

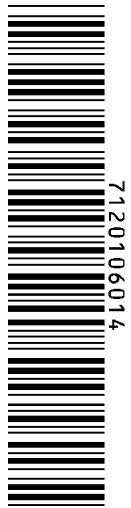
# 2012 Estates and Trusts Income Tax Return

North Carolina Department of Revenue

For calendar year <b>2012</b> , or fiscal year beginning (MM-DD) _____ - _____ - <b>12</b> and ending (MM-DD-YY) _____ - _____ - _____		Fill in all applicable circles: <input type="radio"/> Initial Return <input type="radio"/> Amended Return <input type="radio"/> Final Return <input type="radio"/> Entity has Nonresident Beneficiaries <input type="radio"/> Qualified Funeral Trust If estate return, was final distribution of assets made during the tax year? <input type="radio"/> Yes <input type="radio"/> No
Name of Estate or Trust (Legal Name) (USE CAPITAL LETTERS FOR NAME AND ADDRESS) _____ _____		
Name of Fiduciary (Circle one): <input type="radio"/> Administrator <input type="radio"/> Executor <input type="radio"/> Other	Federal Employer ID Number _____ - _____	
Address _____ _____ _____		
City _____ State _____ Zip Code _____	Apartment Number _____ County (Enter first five letters) _____	

▶ Enter the amount of bonus depreciation from Schedule NC K-1, Line 2a for the fiduciary and all nonresident beneficiaries \_\_\_\_\_ **.00**

<p><b>1. Federal taxable income</b> (From Federal Form 1041)</p> <p><b>2. Additions to income</b> (From Schedule B, Fiduciary Column, Line 3)</p> <p><b>3.</b> Add Lines 1 and 2</p> <p><b>4. Deductions from income</b> (From Schedule B, Fiduciary Column, Line 4)</p> <p><b>5.</b> Line 3 minus Line 4</p> <p><b>6.</b> Did the entity receive for the benefit of a nonresident beneficiary intangible income from any source or business income from sources outside of North Carolina? If so, enter the portion of Line 5 attributable to this income; otherwise, enter zero.</p> <p><b>7. North Carolina taxable income</b> (Line 5 minus Line 6)</p> <p><b>8. Tax</b> (Use the Tax Rate Schedule on Page 2 to calculate the tax)</p> <p><b>9.</b> Tax credits (From Form D-407TC, Line 13)</p> <p><b>10.</b> Tax paid with extension</p> <p><b>11.</b> Other prepayments of tax</p> <p><b>12.</b> Tax paid by partnerships or S Corporations and North Carolina tax withheld reported on Form 1099R (See instructions)</p> <p><b>13.</b> Total tax credits and payments (Add Lines 9 through 12)</p> <p><b>14. Tax Due</b> - If Line 8 is more than Line 13, subtract and enter the result</p> <p><b>15.</b> 15a. Penalties _____ 15b. Interest _____</p> <p style="text-align: right; margin-right: 50px;">(Add Lines 15a and 15b and enter the total on Line 15c)</p> <p><b>15c.</b> _____</p> <p><b>16.</b> Add Lines 14 and 15c and enter the total - <b>Pay this Amount</b> _____ \$</p> <p><b>17.</b> If Line 8 is less than Line 13, subtract and enter the <b>Amount to be Refunded</b> _____</p>	If amount on Line 1, 3, 5, 6, or 7 is negative fill in circle.  Example: <input checked="" type="radio"/>	<table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 5%;">▶ 1.</td><td style="width: 80%;"><input type="radio"/> _____</td><td style="width: 15%; text-align: right;">.00</td></tr> <tr><td>▶ 2.</td><td><input type="radio"/> _____</td><td style="text-align: right;">.00</td></tr> <tr><td>▶ 3.</td><td><input type="radio"/> _____</td><td style="text-align: right;">.00</td></tr> <tr><td>▶ 4.</td><td><input type="radio"/> _____</td><td style="text-align: right;">.00</td></tr> <tr><td>▶ 5.</td><td><input type="radio"/> _____</td><td style="text-align: right;">.00</td></tr> <tr><td>▶ 6.</td><td><input type="radio"/> _____</td><td style="text-align: right;">.00</td></tr> <tr><td>▶ 7.</td><td><input type="radio"/> _____</td><td style="text-align: right;">.00</td></tr> <tr><td>▶ 8.</td><td><input type="radio"/> _____</td><td style="text-align: right;">.00</td></tr> <tr><td>▶ 9.</td><td><input type="radio"/> _____</td><td style="text-align: right;">.00</td></tr> <tr><td>▶ 10.</td><td><input type="radio"/> _____</td><td style="text-align: right;">.00</td></tr> <tr><td>▶ 11.</td><td><input type="radio"/> _____</td><td style="text-align: right;">.00</td></tr> <tr><td>▶ 12.</td><td><input type="radio"/> _____</td><td style="text-align: right;">.00</td></tr> <tr><td>▶ 13.</td><td><input type="radio"/> _____</td><td style="text-align: right;">.00</td></tr> <tr><td>▶ 14.</td><td><input type="radio"/> _____</td><td style="text-align: right;">.00</td></tr> <tr><td>▶ 15c.</td><td><input type="radio"/> _____</td><td style="text-align: right;">.00</td></tr> <tr><td>▶ 16.</td><td><input type="radio"/> _____</td><td style="text-align: right;">.00</td></tr> <tr><td>▶ 17.</td><td><input type="radio"/> _____</td><td style="text-align: right;">.00</td></tr> </table>	▶ 1.	<input type="radio"/> _____	.00	▶ 2.	<input type="radio"/> _____	.00	▶ 3.	<input type="radio"/> _____	.00	▶ 4.	<input type="radio"/> _____	.00	▶ 5.	<input type="radio"/> _____	.00	▶ 6.	<input type="radio"/> _____	.00	▶ 7.	<input type="radio"/> _____	.00	▶ 8.	<input type="radio"/> _____	.00	▶ 9.	<input type="radio"/> _____	.00	▶ 10.	<input type="radio"/> _____	.00	▶ 11.	<input type="radio"/> _____	.00	▶ 12.	<input type="radio"/> _____	.00	▶ 13.	<input type="radio"/> _____	.00	▶ 14.	<input type="radio"/> _____	.00	▶ 15c.	<input type="radio"/> _____	.00	▶ 16.	<input type="radio"/> _____	.00	▶ 17.	<input type="radio"/> _____	.00
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I certify that, to the best of my knowledge, this return is accurate and complete.

