

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

2018

Estate or Trust Name	Shirley Gilman		FEIN	45-3728454	
Trustee/Executor Name					
FIRST LINE OF ADDRESS	107 Pennsylvania Ave		SECOND LINE OF ADDRESS		
CITY	Nutter Fort		STATE	WV	ZIP CODE 26301
FILING PERIOD ENDED MM/DD/YYYY	12	31	2018	EXTENDED DUE DATE MM/DD/YYYY	
FISCAL YEAR FILER			CHECK IF APPLICABLE:	<input type="checkbox"/> Final	<input type="checkbox"/> Amended
CHECK ONE:	<input checked="" type="checkbox"/> Resident		<input type="checkbox"/> Non-Resident		
TYPE OF ENTITY:	<input type="checkbox"/> Simple Trust		<input type="checkbox"/> Decedent's Estate	<input type="checkbox"/> Qualified Funeral Trust	<input type="checkbox"/> Complex Trust
	<input type="checkbox"/> Bankruptcy Estate		<input type="checkbox"/> Grantor Type Trust	<input type="checkbox"/> Qualified Funeral Trust Composite	
			<input checked="" type="checkbox"/> <b>IRC § 671-678 Grantor Trust Election</b>		
DECEDENT INFO:	Date of Death: MM/DD/YYYY			SSN:	<input type="checkbox"/> Final Individual Return Filed for Decedent

1. Federal taxable income (enter line 22, Federal Form 1041 or line 12, 1041-QFT).....	1		.00
2. West Virginia fiduciary additions (Schedule B, line 6).....	2		.00
3. West Virginia fiduciary subtractions (Schedule B, line 11).....	3	-600	.00
4. West Virginia taxable income (sum of lines 1 and 2 minus line 3).....	4	-600	.00

IF THIS IS A SIMPLE TRUST HAVING NO TAXABLE INCOME, OMIT LINES 5-7

5. West Virginia tax (check one) <input checked="" type="checkbox"/> Rate Schedule <input type="checkbox"/> Schedule NR .....	5		.00
6. Credits from Tax Credit Recap Schedule (see schedule page 4).....	6		.00
7. Adjusted tax due (line 5 minus line 6).....	7		.00
8. Non-resident income subject to tax (total of Schedule A, column F).....	8		.00
9. West Virginia income tax paid for non-resident beneficiaries (total of Schedule A, Column H).....	9		.00
10. Combined tax due (sum of lines 7 and 9).....	10		.00
11. West Virginia fiduciary income tax withheld ( <b>See Instructions</b> ) <input type="checkbox"/> CHECK HERE IF WITHHOLDING IS FROM NRSR (NON RESIDENT SALE OF REAL ESTATE).....	11		.00
12. Estimated payments/payments with extension of time.....	12		.00
13. Paid with original return (amended return only).....	13		.00
14. Overpayment previously refunded or credited (amended return only).....	14		.00
15. Total payments (sum of lines 11, 12, and 13 minus line 14).....	15		.00
16. Balance of tax due (line 10 minus line 15).....	16		.00
17. Overpayment (if line 15 is larger than line 10, enter amount).....	17		.00
18. Amount of line 17 to be credited to next year's tax.....	18		.00
19. Amount to be refunded (line 17 minus line 18) .....	19		.00



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