

INDIVIDUAL INCOME TAX RETURN
NORTH DAKOTA OFFICE OF STATE TAX COMMISSIONER
SFN 28702 (12-2024)



FORM ND-1
2024

SSN-99-9999 SSN-99-9999

Deceased: Date of death:
[X] MM/DD/YYYY
[X] MM/DD/YYYY

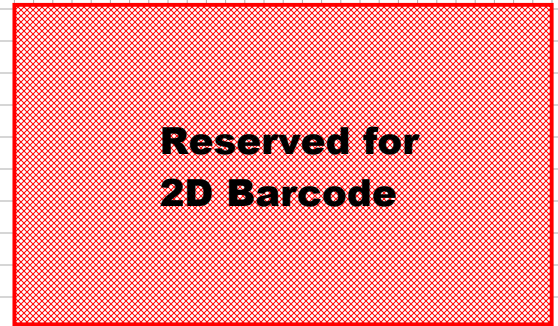
If a fiscal year filer, enter fiscal year end: MM/DD/YYYY
D. Fill in if applicable: Amended: General [X]
Amended: Federal NOL [X]
E. Fill in if applicable: Extension [X]
F. MN/MT Reciprocity: [X] State XX

PRIMARY (FIRST M LAST)
SPOUSE (FIRST M LAST)
MAILINGADDRESS UNIT# (append unit# to address)
MAILINGADDRESSLINE2
CITY STATE ZIP
COUNTRY (IF <> USA)

A. Filing status used on federal return:
[X] 1. Single [X] 4. Head of household
[X] 2. Married filing jointly [X] 5. Qualifying widow(er) with dependent child
[X] 3. Married filing separately

B. School district code: 99-999
(see instructions)

C. Income source code: 99
(see instructions)



Attach a copy of your entire 2024 federal income tax return.

1.a. Federal adjusted gross income from Form 1040 or Form 1040-SR, line 11. If zero, enter 0. (SX) 1a 99999999999999
b. Federal taxable income from Form 1040 or Form 1040-SR, line 15. If zero, see instructions. (SS) 1b 99999999999999

Additions

2. Planned gift or endowment tax credit adjustment to income (NK) 2 99999999999999
3. Total other additions. (Attach Schedule ND-1SA) (AV) 3 99999999999999
4.a. Total additions. Add lines 2 and 3 4a 99999999999999
b. Add lines 1b and 4a 4b 99999999999999

Subtractions

5. Interest from U.S. obligations (SN) 5 99999999999999
6. Net long-term capital gain exclusion (From worksheet in instructions) (NC) 6 99999999999999
7. Exempt income of an eligible Native American (S4) 7 99999999999999
8. Benefits received from U.S. Railroad Retirement Board (S5) 8 99999999999999
9. Licensed peace officer retirement benefits exclusion (See instructions) (AW) 9 99999999999999
10. Nonresident only: Servicemembers Civil Relief Act adjustment (Attach Form W-2) (NJ) 10 99999999999999
11. Military pay exclusion (Attach W-2) (AX) 11 99999999999999
12. North Dakota College SAVE account deduction (AA) 12 99999999999999
13. Qualified dividend exclusion (AO) 13 99999999999999
14. Military retirement benefit exclusion (Attach Form 1099-R) (AQ) 14 99999999999999
15. Social security benefit exclusion (See instructions) (AR) 15 99999999999999
16. Total other subtractions (Attach Schedule ND-1SA) (AB) 16 99999999999999
17. Total subtractions. Add lines 5 through 16 17 99999999999999
18. North Dakota taxable income. Subtract line 17 from line 4b. If less than zero, enter 0 (ND) 18 99999999999999

SSN-XX-XXXX SSN-XX-XXXX
2024 FORM ND-1
SFN 28702 (12-2024), Page 2



19. Enter your North Dakota taxable income from line 18 of page 1 19 9999999999999999
20. Tax. If a full-year resident, enter tax on amount on line 19 from Tax Table in instructions.
If a 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. (SB) 20 9999999999999999

