



Amended North Carolina Individual Income Tax Return

This return is for taxable year

| | | | |
|-----------------------------|---|--------------------|-------------------------------------|
| Please Print or Type | Your first name and middle initial | Your last name | Your Social Security No. |
| | If a joint return, spouse's first name and middle initial | Spouse's last name | Spouse's Social Security No. |
| | Address | | Daytime Telephone Number () |
| | City, town or post office, state and zip code | County | Office Use Only |

| | |
|--|---|
| Enter below name and address shown on original return if different from name and address shown above | Has your original return for this taxable year been changed or audited? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," have you been notified that it will be? <input type="checkbox"/> Yes <input type="checkbox"/> No |
|--|---|

Filing status claimed. Note: You cannot change from joint to separate returns after the due date of the original return has passed.

| | | | | | |
|----------------------|---------------------------------|--|---|--|---|
| On original return ▶ | <input type="checkbox"/> Single | <input type="checkbox"/> Married filing joint return | <input type="checkbox"/> Married filing separate return | <input type="checkbox"/> Head of household | <input type="checkbox"/> Qualifying widow(er) |
| On this return ▶ | <input type="checkbox"/> Single | <input type="checkbox"/> Married filing joint return | <input type="checkbox"/> Married filing separate return | <input type="checkbox"/> Head of household | <input type="checkbox"/> Qualifying widow(er) |

Correction of Taxable Income and Tax Payments

| (See instructions on page 2) | | A. As originally reported or as previously adjusted (see instructions) | B. Net change - Increase or (Decrease) - explain on page 2 | C. Correct Amount |
|---|--------------------------|--|--|-------------------|
| 1. Taxable income from your federal income tax return | 1. | | | |
| 2. Additions to federal taxable income | 2. | | | |
| 3. Add lines 1 and 2 | 3. | | | |
| 4. Deductions from federal taxable income | 4. | | | |
| 5. Line 3 minus line 4 | 5. | | | |
| 6. North Carolina taxable income (Taxable percentage as corrected) 6a. | 6. | | | |
| 7. North Carolina income tax (Use applicable Tax Rate Schedule on reverse) | 7. | | | |
| 8. Tax Credits (Attach Form D-400TC if changing tax credits claimed previously) | 8. | | | |
| 9. Line 7 minus line 8 | 9. | | | |
| 10. Consumer Use Tax (If applicable) | 10. | | | |
| 11. Add lines 9 and 10 | 11. | | | |
| 12. North Carolina income tax withheld | a. Your tax withheld | 12a. | | |
| | b. Spouse's tax withheld | 12b. | | |
| 13. Other tax payments | 13. | | | |
| 14. Tax Credit for Child Health Insurance Premiums (Tax years 1999 and 2000 only) | 14. | | | |
| 15. Amount paid with original return plus additional tax paid after it was filed | | | | 15. |
| 16. Total payments. Add lines 12a through 15 in column C | | | | 16. |
| 17. Total of all previous refunds received for this taxable year | | | | 17. |
| 18. Line 16 minus line 17 | | | | 18. |
| 19. If line 11, column C is more than line 18, enter the difference here | | | | 19. |
| 20. Interest due (See instructions) | | | | 20. |
| 21. Add lines 19 and 20 and enter the total - Pay This Amount | | | | 21. |
| 22. If line 11, column C is less than line 18, enter the difference as Amount To Be Refunded | | | | 22. |

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

Mail to: N.C. DEPT. OF REVENUE, P.O. BOX 25000, RALEIGH, NC 27640-0640

Explanation of changes - Enter the line number from page 1 for each item you are changing and give the reason for each change. Attach all supporting forms and schedules for items changed. Be sure to include your name and social security number on any attachments. If the changes to this return are also applicable to your federal return, include a copy of Federal Form 1040X. **Refunds will not be processed without a complete explanation of the changes.**

INSTRUCTIONS

When to File - File Form D-400X only after you have filed your original return. Generally, Form D-400X must be filed within 3 years after the date the original return was due to be filed or within six months of the date the tax was paid, whichever is later. A return filed early is considered filed on the date it was due. Note: Amended returns are not processed until all current year original returns are processed, which generally occurs by September 1. Please wait until after that date to contact us about your refund.

