

Started

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Do not handwrite any information



Do not use commas when entering amounts



99999.00

Do not use brackets for negative numbers

Use a minus sign to show the amount is negative



-99999.00

Use the print icon on the form to ensure you have completed all required fields



Before printing, select "actual size"

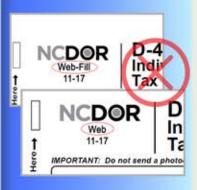


Do not print on both sides of the paper



## Mailing

Do not mix form types



Do not submit photocopies of returns

Submit originals only



## NCDOR | 2021 D-407 Web-Fill States and Trusts Income Tax Return

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-	Only		

9-21   <b>LSL</b> 0	ales and mu	313 IIIC		IAX NELUIII Only		
For calendar year <b>2021</b> , or fiscal year beginning (MM-DD-YY)			and ending (MM-DD-YY)		Fill in all applicable circles:  Initial Return	
Name of Estate or Trust (Legal Name) (US	SE CAPITAL LETTERS FOR NAME	AND ADDRESS)			O Amended Return O Final Return	
Name of Fiduciary (Circle one):	Administrator Executor	Other		Federal Employer ID Number	<ul> <li>Entity has         <ul> <li>Nonresident</li> <li>Beneficiaries</li> </ul> </li> <li>Qualified</li> <li>Funeral Trust</li> </ul>	
Address				Apartment Number	NC-PE attached	
City		State	Zip Code	County (Enter first five letters)	If estate return, was final distribution of assets made during the tax year?  Yes No	

То	designate your overpayment to the Fund, enter the amount of your desi	gnation on Line 19 below. (See instructions for information	on about the Fun	1d.)
Fe	deral Extension Was the entity granted an automatic extension to	file its 2021 federal income tax return, e.g., Form 1041?	◯ Yes ◯ No	
1.	Federal Taxable Income (See instructions)	<b>▶</b> 1.		
2.	Additions to Federal Taxable Income (From Schedule A, Fiduciary Column, Line 4)	<b>▶</b> 2.		
3.	Add Lines 1 and 2	3.		
4.	Deductions from Federal Taxable Income (From Schedule A, Fiduciary Column, Line 5)	<b>▶</b> 4.		
5.	Subtract Line 4 from Line 3	5.		
6.	Income Not Taxable to North Carolina (See instructions)	<b> ▶</b> 6.		
7.	North Carolina Taxable Income (Subtract Line 6 from Line 5)	7.		
8.	N.C. Income Tax (Multiply Line 7 by 5.25% (0.0525))	▶ 8.		
9.	Credits and Payments (When filing an amended return, see instructions)	<b></b>		
	a. Tax Credits (From Form D-407TC, Line 14)	2 <b>▶</b> 9a.		
	<b>b.</b> Tax Paid with Extension	● 9b.		
	c. Tax Paid by Partnerships or S Corporations	<b>≥</b> 9c.		
	d. North Carolina Tax Withheld Reported on Form 1099	▶ 9d.		
	e. Other Payments	<b>▶</b> 9e.		
10.	Add Lines 9a through 9e	10.		
11.	<b>Tax Due</b> (If Line 8 is more than Line 10, subtract Line 10 from Line 8 and enter the tax due here. Otherwise, subtract Line 8 from Line 10 and enter the overpayment on Line 14.)	<b>▶</b> 11.		ļ
12.	12a. Penalties 12b. Interest	(Add Lines 12a and 12b and enter the total on Line 12c)		
13.	Total Due (Add Lines 11 and 12c) Pay in U.S. Currency from You can pay online at <a href="https://www.ncdor.gov">www.ncdor.gov</a> .	a Domestic Bank. 13.		
14.	Overpayment	14.		
15.	Amount of Line 14 contributed to N.C. Nongame and Endanger	red Wildlife Fund ▶ 15.		
16.	Amount of Line 14 contributed to N.C. Education Endowment F	<b>Fund</b> ▶ 16.		
17.	Amount to be Refunded Subtract Lines 15 and 16 from Line 14	<b>▶</b> 17.		

9-21								
Esta	te Information:				Trust In	formation:		
Date o	te of Decedent's Death Date Trust Created							
Bato	, becouding beauti				Name and of Granto	d Address r		
If no re	turn filed last year,				or Granto	•		
reason	why							
					If no retur	n filed last year,		
					reason w			
Cabad	l. A . A	t of Income and Adim	. 4 4	- (Ol-t- F-	NO DE A	1.0. A delitions and Dead		De la Thursanda Frettie e Fetetale
								Pass-Through Entities, Estates, ibutions of income made during
	ble year. For more inform		ica beti	veen ine estate t	n trastana tr	ic beneficialies basea (	ni uic distiii	battoris of income made daming
	<u> </u>	Important: If	more th	on three honofic	viarios includ	le separate schedule fo		
l			Thore ii			-		
Attach ot	her pages if needed.	Fiduciary	┚┖	Beneficiar	/ 1	Beneficiary	<u>2</u>	Beneficiary 3
<b>1.</b> Ider	ntifying Number							
<b>2.</b> Nan	ne							
3. Net								
Sou	rce Income							
<b>4.</b> Add	itions							
5 Dec	luctions							
<b>0.</b> Boo	140110110							
Impor	tant: The fiduciary m	ust provide each benefic	iary a F	orm NC K-1 for	Form D-40	7 and any other inforr	nation nec	cessary for the beneficiary
	to prepare the a	ppropriate N.C. tax retu	rn.					
Evnlar	nation of changes for	or Amended Return	(Attach	additional aboata	if noonnond			
Expiai	iation of changes it	Amended Return	(Allacri	audilioriai srieels	ii riecessary)			
I declare a	and certify that I have examined	this return and accompanying s	chedules	and statements, and	to the best of n	ny knowledge and belief, they	y are true, con	rect, and complete.
						ct Phone Number		
Signature	of Fiduciary Representing E	etate or Truet		Data	(Ir	nclude area code)		
Gigilatufe		state or Trust uthorize the North Carolir	a Done	Date	ia to discuss	this raturn and attack	mante with	the naid proparer below
							ments with	the paid preparer below.
	If prepared by a person other t	han fiduciary, this certification is	based on	all information of wh	ich the prepare	r has any knowledge.		
PAID PREPARER USE ONLY								
E PA	Signature of Preparer Other	Than Fiduciary		Date Pre		ct Phone Number nclude area code)		
R S					(II	iolude alea code)		
	Address	VII TO: NC Departm			D 0500	00 Deleter NO 07	040 0040	
	MA	iii iii: NC: Denartm	ent ∩t	REVENUE P()	BOX 2501	iu Kaleidh NC 27	04U-U64(	1