

C Walker
Walker
Winston Salem, NC
April 18, 2017


N.C. Department of Revenue
P.O. Box 25000
Raleigh, NC 27640-0640


Dear Sir/Madam:

Please find enclosed the filing of our 2016 Form D-400 NC Individual Income Tax Return. Also enclosed are two (2) attached 4852 Substitute for Form W-2 Wage and Tax Statements, due to the fact that the companies that submitted Forms W-2 erroneously alleged payments to my spouse and myself of Internal Revenue Code (IRC) § 3121 and § 3401 "wages". These reports are hereby disputed. Forms 4852 are submitted to rebut the characterization of non-taxable payments to my spouse and myself as reportable "wages". The amounts shown as withheld from our pay on these forms are correct.

We expect a full and complete refund of the overpayment shown on our 2016 Form D-400.

Under penalties of perjury, we declare that I have examined the enclosed Forms 4852 and, to the best of my knowledge and belief, they are true, correct, and accurate.


C Walker 4/18/2017


Walker 4/18/2017

**D-400
Individual Income
Tax Return 2016**

AMENDED RETURN
Fill in circle. (See instructions.)

IMPORTANT: Do not send a photocopy of this form.

For calendar year 2016, or fiscal year beginning (MM-DD) - 16 and ending (MM-DD-YY)

Your Social Security Number: [REDACTED] ← You **must** enter your social security number(s). → Spouse's Social Security Number: [REDACTED]

Your First Name (USE CAPITAL LETTERS FOR YOUR NAME AND ADDRESS) M.I. Your Last Name
C [REDACTED] M.I. **WALKER**
 If a Joint Return, Spouse's First Name M.I. Spouse's Last Name
[REDACTED] M.I. **WALKER**
 Mailing Address Apartment Number
[REDACTED]
 City State Zip Code Country (if not U.S.) Country (show first two letters)
WINSTON SALEM NC [REDACTED] [REDACTED]

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 \$. 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.

Fill in circle if you or, if married filing jointly, your spouse were out of the country on April 15 and a U.S. citizen or resident.

Deceased Taxpayer Information Enter date of death of deceased taxpayer or deceased spouse.
 Fill in circle if return is filed and signed by Executor, Administrator or Court-Appointed Personal Representative. Taxpayer (MM-DD-YY) Spouse (MM-DD-YY)

Residency Status Were you a resident of N.C. for the entire year of 2016? Yes No *If No, complete Lines 1 through 12. Then go to Part D of Schedule S. Fill in residency information and complete Lines 24 through 26.*
 Was your spouse a resident for the entire year? Yes No

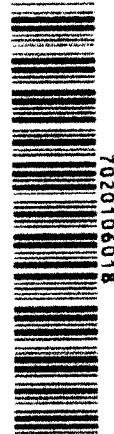
Did you claim the standard deduction on your 2016 federal return? Yes No

Veteran information Are you a veteran? Yes No (See instructions.)
 Is your spouse a veteran? Yes No

Filing Status 1. Single Fill in one circle only. (See instructions.) *Print in Black or Blue Ink Only. No Pencil or Red Ink.*
 2. Married Filing Jointly
 3. Married Filing Separately → (Enter your spouse's full name and Social Security Number) Name SSN
 4. Head of Household
 5. Qualifying Widow(er) with Dependent Child (Year spouse died) Enter Whole U.S. Dollars Only

6. Adjusted gross income from your federal return (If negative, see instructions.)	▶ 6. <input type="radio"/> 879.00
7. Additions to federal adjusted gross income (From Line 6 of Form D-400 Schedule S, Part A)	▶ 7. .00
8. Add Lines 6 and 7.	▶ 8. <input type="radio"/> 879.00
9. Deductions from federal adjusted gross income (From Line 14 of Form D-400 Schedule S, Part B)	▶ 9. .00
10. Subtract Line 9 from Line 8.	▶ 10. <input type="radio"/> 879.00
11. <input checked="" type="radio"/> N.C. standard deduction OR <input type="radio"/> N.C. itemized deductions <i>Fill in one circle only. (If itemizing, complete Part C of Form D-400 Schedule S, and enter the amount from Line 23.)</i>	▶ 11. <input type="radio"/> 16500.00
12. Subtract Line 11 from Line 10.	▶ 12. <input checked="" type="radio"/> 15621.00
13. Part-year residents and nonresidents (From Line 26 of Form D-400 Schedule S, Part D)	▶ 13. .00
14. North Carolina Taxable Income Full-year residents enter the amount from Line 12. Part-year residents and nonresidents multiply amount on Line 12 by the decimal amount on Line 13.	▶ 14. <input checked="" type="radio"/> 15621.00
15. North Carolina Income Tax To calculate your tax, multiply Line 14 by 5.75% (0.0575). If Line 14 is negative, enter -0- on Line 15.	▶ 15. <input type="radio"/> 0.00

*If amount on Line 6, 8, 10, 12, or 14 is negative, fill in circle.
Example*



Staple All Pages of Your Return Here.

