

CD-405 C-Corporation Tax Return 2019

For calendar year 2019 or other tax year beginning (MM-DD) 19 and ending (MM-DD-YY)

DOR Use Only

Legal Name (First 35 Characters)(USE CAPITAL LETTERS FOR YOUR NAME AND ADDRESS)
Address
City State Zip Code

Federal Employer ID Number
Secretary of State ID NAICS Code
Gross Receipts / Sales
Total Assets per Balance Sheet

Initial Return
Final Return
Short Year Return
Amended Return
Captive REIT
Tax Exempt
Non U.S./Foreign
Combined Return (Approved Taxpayers Only)
NC-Rehab is attached
NC-478 is attached
Has Escheatable Property

Federal Extension Were you granted an automatic extension to file your 2019 federal income tax return (Form 1120)? Yes No

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 40. See instructions for information about the Fund.

Computation of Franchise Tax
1. Net Worth
2. Investment in N.C. Tangible Property
3. Appraised Value of N.C. Tangible Property
4. Taxable Amount
5. Total Franchise Tax Due
6. Payment with Franchise Tax Extension
7. Tax Credits
8. Franchise Tax Due
9. Franchise Tax Overpaid

Computation of Corporate Income Tax
10. Federal Taxable Income Before NOL
11. Adjustments to Federal Taxable Income
12. Net Income Before Contributions
13. Contributions to Donees Outside N.C.
14. N.C. Taxable Income
15. Nonapportionable Income
16. Apportionable Income
17. Apportionment Factor
18. Income Apportioned to N.C.
19. Nonapportionable Income Allocated to N.C.
20. Income Subject to N.C. Tax
21. Percentage Depletion over Cost Depletion on N.C. Property

Computation of Corporate Income Tax

- 22. **State Net Loss** (Attach schedule)
- 23. **Income Before Contributions to N.C. Donees**  
Line 20 minus Lines 21 and 22
- 24. **Contributions to N.C. Donees**  
(From Schedule I, Line 2e)
- 25. **Net Taxable Income**  
Line 23 minus Line 24
- 26. **N.C. Net Income Tax**  
Multiply Line 25 by 2.5%
- 27. **Payments and Credits**  
When filing an amended return, see instructions.
  - a. **Income Tax Extension**  
(From Form CD-419, Line 10)
  - b. **2019 Estimated Tax**
  - c. **Partnership** (If a partnership payment is taken on Line 27c, a copy of Form D-403 NC K-1 **MUST** be attached.)
  - d. **Nonresident Withholding**  
(Include copy of 1099 or W-2)
  - e. **Tax Credits** (From Form CD-425, Part 4, Line 30)  
If a tax credit is taken on Line 27e, Form CD-425 **MUST** be attached.
- 28. **Add Lines 27a through 27e**
- 29. **Income Tax Due** - If Line 28 is less than Line 26, enter difference here and on Line 32, below
- 30. **Income Tax Overpaid** - If Line 28 is more than Line 26, enter difference here and on Line 32, below

If amount on Line 23 or 25 is negative fill in circle.  
Example:



