

Form  
**1040EZ**

**Income Tax Return for Single and  
Joint Filers With No Dependents** (99)

**2016**

OMB No. 1545-0074

Your first name and initial <b>shibashis</b>	Last name <b>behera</b>	<b>Your social security number</b> 770   78   9336	
If a joint return, spouse's first name and initial <b>sushri S</b>	Last name <b>panigrahi</b>	<b>Spouse's social security number</b> 872   17   5760	
Home address (number and street). If you have a P.O. box, see instructions. <b>3409 york crest drive</b>		Apt. no. <b>204</b>	▲ <b>Make sure the SSN(s) above are correct.</b>
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). <b>Riverview FL 33578</b>			
Foreign country name	Foreign province/state/county	Foreign postal code	<b>Presidential Election Campaign</b> Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> You <input type="checkbox"/> Spouse

<b>Income</b>				
<b>Attach Form(s) W-2 here.</b>	<b>1</b>	Wages, salaries, and tips. This should be shown in box 1 of your Form(s) W-2. Attach your Form(s) W-2.	<b>1</b>	<b>91,373.</b>
	<b>2</b>	Taxable interest. If the total is over \$1,500, you cannot use Form 1040EZ.	<b>2</b>	
	<b>3</b>	Unemployment compensation and Alaska Permanent Fund dividends (see instructions).	<b>3</b>	
	<b>4</b>	Add lines 1, 2, and 3. This is your <b>adjusted gross income</b> .	<b>4</b>	<b>91,373.</b>
	<b>5</b>	If someone can claim you (or your spouse if a joint return) as a dependent, check the applicable box(es) below and enter the amount from the worksheet on back. <input type="checkbox"/> You <input type="checkbox"/> Spouse If no one can claim you (or your spouse if a joint return), enter \$10,350 if <b>single</b> ; \$20,700 if <b>married filing jointly</b> . See back for explanation.	<b>5</b>	<b>20,700.</b>
	<b>6</b>	Subtract line 5 from line 4. If line 5 is larger than line 4, enter -0-. This is your <b>taxable income</b> .	<b>6</b>	<b>70,673.</b>
<b>Payments, Credits, and Tax</b>	<b>7</b>	Federal income tax withheld from Form(s) W-2 and 1099.	<b>7</b>	<b>9,998.</b>
	<b>8a</b>	<b>Earned income credit (EIC)</b> (see instructions) <span style="float: right;">No</span>	<b>8a</b>	
	<b>b</b>	Nontaxable combat pay election. <span style="float: right;">8b</span>		
	<b>9</b>	Add lines 7 and 8a. These are your <b>total payments and credits</b> .	<b>9</b>	<b>9,998.</b>
	<b>10</b>	<b>Tax.</b> Use the amount on <b>line 6 above</b> to find your tax in the tax table in the instructions. Then, enter the tax from the table on this line.	<b>10</b>	<b>9,674.</b>
	<b>11</b>	Health care: individual responsibility (see instructions) <span style="float: right;">Full-year coverage <input checked="" type="checkbox"/></span>	<b>11</b>	<b>0.</b>
	<b>12</b>	Add lines 10 and 11. This is your <b>total tax</b> .	<b>12</b>	<b>9,674.</b>
<b>Refund</b>	<b>13a</b>	If line 9 is larger than line 12, subtract line 12 from line 9. This is your <b>refund</b> . If Form 8888 is attached, check here <input type="checkbox"/>	<b>13a</b>	<b>324.</b>
	<b>b</b>	Routing number <input type="text" value="053000196"/> <b>c</b> Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings		
	<b>d</b>	Account number <input type="text" value="002373920679"/>		
<b>Amount You Owe</b>	<b>14</b>	If line 12 is larger than line 9, subtract line 9 from line 12. This is the <b>amount you owe</b> . For details on how to pay, see instructions.	<b>14</b>	

**Third Party Designee** Do you want to allow another person to discuss this return with the IRS (see instructions)?  **Yes**. Complete below.  **No**

Designee's name	Phone no.	Personal identification number (PIN)

**Sign Here** Under penalties of perjury, I declare that I have examined this return and, to the best of my knowledge and belief, it is true, correct, and accurately lists all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Joint return? See instructions. Keep a copy for your records.	Your signature	Date	Your occupation	Daytime phone number
			software engineer	(980) 333-1550
	Spouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
			Homemaker	

**Paid Preparer Use Only**

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name	Self-Prepared		Firm's EIN	
Firm's address			Phone no.	

