

D-407 (SD)

8-16-22

2022 Estates and Trusts Income Tax Return

North Carolina Department of Revenue

DOR  
Use  
Only

For calendar year 2022 or  fiscal year beginning 12 19 22 and ending 12 19 99

ABCDEFGHIJKLMN  
 ABCDEFGHIJKLMNOPQRSTUVWXYZABCDEFGHIJKLMN  
 ABCDEFGHIJKLMNOPQRSTUVWXYZABCDE 12345  
 ABCDEFGHIJKLMNOPQR NC 12345-1234 ABCDE

Federal Employer ID Number: 999123456

Administrator  Executor  Other

**Filing Information:**  Initial Return  Amended Return  Final Return  Entity has Nonresident  Qualified Funeral Trust  NC-PE attached  ESBT Income

**Estate Information:** Date of Decedent's Death 12 19 99  Check box if final distribution of assets  Beneficiaries If no return filed last year, reason why ABCDEFGH ABCDEFGHIJKLMNOPQRSTUVWXYZABC

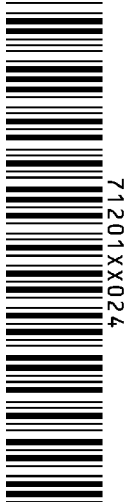
**Trust Information:** Date Trust Created 12 19 99  made during the tax year. ABCDEFGHIJKLMNOPQRSTUVWXYZABC If no return filed last year, reason why ABCDEFGH ABCDEFGHIJKLMNOPQRSTUVWXYZABC

Name and Address of Grantor ABCDEFGHIJKLMNOPQRSTUVWXYZABCDEFGHIJKLMN  
 ABCDEFGHIJKLMNOPQRSTUVWXYZABC  
 ABCDEFGHIJKLMNOPQR AB 12345 ABCDEFGHIJKLMN

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 \$ 1234567890. To designate your overpayment to the Fund, enter the amount of your designation on Line 16. See instructions for information about the Fund.

Federal Extension Was the entity granted an automatic extension to file its 2022 federal income tax return (Form 1041)? Yes  No

ABCD	ABCD	12345	IR	A	AR	A	FR	A	NRB	A	QFT	A	PE	A
ABCDEFGHIJKLMN	OPQRSTUVWXYZ	ABCDEFGHIJKLMN	999123456	ESBT	A									
ABCDEFGHIJKLMN	OPQRSTUVWXYZ	ABCDEFGHIJKLMN	FDA	A	FDEXT	Y								
ABCDEFGHIJKLMN	OPQRSTUVWXYZ	ABCDEFGHIJKLMN	12345				11					1234567890		
ABCDEFGHIJKLMN	OPQRSTUVWXYZ	AB	12345-1234				12A					123456		
01	-1234567890	09A	1234567890				12B					123456		
02	1234567890	09B	1234567890				13					1234567890		
04	1234567890	09C	1234567890				15					1234567890		
06	-1234567890	09D	1234567890				16					1234567890		
08	1234567890	09E	-1234567890				17					1234567890		



Sign Return Below  Refund Due 1234567890  Payment Due 1234567890

I certify that, to the best of my knowledge, this return is accurate and complete.

\_\_\_\_\_  
Signature of Fiduciary Representing Estate or Trust Date \_\_\_\_\_ ( )  
Contact Phone Number (Include area code)

Check here if you authorize the North Carolina Department of Revenue to discuss this return and attachments with the paid preparer below.

I declare and certify that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete.

\_\_\_\_\_  
Signature of Preparer Other Than Fiduciary Date \_\_\_\_\_ ( )  
Preparer's Contact Phone Number (Include area code)

Address \_\_\_\_\_

MAIL TO: North Carolina Department of Revenue, P.O. Box 25000, Raleigh, North Carolina 27640-0640