22. \_\_\_\_\_ .00

23.  \_\_\_\_\_ .00

24. \_\_\_\_\_ .00

25.  \_\_\_\_\_ .00

26. \_\_\_\_\_ .00

27a. \_\_\_\_\_ .00

27b. \_\_\_\_\_ .00

27c. \_\_\_\_\_ .00

27d. \_\_\_\_\_ .00

27e. \_\_\_\_\_ .00

28. \_\_\_\_\_ .00

29. \$ \_\_\_\_\_ .00

30. \_\_\_\_\_ .00

Tax Due or Refund

- 31. **Franchise Tax Due or Overpayment**  
(From Schedule A, Line 8 or 9)
- 32. **Income Tax Due or Overpayment**  
(From Schedule B, Line 29 or 30)
- 33. **Balance of Tax Due or Overpayment**  
Add (or subtract) Lines 31 and 32
- 34. **Underpayment of Estimated Income Tax**  
(Enter letter in exceptions box, if applicable. See instructions.)
- 35. **a. Interest**      **b. Penalties**  
 \_\_\_\_\_ .00      \_\_\_\_\_ .00  
 (Add Lines 35a and 35b and enter the total on Line 35c)
- 36. **Total Due** - Add Lines 33, 34, and 35c and enter result here, but not less than zero. If less than zero, enter amount on Line 37. Pay your tax online. See instructions. Pay in U.S. Currency From a Domestic Bank
- 37. **Overpayment**
- 38. Amount of Line 37 applied to **2020 Estimated Income Tax**
- 39. Amount of Line 37 contributed to **N.C. Nongame and Endangered Wildlife Fund**
- 40. Amount of Line 37 contributed to **N.C. Education Endowment Fund**
- 41. **Amount to be Refunded**  
Line 37 minus Lines 38, 39, and 40

If amount on Line 31-33 is an overpayment fill in circle.  
Example:

Exception to Underpayment of Estimated Tax

31.  \_\_\_\_\_ .00

32.  \_\_\_\_\_ .00

33.  \_\_\_\_\_ .00

34. \_\_\_\_\_ .00

35c. \_\_\_\_\_ .00

36. \_\_\_\_\_ .00

37. \_\_\_\_\_ .00

38. \_\_\_\_\_ .00

39. \_\_\_\_\_ .00

40. \_\_\_\_\_ .00

41. \_\_\_\_\_ .00

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 and Title of Officer: \_\_\_\_\_ Date \_\_\_\_\_ Corporate 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.

**PAID PREPARER USE ONLY**

If prepared by a person other than taxpayer, this certification is based on all information of which the preparer has any knowledge.

Preparer's FEIN, SSN, or PTIN \_\_\_\_\_ Preparer's Contact Phone Number (Include area code) \_\_\_\_\_

Signature of Paid Preparer: \_\_\_\_\_ Date \_\_\_\_\_

Fill in applicable circle:  FEIN  SSN  PTIN

**(C) Net Worth**

1. Total assets <i>(See instructions for definition)</i>	1. _____ .00
2. Total liabilities	2. _____ .00
3. Line 1 minus Line 2	3. _____ .00
4. Accumulated depreciation, depletion, and amortization permitted for income tax purposes <i>(Attach Schedule)</i>	4. _____ .00
5. Line 3 minus Line 4	5. _____ .00
6. Affiliated indebtedness <i>(Attach schedule)</i> _____	6. _____ .00
7. Line 5 plus (or minus) Line 6	7. _____ .00
8. Apportionment factor <i>(From Schedule O, Part 1; Part 2 - Line 9; or Part 3)</i>	8. _____ %
<b>9. Net Worth</b> Multiply Line 7 by factor on Line 8 and enter result here and on Schedule A, Line 1. If amount on Line 9 is less than zero, enter zero on Schedule A, Line 1.	9. <span style="border: 1px solid black; padding: 2px;">_____</span> .00

**(D) Investment in N.C. Tangible Property**

1. Total value of inventories located in N.C. <i>Inventory valuation method:</i> <input type="radio"/> FIFO <input type="radio"/> Lower of cost or market <input type="radio"/> Other _____ <small><i>(LIFO valuation not permitted)</i></small>	1. _____ .00
2. Total value of furniture, fixtures, and machinery and equipment located in N.C.	2. _____ .00
3. Total value of land and buildings located in N.C.	3. _____ .00
4. Total value of leasehold improvements and other tangible property located in N.C.	4. _____ .00
5. Add Lines 1 through 4 and enter total	5. _____ .00
6. Accumulated depreciation, depletion, and amortization with respect to N.C. tangible property	6. _____ .00
7. Debts existing for the purchase or improvement of N.C. real estate	7. _____ .00
<b>8. Investment in N.C. Tangible Property</b> Line 5 minus Lines 6 and 7; enter amount here and on Schedule A, Line 2	8. <span style="border: 1px solid black; padding: 2px;">_____</span> .00

