Black and Orange Trust

Deviations from Test Package Federal Form 1041:

- Change the Federal Employer Identification Number to 11-4000002
- Schedule C #2 'Blacksmith' has net income of \$97,324 and is located at 500 Test Drive, Stillwater, OK 74074
- Farm from Schedule F has a net loss of \$19,500 and is located at Stillwater, OK 74074
- Complete the paid preparer section of the return.

Forms Required: 513NR

Misc. Information:

- Trust is a nonresident trust
- The entity was created on 10/1/2012.
- A return was filed last year.
- An extension payment of \$1,200 was made.
- The refund should be by direct deposit into an Oklahoma checking account with the following information:
 - o Routing number 303085418
 - o Account number 101001234
- Check the box that allows Oklahoma Tax Commission to discuss the return with the preparer.

Form 513NR 2017



OKLAHOMA NONRESIDENT FIDUCIARY RETURN OF INCOME

This form must be filed on or before the 15th day of the fourth month after the close of the taxable year. For the year January 1 - December 31, 2017, or other taxable year beginning: ending: y here See Schedule 513NR on page 4. Name of estate or trust: BLACK AND ORANGE TRUST Address of fiduciary: (number and street) 500 TEST STREET City, State or Province, Country and ZIP or Foreign Postal Code: MARION AL 36756 Federal Employer Identification Number: 11-4000002 Date Entity Created: 10/01/2012				If this is an Amended Return place an 'X' here See Schedule 513NR-X		``		W	Important! /as a Fiduciary Income The Previous year?	Гах
	me and title of fiduciary: OHN DOE, FIDUC	CIARY				X Final Return			X Yes No	
in bo	ace an 'X' -> all applicable oxes:	X Simple ESBT Other (d	nt's Estate Trust escribe): of your Federal		ust Trust	Pooled Income Fu			Number of Beneficiarie 2	es:
	RT 1 schedule fo	or Oklahoma ar	nounts when diffe	erent from Feder	al.	Column A Federal Amount			Column B Oklahoma Amount	
1	Interest income					25,000	00	1		00
2	Dividends						00	2		00
						105 702	╫	1	07 204	
3	Business income	e or (loss)	***************************************			125,723	00	3	97,324	00
4	Capital gain or (l	oss)					00	4		00
5	Rents, royalties,	partnerships,	other estates an	d trusts, etc		,	00	5		00
6	Farm income or					(19,500)	00	6	(19,500)	00
\vdash		•				, , ,	+			+
7	Ordinary gain or						00	7		00
8	Other income (st	ate nature of i	income)				00	8		00
9	Total income (a	dd lines 1 thro	ugh 8)			131,233	00	9	77,824	00
	Oklahoma Additio									
10	State and munici	•					00	10		00
11	Other additions (131,233	00	11	77,824	00
12	Add lines 9, 10 a Oklahoma Subtra					131,233	100	12	77,024	100
13	Interest on U.S.		e instructions)				00	13		00
14	Net operating loss							14		00
15	Oklahoma deplet	ion and Oklaho	oma Capital Gain	Deduction (see in			00	15		00
16	Income distributi	on deduction (use Oklahoma Sch	edule K-1; see ins	tructions)	129,623	00	1	76,224	00
16 17	Total Oklahoma					129,623	00	1	76,224	00
18	Oklahoma adjust						Ta-	18	1,600	00
18a	Oklahoma adjust	ted gross inco	me - All Source	S (line 12 minus lin	e 17)	line 27) (limited to 100%		18a	100	%
19 20	Interest, taxes, fid					mie zij (minieu lu 100%	00		100	<u> </u>
21	Federal estate tax					1,600	00	1		
22	Exemption	•				300	00	1		
23	Total Deduction					1,900	00	23		
24								24	(300)	00

Form 513NR - page 2



OKLAHOMA NONRESIDENT FIDUCIARY RETURN OF INCOME

Name of estate or trust:		Federal Employer Identification Number:				
BLACK AND ORANGE TRUST			11-4000002			
				Column B Oklahoma Amount		
25 Taxable income of fiduciary (Am	ount shown on line 24, Columi	n B)		25 (300) 00		
26 Tax on amount on line 25 (from	tax table - see instructions) (th	is is your base tax)		26 0 00		
27 Oklahoma percentage (enter pe	ercentage from line 19)			27 %		
28 Multiply line 26 by line 27 (this i	is your Oklahoma state incor	ne tax)				
	see the instructions and enter "			1 100		
	add the recaptured credit here a			28 000		
29 Credits: Enter number in box for				29 00		
30 Balance of tax due (subtract line	e 29 from line 28, but not less t	han zero) <u></u>				
31 2017 Okla. estimated tax payme	ents (i.e. Form(s) OW-8-ESC)	31		<u>0</u>		
32 Amount paid with extension req			1,200 0	→ 1		
33 Oklahoma Withholding (provide For	m 1099, 500-B or other withholding sta	atement)33	0	<u>0</u>		
	. —					
Refundable Credits from Form			0	U		
35 Amount paid with original return			lo			
(amended return only)		35				
00 000	ultinal (numerical and watering control	20 /) 0	0		
Any refunds or overpayment ap			·····························	months of the control		
Total of lines 31 through 36				9,		
38 If line 37 is larger than line 30, e	enter amount overpaid		1			
Amount of line 38 to be credited t				0]		
40 Amount of line 38 to be refunded	d to you	R	efund +	40 1,200 00		
Want a Faster Refund? Elect to have your refund directly deposited into your checking or savings account. For Direct Deposit information, see page 16 of the 513NR Packet.	Is this refund going to or through Deposit my refund in my: Routing Number: 303085 Account Number: 101001:	checking account		ited States? Yes No		
41 If line 30 is larger than line 37 er	nter tax due	Ta	x Due 🛨	41 00		
						
