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Do not handwrite any information



Do not use commas when entering amounts



Do not use brackets for negative numbers

Use a minus sign to show the amount is negative



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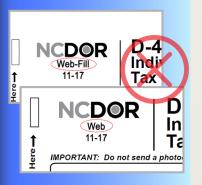


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Do not submit photocopies of returns

Submit originals only





D-407TC 2017 Estates and Trusts Tax Credit Summary

File this form with Form D-407, Estates and Trusts Income Tax Return, if any tax credits are to be allocated to the fiduciary. Do not attach the form if no

tax est	credits are claimed. See Form D-407A , Instructions for Estates and Trusts Income Tax Return , for addates and trusts. Enter on the lines below only the portion of any tax credit allocated to the fiduciary.	litional information on tax credits allowed to
Le	gal Name (First 10 Characters)	Federal Employer ID Number
Pa	rt 1. Tax Credits Not Subject to 50% of Tax Limit (Attach schedule for each credit	it)
1.	Credit for Tax Paid to Another State or Country (From Part 5, Section B, Line 7)	. 1.
2.	Rehabilitating an Income-Producing Historic Structure (Article 3D) (Enter amount of installment)	. 2.
3.	Rehabilitating a Nonincome-Producing Historic Structure (Article 3D) (Enter amount of installment)	. 3.
4.	Rehabilitating an Income-Producing Historic Mill Facility (Article 3H) (Enter amount of installment)	4.
5.	Rehabilitating a Nonincome-Producing Historic Mill Facility (Article 3H) (Enter amount of installment)	5.
6.	Rehabilitating an Income-Producing Historic Structure (Article 3L) (From Form NC-Rehab, Part 4, Line 19)	6.
7.	Rehabilitating a Nonincome-Producing Historic Structure (Article 3L) (From Form NC-Rehab, Part 4, Line 22)	7.
8.	Tax Credits Carried Over From Previous Year, if any. Do Not Include Any Carryover of Tax Credits Claimed on Form NC-478 or Form NC-Rehab	8.
9.	Total Tax Credits (Add Lines 1 through 8)	9.
10.	Amount of Income Tax Due (From Form D-407, Page 1, Line 8)	10.
11.	Enter the lesser of Line 9 or Line 10	11.
Pa	rt 2. Tax Credits Subject to 50% of Tax Limit	
12.	Total Tax Credits Subject to 50% Limit Taken in Current Period (From Form NC-478, Part 3, Line 43)	· 12.
Pa	rt 3. Total Credits Applied to Current Year	
13.	Add Lines 11 and 12 (Enter the amount here and on Form D-407, Line 9)	13.
Pa	rt 4. Qualified Rehabilitation Expenditures and Expenses	
	r Lines 14 and 15, enter the amount of qualified rehabilitation expenditures or rehabilitation expenses only year 2017 is the first year the credit is taken.)	if incurred prior to January 1, 2015, AND
14.	Enter the amount of qualified rehabilitation expenditures with respect to the credit for rehabilitating an income-producing historic structure	
15.	Enter the amount of rehabilitation expenses with respect to the credit for rehabilitating a nonincome-producing historic structure	i.
	r Lines 16 and 17, enter the amount of qualified rehabilitation expenditures or rehabilitation expenses only i s submitted to the State Historic Preservation Office prior to January 1, 2015, AND tax year 2017 is the fi	
16.	Enter the amount of qualified rehabilitation expenditures with respect to the credit for rehabilitating an income-producing historic mill facility	i.
17.	Enter the amount of rehabilitation expenses with respect to the credit for rehabilitating a nonincome-producing historic mill facility	

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Web-Fill				
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Legal Name (First 10 Characters)

Federal Employer ID Number

Part 5. Tax Paid to Another State or Country

art 3. Tax Faid to Another State or Country								
A. Apportionment of Income and Tax Paid to Another State or Country (See instructions)								
Attach other pages if needed.	Fiduciary	Beneficiary 1	Beneficiary 2	Beneficiary 3				
1. Identifying Number								
2. Name								
Share of Gross Income on which Tax was Paid to Another State or Country								
Share of Tax Paid to Another State or Country								

nputation of Tax Credit for Tax Paid to Another State or Cou	ntry	
iary's share of gross income taxed in another state or country (From Fiduciary Column, Line 3 above) 1.	
ciary's share of total gross income (See instructions)	2.	
entage of income taxed in another state or country (Divide Lin	e 1 by Line 2) 3.	%
unt of North Carolina tax (From Form D-407, Page 1, Line 8)	4.	
outed tax credit (Mulitply Line 3 by Line 4)	5.	
ciary's share of tax paid to another state or country (From Fide copy of return and proof of payment)	uciary Column, Line 4 above. 6.	
the lesser of Line 5 or Line 6 here and on Part 1, Line 1	7.	
copy of return and proof of payment)		