

Fiduciary Income and Replacement Tax Return

Туре	Name and/or number of trust or estate			 F	 edera	. al emplo	- yer identifi	_ cation	_ number (F	_ FEIN)	_
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	Check the box if your name or address has changed.			_			turn and		-		
	<u> </u>										
Part	I — Base income or loss										
1 Wr	ite your federal taxable income or loss before FNOLD from the worksh	eet (See inst	tructio	ns.)			1			_ _
2 Ad	ditions		A Fidu	-			eficiaries	_			
a I	Exemption claimed on U.S. Form 1041, Page 1	2a									
b I	Ilinois income and replacement tax deducted in arriving at Line 1 above	2b									
CS	State, municipal, and other federally tax-exempt interest (See instructions.)										
d (Other additions (specify:)	2d						_			
e /	Add Lines 2a through 2d. This is the total of your additions.										
Re	port Column B, Lines 2b through 2d, on Schedule K-1-T, Step 5.										
Wr	ite the amount shown on Column A, Line 2e, here.							2			_ _
3 Ad	d Lines 1 and 2. This is your total income.							3			_İ_
	btractions		A Fidu	ıciary		B Ber	eficiaries				
a /	August 1, 1969, valuation limitation amount from Schedule F	4a									
	Payments from certain retirement plans (See instructions.)	4b									
	nterest income from U.S. Treasury and other exempt federal obligations	4c									
	Retirement payments to retired partners	4d									
	Enterprise zone or foreign trade zone/sub-zone dividends from Sch. 1299-										
e	Lilieipilse zone di loreign tiade zone/sub-zone dividends nom son. 1233-	B 4e									
	· · · · · · · · · · · · · · · · · · ·							_			
f (Other subtractions (specify:) 4f						_			
f (Other subtractions (specify:Add Lines 4a through 4f. This is the total of your subtractions.) 4f						_			
f (g / Re	Other subtractions (specify:) 4f						_			_ _
f (g / Re Wr 5 Su	Other subtractions (specify: Add Lines 4a through 4f. This is the total of your subtractions. Sport Column B, Lines 4b through 4f, on Schedule K-1-T, Step 5. Tite the amount shown on Column A, Line 4g, here. Sharet Line 4 from Line 3. This is your Illinois base income or loss.) 4f						_			_ _
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Pa	rt III — Net income or loss and	replacement tax			
2 3 4 5 6	Check this box if Line 1a is a loss and yo b Write the amount of Illinois net loss ded c Subtract Line 1b from 1a (cannot be less If the trust or estate is a resident of Illinois If the trust or estate is a nonresident of Ill (If you are a short-year filer, see General Is Subtract Line 2 from Line 1c (cannot be less This is your Illinois net income. Lines 4 through 7 are for trusts only a Multiply Line 3 by 1.5% (.015). This is you b Recapture of investment credits from So Add Lines 4a and 4b. This is your total rep	nois, write the amount from Schedule NR, Pnformation.) ss than zero). Write the result here and on Part IV. four replacement tax. hedule 4255. (See instructions.) facement tax. for Form IL-477. (Attach Form IL-477, see insight standard).	See instructions.) aructions.) art III, Line 4. art IV, Line 1. 4a 4b	1a 1b 1c 2 3 5 6 7	
Da	rt IV — Income tax				
1 2 3 4 5 6 Pa 1 2 3 4	Write the amount of net income from Part a Multiply Line 1 by 3% (.03). This is your b Recapture of investment credits from Sc Add Lines 2a and 2b. This is your total income tax paid to other states b Income tax credits from Schedule 1299-E c Credit for replacement tax paid from word d Carryforward of credit for replacement tax Add Lines 4a through 4d. This is the total of Subtract Line 5 from Line 3 (cannot be less Write the result here and on Part II, Line 2 rt V — This information must b Check one of the following: If a trust, check one of the following: B If a trust, write the date created: b If an estate, write the date of the deceder Check the method of accounting used in p	income tax. hedule 4255. (See instructions.) ome tax. s. (Attach Schedule CR, see instructions.) o. (Attach Schedule 1299-D, see instructions.) ox paid. (See instructions.) ox paid. (See instructions.) ox your credits. s than zero). ox this is your net income tax. ox completed by all taxpayers. ox state Simple trust Completed by all taxpayers. ox taxpayers.	4c	1 3 5 6	
	If yes, list all such partnerships, S corporation if necessary).	ions, trusts, or estates, showing the name, a	address, and FEIN of eac	ch (attach addit	tional sheet,
	Name	Address		FEIN	
а					
b .					
C					
d .					
e .					



Year	ending
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Ciai ic3	Identification						
		Month	Voor				

lame as shown on your Form IL-1041	Federal employer identification number (FEIN)
•	. ,

Identify your beneficiaries C Α В D Check if Name Address Social Security number or FEIN nonresident 20 _____ 21 __ 25 _

Schedule D (R-12/00)

Nonresident Computation of Fiduciary Income

Month Year

Nar	ne as shown on your Form IL-1041	Federal employer identification number (FEIN)				
Pa	rrt I — Computation of base inco	me or loss a	llocable to Illin	ois		
inco	ort year filers only: If you are making the business ome election, check the box and report all income, other employee compensation as business ome below. (See instructions.)	ner 1 From U.S. Form 1041	2 Fiduciary's share of amounts in Column 1	Amounts in Column 2 allocable to Illinois	4 Additions to and subtractions from amounts in Column 2	5 Fiduciary's Illinois income
2 3 4 5	Interest income Dividends Business income or loss Gain or loss from sales or exchanges of nonbusiness property other than from partnerships, trusts, or estates a Net rent & royalty income or loss b Income or loss from partnerships & S corps c Income or loss from other trusts & estates d Income or loss from real estate mortgage investment conduits (REMIC) Net farm income or loss Gains or losses from sales or exchanges of business property other than from partnerships, trusts, or estates Other income or loss. (Include winnings from the Illinois State Lottery as Illinois income.) Total income or loss. Add Lines 1 through 8.	2				
10 11 12 13 14 15 16 17 18 19 20 21 22	Interest Taxes Fiduciary fees Charitable deduction Attorney, accountant, and preparer fees Other deductions (including taxes) Total. Add Lines 10 through 15. Subtract Line 16 from Line 9. Income distribution deduction Federal estate tax attributable to income in respect of a decedent (fiduciary's share) Exemption Total. Add Lines 18 through 20. Subtract Line 21 from Line 17. Base income or net loss allocable to Illinois	10				
1 2 3 Pa	Total sales everywhere Total sales within Illinois Divide Line 2 by Line 1. (Carry to six decimal This is your apportionment factor. Int III — Computation of standard Note: Exemption for a short year me Base income or net loss allocable to Illinois from Total base income from Form IL-1041, Part I, Divide Line 1 by Line 2. If Line 1 equals or exe Standard exemption. Multiply Line 3 by \$1,000	exemption ust be prorated. So om Schedule NR, Line 5 ceeds Line 2, write	ee General Information Part I, Line 23		3 • 1 2	