North Dakota Office of State Tax Commissioner

ND-EZ Individual Income Tax Return for full-year residents with no adjustments or credits

2017

'our name (First, MI, Last name)			Deceased Date	e of death	Your social security number*
If joint return, spouse's name (First, MI, Last name)			Deceased Date	e of death	Spouse's social security number*
Mailing address		Apt No.	F	or a con	nplete return,
City	State	ZIP code	you must a	attach a	complete copy of your income tax return
 A. Filing status used on federal return: (Fill in only one) O 1. Single O 2. Married filing jointly O 3. Married filing separately O 4. Head of household O 5. Qualifying widow(er) with dependent child 		 B. School district code: (See page 19) C. Income source code: (See page 9) 		Fill in if you obtained an extension to file: (See page 9) Extension O	
Federal adjusted gross income For a co	omplete ret		,	ine D. T	—
 D. Federal adjusted gross income from line 21, or Form 1040EZ, line 4 Tax calculation 1. Federal taxable income from Form 10 	Form 1040,	line 37, or Forr	n 1040A,	(SX)	D
or Form 1040EZ, line 6)) 1
2. Tax - Enter tax on amount on line 1 fro	m Tax Table	e on page 20 of	instructions -	(SE	3) 2
Tax paid					
3. North Dakota income tax withheld from (Attach Form W-2, Form 1099, and	wages and North Dake	other payments ota Schedule K	-1)	(SI	F) 3
Refund					
 Overpayment - If line 3 is MORE than otherwise, go to line 7. If less than \$ 	line 2, subtr 5.00, ente l	ract line 2 from r 0	line 3;	(SC	3) 4
5. Voluntary Watchable contribution to: Wildlife Fund (SP)	Trees	For ND		Enter	_ 5
6. Refund. Subtract line 5 from line 4. In	f less than	\$5.00, enter 0		(S	R) 6
To direct deposit refund, complete items a, b, and c. <i>(See page 9)</i> b. Account number: x due					
7. Tax due - If line 3 is LESS than line 2, s				(5)	2) 7
If less than \$5.00, enter 0 8. Voluntary Watchable contribution to: Wildlife Fund (su)	Trees	For ND	(SY)	Enter	
9. Balance due. Add lines 7 and 8. Pay t					
(ure authoriz	-	e the ND Office	of State T	at www.nd.gov/tax. ax Commissioner to
declare that this return is correct and complete	to the best of	my knowledge a	nd belief. * Priv	acy Act - S	ee inside front cover of bookle
our signature	Date T	elephone number (land	t line) This	s Space Is F	or Tax Department Use Only
pouse's signature	Date T	elephone number (cell)		
aid preparer signature	PTIN	Date			
rint name of paid preparer	T	elephone number			
Mail to: Office of State Tax Commissio PO Box 5621, Bismarck, ND 58506-56.					_

What is Form ND-1PRV?

The 2017 Form ND-1PRV is a payment voucher that you complete and send in with your return if you:

- are filing your 2017 Form ND-EZ or Form ND-1 on paper,
- have a balance due on your return, and
- are paying the balance due with a paper check or money order.

Do not use Form ND-1PRV if you filed or are going to file your return electronically, or are paying a balance due electronically.

Also do not use this form to make an extension payment; instead, if you have an extension of time to file your Form ND-1 and you want to make an advance payment of an expected balance due on it, use Form ND-1EXT.

When is the payment due?

A balance due on a 2017 Form ND-EZ or 2017 Form ND-1 must be paid on or before April 15, 2018, to avoid any late payment penalty and interest charges.

How to make payment

Make your check or money order payable to "ND State Tax Commissioner." Write the last four digits of your social security number and "2017 ND-1PRV" on your check or money order. Complete the payment voucher, detach it from this page, and enclose it with your payment and return. **Do not send cash.**

Don't staple or otherwise attach your check or money order to the payment voucher or your return. Instead, just place them in the envelope with your return.

Mail your return, payment and voucher to:

Office of State Tax Commissioner PO Box 5621 Bismarck, ND 58506-5621

ND-1PRV

Privacy Act Notification. In compliance with the Privacy Act of 1974, disclosure of a social security number or Federal Employer Identification Number (FEIN) on this form is required under N.D.C.C. §§ 57-01-15 and 57-38-31, and will be used for tax reporting, identification, and administration of North Dakota tax laws. Disclosure is mandatory. Failure to provide the social security number or FEIN may delay or prevent the processing of this form.

2017

Detach here and enclose with payment

Form ND-1PRV Paper Return Payment Voucher (for Individuals)

North Dakota Office of State Tax Commissioner 28756

Do not use this voucher if filing or paying electronically

Name (first, middle initial and last)		Your social security number
Spouse's name (first, middle initial and last)	Spouse's social security number	
Mailing address		
City, state and ZIP code	Amount of payment	
 Make check or money order payable to "ND State Tax Commissioner." Write last four digits of social security number and "2017 ND-1PRV" on check or money order. Enclose payment and voucher in envelope with return. 	For Tax Department use only	