



Illinois Department of Revenue

2008 Form IL-1041

Fiduciary Income and Replacement Tax Return

Due on or before the 15th day of the 4th month following the close of the tax year.

Write the amount you are paying. \$ _____
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If this return is not for calendar year 2008, write your fiscal tax year here.

Tax year beginning ____ / ____, 2008, ending ____ / ____ 20__

Step 1: Identify your fiduciary

I

A Check the box that identifies your fiduciary. Trust Estate

B Write your name and/or number and mailing address.
If you have a change, check this box.

Name: _____

C/O: _____

Mailing address: _____

City: _____ State: _____ ZIP: _____

C Check the box if one of the following apply.
 First return If final, write the date. _____

D Check your method of accounting.
 Cash Accrual Other _____

E Write your federal employer identification no. (FEIN).
_____ - _____

F Check the box if your residency is not in Illinois. Attach Illinois Schedule NR.

G Check the box if you are an
Electing small business trust (ESBT)
Individual bankruptcy estate

H Check the box if you attached Illinois Schedule 1299-D, Income Tax Credits.

I Check the box if you attached Illinois Schedule I, Income Received.

J If you have completed Federal Form 8886, check the box and attach it to this return.

Step 2: Figure your income or loss

	A Beneficiaries	B Fiduciary
1 Federal Taxable Income from U.S. Form 1041, Line 22.	.	1 _____ .00
2 Federal net operating loss deduction from U.S. Form 1041, Line 15a. This amount cannot be negative.		2 _____ .00
3 Taxable income of ESBT, if required (see instructions).		3 _____ .00
4 Exemption claimed on U.S. Form 1041, Line 20.		4 _____ .00
5 Illinois income and replacement tax deducted in arriving at Line 1.	5a _____ .00	5b _____ .00
6 State, municipal, and other interest income excluded from Line 1.	6a _____ .00	6b _____ .00
7 Illinois Special Depreciation addition. Attach Form IL-4562.	7a _____ .00	7b _____ .00
8 Related-party expenses addition. Attach Schedule 80/20.	8a _____ .00	8b _____ .00
9 Distributive share of additions. Attach Schedule K-1-P or K-1-T.	9a _____ .00	9b _____ .00
10 Other additions. Attach Illinois Schedule M (for businesses).	10a _____ .00	10b _____ .00
11 Add Column B, Lines 1 through 10b. This amount is your income or loss. Report Column A, Lines 5a through 10a, on Schedule K-1-T, Step 5.		11 _____ .00

NS DR _____



12 Write the amount of your income or loss from Line 11. 12 _____ .00

Step 3: Figure your Illinois base income or net loss

	A Beneficiaries	B Fiduciary
13 August 1, 1969, valuation limitation amount. Attach Schedule F.	13a _____ .00	13b _____ .00
14 Federally-taxed refund of Illinois income and replacement tax.	14a _____ .00	14b _____ .00
15 Payments from certain retirement plans (see instructions).	15a _____ .00	15b _____ .00
16 Interest income from U.S. Treasury and other exempt federal obligations.	16a _____ .00	16b _____ .00
17 Retirement payments to retired partners.	17a _____ .00	17b _____ .00
18 Enterprise Zone or River Edge Redevelopment Zone Dividend subtraction. Attach Schedule 1299-B.	18a _____ .00	18b _____ .00
19 High Impact Business Dividend subtraction. Attach Schedule 1299-B.	19a _____ .00	19b _____ .00
20 Contributions to certain job training projects (see instructions).	20a _____ .00	20b _____ .00
21 Illinois Special Depreciation subtraction. Attach Form IL-4562.	21a _____ .00	21b _____ .00
22 Related-party expenses subtraction. Attach Schedule 80/20.	22a _____ .00	22b _____ .00
23 Distributive share of subtractions. Attach Schedule K-1-P or K-1-T.	23a _____ .00	23b _____ .00
24 Other subtractions. Attach Illinois Schedule M (for businesses).	24a _____ .00	24b _____ .00
25 Total subtractions. Add Column B, Lines 13b through 24b. Report Column A, Lines 13a through 24a, on Schedule K-1-T, Step 5.		25 _____ .00
26 Base income or net loss. Subtract Line 25 from Line 12.		26 _____ .00



If you are a nonresident of Illinois, complete Schedule NR; otherwise go to Step 4.