**(E) Appraised Value of N.C. Tangible Property**

1. Total appraised value of all N.C. tangible property, including motor vehicles <i>(If tax year ends December 31, 2018 through September 30, 2019, enter the appraised county tax value of all real and tangible property located in N.C. as of January 1, 2018, including any motor vehicles assessed during the tax year. Otherwise, enter value as of January 1, 2019.)</i>	1. _____ .00
<b>2. Appraised Value of N.C. Tangible Property</b> Multiply Line 1 by 55%; enter here and on Schedule A, Line 3	2. <span style="border: 1px solid black; padding: 2px;">_____</span> .00

**(F) Other Information - All Taxpayers Must Complete this Schedule**

1. State of incorporation \_\_\_\_\_ Date incorporated \_\_\_\_\_

2. Date Certificate of Authority was obtained from N.C. Secretary of State \_\_\_\_\_

3. Regular or principal trade or business in N.C. \_\_\_\_\_ Everywhere \_\_\_\_\_

4. Principal place from which business is directed or managed \_\_\_\_\_

5. What was the last year the IRS redetermined the corporation's federal taxable income? \_\_\_\_\_

6. Were the adjustments reported to N.C.?  Yes  No If so, when? \_\_\_\_\_

7. Does this corporation finance or discount its receivables through a related or an affiliated company?  Yes  No

8. Is this corporation subject to franchise tax but not N.C. income tax because the corporation's income tax activities are protected under P.L. 86-272? *(Attach detailed explanation)*  Yes  No

9. Officers' names and addresses:

President \_\_\_\_\_ Secretary \_\_\_\_\_

Vice-President \_\_\_\_\_ Treasurer \_\_\_\_\_

**Ⓒ Federal Taxable Income Before NOL Deduction**

Complete this schedule if you do not attach a copy of your federal income tax return.

1. a. Gross receipts or sales	_____	.00
b. Returns and allowances	_____	.00
c. Balance (Line 1a minus Line 1b)	_____	.00
2. Cost of goods sold (Attach schedule)	_____	.00
3. Gross Profit (Line 1c minus Line 2)	_____	.00
4. Dividends (Attach schedule)	_____	.00
5. a. Interest on obligations of the United States and its instrumentalities	_____	.00
b. Other interest	_____	.00
6. Gross rents	_____	.00
7. Gross royalties (Attach schedule)	_____	.00
8. Capital gain net income (Attach schedule)	_____	.00
9. Net gain (loss) (Attach schedule)	_____	.00
10. Other income (Attach schedule)	_____	.00
<b>11. Total Income</b> Add Lines 3 through 10	_____	.00
12. Compensation of officers (Attach schedule, including addresses)	_____	.00
13. Salaries and wages (Less employment credits)	_____	.00
14. Repairs and maintenance	_____	.00
15. Bad debts	_____	.00
16. Rents	_____	.00
17. Taxes and licenses	_____	.00
18. Interest	_____	.00
19. Charitable contributions	_____	.00
20. a. Depreciation _____		
b. Depreciation included in cost of goods sold _____		
c. Balance (Line 20a minus Line 20b)	_____	.00
21. Depletion	_____	.00
22. Advertising	_____	.00
23. Pension, profit-sharing, and similar plans	_____	.00
24. Employee benefit programs	_____	.00
25. Reserved for future use	_____	.00
26. Other deductions (Attach schedule)	_____	.00
<b>27. Total Deductions</b> Add Lines 12 through 26	_____	.00
<b>28. Taxable Income per Federal Return Before NOL and Special Deductions</b> Line 11 minus Line 27	_____	.00
<b>29. Special Deductions</b> (From Federal Form 1120, Line 29b)	_____	.00
<b>30. Federal Taxable Income Before NOL</b> Line 28 minus Line 29; enter amount here and on Schedule B, Line 10	_____	.00

