	SFN 28702 (12-2020), Page 2					
19.	Enter your North Dakota taxable income from line 18 of page 1					19
	Tax calculation					
20.	Tax - If a full-year resident, enter amount from Tax Table in instructions; however, if you have farm income or sold a research tax credit, see instructions; OR If a full-year nonresident or part-year resident, enter amount from Schedule ND-1NR, line 23; however, if you sold a research tax credit, see instructions(SB) 20					
	Credits					
21.	Credit for income tax paid to another state or local jurisdiction in that state (Attach Schedule ND-1CR) (SD) 2:					
22.	Marriage penalty credit for joint filers (See worksheet in instr.)					
23.	Total other credits (Attach Schedule ND-1TC)					
24.	Total credits. Add lines 21 through				24	
25.	Net tax liability. Subtract line 24	t tax liability. Subtract line 24 from line 20. If less than zero, enter 0(SE)				
	Tax paid					
26.		orth Dakota income tax withheld from wages and other yments (Attach Forms W-2 and 1099, and ND Sch. K-1) (SF) 26				
27.	•	timated tax paid on 2020 Forms ND-1ES and ND-1EXT us an overpayment, if any, applied from your 2019 return (S&) 27				
28.	otal payments. Add lines 26 and 27				(AJ) 28
	Refund					
	Overpayment - If line 28 is MORE otherwise, go to line 33. If less th	nan \$5.00, enter 0				
30.	Amount of line 29 that you want applied to your 2021 estimated tax(SQ) 30					
31.	Voluntary contribution(s): Veterans' Postwar Trust Fund (AS) Enter					
32.	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 Checking Sa	b. Routing Novings	ımber	c. Ac	count Number
33.	Tax Due Tax due - If line 28 is LESS than line 25, subtract line 28 from line 25. If less than \$5.00, enter 0) 33
34.	Penalty (AK)	_ Interest (AL)		Enter total		34
35.	Voluntary contribution(s): Veterans	Postwar Trust Fun	d (AT)			
	Watchable Wildlife Fund (SU)	Trees For	ND Trust Fund (SY)	Enter _ total	35
36.	alance due. Add lines 33, 34, 35, and, if applicable, line 37. ay to: ND State Tax Commissioner				36	
37.	Interest on underpaid estimated ta	x from Schedule ND	- _{1UT} (so) 37			
		1099-G consent-I on the consent of the consense of the consens	i zation- I authoriz	e the ND Office o	f State Tax	<u> </u>
I de	clare that this return is correct and		<u> </u>			See inside front cover of booklet.
	Signature	Date	Telephone Numb			or Tax Department Use Only
Spous	se's Signature	Date	Telephone Numb	er		
Paid F	Preparer Signature	PTIN	Date			
rint l	Name Of Paid Preparer Signature		Telephone Numb	IIT		
	► Mail to: Office of State Tax Co PO Box 5621, Bismarck, ND 5		•			

2020 Form ND-1