## Instructions for Form D-400V, Payment Voucher

### What Is Form D-400V and Why Should You Use It?

It is a statement you send with your payment of a balance due on Form D-400. Using Form D-400V allows the Department to process your payment more accurately and efficiently. We strongly encourage you to use Form D-400V. (Do not use Form D-400V when making a payment of a balance due on an amended Form D-400. Use Form D-400V Amended.)

### Preparing and Sending Your Payment

- Make your check or money order payable in U.S. dollars to the **NC Department of Revenue**. **Note:** The Department will not accept a check, money order, or cashier's check unless it is drawn on a U.S. (domestic) bank and the funds are payable in U.S. dollars.
- Make sure your name and address appear on your check or money order.

- Enter "Tax Year and Form D-400," your daytime phone number, and your SSN on your check or money order. If you are filing a joint return, enter the SSN shown first on your return.
- Cut across the dotted line and send the completed voucher and your check or money order.

### What if You File Electronically?

If you choose to file electronically and have a balance due, follow your transmitter's or preparer's instructions for making your payment.

### Other Payment Methods

In lieu of mailing your payment to the Department, you may pay your tax online by bank draft (free), or credit or debit card using Mastercard or Visa (\$2 convenience fee for every \$100 paid). This online service is accurate, secure and convenient. For details, visit [www.dornc.com](http://www.dornc.com) and search for online file and pay.

### Important Reminders

- **Do not** use this payment voucher if you pay your tax online.
- **Do not** staple, tape, paper clip or otherwise attach your check or money order to the voucher.
- **Do not** fold the voucher or check.
- **Do not** use this voucher to pay quarterly estimated tax.
- **Do not** use a photocopy of the voucher.
- **Do not** use another person's voucher.
- **Do not** send cash.



Cut Here



<b>D-400V (59)</b> 9-16-08	<b>Individual Income Payment Voucher</b> North Carolina Department of Revenue
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REV 12/30/16 INTUIT.CG.CFP.SP

770789336      BEHE      3409      33578      872175760

SHIBASHIS      BEHERA      SUSHRI      S PANIGRAHI

3409 YORK CREST DRIVE APT 204      For Calendar Year      2016

**AMOUNT OF THIS PAYMENT**

RIVERVIEW      FL      33578

This must match the amount shown on your check or money order.

Taxpayer/Paid Preparer: \_\_\_\_\_

\$      62.00

Date: \_\_\_\_\_ Phone: \_\_\_\_\_

7270159006



20168 7707893367 0000000 06408

Mail to:  
NCDOR, PO Box 25000,  
Raleigh, NC 27640-0640

< Staple All Pages of Your Return and W-2s Here

North Carolina Department of Revenue

Amended Return

For calendar year 2016, or fiscal year beginning <u>16</u> and ending _____		<input type="checkbox"/> Select box if you or, if married filing jointly, your spouse were out of the country on April 15 and a U.S. citizen or resident.
SHIBASHIS BEHERA SUSHRI S PANIGRAHI 3409 YORK CREST DRIVE 204 Your SSN: 770789336 RIVERVI FL 33578 MECK Spouse's SSN: 872175760	<input type="checkbox"/> Select box if return is filed and signed by Executor or Administrator.	
Filing Status <input type="checkbox"/> 1. Single <input checked="" type="checkbox"/> 2. Married Filing Jointly <input type="checkbox"/> 3. Married Filing Separately <input type="checkbox"/> 4. Head of Household <input type="checkbox"/> 5. Widow(er) with Dependent Child		
Were you a resident of N.C. for the entire year of 2016? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Return for deceased taxpayer.	Year spouse died: _____
Was your spouse a resident for the entire year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Return for deceased spouse.	Date of death: _____
N.C. Education Endowment Fund: You may contribute to the N.C. Education Endowment Fund by making a contribution or designating some or all of your overpayment to the Fund. To make a contribution, enclose Form NC-EDU and your payment of \$ <u>0</u> . To designate your overpayment to the Fund, enter the amount of your designation on Page 2, Line 31. See instructions for information about the Fund.		
Did you claim the standard deduction on your 2016 federal return? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Are you a veteran? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is your spouse a veteran? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

