NCDOR	2019 D-407				DOR	
Web 7-19	Estates and Tru	usts Inc	ome Ta	ax Retu		
For calendar year 2019	, or fiscal year beginning (MM-DD)	- 1 9	9 and ending		-	Fill in all applicable circles:
Name of Estate or Trust (Legal I				/		<ul> <li>Initial Return</li> <li>Amended Return</li> </ul>
						Final Return
Name of Fiduciary (Circle one	): O Administrator O Executo	r Other		Federal Employ	ver ID Number	<ul> <li>Entity has Nonresident Beneficiaries</li> </ul>
Address	<u> </u>			Apartmen	t Number	Qualified Funeral Trust
						If estate return, was
City		State Z	Zip Code	_	County (Enter first five letter	s) final distribution of assets made during the tax year?
N.C. Education Endowr	ment Fund: You may contribute to t	the N.C. Education	on Endowment	Fund by makin	g a contribution or de	
your overpayment to the I To designate your overpa	Fund. To make a contribution, enclose ayment to the Fund, enter the amount	e Form NC-EDU t of your designat	and your payme tion on Line 19 I	ent of \$ below. See inst	tructions for informatic	on about the Fund.
Federal Extension	Was the entity granted an automa	tic extension to f	ile its 2019 fede	eral income tax	return (Form 1041)?	🔵 Yes 🔵 No
1. Federal taxable in	come (See instructions)	or	f amount 1 Line 1, 3,	▶ 1. 0	)	
2. Additions to inco Column, Line 4)	me (From Schedule B, Fiduciary	y i	, 6, or 7 is negative Il in circle.	▶ 2.		
3. Add Lines 1 and 2			Example:	3. 🔿	)	
4. Deductions from in Column, Line 5)	ncome (From Schedule B, Fiducia	ary	•	▶ 4.		
5. Line 3 minus Line	4	=		5. 🔿	)	
6. Income not taxable	e to North Carolina (See instruc	tions)		▶ 6. 0	)	
7. North Carolina ta	xable income (Line 5 minus Lin	e 6)		7. 0	)	
8. Tax - To calculate t taxable income on	the tax, multiply North Carolina Line 7 by 5.25% (0.0525)		17	▶ 8.		
9. Tax credits (From I	Form D-407TC, Line 13)		2010	► 9.	·	
<b>10.</b> Tax paid with exter	ision		06021	<b>▶</b> 10.	· · · · ·	
<b>11.</b> Other prepayments				► 11.	<u> </u>	
12. Tax paid by partne North Carolina tax (See instructions)	rships or S Corporations and withheld reported on Form 1099	R		► 12.		
	d payments (Add Lines 9 - 12)			13.	· · · · · · · · · · · · · · · · · · ·	
14. Tax Due - If Line 8 subtract and enter	is more than Line 13, the result			<b>▶</b> 14.	* *	<b>_</b> 00
15. 15a. Penalties	15b. Interest		(Add Lines 15a	a and		
► <u> </u>			15b and enter total on Line			
<b>16.</b> Add Lines 14 and	15c and enter the total - <b>Pay thi</b> s	s Amount		16.	5	
17. If Line 8 is less that	n Line 13, subtract and enter the	Overpayment		17.		
<b>18.</b> Contribution to the	N. C. Nongame and Endanger	ed Wildlife Fur	nd	► 18.	. <del>.</del> <del>.</del> .	
<b>19.</b> Contribution of ove	rpayment to the N. C. Education	n Endowment	Fund	► 19.		
<b>20.</b> Add Lines 18 and 1	9			20.		
21. Subtract Line 20 fro	om Line 17 and enter the <b>Amour</b>	nt to be Refund	ded	▶ 21.	· · · ·	

Page 2 Legal Name (First 10 Characters) D-407						Federal Employer ID Number				
Web 7-19	b									
_	state Information	:			ormation:					
Date of Decedent's Death					Date Trust Created Name and Address					
lfn	no return filed last year			of Grantor						
	ason why	·		-						
					If no return filed last year, reason why					
					.,					
Sch	hedule A. North Ca	arolina Fiduciary Adjust	t <b>ments</b> (See instr	ructions)						
'ne	1. Interest income fror	n obligations of states other	than North Carolina			1.		00		
ncor	2. State, local, or forei	ign income taxes deducted o	on the federal return			2.		00		
s to l	3. Adjustment for bonu	3.		00.						
Additions to Income	4. Other additions to in	ncome (See instructions)				4.		00.		
Add	5. Total additions to in	come (Add Lines 1 - 4) ons on Line 5 between the be	neficiaries and the fic	luciary on Sched	ule R. Line 4 helow	5.		00		
+	Apportion the addite			uciary on conca						
	6. Interest income fror	n obligations of the United S	itates or United State	es' possessions		6.		00		
7	7. Taxable portion of S	Social Security and Railroad	Retirement benefits			7.		.00		
e a	<ol> <li>Retirement benefits or federal governme</li> </ol>	8.		00						
el s	9. State, local, or forei	9.		00						
	0. Adjustment for bon	us depreciation added back	in 2014, 2015, 2016	, 2017, and 201	8	I		_ ∎00		
ons	<b>10a.</b> 2014	<b>10b.</b> 2015	<b>10c</b> . 2016	10d.	2017	<b>10e.</b> 2018				
Deductions from Income		00	_00	00		00	00			
De	(Add Lines 10a, 10	(Add Lines 10a, 10b, 10c, 10d, and 10e, and enter total on Line 10f)						00		
11	<ol> <li>Other deductions from the second secon</li></ol>	om income (See instructions	;)			11.		00		
12	<ol> <li>Total deductions fro Apportion the deduct</li> </ol>	12.		] .00						
Sch	hedule B. Apportion	nment of Income and Adj	ustments (See ins	tructions) Im		an three benefic for additional be	ciaries, include separ			
Attac	ch other pages if needed.	Fiduciary	Benefic	iarv 1	Beneficiary		Beneficiary 3	3		
1.	Identifying Number				-		<b>_</b>			
	Name									
	Net N.C. Source Income									
	Additions									
<b>5.</b> [	Deductions		1							
Im	portant: The fiducia the approp	ary must provide each benef priate North Carolina Income	iciary an NC K-1 for Tax Return.	Form D-407 or o	other information ne	cessary for the	e beneficiary to prep	pare		
l dec		amined this return and accompanying		, and to the best of m	y knowledge and belief, th	ney are true, correc	t, and complete.			
					ct Phone Number clude area code)	-	-			
Sign	ature of Fiduciary Represer	•	Date							
		you authorize the North Carol	•			hments with th	e paid preparer below	<b>w</b> .		
ĸ		other than fiduciary, this certification	is based on all information	of which the preparer	has any knowledge.					
PAID PREPARER	Signature of Preparer	reparer Other Than Fiduciary Date Pre			t Phone Number	_	_			
PRE				(In	clude area code)					
	Address	MAIL TO: NC Departr	nent of Revenue	P.O. Box 2500	0 Raleigh NC 2	7640-0640				