

Form

North Dakota Office of State Tax Commissioner

**ND-EZ****Individual Income Tax Return****2016**

for full-year residents with no adjustments or credits

Your name (First, MI, Last name)		Deceased <input type="radio"/>	Date of death	Your social security number*
If joint return, spouse's name (First, MI, Last name)		Deceased <input type="radio"/>	Date of death	Spouse's social security number*
Mailing address		Apt No.		
City	State	ZIP code	For a complete return, you must attach a complete copy of your 2016 federal income tax return	
A. Filing status used on federal return: (Fill in only one) <input type="radio"/> 1. Single <input type="radio"/> 2. Married filing jointly <input type="radio"/> 3. Married filing separately <input type="radio"/> 4. Head of household <input type="radio"/> 5. Qualifying widow(er) with dependent child		B. School district code: _____ (See page 19)		Fill in if you obtained an extension to file: (See page 9) Extension <input type="radio"/>
		C. Income source code: _____ (See page 9)		

Federal adjusted gross income For a complete return, you must complete Line D. If zero, enter 0.**D. Federal adjusted gross income** from Form 1040, line 37, or Form 1040A, line 21, or Form 1040EZ, line 4 _____ (SX) D _____**Tax calculation****1. Federal taxable income** from Form 1040, line 43, or Form 1040A, line 27, or Form 1040EZ, line 6 _____ (ND) 1 _____**2. Tax** - Enter tax on amount on line 1 from Tax Table on page 20 of instructions _____ (SB) 2 _____**Tax paid****3. North Dakota income tax withheld** from wages and other payments (Attach Form W-2, Form 1099, and North Dakota Schedule K-1) _____ (SF) 3 _____**Refund****4. Overpayment** - If line 3 is MORE than line 2, subtract line 2 from line 3; otherwise, go to line 7. If less than \$5.00, enter 0 _____ (SG) 4 _____
5. Voluntary contribution to: Watchable Wildlife Fund (SP) _____ Trees For ND Program Trust Fund (sw) _____ Enter total --- 5 _____
6. Refund. Subtract line 5 from line 4. If less than \$5.00, enter 0 _____ (SR) 6 _____

To direct deposit

refund, complete items

a, b, and c. (See page 9)

a. Routing number: _____

b. Account number: _____

c. Type of account

☐ Checking☐ Savings**Tax due****7. Tax due** - If line 3 is LESS than line 2, subtract line 3 from line 2. If less than \$5.00, enter 0 _____ (SZ) 7 _____
8. Voluntary contribution to: Watchable Wildlife Fund (su) _____ Trees For ND Program Trust Fund (sy) _____ Enter total --- 8 _____
9. Balance due. Add lines 7 and 8. Pay to: **ND State Tax Commissioner** _____ 9 _____Fill in the circles that apply: ☐ **1099-G consent**-I agree to obtain Form 1099-G electronically at www.nd.gov/tax.

(See page 10 of 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 inside front cover of booklet.

Your signature	Date	Telephone number (land line)
Spouse's signature	Date	Telephone number (cell)
Paid preparer signature	PTIN	Date
Print name of paid preparer	Telephone number	

This Space Is For Tax Department Use Only

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**Mail to: Office of State Tax Commissioner,
PO Box 5621, Bismarck, ND 58506-5621**