FS	2	PP	N	DT	N	OC	N	TPRES	N	SPRES	N	STDD	Y	VT	N	SVT	N
BEHE	3409	33578	DS	N	EA	N	TD					SD					
SHIBASHIS		BEHERA								770789336							
SUSHRI		S	PANIGRAHI							872175760	FL	33578					
3409	YORK CREST DRIVE						204			RIVERVIEW							
06		91373				18			0		26B						
07		0				18			Y		26C						
09		0				20A			706		26E						
11	S	Y	I	N		20B			0		EU						
11		16500				21A			0		27			62			
13		01783				21B			0		29			0			
14		13350				21C			0		30			0			
15		768				21D			0		31			0			
16		0				26A			62		33			0			
TN	9803331550					PN					PP						



<b>Sign Return Below</b> <input type="checkbox"/> Refund Due <u>0</u>	<input checked="" type="checkbox"/> <b>Payment Due</b> <u>62</u>
<i>I certify that, to the best of my knowledge, this return is accurate and complete.</i>	<i>If prepared by a person other than taxpayer, this certification is based on all information of which the preparer has any knowledge.</i>
_____ Your Signature	_____ SELF PREPARED
_____ Date	_____ Paid Preparer's Signature
_____ Spouse's Signature (If filing joint return, both must sign.)	_____ Date
<u>9803331550</u>	_____ Paid Preparer's FEIN, SSN, or PTIN
_____ Home Telephone Number (Include area code)	_____ Paid Preparer's Telephone Number

**For original returns only: If you ARE NOT due a refund, mail return, any payment, and Form D-400V to: NCDOR, P.O. Box 25000, Raleigh, N.C. 27640-0640. If you ARE due a REFUND mail to: NCDOR, P.O. Box R, Raleigh, N.C. 27634-0001.**

Last Name (First 10 Characters) BEHERA

Your Social Security Number 770789336

**D-400 Line-by-Line Information**

6.	Adjusted gross income from your federal return	6.	91373
7.	Additions to federal adjusted gross income	7.	0
8.	Add Lines 6 and 7	8.	91373
9.	Deductions from federal adjusted gross income	9.	0
10.	Subtract Line 9 from Line 8	10.	91373
11.	N.C. standard deduction	11.	Y
11.	N.C. itemized deduction	11.	N
11.	Deduction amount	11.	16500
12.	Subtract Line 11 from Line 10	12.	74873
13.	Part-year residents and nonresidents	13.	0.1783
14.	N.C. Taxable Income	14.	13350
15.	N.C. Income Tax	15.	768
16.	Tax Credits	16.	0
17.	Subtract Line 16 from Line 15	17.	768
18.	Consumer Use Tax	18.	0
	You certify that no Consumer Use Tax is due		Y
19.	Add Lines 17 and 18	19.	768

**North Carolina Income Tax Withheld**

20a.	Your tax withheld	20a.	706
20b.	Spouse's tax withheld	20b.	0

**Other Tax Payments**

21a.	2016 estimated tax	21a.	0
21b.	Paid with extension	21b.	0
21c.	Partnership	21c.	0
21d.	S Corporation	21d.	0
22.	Amended Returns Only - Previous payments	22.	0
23.	Total Payments	23.	706
24.	Amended Returns Only - Previous refunds	24.	0
25.	Subtract Line 24 from Line 23	25.	706
26a.	<b>Tax Due</b>	26a.	62
26b.	Penalties	26b.	0
26c.	Interest	26c.	0
26d.	Add Lines 26b and 26c and enter the total on 26d	26d.	0
EU	Exception to underpayment of estimated tax	EU	
26e.	Interest on the underpayment of estimated income tax	26e.	0
27.	<b>Pay this Amount</b>	27.	<b>62</b>
28.	<b>Overpayment</b>	28.	0

**Amount of Refund to Apply to:**

29.	Amount of Line 28 to be applied to 2017 Estimated Income Tax	29.	0
30.	N.C. Nongame and Endangered Wildlife Fund	30.	0
31.	N.C. Education Endowment Fund	31.	0
32.	Add Lines 29, 30, and 31	32.	0
33.	<b>Amount to be Refunded</b>	33.	<b>0</b>

**D-400 Sch S (59)**

8-25-16

**Supplemental Schedule 2016**  
North Carolina Department of Revenue

Important: Refer to the D-401 Income Tax Instructions before completing Parts A, B, C, or D of this form.  
If you complete this form, you must attach this form to Form D-400, otherwise, we may be unable to process your return.

