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D-400

Web-Fill

Individual Income Tax Return 1999

North Carolina Department of Revenue

For calendar year **1999**, or other tax 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.I.

Your Last Name

If a Joint Return, Spouse's First Name

M.I.

Spouse's Last Name

Address

County (Enter first five letters)

City

State

Zip Code

Fill in all applicable circles:

Incorrect responses may delay any refund due.

- Your name, spouse's name, address, or filing status has changed since last year's return
- First N.C. return for you or your spouse
- Return for deceased taxpayer Date of death
- Return for deceased spouse Date of death

N.C. Political Parties Financing Fund

Fill in appropriate circle if you want to designate \$1 to this fund; making a donation neither increases your tax nor reduces your refund.

- | | |
|-----------------------------------|-----------------------------------|
| You | Your Spouse |
| <input type="radio"/> Democratic | <input type="radio"/> Democratic |
| <input type="radio"/> Republican | <input type="radio"/> Republican |
| <input type="radio"/> Unspecified | <input type="radio"/> Unspecified |

Residency Status

Were you a resident of N.C. for the entire year of 1999? Yes No

Was your spouse a resident for the entire year? Yes No

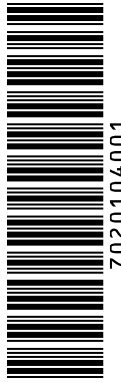
If no, complete Lines 49 through 53 on Page 4

Filing Status

Same as federal. Fill in one circle only. If your spouse was a nonresident and had no North Carolina taxable income in 1999, see the Line Instructions for Lines 1 through 5. If you do not indicate your filing status by filling in one of the circles, any refund due will be delayed.

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

Enter the Number of Exemptions claimed on your federal income tax return



6. Taxable Income from Your Federal Income Tax Return

Form 1040, Line 39; Form 1040A, Line 24; Form 1040EZ, Line 6; or TeleFile Tax Record, Line K (If zero, see the Line Instructions) ▶ 6.

7. Additions to Federal Taxable Income

All taxpayers must complete Lines 31 through 40 on Page 3 and enter amount from Line 40 ▶ 7.

8. Add Lines 6 and 7 8.

9. Deductions from Federal Taxable Income

If applicable, complete Lines 41 through 48 on Page 3 and enter amount from Line 48 ▶ 9.

10. a. Line 8 minus Line 9 10a.

b. Part-year residents and nonresidents

Complete Lines 49 through 53 on Page 4 and enter decimal amount from Line 53 ▶ 10b.

11. North Carolina Taxable Income

Full-year residents enter the amount from Line 10a 11.
Part-year residents and nonresidents multiply amount on Line 10a by 10b and enter result

- 12. Enter amount from Line 11 (North Carolina Taxable Income) 12.
- 13. **North Carolina Income Tax**
If the amount on Line 12 is less than \$68,000, use the **Tax Table** beginning on Page 15 of the instructions to determine your tax. If the amount on Line 12 is \$68,000 or more, use the **Tax Rate Schedule** on Page 23 to calculate your tax. 13.
- 14. **Tax Credits** (From Form D-400TC, Part 4, Line 31) ▶ 14.
- 15. Subtract Line 14 from Line 13 15.
- 16. **Consumer Use Tax** (See instructions on Page 6) ▶ 16.
- 17. Add Lines 15 and 16 17.
- 18. **North Carolina Income Tax Withheld**
(Staple original or copy of the original State wage and tax statement(s) in top left-hand corner of the return)

	a. Your tax withheld	▶	18a.
	b. Spouse's tax withheld	▶	18b.
- 19. **Other Tax Payments**
 - a. 1999 Estimated Tax ▶ 19a.
 - b. Paid with Extension ▶ 19b.
 - c. Partnership ▶ 19c.
 - d. S Corporation ▶ 19d.
- 20. Add Lines 19a through 19d 20.
- 21. **Tax Credit for Child Health Insurance Premiums** (From Form D-400TC, Part 5, Line 39) ▶ 21.
- 22. Add Lines 18a, 18b, 20, and 21 22.
- 23. a. If Line 17 is more than Line 22, subtract and enter the result ▶ 23a.
- b. Penalty for underpayment of estimated income tax **Penalty Exception** ▶ 23b.
(See instructions and enter letter in box, if applicable)
- c. Other penalties and interest (See instructions) 23c.
- 24. Add Lines 23a, 23b, and 23c and enter the total - **Pay This Amount** 24. \$
- 25. If Line 17 is less than Line 22, subtract and enter the result 25.
- 26. Amount of Line 25 to be applied to **2000 Estimated Income Tax** ▶ 26.
- 27. Contribution to the **N.C. Nongame and Endangered Wildlife Fund** ▶ 27.
- 28. Contribution to the **N.C. Candidates Financing Fund** ▶ 28.
- 29. Add Lines 26, 27, and 28 29.
- 30. Subtract Line 29 from Line 25 and enter the **Amount To Be Refunded** ▶ 30.

