

D-407TC 2021 Estates and Trusts Tax Credit Summary

DOR		
Use		
Only		

File this form with Form D-407, Estates and Trusts Income Tax Return, if tax credits are allocated to the fiduciary. Enter only the portion of the tax credit allocated to the fiduciary. (For more information, see the instructions for Form D-407.) Legal Name (First 10 Characters) Federal Employer ID Number Part 1. Tax Credits Not Subject to 50% of Tax Limit (Attach schedule for each credit) 1. Credit for Tax Paid to Another State or Country 00 (From Part 5, Section B, Line 7) 2. Rehabilitating an Income-Producing Historic Structure OO (Article 3D) (Enter amount of installment) 3. Rehabilitating a Nonincome-Producing Historic Structure (Article 3D) (Enter amount of installment) 4. Rehabilitating an Income-Producing Historic Mill Facility (Article 3H) (Enter amount of installment) 5. Rehabilitating a Nonincome-Producing Historic Mill Facility OO (Article 3H) (Enter amount of installment) 6. Rehabilitating an Income-Producing Historic Structure (Article 3L) (From Form NC-Rehab, Part 4, Line 19) 7. Rehabilitating a Nonincome-Producing Historic Structure (Article 3L) (From Form NC-Rehab, Part 4, Line 22) 8. Tax Credits Carried Over From Previous Years (Do Not Include Any Carryover of Tax Credits Claimed on Form NC-478 00 or Form NC-Rehab.) 9. Total Tax Credits 00 (Add Lines 1 through 8) 10. Amount of Income Tax Due 00 (From Form D-407, Page 1, Line 9) 11. Enter the Lesser of Line 9 or Line 10 .00 Part 2. Tax Credits Subject to 50% of Tax Limit 12. Total Tax Credits Subject to 50% Limit Taken in Current Period .00 (From Form NC-478, Part 3) Part 3. Total Credits Applied to Current Year 13. Reserved 00 14. Add Lines 11 through 13 00 (Enter the amount here and on Form D-407, Line 9) Part 4. Qualified Rehabilitation Expenditures and Expenses (For Lines 15 and 16, enter the amount of qualified rehabilitation expenditures or rehabilitation expenses only if incurred prior to January 1, 2015, AND tax year 2021 is the first year the credit is taken.) 15. Enter the amount of qualified rehabilitation expenditures with respect to .00 the credit for rehabilitating an income-producing historic structure 16. Enter the amount of rehabilitation expenses with respect to the credit for .00 rehabilitating a nonincome-producing historic structure (For Lines 17 and 18, enter the amount of qualified rehabilitation expenditures or rehabilitation expenses only if an application for an eligibility certification was submitted to the State Historic Preservation Office prior to January 1, 2015, AND tax year 2021 is the first year the credit is taken.) 17. Enter the amount of qualified rehabilitation expenditures with respect to the credit for rehabilitating an income-producing historic mill facility _00 18. Enter the amount of rehabilitation expenses with respect to the credit for ▶ 18. .00 rehabilitating a nonincome-producing historic mill facility

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Legal Name (First 10 Characters)	Federal Employer ID Number		

Part 5. Tax Paid to Another State or Country

A. Apportionment of Income	and Tax Paid to Ano	ther State or Country (See	instructions)		
Attach other pages if needed.	Fiduciary	Beneficiary 1	Beneficiary 2	Beneficia	ry 3
1. Identifying Number					
2. Name					
3. Share of Gross Income on which Tax was Paid to Another State or Country					
4. Share of Tax Paid to Another State or Country					
B. Computation of Tax Cred	lit for Tax Paid to And	ther State or Country			
1. Fiduciary's share of gross in	ncome taxed in anothe	er state or country (From Fidu	ıciary Column, Line 3 above)	1.	00
2. Fiduciary's share of total of	2.	00			
3. Percentage of income taxe	ne 2)	3.	%		
4. Amount of North Carolina		4.	00		
5. Computed tax credit (Mulity	oly Line 3 by Line 4)			5.	00
6. Fiduciary's share of tax pa Attach copy of return and proof		r country (From Fiduciary Co	olumn, Line 4 above.	6.	00
7. Enter the lesser of Line 5	7.	00			