Last Name (First 10 Characters) **BEHERA** Your Social Security Number **770789336**

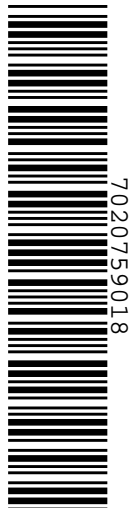
01	0	08	0	11D	0	12E	0	21	0
02	0	09	0	11E	0	13	0	22	0
03	0	10	0	12A	0	15	0	24	16290
04	0	11A	0	12B	0	16	0	25	91373
05	0	11B	0	12C	0	19	0	NRT	N PYT Y
07	0	11C	0	12D	0	20	0	NRS	N PYS Y

**Part A. Additions to Federal Adjusted Gross Income**

1.	Interest income from obligations of states other than North Carolina	1.	0
2.	Adjustment for domestic production activities	2.	0
3.	Adjustment for bonus depreciation	3.	0
4.	Adjustment for section 179 expense deduction	4.	0
5.	Other additions to federal adjusted gross income	5.	0
6.	Total additions - Add Lines 1 through 5	6.	0

**Part B. Deductions from Federal Adjusted Gross Income**

7.	State or local income tax refund	7.	0			
8.	Interest income from obligations of the United States or United States' possessions	8.	0			
9.	Social Security and Railroad Retirement Benefits included on your federal return	9.	0			
10.	Bailey settlement retirement benefits	10.	0			
11.	Adjustment for bonus depreciation added back in 2011, 2012, 2013, 2014, and 2015					
11a.	2011	0	11b. 2012	0	11c. 2013	0
11d.	2014	0	11e. 2015	0		
11f.	Add Lines 11a, 11b, 11c, 11d, and 11e and enter on 11f	11f.	0			
12.	Adjustment for section 179 expense deduction added back in 2011, 2012, 2013, 2014, and 2015					
12a.	2011	0	12b. 2012	0	12c. 2013	0
12d.	2014	0	12e. 2015	0		
12f.	Add Lines 12a, 12b, 12c, 12d, and 12e and enter on 12f	12f.	0			
13.	Other deductions from federal adjusted gross income	13.	0			
14.	Total deductions	14.	0			



**Part C. N.C. Itemized Deductions**

15.	Qualifying home mortgage interest	15.	0
16.	Real estate property taxes	16.	0
17.	Total home mortgage interest and real estate property taxes	17.	0
18.	Qualifying home mortgage interest and real estate property taxes limitation	18.	0
19.	Allowable home mortgage interest and real estate property taxes	19.	0
20.	Charitable contributions	20.	0
21.	Medical and dental expenses	21.	0
22.	Repayment of claim of right income	22.	0
23.	Total N.C. itemized deductions	23.	0

**Part D. Computation of North Carolina Taxable Income for Part-Year Residents and Nonresidents**

Select box if you or your spouse move into or out of NC during the year.				Select box if you or your spouse were a nonresident of NC for the entire year.				
You	<input checked="" type="checkbox"/>	Beginning	01 01 16	Ending	03 18 16	You	<input type="checkbox"/>	
Spouse	<input checked="" type="checkbox"/>	Beginning	01 01 16	Ending	03 18 16	Spouse	<input type="checkbox"/>	
24.	All income while a part-year NC resident and NC source income while a nonresident						24.	16290
25.	Total income from all sources						25.	91373
26.	Divide Line 24 by Line 25						26.	0.1783

