Do Not Include This Page



## Instructions For Handwritten Forms

## Guidelines



Do not use red ink. Use blue or black ink.



Do not use dollar signs, commas, or other punctuation marks.



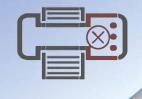
Printing



Set page scaling to "none." The Auto-Rotate and Center checkbox should be unchecked.

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Do not select "print on both sides of paper."



Before Sending



Do not submit photocopies of returns. Submit originals only.





Ν	CDOR   2020 D-407			
	Web 6-20 Estates and Trusts Income Tax	x Retur	DOR Use Only	
	For calendar year <b>2020</b> , or fiscal year beginning (MM-DD) = 20 and ending (MM-DD-YY)			Fill in all applicable circles:
Nar	ne of Estate or Trust (Legal Name) (USE CAPITAL LETTERS FOR NAME AND ADDRESS)			<ul> <li>Amended Return</li> <li>Final Return</li> </ul>
Na	me of Fiduciary ( <i>Circle one</i> ): Administrator Executor Other	Federal Employer ID	) Number	<ul> <li>Entity has Nonresident Beneficiaries</li> </ul>
Ado	iress	Apartment Nur	nber	O Qualified Funeral Trust
City	State Zip Code		County (Enter first five letters)	If estate return, was final distribution of assets made during the tax year?
		·····		O Yes O No
yo	C. Education Endowment Fund: You may contribute to the N.C. Education Endowment Fu ur overpayment to the Fund. To make a contribution, enclose Form NC-EDU and your payment designate your overpayment to the Fund, enter the amount of your designation on Line 19 be	of\$		
Fe	ederal Extension Was the entity granted an automatic extension to file its 2020 federa	al income tax ret	urn (Form 1041)?	🔵 Yes 🔵 No
1.	Federal taxable income (See instructions)	▶ 1. 0		
2.	Additions to income (From Schedule B, Fiduciary Column, Line 4)5, 6, or 7 is negative fill in circle.	▶ 2.		
3.	Add Lines 1 and 2 Example:	3. 🔘	<del></del>	
4.	Deductions from income (From Schedule B, Fiduciary Column, Line 5)	▶ 4.		
5.	Line 3 minus Line 4	5. O	<del></del>	
6.	Income not taxable to North Carolina (See instructions)	▶ 6. ○	<del></del>	
7.	North Carolina taxable income (Line 5 minus Line 6)	7. O		
8.	Tax - To calculate the tax, multiply North Carolina         taxable income on Line 7 by 5.25% (0.0525)	▶ 8.		
9.	Tax credits (From Form D-407TC, Line 13)	▶ 9.		
10.	Tax paid with extension	▶ 10.		
11.	Other prepayments of tax	▶ 11.		
12.	Tax paid by partnerships or S Corporations and       Image: Corporation of the second se	▶ 12.		.00
13.	Total tax credits and payments (Add Lines 9 - 12)	13.	, ,	
14.	Tax Due - If Line 8 is more than Line 13, subtract and enter the result	▶ 14.	<del></del>	00
15.	15a. Penalties 15b. Interest (Add Lines 15a a	nd _	<del>, , .</del>	
	► •00 ► •00 15b and enter the total on Line 15c	ne 15c.	<del>, , .</del>	
16.	Add Lines 14 and 15c and enter the total - Pay this Amount	16. <b>\$</b> ,	<del></del>	
17.	If Line 8 is less than Line 13, subtract and enter the <b>Overpayment</b>	17.		
18.	Contribution to the N. C. Nongame and Endangered Wildlife Fund	▶ 18.	<del></del>	
19.	Contribution of overpayment to the N. C. Education Endowment Fund	▶ 19.	<del></del>	
20.	Add Lines 18 and 19	20.	<del></del>	
21.	Subtract Line 20 from Line 17 and enter the Amount to be Refunded	▶ 21.		

Page 2 Legal Name (First 10 Characters) D-407					Federal Employer ID Number					
W	407 /eb -20									
È	-	tate Information				formation:				
Date of Decedent's Death						Date Trust Created				
1	f no	return filed last year			of Grantor					
		on why			-					
					If no return filed last year, reason why					
_										
S	che	edule A. North Ca	arolina Fiduciary Adjust	t <b>ments</b> (See instru	uctions)					
me	1.	Interest income fror	m obligations of states other	than North Carolina			1.		00	
Additions to Income	2.	2. State, local, or foreign income taxes deducted on the federal return				2.		00		
s to	3.	3. Adjustment for bonus depreciation (See instructions)					3.		00	
lition	4.	Other additions to in	ncome (See instructions)				4.		00	
Ado	5.	Total additions to in	icome (Add Lines 1 - 4) ons on Line 5 between the bei	neficiaries and the fid	uciary on Sched	ule R I ine 4 below	5.		.00	
	6.	Interest income from	m obligations of the United S	tates or United State	s' possessions		6.		00	
	7.	7. Taxable portion of Social Security and Railroad Retirement benefits				7.		00		
a me	8.	<ol> <li>Retirement benefits received from vested N. C. State government, N. C. local government, or federal government retirees (<i>Bailey Settlement – Important: See Instructions</i>)</li> </ol>					8.		00	
Deductions from Income	9.	-	ign income tax refunds repor				9.		00.	
irom	10.		us depreciation added back			9			00	
onsf		<b>10a</b> . 2015	<b>10b.</b> 2016	<b>10c.</b> 2017	10d.	. 2018	<b>10e.</b> 2019			
Jucti			.00	_00	_00	0	0	.00		
Dec		(Add Lines 10a, 10l	b, 10c, 10d, and 10e, and en	ter total on Line 10f)	1		10f.		00	
	11.	11. Other deductions from income (See instructions)					11.		.00	
	12.		om income (Add Lines 6 - 9, tions on Line 12 between the b		duciary on Scheo	dule B, Line 5 below	12.		] .00	
s	che	edule B. Apportion	nment of Income and Adju	ustments (See inst	tructions) Im	portant: If more than				
		other pages if needed.	Fiduciary	Benefici			r additional be			
						Beneficiary		Beneficiary 3	<u> </u>	
		lentifying Number ame			-					
	. Ne	et N.C.			-					
1		ource Income dditions		■	-					
		eductions	[		-					
		ortant: The fiducia	ary must provide each benefi	L iciary an NC K-1 for I	Eorm D-407 or (	other information nec	essary for th	e beneficiary to prep	 bare	
_	•	the approp	oriate North Carolina Income	Tax Return.						
10	leclar	re and certify that I have exa	amined this return and accompanying	schedules and statements,		y knowledge and belief, the	y are true, correc	t, and complete.		
s	anati	ure of Fiduciary Represer	nting Estate or Trust	Date		clude area code)				
J	grice.		you authorize the North Caroli		venue to discuss	this return and attach	ments with th	e paid preparer below	<i>N</i> .	
			other than fiduciary, this certification i	is based on all information of	of which the preparer	has any knowledge.				
₽	PREPARER USE ONLY									
PA	NEP/	Signature of Preparer	Other Than Fiduciary	Date	Preparer's Contac (In	ct Phone Number clude area code)		=		
	ш -	Address								
i i			MAIL TO: NC Departn	nent of Revenue, H	P.O. Box 2500	0, Raleigh, NC 27	640-0640		1	