17 of the instructions and enter the tax credit on Line 20b.) | | - | |

| Page 2 D-400TC Web-Fill 11-10 | Last | Na |
|-------------------------------------|------|----|
| | | |

Last Name (First 10 Characters)

Tax Year **2010**

| Pa | rt 4. Other Tax Credits (Limited to the amount of tax) (continued) |
|-----|---|
| | Credit for long-term care insurance premiums <i>(Complete the Worksheet for Determining Tax</i> <i>Credit for Premiums Paid on Long-term Care Insurance Contracts</i> on Page 18 of the instructions.) ^{21.} 21. Do not enter more than \$350 per contract. |
| 22. | Credit for adoption expenses (Complete the Adoption Tax Credit Worksheet on Page 18 of the instructions.) > 22. |
| | Credit for Qualified Business Investments (See instructions on Page 18. You must attach a copy of the tax credit approval letter that you received from the Department of Revenue.) |
| | Credit for disabled taxpayer, dependent, or spouse (Complete Form D-429, Worksheet for Determining the Credit for the Disabled Taxpayer, Dependent, or Spouse, and enter the amount from Line 13 or 14, whichever is applicable.) |
| 25. | Credit for certain real property land donations (See instructions on Page 19.) > 25. |
| | Enter expenditures and expenses on Lines 26a, 27a, 28a, and 29a only in the first year the credit is taken |
| 26. | Credit for rehabilitating an income-producing historic structure (See instructions on Page 19.) |
| | Enter qualified Enter installment amount of credit > 26b. |
| 27. | Credit for rehabilitating a nonincome-producing historic structure (See instructions on Page 19.) |
| | Enter rehabilitation expenses 27a. Enter installment amount of credit > 27b. |
| 28. | Credit for rehabilitating an income-producing historic mill facility (See instructions on Page 19.) |
| | Enter qualified rehabilitation expenditures 28a. Enter amount of credit 28b. |
| 29. | Credit for rehabilitating a nonincome-producing historic mill facility (See instructions on Page 19.) |
| | Enter rehabilitation expenses 29a. Enter installment amount of credit > 29b. |
| 30. | Other miscellaneous income tax credits (See instructions on Page 19.) Fill in applicable circles: |
| | Property Taxes on Farm Machinery Ogleaned Crops Maximum credit \$1,000 10% of market value |
| | Handicapped Dwelling Units Maximum credit \$550 per unit Poultry Composting Maximum credit \$1,000 per installation 30. |
| | Conservation Tillage Equipment Recycling Oyster Shells Maximum credit \$2,500 \$1 per bushel donated |
| | Tax credits carried over from previous year, if any. Do not include any carryover of tax credits claimed on Form NC-478. |
| 32. | Total (Add Lines 19, 20b, 21, 22, 23, 24, 25, 26b, 27b, 28b, 29b, 30 and 31) |
| 33. | Amount of total North Carolina income tax (From Form D-400, Line 16) 33. |
| 34. | Enter the lesser of Line 32 or Line 33 34. |
| 35. | Business incentive and energy tax credits (See |
| | instructions on Page 20. Attach Form NC-478 and any required supporting schedules to the front of your income tax return.) |
| | Add Lines 34 and 35 (Enter the total here and on Form D-400, Line 17.) 36. The amount on this line may not exceed the tax shown on Form D-400, Line 16. 36. |
| Pa | rt 5. Earned Income Tax Credit (Not limited to the amount of tax) |
| | You are allowed a credit equal to 5% of the Earned Income Tax Credit allowed on your federal return. For part-year residents and nonresidents, the credit must be prorated based on the ratio of income subject to North Carolina tax to total federal income. |
| 37. | Enter the amount of your federal earned income tax credit. Number of qualifying children |
| | Multiply Line 37 by 5% (.05) |
| | Full-year residents enter this amount here and on Line 23 of Form D-400. 30. Part-year residents and nonresidents multiply the amount on Line 38 by the decimal amount from Form |
| | D-400, Line 12 and enter the result here and on Line 23 of Form D-400. If Line 12 of Form D-400 is more 39. than 1.0000, enter the amount from Line 38 here and on Line 23 of Form D-400. |
| Pa | rt 6. Tax Credit for Small Businesses That Pay N.C. Unemployment Insurance (Not limited to the amount of tax) |
| 40. | a. Enter the amount of qualified N.C. Unemployment Insurance Contributions <a>40a. |
| | b. Multiply Line 40a by 25% (.25) and enter the amount here and on Line 24 of Form D-400 40b. |