

INDIVIDUAL INCOME TAX RETURNOFFICE OF STATE TAX COMMISSIONER SFN 28702 (12-2022)



2022

			If a fiscal year e		ter <i>nstructions)</i>	/	/
Name (First, MI, Last Name)					Date Of Death	Your Social S	Security Number
If Joint Return, Spouse's Name (First, MI, Last Name)					Date Of Death	Spouse's So	cial Security Number
Current Mailing Address Apt Number					D. Fill in if applicable: Amended: General O (See instructions) Amended: Federal NOL O		
City		State	ZIP Code	E. Fill in	if applicable: (See instr.)	Extension (
A.	A. Filing status used O 1. Single O 4. Head of h on federal return: O 2. Married filing jointly O 5. Qualifying				T Reciprocity tructions)	0	State
В.	(Fill in only one) O 3. Married filing separately School district code: (See instructions) C. Income source code: (See instructions)			 Attach a copy of your entire 2022 federal income tax return Attach W-2s, 1099s, and ND Sch. K-1s showing ND income tax withholding 			
1.	a. Federal adjusted gross income from Form 1 If zero, enter zero	040 or 10	40-SR, line 11.		(SX)	1a	
	b. Federal taxable income from Form 1040 or 1040-SR, line 15. If zero, see instructions			(SS) 1b			
	Additions						
2.	Lump-sum distribution from Federal Form 4972 – –		(NA) 2				
3.	Loss from S corporation taxed as C corporation $_{--}$		(NB) 3		•		
4.	Planned gift or endowment tax credit adjustment t	o income	(NK) 4				
5.	a. Total additions. Add lines 2 through 4					5a	
	b. Add lines 1b and 5a					5b	
	Subtractions						
6.	Interest from U.S. obligations		(SN) 6				
7.	Net long-term capital gain exclusion (From worksheet in instructions)		(NC) 7				
8.	Exempt income of an eligible Native American		(S4) 8 <u></u>				
9.	Benefits received from U.S. Railroad Retirement B	oard	(S5) 9				
10.	Income from S corporation taxed as C corporation		(S6) 10				
11.	Nonresident only: Servicemembers Civil Relief Ac (Attach copy of Form W-2 showing this compensation)						
12.	North Dakota College SAVE account deduction		(AA) 12 <u></u>				
13.	Qualified dividend exclusion		(AO) 13				
	Military retirement pay exclusion (Attach 1099-R)						
	Social security benefit exclusion (See instructions)						
	Total other subtractions (Attach Schedule ND-1SA)						
17.	Total subtractions. Add lines 6 through 16					17	
18.	North Dakota taxable income. Subtract line 17 If less than zero, enter 0				(N	D)18	

	2022 Form ND-1 SFN 28702 (12-2022), Page 2						
19.	9. Tax - If full-year resident, enter tax on amount on line 18 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 (SB) 19						
20.	TAX RELIEF CREDIT - Full-year in head of household, qualifying widd separately, enter \$350. If married (See instructions)	ow(er), or married filing filing jointly, enter \$700.	(AU) 20				
	Other credits						
21.	Credit for income tax paid to another state or local jurisdiction in that state (Attach Schedule ND-1CR)						
22.	Marriage penalty credit for joint filers (See worksheet in instr.)) (AC) 22				
23.	Total other credits (Attach Schedu	lle ND-1TC)	_ (AE) 23				
24.	Total credits. Add lines 20 through	า 23		24			
25.	Net tax liability. Subtract line 2	4 from line 19. If less tha	n zero, enter 0	(SE) 25			
	Tax paid						
26.	North Dakota income tax withheld payments (Attach Forms W-2 and	from wages and other 1099, and ND Sch. K-1)	_ (SF) 26				
27.	Estimated tax paid on 2022 Forms plus an overpayment, if any, appli	ND-1ES and ND-1EXT ed from your 2021 return	(S&) 27				
28.	Total payments. Add lines 26 and	27		(AJ) 28			
29.	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 a	(SQ) 30					
31.	Voluntary contribution(s): Veterans' Postwar Trust Fund (AS)			Enter			
	Watchable Wildlife Fund (SP) Trees For ND Trus		ust Fund (SW)	total 31			
32.	2. 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. (See instructions)	a. Type Of Account O Checking O Savings	o. Routing Number	c. Account Number			
33.	Tax Due Tax due - If line 28 is LESS than	line 25, subtract line 28 fro	m line 25.	(SZ) 33			
34.	Penalty (AK)	Interest (AL)	Ent	ter total 34			
35.	Voluntary contribution(s): Veteran	s' Postwar Trust Fund (AT)	·	Enter			
	Watchable Wildlife Fund (SU)	Trees For ND Trees	ust Fund (SY)	total ³⁵			
	Balance due. Add lines 33, 34, 3 Pay to: ND State Tax Commissi	oner					
37.	Interest on underpaid estimated to	ax from Schedule ND-1UT_	_ (SO) 37				
		_	ı-I authorize the ND	9-G electronically at www.tax.nd.gov . O Office of State Tax Commissioner to			
I de	eclare that this return is correct and			elief. * Privacy Act - See inside front cover of booklet.			
	Signature		phone Number	This Space Is For Tax Department Use Only			
Spou	se's Signature	Date Tele	phone Number				
Paid	Preparer Signature	PTIN	Date				

Telephone Number

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

Print Name Of Paid Preparer Signature