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INDIVIDUAL INCOME TAX RETURN OFFICE OF STATE TAX COMMISSIONER

SFN 28702 (12-2024)



If a fiscal year filer, enter fiscal year end: (See instructions)	//
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Subtractions 5. Interest from U.S. obligations (SN) 5 6. Net long-term capital gain exclusion (From worksheet in instructions) (NC) 6 7. Exempt income of an eligible Native American (S4) 7 8. Benefits received from U.S. Railroad Retirement Board (S5) 8 9. Licensed peace officer retirement benefit exclusion (See instructions) (AW) 9 10. Nonresident only: Servicemembers Civil Relief Act adjustment (Attach Form W-2) 11. Military pay exclusion (Attach Form W-2) (AX) 11 12. North Dakota College SAVE account deduction (AO) 13 13. Qualified dividend exclusion (Attach Form 1099-R) (AQ) 14 15. Social security benefit exclusion (See instructions) (AR) 15 16. Total other subtractions (Attach Schedule ND-15A) (AB) 16 17 18. North Dakota taxable income. Subtract line 17 from line 4b.	You	r First Name and Middle Initial	Last name		Deceased	Date Of Death	Your Social Security Number				
City State ZIP Code (See Instructions) Amended; Federal NOL O City State ZIP Code E. Fill in if applicable: (See Instr.) Extension O A. Filing status used 0.1. Single 0.4. Head of household on federal return: (Fill in only one) D. Married filing separately on Source code: (See Instructions) State F. MU/NT Reciprocity on State State B. School district code:	If Jo	int Return, Spouse's First Name and MI	Last name			Date Of Death	Spouse's Social Security Number				
A. Fills status used 0.1. Single 0.4. Head of household on federal return: (Fill in only one) State State B. School district code:	Curi	Current Mailing Address Ap									
A. Hing status used U 1. Single O 4. Head of household on federal return O. Married filing separately S. Qualifying surviving B. School district code: C. Income source code: (See instructions) I. a. Federal adjusted gross income from Form 1040 or 1040-SR, line 11. Attach w-2s, 1099s, and/or ND Sch. K-1s I. a. Federal taxable income from Form 1040 or 1040-SR, line 15. (See instructions) I. frace, enter zero (See instructions) Additions (SS) 1b 2. Planned gift or endowment tax credit adjustment to income (NK) 2 3. Total other additions. (Attach Schedule ND-15A) (AV) 3 4. a. Total additions. Add lines 2 and 3 4a b. Add lines 1b and 4a 4b Subtractions (SN) 5 5. Interest from U.S. obligations (SN) 5 6. Net long-term capital gain exclusion (MC) 6 7. Exempt income of an eligible Native American (S4) 7 8. Benefits received from U.S. Relifoad Retirement Board (S5) 8 9. Licensed pace officer retirement benefit exclusion (AW) 9 (See instructions) (AW) 10 11. Military pay exclusion (Attach Form W-2) (AX) 11 12. North Dakota College SAVE account deduc	City	City State ZIF				E. Fill in i	E. Fill in if applicable: <i>(See instr.)</i> Extension (
(PHI III only one) O. 3. Married filing separately spouse income tax return (See instructions)								O State			
B. School district code:		(Fill in only one)		-	, , ,						
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 18. North Dakota taxable income. Subtract line 17 from line 4b. 	16.	Total other subtractions (Attach Sc	hedule ND-1SA)		(AB) 16						
18. North Dakota taxable income. Subtract line 17 from line 4b.	17.	Total subtractions. Add lines 5 thr	ough 16					17			
If less than zero, enter 0 (ND)18	18.	North Dakota taxable income. S If less than zero, enter 0	Subtract line 17 f	rom line	4b.		(ND)18			

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19.	9. Enter your North Dakota taxable income from line 18 of page 1						19
20.	 Tax - If full-year resident, enter tax on amount on line 19 from Tax Table in instructions. If full-year nonresident or part-year resident, enter tax from Schedule ND-1NR, line 23. All filers: If you have farm income or sold a research credit, see instructions) 20
	Other credits						
21.	Credit for income tax paid to anoth in that state (Attach Schedule ND-1	er state or loca CR)	al jurisdiction	(SD) 21			
22.	Marriage penalty credit for joint file	rs (See worksh	eet in instr.)	(AC) 22			
23.	Total other credits (Attach Schedule	e ND-1TC)		(AE) 23			
24.	Total credits. Add lines 21 through	23					24
25.	Net tax liability. Subtract line 24	from line 20.	If less than	zero, enter (0	(SE)	25
	Tax paid						
26.	North Dakota income tax withheld to payments (Attach Forms W-2, 10	rom wages an 199, and/or N	d other D Sch. K-1)	(SF) 26			
27.	Estimated tax paid on 2024 Forms I plus an overpayment, if any, applied			(S&) 27			
28.	Total payments. Add lines 26 and 2	7				(AJ)	28
	Refund						
	 Overpayment - If line 28 is MORE than line 25, subtract line 25 from line 28; otherwise, go to line 33. If less than \$5.00, enter 0 						
30.	Amount of line 29 that you want applied to your 2025 estimated tax					(SQ)	30
31.	Voluntary contribution(s): Veterans	' Postwar Trust	Fund (AS)			Enter	
	—					31	
32.	Refund. Subtract lines 30 and 31	from line 29.	If less than	\$5.00, enter	0	(SR)	32
	To direct deposit your refund, complete items a, b, and c. <i>(See instructions)</i>	a. Type Of Accor O Checking		Routing Number		c. Ac	count Number
33.	Tax Due Tax due - If line 28 is LESS than li If less than \$5.00, enter 0	ne 25, subtract	t line 28 from	line 25.		(SZ)	33
34.	Penalty (AK)	Interest (A	L)		Enter total		34
35.	Voluntary contribution(s): Veterans	' Postwar Trust	Fund (AT)				
	Watchable Wildlife Fund (SU)	Trees	s For ND Trus	t Fund (SY)		Enter total	35
36.	 Balance due. Add lines 33, 34, 35, and, if applicable, line 37. Pay to: ND State Tax Commissioner 					36	
37.	Interest on underpaid estimated tax	x from Schedu	le ND-1UT	(SO) 37			
		Disclosure au	thorization-	I authorize the		State Tax	www.tax.nd.gov. Commissioner to
I de	clare that this return is correct and	complete to the	e best of my l	knowledge and	d belief. * Priva	cy Act - S	ee inside front cover of booklet.
Your	Signature	Date	e Telepł	none Number	This	Space Is Fo	r Tax Department Use Only
Spou	se's Signature	Dat	e Telepł	none Number			
Paid	Preparer Signature	PTI	N	Date	7		
Print	Name Of Paid Preparer Signature	•	Teleph	none Number	IIT		
	Mail to: Office of State Tax Co PO Box 5621, Bismarck, ND 5						