42 Underpayment of estimated tax	interest	Annu	alized	42 00		
For delinquent payment, add pe				42		
interest at 1.25% per month		\$		43		
44 Total tax, penalty and interest (a	add lines 41, 42 and 43)	Balanc	e Due →	44 00		
If you have asked for an extension	on from the IRS, place an 'X' her	re and provide a copy with	this return [
V.U. 700 0	alau wang diaanga dista wakuwa!!	th value for premares wises	an ivi hava T	Make check payable to the		
If the Tax Commission Under penalties of perjury, I declare I have example 1	sion may discuss this return wit	in your tax preparer, place	all A fiele [Oklahoma Tax Commission		
Under penalties of perjury, I declare I have examilf prepared by person other than the taxpayer, the	nineu inis reium, including accompanyin his declaration is based on all information	y atalementa, and to the best of fi n of which preparer has any know	iy kilowiedye an ledge.	ים הסיוטו זו וס נוספי פטונספי שנות פטונולופים:		
Signature of Fiduciary	Date	Signature of Preparer	5	Date		
Printed Name of Fiduciary		Printed Name of Preparer				
JOHN DOE		BILL TAXPREPARER				
Title of Fiduciary	Phone Number	Phone Number		Preparer's PTIN		
FIDUCIARY		888-555-1212		P2222222		



Form 513NR - page 3 Oklahoma Schedule K-1

PART 2: BENEFICIARY'S SHARE OF INCOME AND DEDUCTIONS

2017

Foi	r calendar year 2017 or fiscal year beginning	☐ Amend				
and	d ending	,	Nonres	ident		
Nar	me of estate or trust					
В	LACK AND ORANGE TRUST					
Ber	neficiary's FEIN/SSN	Estate's or trust's Federal Employer Identification Number				
4	52-00-4321	11-4000002				
Ber	neficiary's name, address and ZIP	Fiduciary's name, address and ZIP				
ı	DHN BLUE	JOHN DOE, FIDUCIARY				
	00 TEST DRIVE MAHA, NE 68701	500 TEST STREET MARION AL 36756				
1002570						
PROGRESSION AND ADDRESS OF THE PROGRESS OF THE	come		FEDERAL	OKLAHOMA		
1	Interest		12,500			
2	DividendsShort-term capital gain (or loss)					
3	Long-term capital gain (or loss)					
5	Other taxable income:	т				
٦	a. Annuities, royalties and other nonbusiness incom	ne				
	b. Trade or business, rental real estate and other business.		52,311	38,112		
6	State, municipal interest					
-	U.S. interest					
D	eductions					
8	a. Depreciation, depletion, amortization attributable to li	ne 5a8a				
	b. Depreciation, depletion, amortization attributable to li					
9						
10	Expenses allocable to Oklahoma-exempt income	10				
11	Deductions in the final year of trust or decedent's estate:					
	a. Excess deductions on termination					
	b. Net operating loss carryover	11b				
12	Withholding	12				
13	1					
	a	13a				
	b					
	C					
	d	13d				
	е	13e				
	f					
1	l a.	13a		-		



Form 513NR - page 3 Oklahoma Schedule K-1

PART 2: BENEFICIARY'S SHARE OF INCOME AND DEDUCTIONS

2017

For calendar year 2017 or fiscal year beginning	, 2017	☐ Amended K-1 ☐ Final K-1				
and ending, Nonresident						
Name of estate or trust		******	J. 70440-7			
BLACK AND ORANGE TRUST						
Beneficiary's FEIN/SSN	Estate's or trust's Federal Employer	Estate's or trust's Federal Employer Identification Number				
452-00-1234	11-4000002					
Beneficiary's name, address and ZIP	Fiduciary's name, address and ZIP	Fiduciary's name, address and ZIP				
JOHN GOLD 1500 TEST DRIVE FORT DODGE, IA 50501	JOHN DOE, FIDUCIARY 500 TEST STREET MARION AL 36756					
Income		FEDERAL	OKLAHOMA			
1 Interest		12,500				
2 Dividends						
4 Long-term capital gain (or loss)						
5 Other taxable income:						
a. Annuities, royalties and other nonbusiness inco	me5a					
b. Trade or business, rental real estate and other I		52,311	38,112			
6 State, municipal interest	10.00					
7 U.S. interest	7 _					
Deductions						
8 a. Depreciation, depletion, amortization attributable to						
b. Depreciation, depletion, amortization attributable to						
9 Expenses allocable to Federally-exempt income		Section 1995				
Expenses allocable to Oklahoma-exempt income						
11 Deductions in the final year of trust or decedent's estate						
a. Excess deductions on terminationb. Net operating loss carryover	·					
	_					
12 Withholding	12					
	13a					
a b						
С.						
d						
е	ا م. ا					
f	· · · · · · · · · · · · · · · · · · ·					
l a	13a					