## INDIVIDUAL INCOME TAX RETURN NORTH DAKOTA OFFICE OF STATE TAX COMMISSIONER SFN 28745 (12-2025)

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PO Box 5621, Bismarck, ND 58506-5621



FORM ND-EZ **2025** 

		2025
SSN-99-9999 SSN-9	9-9999  Deceased: Date of death:	
		B. School district code: 99 - 999
PRIMARY (FIRST M LAST	·	(See instructions)
SPOUSE (FIRST M LAST	) X MM/DD/YYYY	
		C. Income source code: 99
MAILINGADDRESS UNIT#	(append unit# to address)	(See instructions)
MAILINGADDRESSLINE2		
CITY STATE ZIP		D. Fill in if you obtained an extension of
		time to file: (see instructions)
A. Filing status 1. Single	X 4. Head of household intly X 5. Qualifying widow(er) with	
used on X 2. Married filing jo	Extension X	
federal return: 3. Married filing se	parately dependent child	
Forg	complete return, you must attach a copy of yo	our entire 2025 federal income tax return
Tax Calculation	complete return, you must attach a copy of yo	our entire 2025 jederal income lax return
1.a. Federal adjusted gross income fro	m Form 1040 or Form 1040-SR, line 11. If zero, enter (	(SX) 1a 99999999999999999999999999999999999
h Federal taxable income from Form	1040 or Form 1040-SR, line 15. If zero, enter 0	(ND) 1b 99999999999999999999999999999999999
b. I cuciai taxabic income nom i om		
2. Tax - Enter tax on amount on line 1b	from Tay Table in instructions	(SB) 2 99999999999999999999999999999999999
	Hom Tax Table in instructions	
Tax Paid		
3. North Dakota income tax withheld fro		(SF) 3 99999999999999999999999999999999999
(Attach Form W-2, Form 1099, an	d/or North Dakota Schedule K-1)	(31)3
Refund		
4. Overpayment - If line 3 is MORE th		(20) 4 000000000000000
otherwise, go to line 7. If less than \$5.		(SG) 4 99999999999999999999999999999999999
	nable Wildlife Fund (\$P) 9999999	Enter - 00000000000000
	for ND Program Trust Fund(SW) 9999999	total: 5
	ans' Postwar Trust Fund (AS) 9999999	
<b>6. Refund -</b> Subtract line 5 from line 4.		(SR) 6 <u>99999999999999</u>
To direct deposit refun	d, a. Type of account:	
complete items a, b, an		
(see instructions)	c. Account Number: XXXXXXXXXXXXX	XXXX
- Ida Buo		
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 <u>999999999999999</u>
Watc	hable Wildlife Fund( <b>SU</b> ) <u>9999999</u>	Fred an
8. Voluntary contribution to: Trees	for ND Program Trust Fund (SY) 9999999	Enter 8 99999999999999999999999999999999999
Veter	rans' Postwar Trust Fund (AT) 9999999	total.
9. Balance Due - Add lines 7 and 8. Pa	y to: ND Office of State Tax Commissioner	9 9999999999999999999999999999999999999
Check the boxes that apply:	1099-G consent - I agree to obtain Form 1099-G electro	onically at www.tax.nd.gov
Check the boxes that apply:  (see instructions)	Disclosure Authorization - I authorize the ND Office o	f State Tax Commissioner to discuss this return
	with the paid preparer identified below.	
I declare that this return is correct and comp	plete to the best of my knowledge and belief.	Privacy Act - See inside front cover of booklet.
Your Signature	Date Telephone Number	This Space Is For Tax Department Use Only
	(999) 999-9999	
Spouse's Signature	Date Telephone Number	
	(999) 999-9999	
Paid Preparer Signature	PTIN Date	
Print Name of Paid Preparer Signature	Telephone number	
	(999) 999-9999	
May Stand		
<b> →</b> Mail to: State Tax Commi	SSIONET TO THE STATE OF THE STA	r <del></del>

## INDIVIDUAL INCOME TAX RETURN NORTH DAKOTA OFFICE OF STATE TAX COMMISSIONER SFN 28745 (12-2025)



## FORM ND-EZ **2025**

		Deceased: Date of death:	B. School district code: (See instructions)
			C. Income source code: (See instructions)
_			D. Fill in if you obtained an extension of time to file: (see instructions)
	ling jointly 🔲 5. Qualify	f household ring widow(er) with endent child	Extension
F Tax Calculation	or a complete retur	n, you must attach a copy	of your entire 2025 federal income tax return
1.a. Federal adjusted gross inco	<b>me</b> from Form 1040 or F	orm 1040-SR, line 11. If zero, e	nter 0(SX) 1a
b. Federal taxable income from	n Form 1040 or Form 10-	40-SR, line 15. If zero, enter 0.	(ND) 1b
	ine 1b from Tax Table in	instructions	(SB) 2
Tax Paid 3. North Dakota income tax withh (Attach Form W-2, Form 10	eld from wages and othe 99, and/or North Dakot	r payments a Schedule K-1)	(SF) 3
<b>Refund 4. Overpayment</b> - If line 3 is MC	ORE than line 2, subtract	line 2 from line 3;	(SG) 4
5. Voluntary contribution to:	Trees for ND Program	d (SP) Trust Fund (SW) Fund (AS)	total: 5
6. Refund - Subtract line 5 from To direct deposi complete items a (see instructions	line 4. <i>If less than \$5.00</i> a. Type of a, b, and c. b. Routing	0, enter 0 Checking Sa	vings
7. Tax Due - If line 3 is LESS that			
8. Voluntary contribution to:		rust Fund (SY) (AT)	Enter 8
9. Balance Due - Add lines 7 and			<u></u>
Check the boxes that apply: (see instructions)	Disclosure Author	I agree to obtain Form 1099-G el rization - I authorize the ND Off preparer identified below.	ectronically at www.tax.nd.gov ice of State Tax Commissioner to discuss this return
<i>I declare that this return is correct ar</i> Your Signature	nd complete to the best of m	y knowledge and belief.  Telephone Number	Privacy Act - See inside front cover of booklet.
. ca. Signature	- Ducc	. Siephone Humber	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	I	Telephone number	