2004 Estates and Trusts Income Tax Return North Carolina Department of Revenue

For calendar yea	ar 2004, or other tax year beginning (MM-DD-YY)	and ending (MM-DD-YY)	
Name of Estate or Trust (L Name of Fiduciary (Cir		Federal Employer ID Number	Fill in all applicable circles: Initial Return Amended Return Final Return Entity has
Address		County (Enter first five letters)	Nonresident Beneficiaries
City		State Zip Code	If estate return, was final distribution of assets made during the tax year?
		Enter Whole U.S	. Dollars Only
	1. Federal taxable income (From Federal Form 1041,	, Line 22) 🕨 1.	
	2. Additions to taxable income (From Schedule B, Fide Column, Line 3)	uciary > 2.	
	3. Add Lines 1 and 2	3.	
71201	4. Deductions from taxable income (From Schedule E Column, Line 4)	3, Fiduciary 🕨 4.	
104006	5. Line 3 minus Line 4	5.	
	6. Did the entity receive for the benefit of a nonresider intangible income from any source or business i sources outside of North Carolina? If so, enter th Line 5 attributable to this income; otherwise, enter	ncome from 6 .	
	7. North Carolina taxable income (Line 5 minus Line 6	6) 7.	
	8. Tax due (Use the Tax Rate Schedule on Page 2 to calculate the tax due)	o 8.	
	9. Tax credits (From Form D-407TC)	▶ 9.	
10. Tax paid wit	th extension	▶ 10.	
11. Other prepa	yments of tax	▶ 11.	
12. Tax paid by	partnerships or S Corporations (See instructions)	▶ 12.	
13. Total tax cre	edits and payments (Add Lines 9 through 12)	13.	
14. If Line 8 is r	nore than Line 13, subtract and enter the result	▶ 14.	
15. Penalties ar	nd interest (See instructions)	15.	
16. Add Lines 1	4 and 15 and enter the total - Pay this Amount	16. \$	
17. If Line 8 is le	ess than Line 13, subtract and enter the Amount to be	e Refunded 🕨 17.	
I certify that, to the	e best of my knowledge, this return is accurate and complete.	prepared by a person other than fiduciary, this certificat formation of which the preparer has any knowledge.	ion is based on all
Signature of Fiducia	ary Representing Estate or Trust Date S	ignature of Preparer Other Than Fiduciary	Date
	Ā	uddress	

Preparer's Daytime Telephone Number (Include area code.)

Legal Name (First 10 Characters)

9-	-04				
_	Estate Information:				
Date of Decedent's Death		Date Trust Created Name and Address of Grantor			
If no return filed last year, reason why					
		lf no return filed last year, reason why			
Sch	nedule A. North Carolina Fiduciary Adjustments (See instruct	ctions.)			
	Additions to Federal Taxable Income				
1.	Interest income from obligations of states other than North C	carolina	1.		
2.	State, local, or foreign income taxes deducted on the federal in	e, local, or foreign income taxes deducted on the federal return 2.			
3.	Adjustment for additional first-year depreciation 3.		3.		
4.	4. Other additions to federal taxable income (See instructions) 4.		4.		
5.	Total additions to federal taxable income (Add lines 1 through Apportion the additions on Line 5 between the beneficiaries Schedule B, Line 3 below	n 4) and the fiduciary on	5.		
	Deductions from Federal Taxable Income				
6.	Interest income from obligations of the United States or United	States' possessions	6.		
7.	Taxable portion of Social Security and Railroad Retirement be	enefits	7.		
8.	Federal, state, or local government retirement benefits exclusion (Not to exceed \$4,000 - See instructions)	8.			
9.	Private retirement benefits exclusion (Not to exceed \$2,000)	9.			
10.	. Add Lines 8 and 9	10.			

11. Enter the amount from Line 10 or \$4,000, whichever is less	11.
12. State, local, or foreign income tax refunds reported as income on federal return	12.
13. Other deductions from federal taxable income (See instructions)	13.
14. Total deductions from federal taxable income (Add Lines 6, 7, 11, 12, and 13) Apportion the deductions on Line 14 between the beneficiaries and the fiduciary on Schedule B, Line 4 below	14.

Schedule B. Allocation of Adjustments (See instr	uctions.) If more than three ber	Important neficiaries, include separate sche	edule for additional beneficiaries.				
Attach other pages Fiduciary	Beneficiary 1	Beneficiary 2	Beneficiary 3				
1. Identifying Number							
2. Name							
3. Additions							
4. Deductions							
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.							
Tax Rate Schedule							
If the amount on Page 1, Line 7 <u>is more than</u> \$0	But not over \$12,750	The tax is	Line 7				

\$60,000 \$120,000

6% of the amount on Line 7 \$765 + 7% of amount over \$12,750 \$4,072.50 + 7.75% of amount over \$60,000 \$8,722.50 + 8.25% of amount over \$120,000