Form  
**1040EZ**

**Income Tax Return for Single and  
Joint Filers With No Dependents** (99)

**2016**

OMB No. 1545-0074

Your first name and initial <b>shibashis</b>	Last name <b>behera</b>	<b>Your social security number</b> 770   78   9336	
If a joint return, spouse's first name and initial <b>sushri S</b>	Last name <b>panigrahi</b>	<b>Spouse's social security number</b> 872   17   5760	
Home address (number and street). If you have a P.O. box, see instructions. <b>3409 york crest drive</b>		Apt. no. <b>204</b>	▲ <b>Make sure the SSN(s) above are correct.</b>
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). <b>Riverview FL 33578</b>			
Foreign country name	Foreign province/state/county	Foreign postal code	<b>Presidential Election Campaign</b> Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund. <input type="checkbox"/> <b>You</b> <input type="checkbox"/> <b>Spouse</b>

<b>Income</b>		<b>1</b>	<b>91,373.</b>
<b>1</b> Wages, salaries, and tips. This should be shown in box 1 of your Form(s) W-2. Attach your Form(s) W-2.		<b>1</b>	<b>91,373.</b>
<b>2</b> Taxable interest. If the total is over \$1,500, you cannot use Form 1040EZ.		<b>2</b>	
<b>3</b> Unemployment compensation and Alaska Permanent Fund dividends (see instructions).		<b>3</b>	
<b>4</b> Add lines 1, 2, and 3. This is your <b>adjusted gross income</b> .		<b>4</b>	<b>91,373.</b>
<b>5</b> If someone can claim you (or your spouse if a joint return) as a dependent, check the applicable box(es) below and enter the amount from the worksheet on back. <input type="checkbox"/> <b>You</b> <input type="checkbox"/> <b>Spouse</b> If no one can claim you (or your spouse if a joint return), enter \$10,350 if <b>single</b> ; \$20,700 if <b>married filing jointly</b> . See back for explanation.		<b>5</b>	<b>20,700.</b>
<b>6</b> Subtract line 5 from line 4. If line 5 is larger than line 4, enter -0-. This is your <b>taxable income</b> .	▶ <b>6</b>	<b>6</b>	<b>70,673.</b>
<b>7</b> Federal income tax withheld from Form(s) W-2 and 1099.		<b>7</b>	<b>9,998.</b>
<b>8a</b> <b>Earned income credit (EIC)</b> (see instructions) <span style="float: right;">No</span>		<b>8a</b>	
<b>b</b> Nontaxable combat pay election. <span style="float: right;">8b</span>			
<b>9</b> Add lines 7 and 8a. These are your <b>total payments and credits</b> .	▶ <b>9</b>	<b>9</b>	<b>9,998.</b>
<b>10</b> <b>Tax</b> . Use the amount on <b>line 6 above</b> to find your tax in the tax table in the instructions. Then, enter the tax from the table on this line.		<b>10</b>	<b>9,674.</b>
<b>11</b> Health care: individual responsibility (see instructions) <span style="float: right;">Full-year coverage <input checked="" type="checkbox"/></span>		<b>11</b>	<b>0.</b>
<b>12</b> Add lines 10 and 11. This is your <b>total tax</b> .		<b>12</b>	<b>9,674.</b>
<b>13a</b> If line 9 is larger than line 12, subtract line 12 from line 9. This is your <b>refund</b> . If Form 8888 is attached, check here <input type="checkbox"/>		<b>13a</b>	<b>324.</b>
▶ <b>b</b> Routing number <input type="text" value="053000196"/> ▶ <b>c</b> Type: <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings			
▶ <b>d</b> Account number <input type="text" value="002373920679"/>			
<b>14</b> If line 12 is larger than line 9, subtract line 9 from line 12. This is the <b>amount you owe</b> . For details on how to pay, see instructions.	▶ <b>14</b>		

**Third Party Designee** Do you want to allow another person to discuss this return with the IRS (see instructions)?  **Yes**. Complete below.  **No**

Designee's name ▶	Phone no. ▶	Personal identification number (PIN) ▶
		<input type="text"/>

**Sign Here** Under penalties of perjury, I declare that I have examined this return and, to the best of my knowledge and belief, it is true, correct, and accurately lists all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Joint return? See instructions. Keep a copy for your records.	Your signature	Date	Your occupation <b>software engineer</b>	Daytime phone number <b>(980) 333-1550</b>
	Spouse's signature. If a joint return, <b>both</b> must sign.	Date	Spouse's occupation <b>Homemaker</b>	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) <input type="text"/>

**Paid Preparer Use Only**

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶ <b>Self-Prepared</b>	Firm's EIN ▶			
Firm's address ▶	Phone no.			