Other Credits

21. Credit for income tax paid to another state or local jurisdiction (Attach Schedule ND-1CR) (SD) 21 9999999999999999
22. Marriage penalty credit for joint filers (See worksheet in instructions) (AC) 22 9999999999999999
23. Total other credits (Attach Schedule ND-1TC) (AE) 23 9999999999999999
24. Total credits. Add lines 21 through 23 24 9999999999999999
25. Net tax liability. Subtract line 24 from line 20. If less than zero, enter 0 (SE) 25 9999999999999999

Tax Paid

26. North Dakota income tax withheld from wages and other payments
(Attach Form W-2, 1099, and/or ND Sch. K-1) (SF) 26 9999999999999999
27. Estimated tax paid on 2024 Forms ND-1ES and ND-1EXT
plus an overpayment, if any, applied from your 2023 return (S&) 27 9999999999999999
28. Total payments. Add lines 26 and 27 (AJ) 28 9999999999999999

Refund

29. 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 (SG) 29 9999999999999999
30. Amount of line 29 that you want applied to your 2025 estimated tax (SQ) 30 9999999999999999
31. Voluntary contribution to: Watchable Wildlife Fund (SP) 99999999
Trees for ND Program Trust Fund (SW) 99999999
Veterans' Postwar Trust Fund (AS) 99999999 Enter total: 31 9999999999999999
32. Refund. Subtract lines 30 and 31 from line 29. If less than \$5.00, enter 0 (SR) 32 9999999999999999
To direct deposit your refund, complete a. Type of account: Checking Savings
items a, b, and c. (See instructions) b. Routing Number: 9999999999
c. Account Number: 999999999999999999

Tax Due

33. Tax due - If line 28 is LESS than line 25, subtract line 28 from line 25. If less than \$5.00, enter 0 (SZ) 33 9999999999999999
34. Penalty (AK) 999999999999 Interest (AL) 999999999999 Enter total: 34 9999999999999999
35. Voluntary contribution to: Watchable Wildlife Fund (SU) 99999999
Trees for ND Program Trust Fund (SY) 99999999
Veterans' Postwar Trust Fund (AT) 99999999 Enter total: 35 9999999999999999
36. Balance due. Add lines 33,34, 35, and if applicable, line 37. Pay to: ND State Tax Commissioner 36 9999999999999999
37. Interest on underpaid estimated tax from Schedule ND-1UT (SO) 37 9999999999999999

Check the boxes that apply: 1099-G consent - I agree to obtain Form 1099-G electronically at www.tax.nd.gov.
(see instructions) Disclosure Authorization - I authorize the ND Office of State Tax Commissioner to discuss this return
with the paid preparer identified below.

I declare that this return is correct and complete to the best of my knowledge and belief.

*Privacy Act - See instructions

Your Signature	Date	Telephone Number
Spouse's Signature	Date	Telephone Number
Paid Preparer Signature	PTIN	Date
Print Name of Paid Preparer Signature	Telephone Number	

This Space Is For Tax Department Use Only

▶ Attach copy of 2024 federal income tax return ▶ Mail to: State Tax Commissioner, PO Box 5621, Bismarck, ND 58506-5621



INDIVIDUAL INCOME TAX RETURN
NORTH DAKOTA OFFICE OF STATE TAX COMMISSIONER
SFN 28702 (12-2024)



FORM ND-1
2024

Deceased: Date of death: / /

▶ If a fiscal year filer, enter fiscal year end: / /

D. Fill in if applicable: (see instructions)

Amended: General
 Amended: Federal NOL

E. Fill in if applicable: (see instructions)

Extension

F. MN/MT Reciprocity: (see instructions)

State

A. Filing status used on federal return: 1. Single 2. Married filing jointly 3. Married filing separately 4. Head of household 5. Qualifying widow(er) with dependent child

B. School district code: -
 (see instructions)

C. Income source code:
 (see instructions)

Attach a copy of your entire 2024 federal income tax return.

