**IT-141** REV 8-18

## West Virginia Fiduciary Income Tax Return (for resident and non-resident estates and trusts)

2018

Estate or Trust Name			FEIN -			
Trustee Executor Name						
FIRST LINE OF ADDRESS		SECOND LI ADDRE				
CITY		STATE	ZIP CODE			
FILING PERIOD ENDED MM/DD/YYYY	EXTENDED  DUE DATE  MM/DD/YYYY	FISCAL YEAR FILER	CHECK IF APPLICABLE:	Amended CHECK ONE:	Resident Non- Resident	
Simple Trust	Decedent's Estate	Qualified Funeral Trust	Complex Trust	IRC § 671-	678	
TYPE OF ENTITY:  Bankruptcy Estate	Grantor Type Trust	Qualified Funeral Trust Comp	osite	Grantor Trust Election		
Date of Death:  MM/DD/YYYY		SSN:		Final Individual Return Filed for Decendent		
					00	
Federal taxable income (enter lin	le 22, Federal Form 104	11 or line 12, 1041-QFT)		1	.00	
2. West Virginia fiduciary additions (	(Schedule B, line 6)			2	.00	
3. West Virginia fiduciary subtraction	ns (Schedule B, line 11)	)		3	.00	
West Virginia taxable income (su	m of lines 1 and 2 minu	s line 3)		4	.00	
		UST HAVING NO TAXAE				
5. West Virginia tax (check one)	Rate Schedule	Schedule NR		5	.00	
6. Credits from Tax Credit Recap So	chedule (see schedule p	page 4)		6	.00	
7. Adjusted tax due (line 5 minus lin					.00	
Non-resident income subject to ta	ax (total of Schedule A,	column F)		8	.00	
9. West Virginia income tax paid for	non-resident beneficial	ries (total of Schedule A, (	Column H)	9	.00	
10. Combined tax due (sum of lines 7	7 and 9)			10	.00	
11. West Virginia fiduciary income tax				11	.00	
CHECK HERE IF WITHHOLDING IS						
12. Estimated payments/payments w	vith extension of time			12	.00	
13. Paid with original return (amende	ed return only)			13	.00	
14. Overpayment previously refunded	d or credited (amended	return only)		14	.00	
15. Total payments (sum of lines 11,	12, and 13 minus line 1	4)		15	.00	
16. Balance of tax due (line 10 minus	c line 15)			16	.00	
17. Overpayment (if line 15 is larger	than line 10, enter amo	unt)		17	.00	
18. Amount of line 17 to be credited t	to next year's tax			18	.00	
		19. Amount to be refunde	ed (line 17 minus line 1	8) 19	.00	

## SCHEDULE A – BENEFICIARY INFORMATION AND NON-RESIDENT TAX PAID FOR WITHHOLDING ATTACH ADDITIONAL COPIES OF SCHEDULE AS NEEDED

		NAME AND ADDRES	S OF EACH BENE	FICIARY		
NAM	1E STR	EET OR OTHER MAILING A		CITY	STATE	ZIP CODE
1.						
2.						
3.						
4.						
5.						
(A	<b>(</b> )	VEST VIRGINIA FILING METHOD	(E)	(F) BENEFICIARY SHARE	(G) RATE	(H) TAX PAID FOR
SOCIAL SE	CURITY # (B) RESIDE		IF NRW-4 PREVIOUSLY FILED	OF WV INCOME	· IVIL	BENEFICIARIES WITHHOLDING
1.			T NEVIGOGET TILED		6.5%	WITHTOLDING
2.					6.5%	
3.					6.5%	
4.					6.5%	
5.					6.5%	
6. TOTALS					6.5%	
		UCIARY MODIFICATIONS		COLUMNI	0.070	COLUMN II
ADDITIONS:	S - WEST VIRGINIA FID	CIART WODIFICATIONS		TOTAL	AM	OUNT ALLOCATED
1. Interest inc	come on state and municipal	bonds, ot <mark>her than West Virginia.</mark>				
		270)				
2. Lump sum	distribution (Federal Form 4	972)		If	this is a	
3. Federal ex	emption (Form 1041, line 20				nple Trust Iving NO	
					Taxable ncome,	
<ol><li>Other addi</li></ol>	tions – state nature and sour	ce			IIT Col. II	
5. Electing sn	call business trust additions					
J. Electing Sil	naii business trust auditions					
6. Total additi	ons (add lines 1 through 5, c	ol. II and enter here and on page	1, line 2)			
SUBTRACTION 7. Interest inc	ONS:	ifically exempt from state tax				
		meany exempt norm state tax		600.00		600.00
	ractions – state nature and s			000.00		300.00
TO. Electing sn	nall business trusts subtraction	DAS				
11. Total subtra	actions (add lines 7 through	0, col. II and enter here and on	page 1, line 3)			
12. Net fiducia	ry modifications (line 6 minus	line 11)				
Direct						
Deposit						
f Refund	CHECKING	SAVINGS	ROUTING N	IUMBER	ACCOUN	IT NUMBER
PLEASE RE	VIEW YOUR ACCOUNT INFOR	MATION FOR ACCURACY. INCORRE	CT ACCOUNT INFORMATION	MAY RESULT IN A \$15.00	RETURNED PAY	MENT CHARGE.
	e Tax Department to discuss my ret	urn with my preparer YES NO	and statements, and to the best of	of my knowledge and belief, it	is true, correct and	d complete.
				3		
Signature of Fi	duciary or Officer Represe	nting Fiduciary)	(Date)	(Email)		
<b>D</b> : 1						
Paid	(Signature of Preparer)				(Date	e)
Preparer's Use Only						
Jac Only	(Preparer's EIN)	(Printe	ed Name)		(Telephone	e Number)
	I (i Toparor 3 Litt)	U Time	- Hamo)			e Number)



## **SCHEDULE NR**

## PART I - NONRESIDENT INCOME AND ALLOCATION

Jillesia	ent estates and trusts only)			
COLUMN I REPORTED ON FEDERAL RETURN		COLUMN II ALLOCATED TO WEST VIRGINIA		
1	.00	1	.00	
2	.00	2	.00	
3	.00	3	.00	
4		4	.00	
5		5	.00	
			.00	
			.00	
			.00	
9	COLUMN I REPORTED ON	COLUMN II ALLOCATED TO		
	FEDERAL RETURN		WEST VIRGINIA	
10	.00	10	.00	
11	.00	11	.00	
12	.00	12	.00	
13	.00	13	.00	
14	.00	14	.00	
15	.00	15	.00	
16	.00	16	.00	
17	-00	17	.00	
18		18	.00	
19		19	.00	
			.00	
[21]	.00	[21]	.00	
ION	OF WEST VIRGINIA TAX			
		22	.00	
			.00	
3. Tentative tax (apply rate schedule to amount on line 22)				
24. Income percentage (carry to four decimal places = WV income (line 21, col. II)  Federal income (line 21, col. I)				
25. West Virginia tax (line 23 times line 24) – enter here and on page 1, line 5				
	1 2 3 4 5 6 7 8 9 9 10 11 12 13 14 15 16 17 18 19 20 21 21 21 20 21 21 21 21 21 21 21 21 21 21 21 21 21	COLUMN I REPORTED ON FEDERAL RETURN  1	COLUMN I REPORTED ON FEDERAL RETURN  1	



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