

If you complete Schedule S, you MUST attach the schedule to Form D-400. If you do not, the Department may be unable to process your return.

Important: Refer to the instructions before completing Parts A, B, or C of this form.

Last Name (First 10 Characters)	ABCDEFGHIJ							Your Social Security Number	9 0 0 1 2 3 4 5 6
01 12345678	08	12345678	11D	12345678	12E	12345678	21	12345678	
02 12345678	09	12345678	11E	12345678	13	12345678	22A	12345678	
03 12345678	10	12345678	12A	12345678	14	12345678	22B	-12345678	
04 12345678	11A	12345678	12B	12345678	16	12345678	22D	12345678	
05 12346578	11B	12345678	12C	12345678	17	12345678	23	12345678	
07 12345678	11C	12345678	12D	12345678	20	12345678			

Part A. Additions to Federal Adjusted Gross Income

- | | |
|--|-------------|
| 1. Interest income from obligations of states other than North Carolina | 1. 12345678 |
| 2. Deferred gains reinvested into an Opportunity Fund under IRC section 1400Z-2 | 2. 12345678 |
| 3. Bonus depreciation | 3. 12345678 |
| 4. IRC section 179 expense | 4. 12345678 |
| 5. Other additions to federal adjusted gross income (Attach explanation or schedule) | 5. 12345678 |
| 6. Total additions - Add Lines 1 through 5 | 6. 12345678 |

Part B. Deductions from Federal Adjusted Gross Income

- | | |
|--|--------------|
| 7. State or local income tax refund | 7. 12345678 |
| 8. Interest income from obligations of the United States or United States' possessions | 8. 12346578 |
| 9. Taxable portion of Social Security and Railroad Retirement Benefits | 9. 12346578 |
| 10. Bailey settlement retirement benefits | 10. 12346578 |
| 11. Bonus depreciation | |
| 11a. 2014 12345678 11b. 2015 12345678 11c. 2016 12345678 | 7. 12345678 |
| 11d. 2017 12345678 11e. 2018 12345678 11f. Total | 12345678 |
| 12. IRC section 179 expense | |
| 12a. 2014 12345678 12b. 2015 12345678 12c. 2016 12345678 | 8. 12346578 |
| 12d. 2017 12345678 12e. 2018 12345678 12f. Total | 12345678 |
| 13. Recognized IRC section 1400Z-2 gain | 9. 12346578 |
| 14. Other deductions from federal adjusted gross income (Attach explanation or schedule) | 10. 12346578 |
| 15. Total deductions - Add Lines 7 through 10, 11f, 12f, 13, and 14 | 11. 12346578 |



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Part C. N.C. Standard Deduction or N.C. Itemized Deductions

- | | |
|---|----------------|
| 16. Home mortgage interest | 16. 12345678 |
| 17. Real estate property taxes | 17. 12345678 |
| 18. Home mortgage interest and real estate property taxes before limitation | 18. 12345678 |
| 19. Home mortgage interest and real estate property taxes limitation | 19. 20000 |
| 20. Home mortgage interest and real estate property taxes after limitation | 20. 12345678 |
| 21. Charitable contributions | 21. 12345678 |
| 22. a. Medical and dental expenses before limitation | 22a. 12345678 |
| b. Enter the amount from Form D-400, Line 6 | 22b. -12345678 |
| c. Multiply Line 22b by 10% (0.10). If zero or less, enter a zero. | 22c. 12345678 |
| d. Medical and dental expenses after limitation | 22d. 12345678 |
| 23. Repayment of claim of right income | 23. 12345678 |
| 24. Total N.C. itemized deductions - Add Lines 20, 21, 22d, and 23 | 24. 12345678 |