**Ⓓ Adjustments to Federal Taxable Income**

<b>1. Additions:</b>		
a. Taxes based on net income	_____	.00
b. Contributions	_____	.00
c. Royalties to related members	_____	.00
d. Net interest expense to related members	_____	.00
e. Expenses attributable to income not taxed	_____	.00
f. Bonus depreciation	_____	.00
g. Section 179 expense deduction	_____	.00
h. Other (Attach explanation or schedule)	_____	.00
<b>2. Total Additions</b> (Add Lines 1a-1h)	_____	.00
<b>3. Deductions:</b>		
a. U.S. obligation interest (net of expenses) (Attach schedule)	_____	.00
b. Other deductible dividends	_____	.00
c. Royalties from related members	_____	.00
d. Qualified interest expense to related members	_____	.00
e. Bonus depreciation	_____	.00
f. Section 179 expense deduction	_____	.00
g. Other (Attach explanation or schedule)	_____	.00
<b>4. Total Deductions</b> (Add Lines 3a-3g)	_____	.00
<b>5. Adjustments to Federal Taxable Income</b> Line 2 minus Line 4, enter amount here and on Schedule B, Line 11	_____	.00

**Ⓔ Contributions**

<b>1. Contributions to Donees Outside N.C.</b>	
a. Enter total contributions to donees outside N.C.	_____ .00
b. Multiply the amount shown on Schedule B, Line 12 by 5% if Line 12 is greater than zero. Otherwise, enter zero here.	_____ .00
<b>c. Amount Deductible</b> Enter the lesser of Line 1a or 1b here and on Schedule B, Line 13	_____ .00
<b>2. Contributions to N.C. Donees</b>	
a. Enter total contributions to N.C. donees other than those listed in Line 2d, below	_____ .00
b. Multiply the amount shown on Schedule B, Line 23 by 5% if Line 23 is greater than zero. Otherwise, enter zero here.	_____ .00
c. Enter the lesser of Line 2a or 2b	_____ .00
d. Enter total contributions to the State of N.C. and its political subdivisions	_____ .00
<b>e. Amount Deductible</b> Add Lines 2c and 2d; enter total here and on Schedule B, Line 24	_____ .00

**Ⓕ Explanation of Changes for Amended Return**

Attach additional sheets if necessary


Note: The letter K is not used to designate a schedule.

		Beginning of Tax Year		End of Tax Year	
<b>L Balance Sheet per Books</b>	<b>Assets</b>				
	1. Cash				
	2. a. Trade notes and accounts receivable				
	b. Less allowance for bad debts	(            )		(            )	
	3. Inventories				
	4. a. U.S. government obligations				
	b. State and other obligations				
	5. Tax-exempt securities				
	6. Other current assets <i>(Attach end of year schedule)</i>				
	7. Loans to shareholders				
	8. Mortgage and real estate loans				
	9. Other investments <i>(Attach end of year schedule)</i>				
	10. a. Buildings and other depreciable assets				
	b. Less accumulated depreciation	(            )		(            )	
	11. a. Depletable assets				
b. Less accumulated depletion	(            )		(            )		
12. Land <i>(net of any amortization)</i>					
13. a. Intangible assets <i>(amortizable only)</i>					
b. Less accumulated amortization	(            )		(            )		
14. Other assets <i>(Attach end of year schedule)</i>					
15. <b>Total Assets</b>					
	<b>Liabilities and Shareholders' Equity</b>				
	16. Accounts payable				
	17. Mortgages, notes, and bonds payable in less than 1 year				
	18. Other current liabilities <i>(Attach end of year schedule)</i>				
	19. Loans from shareholders				
	20. Mortgages, notes, and bonds payable in 1 year or more				
	21. Other liabilities <i>(Attach end of year schedule)</i>				
	22. Capital stock: a. Preferred Stock				
	b. Common Stock				
	23. Additional paid-in capital				
	24. Retained earnings – Appropriated <i>(Attach end of year schedule)</i>				
	25. Retained earnings – Unappropriated				
	26. Adjustments to shareholders' equity <i>(Attach end of year schedule)</i>				
27. Less cost of treasury stock		(            )		(            )	
28. <b>Total Liabilities and Shareholders' Equity</b>					
<b>M-1 Reconciliation of Income (Loss) per Books With Return</b>	1. Net income (loss) per books			7. Income recorded on books this year not included on this return <i>(itemize)</i> :	
	2. Federal income tax			Tax-exempt interest \$ _____	
	3. Excess of capital losses over capital gains				
	4. Income subject to tax not recorded on books this year <i>(itemize)</i> :			8. Deductions on this return not charged against book income this year <i>(itemize)</i> :	
	5. Expenses recorded on books this year not deducted on this return <i>(itemize)</i> :			a. Depreciation \$ _____	
	a. Depreciation \$ _____			b. Charitable Contributions \$ _____	
b. Charitable Contributions \$ _____					
c. Travel and entertainment \$ _____			9. Add Lines 7 and 8		
6. Add Lines 1 through 5			10. Income <i>(Line 6 minus Line 9)</i>		
<b>M-2 Retained Earnings Analysis</b>	1. Balance at beginning of year			5. Distributions: a. Cash	
	2. Net income (loss) per books			b. Stock	
	3. Other increases <i>(itemize)</i> :			c. Property	
	4. Add Lines 1, 2, and 3			6. Other decreases <i>(itemize)</i> :	
			7. Add Lines 5 and 6		
			8. Balance at End of Year <i>(Line 4 minus Line 7)</i>		

