

D-407 (SD)

2011 Estates and Trusts Income Tax Return

North Carolina Department of Revenue

11-10-11

For calendar year 2011 or [] fiscal year beginning 12 45 11 and ending 12 45 78

ABCDEFGHIJKLMN... 12345

Federal Employer ID Number: 123456789

[X] Administrator [] Executor [] Other

Filing Information:

[X] Initial Return [] Amended Return [X] Final Return [] Entity has Nonresident Beneficiaries [] Qualified Funeral Trust

Estate Information:

Date of Decedent's Death 12 45 78 [X] Check box if final distribution of assets made during the tax year. If no return filed last year, reason why ABCDEFGH ABCDEFGHIJKLMNOPQRSTUVWXYZABC

Trust Information:

Date Trust Created 12 45 78 If no return filed last year, reason why ABCDEFGH ABCDEFGHIJKLMNOPQRSTUVWXYZABC

Name and Address of Grantor ABCDEFGHIJKLMNOPQRSTUVWXYZABCDEF... ABCDEFGHIJKLMNOPQRSTUVWXYZABCD... ABCDEFGHIJKLMNOPQR AB 12345 ABCDEFGHIJKLMN

Enter the amount of bonus depreciation from Schedule NC K-1, Line 2a for the fiduciary and all nonresident beneficiaries 1234567

ABCD ABCD 12345 IR A AR A FR A NRB A QFT A

ABCDEFGHIJKLMN... 123456789

ABCDEFGHIJKLMN... 12345

ABCDEFGHIJKLMN... 12345

ABCDEFGHIJKLMN... AB 12345-1234

BD 1234567 10 1234567890 16B 1234567890

01 -1234567890 11 1234567890 17 1234567890

02 1234567890 12 1234567890 18 1234567890

04 1234567890 13 1234567890 TN 1234567890

06 -1234567890 15 1234567890 PN 1234567890

09 1234567890 16A 1234567890



Sign Return Below [] Refund Due 1234567890 [] Payment Due 1234567890

I certify that, to the best of my knowledge, this return is accurate and complete. If prepared by a person other than the fiduciary, this certification is based on all information of which the preparer has any knowledge.

Signature of Fiduciary Representing Estate or Trust Date

Signature of Preparer other than Fiduciary Date

()

()

Telephone Number (Area code required)

Address ()

Preparer's Telephone Number (Area code required)

MAIL TO: North Carolina Department of Revenue, P.O. Box 25000, Raleigh, North Carolina 27640-0645

D-407 2011 Page 2 (SD)

Last Name (First 10 Characters) **ABCDEFGHIJ** Federal Employer ID Number **123456789**

Computation of Income Tax Due or Refund

1. Federal taxable income	1.	-1234567890
2. Additions to taxable income	2.	1234567890
3. Add Lines 1 and 2	3.	-1234567890
4. Deductions from taxable income	4.	1234567890
5. Line 3 minus Line 4	5.	-1234567890
6. Did the entity receive for the benefit of a nonresident beneficiary intangible income from any source or business income from sources outside of N.C.? If so, enter the portion of Line 5 attributable to this income; otherwise, enter zero	6.	-1234567890
7. N.C. taxable income	7.	-1234567890
8. Tax	8.	1234567890
9. Tax credits	9.	1234567890
10. Tax paid with extension	10.	1234567890
11. Other prepayments of tax	11.	1234567890
12. Tax paid by partnerships or S Corporations and North Carolina tax withheld reported on Form 1099R	12.	1234567890
13. Tax Credit for Small Businesses That Pay N.C. Unemployment Insurance	13.	1234567890
14. Total tax credits and payments	14.	1234567890
15. Tax Due - If Line 8 is more than Line 14, subtract and enter the result	15.	1234567890
16. a. Penalties	16a.	1234567890
b. Interest	16b.	1234567890
c. Add Lines 16a and 16b and enter the total on Line 16c	16c.	1234567890
17. Add Lines 15 and 16c and enter the total - Pay this Amount	17.	1234567890
18. If Line 8 is less than Line 14, subtract and enter the Amount to be Refunded	18.	1234567890

Schedule A. North Carolina Fiduciary Adjustments

Additions	1. Interest income from obligations of states other than North Carolina	1.	1234567890
	2. State, local, or foreign income taxes deducted on the federal return	2.	1234567890
	3. Adjustment for bonus depreciation	3.	1234567890
	4. Other additions to federal taxable income	4.	1234567890
	5. Total additions to federal taxable income - Add Lines 1 through 4	5.	1234567890
Deductions	6. Interest income from obligations of the United States or United States' possessions	6.	1234567890
	7. Taxable portion of Social Security and Railroad Retirement benefits	7.	1234567890
	8. Federal, state, or local government retirement benefits exclusion	8.	1234567890
	9. Private retirement benefits exclusion	9.	1234567890
	10. Add Lines 8 and 9	10.	1234567890
	11. Enter the amount from Line 10 or \$4,000, whichever is less	11.	1234567890
	12. State, local, or foreign income tax refunds reported as income on federal return	12.	1234567890
	13. Adjustment for bonus depreciation added back in 2008, 2009, and 2010		
	a. 2008	13a.	1234567890
	b. 2009	13b.	1234567890
c. 2010	13c.	1234567890	
d. Add Lines 13a, 13b, and 13c and enter on Line 13d	13d.	1234567890	
14. Other deductions from federal taxable income	14.	1234567890	
15. Total deductions from federal taxable income - Add Lines 6, 7, 11, 12, 13d, and 14	15.	1234567890	

Schedule B. Allocation of Adjustments

	Fiduciary	Beneficiary 1	Beneficiary 2	Beneficiary 3
1. Identifying Number	123456789	123456789	123456789	123456789
2. Name	ABCDEFGHIJKLMNO ABCDEFGHIJKLMNO	ABCDEFGHIJKLMNO ABCDEFGHIJKLMNO	ABCDEFGHIJKLMNO ABCDEFGHIJKLMNO	ABCDEFGHIJKLMNO ABCDEFGHIJKLMNO
3. Additions	1234567890	1234567890	1234567890	1234567890
4. Deductions	1234567890	1234567890	1234567890	1234567890

Tax Rate Schedule

If the amount on	\$ 0	\$ 12,750	6% of the taxable income
Page 2, Line 7	\$ 12,750	But not \$ 60,000	The tax is \$ 765 + 7% of the amount over \$ 12,750
is more than	\$ 60,000	over -----	\$ 4,072.50 + 7.75% of the amount over \$ 60,000