If prepared by a person other than 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 \_\_\_\_\_

▶ \_\_\_\_\_  
Daytime Telephone Number (Include area code.)

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

Legal Name (First 10 Characters)

Federal Employer ID Number

**Estate Information:**

Date of Decedent's Death \_\_\_\_\_

If no return filed last year, reason why \_\_\_\_\_

**Trust Information:**

Date Trust Created \_\_\_\_\_

Name and Address of Grantor \_\_\_\_\_

If no return filed last year, reason why \_\_\_\_\_

**Schedule A. North Carolina Fiduciary Adjustments (See instructions.)**

**Additions to Income**

- 1. Interest income from obligations of states other than North Carolina 1.  .00
- 2. State, local, or foreign income taxes deducted on the federal return 2.  .00
- 3. Adjustment for Bonus Depreciation 3.  .00
- 4. Other additions to income (See instructions) 4.  .00
- 5. Total additions to income (Add lines 1 through 4) 5.  .00  
*Apportion the additions on Line 5 between the beneficiaries and the fiduciary on Schedule B, Line 3 below*

**Deductions from Income**

- 6. Interest income from obligations of the United States or United States' possessions 6.  .00
- 7. Taxable portion of Social Security and Railroad Retirement benefits 7.  .00
- 8. Federal, state, or local government retirement benefits exclusion (Not to exceed \$4,000 - See instructions) 8.  .00
- 9. Private retirement benefits exclusion (Not to exceed \$2,000) 9.  .00
- 10. Add Lines 8 and 9 10.  .00
- 11. Enter the amount from Line 10 or \$4,000, whichever is less 11.  .00
- 12. State, local, or foreign income tax refunds reported as income on federal return 12.  .00
- 13. Adjustment for bonus depreciation added back in 2008, 2009, 2010, and 2011 (Add Lines 13a, 13b, 13c, and 13d, and enter on Line 13e)  
 13a. 2008  .00    13b. 2009  .00    13c. 2010  .00    13d. 2011  .00    13e.  .00
- 14. Other deductions from income (See instructions) 14.  .00
- 15. Total deductions from income (Add Lines 6, 7, 11, 12, 13e, and 14) 15.  .00  
*Apportion the deductions on Line 15 between the beneficiaries and the fiduciary on Schedule B, Line 4 below*

**Schedule B. Allocation of Adjustments (See instructions.)** **Important** If more than three beneficiaries, include separate schedule for additional beneficiaries.

Attach other pages if needed.	Fiduciary	Beneficiary 1	Beneficiary 2	Beneficiary 3
1. Identifying Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. Additions	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. Deductions	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**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 is more than

\$0  
\$12,750  
\$60,000

But not over

\$12,750  
\$60,000  
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The tax is

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