Specific Instructions - Above your name, enter the calendar year or fiscal year of the return you are amending.

Columns A-C - In column A, enter the amounts from your return as originally filed or as you later amended it. If your return was changed or audited by the Department of Revenue, enter the adjusted amounts.

In column B, enter the net increase or net decrease for each line you are changing. Show all decreases in parentheses. Explain each change in the space above. If you need additional space, show the required information on an attached statement. **If you are claiming a refund as a result of a carryback of a net operating loss, please attach a copy of Federal Form 1045, including Schedule A or B, to this form.**

For column C, add the increase in column B to the amount in column A, or subtract the decrease in column B from column A. For any item you do not change, enter the amount from column A in column C.

Line Instructions - If you are only changing withholding, other tax payments, or tax credits, skip lines 1-5 and start with line 6.

Line 1 — Enter the amount from line 6, Form D-400 or line 5, Form D-400EZ. If you are correcting your wages or other employee compensation, attach a copy of all additional or corrected Forms W-2 you received after you filed your original return.

Line 2 — Enter the amount from line 7, Form D-400 or line 6, Form D-400EZ in column A.

Line 4 — Enter the amount from line 9, Form D-400. If you filed Form D-400EZ, enter zero in column A.

Line 6 and 6a — For full-year North Carolina residents, the amount on line 5 is the North Carolina taxable income. Full-year residents should enter on line 6 the amount on line 5. Nonresidents and part-year residents report only the portion of federal taxable income that is from North Carolina sources. The percentage of a nonresident's or part-year resident's federal taxable income from North Carolina sources is reflected as a decimal amount on Form D-400. If the percentage of federal taxable income from North Carolina sources has changed, show your calculation of the new percentage in the Explanation of Changes section above. Enter the new percentage as a decimal amount on line 6a. For tax years prior to 2003, round the decimal amount to two places. For tax years after 2002, round the decimal amount to four places. Determine the corrected North Carolina taxable income by multiplying the amount on line 5, column C by the decimal amount on line 6a. Enter the result on line 6, column C.

Line 7 — Figure the tax on the taxable income you reported on line 6, column C. Use the **Tax Tables** in the instructions for Form D-400 or the appropriate **Tax Rate Schedule** below to compute the tax.

Line 8 — Enter your total tax credits from the tax credits line on Form D-400. If you filed Form D-400EZ, enter zero in column A. Attach Form D-400TC and supporting schedules to show any changes to tax credit(s) that were claimed on your original return.

Line 10 — Enter your consumer use tax claimed on Form D-400 or Form D-400EZ. If you are correcting the amount reported, use the worksheets and table in the instructions for Form D-400 to calculate the correct use tax.

Lines 12 - 13 — Enter on the applicable lines your income tax withholding and other tax payments. **Attach copies of corrected Forms W-2 if you change your withholding.** Other tax payments include payments of

estimated income tax, payment made with an extension request, and payments made by partnerships or S corporations on behalf of nonresident partners or shareholders. Include supporting documentation if you change the amount of any tax payments you claim.

Line 14 — Enter the tax credit for child health insurance premiums. Note: This credit is applicable only if amending a 1999 or 2000 return.) If you filed Form D-400EZ, enter zero in column A.

Line 15 — Enter any amount you paid with your original return. Also include additional tax paid after you filed your return. Do not include any payments of interest or penalties.

Line 17 — Enter the amount of overpayment shown on your original return. That amount must be considered in preparing Form D-400X because any refund you have not yet received from your original return will be sent to you separately from any additional refund you claimed on Form D-400X. 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 17. Do not include any interest you received on any refund.