1.a. **Federal adjusted gross income** from Form 1040 or Form 1040-SR, line 11. If zero, enter 0. _____ (SX) 1a _____

b. **Federal taxable income** from Form 1040 or Form 1040-SR, line 15. If zero, see instructions. _____ (SS) 1b _____

Additions

2. Planned gift or endowment tax credit adjustment to income _____ (NK) 2 _____

3. Total other additions. (Attach Schedule ND-1SA) _____ (AV) 3 _____

4.a. Total additions. Add lines 2 and 3 _____ 4a _____

b. Add lines 1b and 4a _____ 4b _____

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 benefits exclusion (See instructions) _____ (AW) 9 _____

10. Nonresident only: Servicemembers Civil Relief Act adjustment (Attach Form W-2) _____ (NJ) 10 _____

11. Military pay exclusion (Attach W-2) _____ (AX) 11 _____

12. North Dakota College SAVE account deduction _____ (AA) 12 _____

13. Qualified dividend exclusion _____ (AO) 13 _____

14. Military retirement benefit exclusion (Attach Form 1099-R) _____ (AQ) 14 _____

15. Social security benefit exclusion (See instructions) _____ (AR) 15 _____

16. Total other subtractions (Attach Schedule ND-1SA) _____ (AB) 16 _____

17. Total subtractions. Add lines 5 through 16 _____ 17 _____

18. **North Dakota taxable income.** Subtract line 17 from line 4b. If less than zero, enter 0 _____ (ND) 18 _____



19. Enter your **North Dakota taxable income** from line 18 of page 1 _____ **19** _____

20. **Tax.** If a **full-year resident**, enter tax on amount on line 19 from Tax Table in instructions.
 If a **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. _____ **(SB) 20** _____

Other Credits

21. Credit for income tax paid to another state or local jurisdiction (Attach Schedule ND-1CR) _____ **(SD) 21** _____

22. Marriage penalty credit for joint filers (See worksheet in instructions) _____ **(AC) 22** _____

23. Total other credits (Attach Schedule 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 from wages and other payments
(Attach Form W-2, 1099, and/or ND Sch. K-1) _____ **(SF) 26** _____

27. Estimated tax paid on 2024 Forms ND-1ES and ND-1EXT
 plus an overpayment, if any, applied from your 2023 return _____ **(S&) 27** _____

28. Total payments. Add lines 26 and 27 _____ **(AJ) 28** _____

Refund

29. **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** _____ **(SG) 29** _____

30. Amount of line 29 that you want applied to your 2025 estimated tax _____ **(SQ) 30** _____

31. Voluntary contribution to: Watchable Wildlife Fund _____ **(SP)** _____
 Trees for ND Program Trust Fund _____ **(SW)** _____
 Veterans' Postwar Trust Fund _____ **(AS)** _____ **Enter total: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 a. Type of account: Checking Savings
 items a, b, and c. (See instructions) b. Routing Number: _____
 c. Account Number: _____

Tax Due

33. **Tax due** - If line 28 is LESS than line 25, subtract line 28 from line 25. **If less than \$5.00, enter 0** _____ **(SZ) 33** _____

34. Penalty **(AK)** _____ Interest **(AL)** _____ **Enter total:34** _____

35. Voluntary contribution to: Watchable Wildlife Fund _____ **(SU)** _____
 Trees for ND Program Trust Fund _____ **(SY)** _____
 Veterans' Postwar Trust Fund _____ **(AT)** _____ **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 from Schedule ND-1UT _____ **(SO) 37** _____

Check the boxes that apply: **1099-G consent** - I agree to obtain Form 1099-G electronically at www.tax.nd.gov.
 (see instructions) **Disclosure Authorization** - I authorize the ND Office of State Tax Commissioner to discuss this return
 with the paid preparer identified below.

I declare that this return is correct and complete to the best of my knowledge and belief. **Privacy Act - See instructions*

Your Signature	Date	Telephone Number	This Space Is For Tax Department Use Only
Spouse's Signature	Date	Telephone Number	
Paid Preparer Signature	PTIN	Date	
Print Name of Paid Preparer Signature		Telephone Number	