Be sure to sign and date your return on Page 4



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Additions to Federal Taxable Income (See Line Instructions beginning on Page 8.)

- 31. Enter the itemized deductions or the standard deduction from your federal return
 - Form 1040, Line 36
 - Form 1040A, Line 21
 - Form 1040EZ SINGLE filers - enter \$4,300 **OR** the amount from Line 5 of Form 1040EZ, **whichever is less**
 - Form 1040EZ MARRIED FILING JOINTLY filers - enter \$7,200 **OR** the amount from Line 5 of Form 1040EZ, **whichever is less**
 - TeleFile Tax Record filers - enter standard deduction from Line J of TeleFile Tax Record▶ 31.
- 32. Enter your standard deduction from the applicable chart or worksheet on Page 8 ▶ 32.
- 33. **Subtract** Line 32 from Line 31 and enter the result here, but not less than zero
IMPORTANT: If you claimed the standard deduction on your federal return, skip Line 34 and enter on Line 35 the amount entered on Line 33 33.
- 34. If you itemized your deductions on your federal return, Form 1040, enter the state and local income taxes from Line 5 and any foreign income taxes included on Line 8 of Federal Schedule A. **IMPORTANT:** If you were required to complete the **Itemized Deductions Worksheet** on Page A-6 of the instructions for **Federal Form 1040**, see Page 9 ▶ 34.
- 35. **Compare Line 33 with Line 34 and enter whichever is less** ▶ 35.
- 36. Personal exemption adjustment (Complete the **Personal Exemption Adjustment Worksheet** on Page 9 and enter the result) ▶ 36.
- 37. Interest income from obligations of states other than North Carolina ▶ 37.
- 38. Lump-sum distributions from a pension or profit sharing plan ▶ 38.
- 39. Other additions to federal taxable income (Attach explanation or schedule) ▶ 39.
- 40. **Total additions** - Add Lines 35 through 39 (Enter the total here and on Line 7) 40.

Deductions from Federal Taxable Income (See Line Instructions beginning on Page 10.)

- 41. State or local income tax refund if included on Line 10 of Federal Form 1040 ▶ 41.
- 42. Interest income from obligations of the United States, United States' possessions, or the State of North Carolina ▶ 42.
- 43. Taxable portion of Social Security and Railroad Retirement Benefits included on your federal return ▶ 43.
- 44. Other retirement benefits (Enter amount from Line 4 of the **Retirement Benefits Deduction Worksheet** on Page 10) ▶ 44.
- 45. Federal tax credits for which deductions were reduced ▶ 45.
- 46. Retirement benefits received by vested N.C. State government, N.C. local government, or federal government retirees (**Bailey settlement**) ▶ 46.
- 47. Other deductions from federal taxable income (Attach explanation or schedule) ▶ 47.
- 48. **Total deductions** - Add Lines 41 through 47 (Enter the total here and on Line 9) 48.



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Computation of North Carolina Taxable Income for Part-Year Residents and Nonresidents

(See Line Instructions beginning on Page 11.)

- 49. Total income while you were a Resident of North Carolina 49.
50. Total income from North Carolina sources while you were a Nonresident of North Carolina 50.
51. Add Lines 49 and 50 51.
52. Total income from all sources Form 1040, Line 22; 1040A, Line 14; 1040EZ, Line 4; or TeleFile Tax Record, Line I (If you entered additions or deductions on Lines 7 or 9, see the instructions on Page 11) 52.
53. Divide Line 51 by Line 52 (Enter the result as a decimal amount here and on Line 10b; round to two decimal places) 53.

I certify that, to the best of my knowledge, this return is accurate and complete. Fill in circle if return was completed by paid preparer. -> []

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.

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

Paid Preparer's Signature Date

Daytime Telephone Number (Optional)

Paid Preparer's FEIN, SSN, or PTIN Preparer's Telephone Number

Fill in circle if prepared by: [] VITA Volunteer [] TCE Volunteer

If REFUND mail to: N.C. DEPT. OF REVENUE P.O. BOX R RALEIGH, NC 27634-0001

If you ARE NOT due a refund mail with payment to: N.C. DEPT. OF REVENUE P.O. BOX 25000 RALEIGH, NC 27640-0640