Line 18 — If line 18 is a negative amount, treat it as a positive amount and add it to the amount on line 11, column C. Enter the result on line 19. This is the additional tax due.

Line 20 — If a balance is due, 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 www.dor.state.nc.us to determine the applicable interest rate. Include the accrued interest in your payment.

Line 21 — Send Form D-400X with a check or money order for the amount shown on line 21 payable to the **North Carolina Department of Revenue, P.O. Box 25000, Raleigh, N.C. 27640-0640.** Do not send cash. Write your name, address, and SSN on your payment.

Tax Rate Schedule for Tax Years Before 2001

| If your filing status is | And the amount on line 6, column C is more than | But not over | The Tax is |
|--|---|--------------|---|
| Single | \$ 0 | \$ 12,750 | 6% of the amount on line 6, column C |
| | \$ 12,750 | \$ 60,000 | \$765 + 7% of the amount over \$12,750 |
| | \$ 60,000 | ----- | \$4,072.50 + 7.75% of the amount over \$60,000 |
| Head of Household | \$ 0 | \$ 17,000 | 6% of the amount on line 6, column C |
| | \$ 17,000 | \$ 80,000 | \$1,020 + 7% of the amount over \$17,000 |
| | \$ 80,000 | ----- | \$5,430 + 7.75% of the amount over \$80,000 |
| Married Filing Jointly or Qualifying Widow(er) | \$ 0 | \$ 21,250 | 6% of the amount on line 6, column C |
| | \$ 21,250 | \$100,000 | \$1,275 + 7% of the amount over \$21,250 |
| | \$100,000 | ----- | \$6,787.50 + 7.75% of the amount over \$100,000 |
| Married Filing Separately | \$ 0 | \$ 10,625 | 6% of the amount on line 6, column C |
| | \$ 10,625 | \$ 50,000 | \$637.50 + 7% of the amount over \$10,625 |
| | \$ 50,000 | ----- | \$3,393.75 + 7.75% of the amount over \$50,000 |

Tax Rate Schedule for Tax Years After 2000

| | | | |
|--|-----------|-----------|--|
| Single | \$ 0 | \$ 12,750 | 6% of the amount on line 6, column C |
| | \$ 12,750 | \$ 60,000 | \$765 + 7% of the amount over \$12,750 |
| | \$ 60,000 | \$120,000 | \$4,072.50 + 7.75% of the amount over \$60,000 |
| | \$120,000 | ----- | \$8,722.50 + 8.25% of amount over \$120,000 |
| Head of Household | \$ 0 | \$ 17,000 | 6% of the amount on line 6, column C |
| | \$ 17,000 | \$ 80,000 | \$1,020 + 7% of the amount over \$17,000 |
| | \$ 80,000 | \$160,000 | \$5,430 + 7.75% of the amount over \$80,000 |
| | \$160,000 | ----- | \$11,630 + 8.25% of amount over \$160,000 |
| Married Filing Jointly or Qualifying Widow(er) | \$ 0 | \$ 21,250 | 6% of the amount on line 6, column C |
| | \$ 21,250 | \$100,000 | \$1,275 + 7% of the amount over \$21,250 |
| | \$100,000 | \$200,000 | \$6,787.50 + 7.75% of the amount over \$100,000 |
| | \$200,000 | ----- | \$14,537.50 + 8.25% of the amount over \$200,000 |
| Married Filing Separately | \$ 0 | \$ 10,625 | 6% of the amount on line 6, column C |
| | \$ 10,625 | \$ 50,000 | \$637.50 + 7% of the amount over \$10,625 |
| | \$ 50,000 | \$100,000 | \$3,393.75 + 7.75% of the amount over \$50,000 |
| | \$100,000 | ----- | \$7,268.75 + 8.25% of the amount over \$100,000 |