D-407 Web 11-07

2007 Estates and Trusts Income Tax Return North Carolina Department of Revenue

For calendar	year 2007, or fiscal year beginning (MM-DD)	<u>0</u> 7 and e	nding (MM-DD-YY) =	
Name of Estate or Tru	ist (Legal Name) (USE CAPITAL LETTERS FOR NAME AND ADDRES	SS)		Fill in all applicable circles:
	me of Fiduciary (Circle one): Administrator Executor Other		al Employer ID Number	Initial Return Amended Return Final Return Entity has Nonresident
Address			County (Enter first five letters)	Beneficiaries If estate return, was
City	st	ate Zip Code		final distribution o assets made during the tax year?
	If amount on Line 1, 3, 5, 6, or 7 is negative	ve fill in circle. Example:	Enter Whole U.S. D	O Yes O No
	1. Federal taxable income (From Federal Form	<u> </u>		
	2. Additions to taxable income (From Schedule Column, Line 3)			
	3. Add Lines 1 and 2	3	3. 0	,
6	4. Deductions from taxable income (From Schede Column, Line 4)	ule B, Fiduciary 🕨 👃 4		00
712010600	5. Line 3 minus Line 4	5	5. 0	
	6. Did the entity receive for the benefit of a nonreside intangible income from any source or business sources outside of North Carolina? If so, enter Line 5 attributable to this income; otherwise, en	s income from the portion of	5. 0	.00
	7. North Carolina taxable income (Line 5 minus	S Line 6) 7	· O	.00
	8. Tax due (Use the Tax Rate Schedule on Page 2 calculate the tax due)	to 8	3.	
	9. Tax credits (From Form D-407TC)	▶ 9).	
	10. Tax paid with extension	▶ 10		.00
11. Other prep	ayments of tax	▶ 11		
12. Tax paid by reported of		. 00		
13. Total tax credits and payments (Add Lines 9 through 12)			i.	
14. If Line 8 is more than Line 13, subtract and enter the result				
15. Penalties and interest (See instructions)		15	5.	00
16. Add Lines 14 and 15 and enter the total - Pay this Amount		16	\$	
17. If Line 8 is	less than Line 13, subtract and enter the Amount to	be Refunded ▶ 17		00
I certify that, to	the best of my knowledge, this return is accurate and complete.	If prepared by a person other t information of which the prepa	han fiduciary, this certification is b rer has any knowledge.	ased on all
Signature of Fig	luciary Representing Estate or Trust Date	Signature of Preparer Other Th	nan Fiduciary	Date
		Address		
>				
Davtime T	elephone Number (Include area code.)	Preparer's Daytime Teleph	one Number (Include area code.)	

D-407 Web 11-07	me (First 10 Characters)			Federal Empl	over ID Number
Estate Information Date of Decedent's Decedent's Decedent's Decedent's Decedent's Decedent's Decedent's Decedent's Decedent's Decedent De	eath	Date 1	Information: Trust Created ————————————————————————————————————		
		If no re reason	eturn filed last year, n why		
Schedule A. North	Carolina Fiduciary Adjustr	ments (See instructions.)			
	ral Taxable Income	,			
1. Interest income from	1.				
2. State, local, or foreign income taxes deducted on the federal return					.00
3. Other additions to federal taxable income (See instructions)					.00
4. Total additions to f Apportion the addit	ederal taxable income (Add tions on Line 4 between the b	lines 1 through 3) eneficiaries and the fiducia	ry on Schedule B, Line	3 below 4.	.00
Deductions from	Federal Taxable Income				
5. Interest income fro	m obligations of the United	States or United States' p	ossessions	5.	.00
6. Taxable portion of	Social Security and Railroad	d Retirement benefits		6.	
	ocal government retirement 000 - See instructions)	benefits exclusion 7.	.00		
8. Private retirement	benefits exclusion (Not to ex	xceed \$2,000) 8.	00		
9. Add Lines 7 and 8		9.	■00		
10. Enter the amount	from Line 9 or \$4,000, which	never is less		10.	
11. State, local, or foreign income tax refunds reported as income on federal return					
12. Adjustment for additional first-year depreciation added back in 2002, 2003, and 2004					
13. Other deductions t	from federal taxable income	(See instructions)		13.	
14. Total deductions fr Apportion the deduc	om federal taxable income (tions on Line 14 between the b	Add Lines 5, 6, 10, 11, 12 peneficiaries and the fiducial	2, and 13) ry on Schedule B, Line 4	below 14.	
Schedule B. Allocat	ion of Adjustments (See in	structions.) If more than three	Impor e beneficiaries, include sep	tant arate schedule	e for additional beneficiaries.
Attach other pages if needed.	Fiduciary	Beneficiary 1	Beneficiary	2	Beneficiary 3
1. Identifying Number					
2. Name					
3. Additions					
4. Deductions					
Important: The fidu benefici	iciary must provide each bei ary to prepare the appropria	neficiary an NC K-1 for Fo te North Carolina Income	orm D-407 or other info Tax Return.	rmation nec	essary for the
		Tax Rate Sched	lule		
If the amount <u>is n</u>	on Page 1, Line 7 ore than	But not over	The tax	<u>is</u>	
9	\$0 612,750 60,000 20,000	\$12,750 \$60,000 \$120,000	\$765 + 7' \$4,072.50		ine 7 over \$12,750 amount over \$60,000 ount over \$120,000