Staple W-2s Here.

Be sure to sign and date your return below.

16. Tax Credits (From Form D-400TC, Part 3, Line 20 - You must attach Form D-400TC if you enter an amount on this line.)	▶	16.	.....	.00
17. Subtract Line 16 from Line 15.		17.	.....	0.00
18. Consumer Use Tax (See instructions)	▶	18.	.....	.00
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> If you certify that no Consumer Use Tax is due, fill in circle. <input checked="" type="radio"/> </div>				
19. Add Lines 17 and 18.		19.	.....	0.00
20. North Carolina Income Tax Withheld				
a. Your tax withheld	▶		.....	2912.00
b. Spouse's tax withheld	▶		.....	485.00
21. Other Tax Payments				
a. 2016 estimated tax	▶		.....	.00
b. Paid with extension	▶		.....	.00
c. Partnership	▶		.....	.00
d. S Corporation	▶		.....	.00
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> If you claim a partnership payment on Line 21c or S corporation payment on Line 21d, you must attach a copy of the NC K-1. </div>				
22. Amended Returns Only - Previous payments (See Amended Returns in instructions.)		22.	.....	.00
23. Total Payments - Add Lines 20a through 22.		23.	.....	3397.00
24. Amended Returns Only - Previous refunds (See Amended Returns in instructions.)		24.	.....	.00
25. Subtract Line 24 from Line 23.		25.	.....	3397.00
26. a. Tax Due - If Line 19 is more than Line 25, subtract Line 25 from Line 19. (If Line 25 is negative, see instructions.)	▶	26a.	.....	.00
b. Penalties	▶		.....	.00
c. Interest	▶		.....	.00
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> If amount on Line 25 is negative, fill in circle. Example: <input checked="" type="radio"/> </div>				
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> (Add Lines 26b and 26c and enter the total on Line 26d.) </div>				
e. Interest on the underpayment of estimated income tax (See instructions and enter letter in box, if applicable.)	▶	26e.	.....	.00
27. Add Lines 26a, 26d, and 26e. Pay This Amount - You can pay online. See instructions.	▶	27.	.....	\$ .00
28. Overpayment - If Line 19 is less than Line 25, subtract Line 19 from Line 25.		28.	.....	3397.00
29. Amount of Line 28 to be applied to 2017 Estimated Income Tax	▶	29.	.....	.00
30. Contribution to the N.C. Nongame and Endangered Wildlife Fund	▶	30.	.....	.00
31. Contribution of overpayment to the N.C. Education Endowment Fund	▶	31.	.....	.00
32. Add Lines 29, 30, and 31.		32.	.....	.00
33. Subtract Line 32 from Line 28. This is the Amount To Be Refunded. For direct deposit, file electronically.	▶	33.	.....	3397.00



I certify that, to the best of my knowledge, this return is accurate and complete.		If prepared by a person other than taxpayer, this certification is based on all information of which the preparer has any knowledge.	
Sign Here		Date	4/18/2017
		Date	4/18/2017
	Preparer's FEIN, SSN, or PTIN		▶
	Preparer's Telephone Number (include area code)		▶

If REFUND mail return to: N.C. DEPT. OF REVENUE P.O. BOX R RALEIGH, NC 27634-0001	FOR ORIGINAL RETURNS ONLY	If you ARE NOT due a refund, mail return, any payment, and D-400V to: N.C. DEPT. OF REVENUE P.O. BOX 25000 RALEIGH, NC 27640-0640
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Substitute for Form W-2, Wage and Tax Statement, or Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 1040, 1040A, 1040-EZ, or 1040X.
▶ Information about Form 4852 is available at www.irs.gov/form4852.

1 Name(s) shown on return
WALKER

2 Your social security number
[REDACTED]

3 Address
[REDACTED] WINSTON SALEM, NC [REDACTED]

4 Enter year in space provided and check one box. For the tax year ending December 31, 2016

herby
notify

I have been unable to obtain (or have received an incorrect) Form W-2 OR Form 1099-R.

I have notified the IRS of this fact. The amounts shown on line 7 or line 8 are my best estimates for all wages or payments made to me and tax withheld by my employer or payer named on line 5.

