



<b>Estate Information:</b> Date of Decedent's Death _____  If no return filed last year, reason why _____ _____ _____	<b>Trust Information:</b> Date Trust Created _____ Name and Address of Grantor _____ _____ _____ If no return filed last year, reason why _____ _____
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**Schedule A. North Carolina Fiduciary Adjustments (See instructions)**

<b>Additions to Income</b>	1. Interest income from obligations of states other than North Carolina <span style="float: right;">1. <input style="width: 100px;" type="text"/> .00</span> 2. State, local, or foreign income taxes deducted on the federal return <span style="float: right;">2. <input style="width: 100px;" type="text"/> .00</span> 3. Adjustment for bonus depreciation (See instructions) <span style="float: right;">3. <input style="width: 100px;" type="text"/> .00</span> 4. Other additions to income (See instructions) <span style="float: right;">4. <input style="width: 100px;" type="text"/> .00</span> 5. Total additions to income (Add Lines 1 - 4) <i>Apportion the additions on Line 5 between the beneficiaries and the fiduciary on Schedule B, Line 4 below</i> <span style="float: right;">5. <input style="width: 100px;" type="text"/> .00</span>												
<b>Deductions from Income</b>	6. Interest income from obligations of the United States or United States' possessions <span style="float: right;">6. <input style="width: 100px;" type="text"/> .00</span> 7. Taxable portion of Social Security and Railroad Retirement benefits <span style="float: right;">7. <input style="width: 100px;" type="text"/> .00</span> 8. Retirement benefits received from vested N. C. State government, N. C. local government, or federal government retirees (Bailey Settlement - Important: See Instructions) <span style="float: right;">8. <input style="width: 100px;" type="text"/> .00</span> 9. State, local, or foreign income tax refunds reported as income on federal return <span style="float: right;">9. <input style="width: 100px;" type="text"/> .00</span> 10. Adjustment for bonus depreciation added back in 2014, 2015, 2016, 2017, and 2018 <table style="width:100%; border: none;"> <tr> <td style="width:15%;"><b>10a.</b> 2014</td> <td style="width:15%;"><b>10b.</b> 2015</td> <td style="width:15%;"><b>10c.</b> 2016</td> <td style="width:15%;"><b>10d.</b> 2017</td> <td style="width:15%;"><b>10e.</b> 2018</td> <td style="width:10%;"></td> </tr> <tr> <td><input style="width: 100px;" type="text"/> .00</td> <td><input style="width: 100px;" type="text"/> .00</td> <td><input style="width: 100px;" type="text"/> .00</td> <td><input style="width: 100px;" type="text"/> .00</td> <td><input style="width: 100px;" type="text"/> .00</td> <td></td> </tr> </table> <i>(Add Lines 10a, 10b, 10c, 10d, and 10e, and enter total on Line 10f)</i> <span style="float: right;">10f. <input style="width: 100px;" type="text"/> .00</span> 11. Other deductions from income (See instructions) <span style="float: right;">11. <input style="width: 100px;" type="text"/> .00</span> 12. Total deductions from income (Add Lines 6 - 9, 10f, and 11) <i>Apportion the deductions on Line 12 between the beneficiaries and the fiduciary on Schedule B, Line 5 below</i> <span style="float: right;">12. <input style="width: 100px;" type="text"/> .00</span>	<b>10a.</b> 2014	<b>10b.</b> 2015	<b>10c.</b> 2016	<b>10d.</b> 2017	<b>10e.</b> 2018		<input style="width: 100px;" type="text"/> .00	<input style="width: 100px;" type="text"/> .00	<input style="width: 100px;" type="text"/> .00	<input style="width: 100px;" type="text"/> .00	<input style="width: 100px;" type="text"/> .00	
<b>10a.</b> 2014	<b>10b.</b> 2015	<b>10c.</b> 2016	<b>10d.</b> 2017	<b>10e.</b> 2018									
<input style="width: 100px;" type="text"/> .00	<input style="width: 100px;" type="text"/> .00	<input style="width: 100px;" type="text"/> .00	<input style="width: 100px;" type="text"/> .00	<input style="width: 100px;" type="text"/> .00									

**Schedule B. Apportionment of Income and Adjustments (See instructions)** **Important:** If more than three beneficiaries, include separate schedule for additional beneficiaries.

<i>Attach other pages if needed.</i>	<b>Fiduciary</b>	<b>Beneficiary 1</b>	<b>Beneficiary 2</b>	<b>Beneficiary 3</b>
1. Identifying Number	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
2. Name	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
3. Net N.C. Source Income	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
4. Additions	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
5. Deductions	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

**Important:** The fiduciary must provide each beneficiary an NC K-1 for Form D-407 or other information necessary for the beneficiary to prepare the appropriate North Carolina Income Tax Return.

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.

Contact Phone Number \_\_\_\_\_  
(Include area code)

Signature of Fiduciary Representing Estate or Trust \_\_\_\_\_ Date \_\_\_\_\_

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

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

**PAID PREPARER USE ONLY**

Signature of Preparer Other Than Fiduciary \_\_\_\_\_ Date \_\_\_\_\_

Preparer's Contact Phone Number \_\_\_\_\_  
(Include area code)

Address \_\_\_\_\_

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