Step 4: Figure your net income

27 Base income or net loss from Line 26, or, if a nonresident, from Schedule NR, Line 51.	27 _____ .00
28 Illinois net loss deduction. Attach Schedule NLD. If Line 27 is zero or a negative amount, write "0".	28 _____ .00
29 Standard exemption. Residents only: Write \$1,000. Nonresidents only: Write the amount from Schedule NR, Line 54.	29 _____ .00
30 Add Lines 28 and 29.	30 _____ .00
31 Net Income. Subtract Line 30 from Line 27. If the amount is negative, write "0".	31 _____ .00

Step 5: Figure your net replacement tax — For trusts only, estates go to Step 6

32 Replacement tax. Multiply Line 31 by 1.5% (.015).	32 _____ .00
33 Recapture of investment credits. Attach Schedule 4255.	33 _____ .00
34 Replacement tax before investment credits. Add Lines 32 and 33.	34 _____ .00
35 Investment credits. Attach Form IL-477. (Fiscal-year filers only. See instructions)	35 _____ .00
36 Net replacement tax. Subtract Line 35 from Line 34. If the amount is negative, write "0".	36 _____ .00



37 Write the amount of your net income from Line 31. 37 _____ .00

Step 6: Figure your net income tax

38 Income tax. Multiply Line 37 by 3% (.03). 38 _____ .00

39 Recapture of investment credits. Attach Schedule 4255. 39 _____ .00

40 Income tax before credits. Add Lines 38 and 39. 40 _____ .00

41 Credit for income tax paid to another state while an Illinois resident. Attach Schedule CR and other states' returns. 41 _____ .00

42 Income tax credits. Attach Schedule 1299-D. 42 _____ .00

43 Total credits. Add Lines 41 and 42. 43 _____ .00

44 Net income tax. Subtract Line 43 from Line 40. If the amount is negative, write "0." 44 _____ .00

Step 7: Figure your refund or balance due

45 Trusts only: net replacement tax from Line 36. 45 _____ .00

46 Net income tax from Line 44. 46 _____ .00

47 Total net income and replacement taxes. Add Lines 45 and 46. 47 _____ .00

48 Payments.

a Illinois Income Tax withheld. Attach W-2 forms. 48a _____ .00

b Credit from 2007 overpayment. 48b _____ .00

c Form IL-505-B (extension) payment. 48c _____ .00

d Pass-through entity payments from Schedule K-1-P or K-1-T. 48d _____ .00

49 Total payments. Add Lines 48a through 48d. 49 _____ .00

50 Overpayment. If Line 49 is greater than Line 47, subtract Line 47 from Line 49. 50 _____ .

51 Amount to be credited to 2009. 51 _____ .00

52 Refund. Subtract Line 51 from Line 50. This is the amount to be refunded. 52 _____ .

53 Tax Due. If Line 47 is greater than Line 49, subtract Line 49 from Line 47. This is the amount you owe. 53 _____ .

Special Note ▶ Make your check payable to "Illinois Department of Revenue." ◀ Write the amount of your payment on the top of Page 1 in the space provided.

Step 8: Sign here

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete.

Signature of fiduciary _____ Date ____ / ____ / ____ Title _____ Phone (____) _____
Signature of preparer _____ Date ____ / ____ / ____ Preparer's Social Security number or firm's FEIN _____
Preparer firm's name (or yours, if self-employed) _____ Address _____ Phone (____) _____

▶ Mail this return to: Illinois Department of Revenue, P.O. Box 19009, Springfield, IL 62794-9009 ◀





Schedule D

Attach to your Form IL-1041

Beneficiary Information

Year ending

Month Year

IL Attachment No. 1

Write your name as shown on your Form IL-1041.

Write your federal employer identification number (FEIN).

Step 1: Provide the following information



- 1 Write the amount of base income or net loss from your Form IL-1041, Line 26. **1** _____
- 2 Write the apportionment factor from your Form IL-1041, Schedule NR, Step 6, Line 3. **2** _____

Step 2: Identify your beneficiaries. Attach additional sheets if necessary.

	A	B	C	D	E	F
	Name and Address	SSN or FEIN	Beneficiary type (See instructions.)	Total amount of base income (loss) distributable (See instructions.)	Check the box if the beneficiary is an Illinois nonresident	Pass-through entity payment amount (See instructions.)
1	_____	_____	_____	_____	<input type="checkbox"/>	_____

2	_____	_____	_____	_____	<input type="checkbox"/>	_____

3	_____	_____	_____	_____	<input type="checkbox"/>	_____

4	_____	_____	_____	_____	<input type="checkbox"/>	_____

5	_____	_____	_____	_____	<input type="checkbox"/>	_____

6	_____	_____	_____	_____	<input type="checkbox"/>	_____

7	_____	_____	_____	_____	<input type="checkbox"/>	_____

- 8 Add the amounts shown in Column D for partners or shareholders for which you have entered a check mark in Column E. Write the total here. (See instructions.) **8** _____