Complete this schedule if you have income classified as nonapportionable income. See the instructions for an explanation of what is apportionable income and what is nonapportionable income.

Ⓝ Nonapportionable Income

(A) Nonapportionable Income	(B) Gross Amounts	(C) Related Expenses*	(D) Net Amounts <i>(Column B minus Column C)</i>	(E) Net Amounts Allocated Directly to N.C.

1. **Nonapportionable Income** *(Enter the total of Column D here and on Schedule B, Line 15)* .00

2. **Nonapportionable Income Allocated to N.C.** *(Enter the total of Column E here and on Schedule B, Line 19)* .00

**Explanation** of why income listed in chart is nonapportionable income rather than apportionable income:

*(Attach additional sheets if necessary)*

\* For an acceptable means of computing related expenses, see 17 N.C.A.C. 5C .0304.

Ⓞ Computation of Apportionment Factor

**Part 1. Domestic and Other Corporations Not Apportioning Franchise or Income Outside N.C.** 100.0000 %  
 Enter 100% on Schedule B, Line 17 and Schedule C, Line 8

**Part 2. Corporations Apportioning Franchise or Income to N.C. and to Other States** Example: 99.9999 %  
*Note: Apportionment factors must be calculated 4 places to the right of the decimal.*

	1. Within North Carolina	2. Total Everywhere
1. Gross Receipts Subject to Apportionment		
2. Gross Rents Subject to Apportionment		
3. Gross Royalties Subject to Apportionment		
4. Dividends Subject to Apportionment		
5. Interest Subject to Apportionment		
6. Other Apportionable Income		
7. Share of Receipts from Noncorporate Entities Subject to Apportionment		
<b>8. Total</b> <i>(Add Lines 1 through 7 for each column)</i>		

**9. N.C. Apportionment Factor**   %  
*(Divide Line 8 Column 1 by Line 8 Column 2; enter the factor here, on Schedule B, Line 17, and Schedule C, Line 8. See instructions and G.S. 105-130.4 for more information.)*

**Part 3. Special Apportionment**   %  
 Special apportionment formulas apply to certain types of corporations such as air transportation companies, water transportation companies, pipeline companies, and railroad companies. If you use a special apportionment formula, enter the computed apportionment factor here, on Schedule B, Line 17, and on Schedule C, Line 8. *(See instructions and G.S. 105 -130.4 for more information.)*