5 Employer's or payer's name, address, and ZIP code
[REDACTED] GREENSBORO, NC [REDACTED]

6 Employer's or payer's identification number (if known)
[REDACTED]

7 Form W-2. Enter wages, tips, other compensation, and taxes withheld.

a Wages, tips, and other compensation	0	f State income tax withheld	485
b Social security wages	0	(Name of state) NORTH CAROLINA	
c Medicare wages and tips	0	g Local income tax withheld	
d Social security tips	0	(Name of locality)	
e Federal income tax withheld	168	h Social security tax withheld	999
		i Medicare tax withheld	234

8 Form 1099-R. Enter distributions from pensions, annuities, retirement/profit-sharing plans, IRAs, insurance contracts, etc.

a Gross distribution		f Federal income tax withheld	
b Taxable amount		g State income tax withheld	
c Taxable amount not determined	<input type="checkbox"/>	h Local income tax withheld	
d Total distribution	<input type="checkbox"/>	i Employee contributions	
e Capital gain (included in line 8b)		j Distribution codes	

9 How did you determine the amounts on lines 7 and 8 above?
NONE

RECORDS PROVIDED BY THE PAYER LISTED ON LINE 5. NO INTERNAL REVENUE CODE § 3121 / § 3401 "WAGES" WERE RECEIVED.

10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c. Corrected Wage and Tax Statement.

NONE

General Instructions

Section references are to the Internal Revenue Code.

Future developments. The IRS has created a page on www.irs.gov/form4852. Information about any future developments affecting Form 4852 (such as legislation enacted after we release it) will be posted on that page.

Purpose of form. Form 4852 serves as a substitute for Forms W-2, W-2c, and 1099-R and is completed by you or your representatives when (a) your employer or payer does not issue you a Form W-2 or Form 1099-R or (b) an employer or payer has issued an incorrect Form W-2 or Form 1099-R. Attach this form to the back of your income tax return, before any supporting forms or schedules.

You should always attempt to get Form W-2, Form W-2c, or Form 1099-R from your employer or payer before contacting the IRS or filing Form 4852. If you do not receive the missing or corrected form from your employer or payer by February 14, you may call the IRS at 1-800-829-1040 for assistance. You must provide your name, address (including ZIP code), phone number, social security number, and dates of employment, and your employer's or payer's name, address (including ZIP code), and phone number. The IRS will contact your employer or payer and request the missing form. The IRS also will send you a Form 4852. If you do not receive the missing form in sufficient time to file your income tax return timely, you may use the Form 4852 that the IRS sent you.

If you received an incorrect Form W-2 or Form 1099-R, you should always attempt to have your employer or payer issue a corrected form before filing Form 4852.

Note. Retain a copy of Form 4852 for your records. To help protect your social security benefits, keep a copy of Form 4852 until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year. After September 30 following the date shown on line 4, you may use a my Social Security online account to verify wages reported by your employers. Please visit www.ssa.gov/myaccount. Or, you may contact your local SSA office to verify wages reported by your employer.

Will I need to amend my return? If you receive a Form W-2, Form W-2c, or Form 1099-R after your return is filed with Form 4852, and the information differs from the information reported on your return, you must amend your return by filing Form 1040X, Amended U.S. Individual Income Tax Return.

Penalties. The IRS will challenge the claims of individuals who attempt to avoid or evade their federal tax liability by using Form 4852 in a manner other than as prescribed. Potential penalties for the improper use of Form 4852 include:

- Accuracy-related penalties equal to 20 percent of the amount of taxes that should have been paid,
- Civil fraud penalties equal to 75 percent of the amount of taxes that should have been paid, and

Substitute for Form W-2, Wage and Tax Statement, or Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.
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OMB No. 1545-0074

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 C. WALKER

2 Your social security number

3 Address
 WINSTON SALEM, NC

hereby
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I have notified the IRS of this fact. The amounts shown on line 7 or line 8 are my best estimates for all wages or payments made to me and tax withheld by my employer or payer named on line 5.

5 Employer's or payer's name, address, and ZIP code
 GREENSBORO, NC

6 Employer's or payer's identification number (if known)

7 Form W-2. Enter wages, tips, other compensation, and taxes withheld.

a Wages, tips, and other compensation	0	f State income tax withheld	2912
b Social security wages	0	(Name of state) .	NORTH CAROLINA
c Medicare wages and tips	0	g Local income tax withheld	
d Social security tips	0	(Name of locality)	
e Federal income tax withheld	3587	h Social security tax withheld	3817
		i Medicare tax withheld	893

8 Form 1099-R. Enter distributions from pensions, annuities, retirement/profit-sharing plans, IRAs, insurance contracts, etc.

a Gross distribution		f Federal income tax withheld	
b Taxable amount		g State income tax withheld	
c Taxable amount not determined	<input type="checkbox"/>	h Local income tax withheld	
d Total distribution	<input type="checkbox"/>	i Employee contributions	
e Capital gain (included in line 8b)		j Distribution codes	

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