IT-141 REV 03/2022

WEST VIRGINIA FIDUCIARY INCOME TAX RETURN (for resident and non-resident estates and trusts)

Estate or Trust Name FEIN		
Trustee Executor Name		
FIRST LINE OF SECOND LINE OF ADDRESS ADDRESS		
CITY STATE ZIP		
FILING PERIOD EXTENDED FISCAL YEAR FILER CHECK ONE: DUE DATE	CHECK IF AI	_
TYPE OF ENTITY	Resident Final Final GR	Amended
TRUST TRUST ESTATE CH7 CH11 QUALIFIED POULED INCOME FUND Bankruptcy estate		PE TRUST
DECEDENT Date of Death MM/DD/YYYYY SSN	Final Individual Retu Filed for Decedent	ırn
Federal taxable income (enter line 23, Federal Form 1041 or line 11, 1041-QFT)	1	.00
West Virginia fiduciary additions (Schedule B, line 6)	2	.00
West Virginia fiduciary subtractions (Schedule B, line 11)	3	.00
4. West Virginia taxable income (sum of lines 1 and 2 minus line 3)	4	.00
IF THIS IS A SIMPLE TRUST HAVING NO TAXABLE INCOME, OMIT LINES	5-7	
5. West Virginia tax (check one) Rate Schedule Schedule NR	5	.00
6. Credits from Tax Credit Recap Schedule (see schedule page 6)	6	.00
7. Adjusted tax due (line 5 minus line 6)	7	.00
8. Non-resident income subject to tax (total of income for Beneficiaries, column F)	8	.00
9. West Virginia income tax paid for non-resident beneficiaries (total of Withholding for Beneficiaries, Column H)	9	.00
10. Combined tax due (sum of lines 7 and 9)	10	.00
11. West Virginia fiduciary income tax withheld (See Instructions) 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
		.00
18. Amount of line 17 to be credited to next year's tax	18	
19. Amount to be refunded (line 17 minus line 18)	19	.00
F 3 5 Z U Z Z U 1 W 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	62 63 64 65 66 67 68 69 70 71 72 7	2 74 75 76 77 70 70 0

Schedule SB Form IT-141

WITHHOLDING FOR BENEFICIARIES AND NON-RESIDENT TAX PAID FOR WITHHOLDING

2022

ATTACH ADDITIONAL COPIES OF WITHHOLDING FOR BENEFICIARIES AS NEEDED

			S OF EACH BENE			
NAM	IE	STREET OF	R MAILING ADDRESS	CITY	STATE	ZIP CODE
1						
2						
3						
<u> </u>						
7						
3						
)						
0						
			(E)	(F)	(G)	(H)
SOCIAL SECURITY		RGINIA FILING METHOD	IF NRW-4 PREVIOUSLY	(F) BENEFICIARY SHARE OF WV INCOME	(G) RATE	(H) TAX PAID FOR BENEFICIARIES
#	(B) RESIDENT (C) COMPOSITE (D) NON	IRES PREVIOUSLY FILED			WITHHOLDING
					6.5%	
					6.5%	
					6.5%	
					6.5%	
					6.5%	
					6.5%	
,					6.5%	
					6.5%	
					6.5%	
0					6.5%	

SCHEDULE B FORM IT-141

WEST VIRGINIA FIDUCIARY MODIFICATIONS

2022

Interest income on state and municipal bonds, other than West Virginia					COLUMN II:AMOUNT ALLOCATED
2. Lump sum distribution (Federal Form 4972)	ADDITIONS:			COLUMN I: TO TAL	
3. Federal exemption (Form 1041, line 21)	Interest inco	ome on state and municipal bonds, other than V	Vest Virginia		
4. Other additions – state nature and source	2. Lump sum	distribution (Federal Form 4972)			
5. Electing small business trust additions	3. Federal exe	mption (Form 1041, line 21)			
6. TOTAL ADDITIONS (Add Lines 1 through 5, Col. II and enter here and on Page 1, Line 2)	4. Other additi	ons – state nature and source			
SUBTRACTIONS: COLUMN I:TOTAL 7. Interest income on US obligations specifically exempt from state tax	5. Electing sm	all business trust additions			
7. Interest income on US obligations specifically exempt from state tax			1, Line 2)		
8. West Virginia exemption	SUBTRACTIO	NS:		COLUMN I:TOTAL	COLUMN II:AMOUNT ALLOCATED
9. Other subtractions – state nature and source				600.00	600.00
10. Electing small business trusts subtractions	o. west viigiii			800.00	600.00
11. TOTAL SUBTRACTIONS (Add Lines 7 through 10, Col. II and enter here and on Page 1, Line 3) NET FIDUCIARY MODIFICATIONS COLUMN I:TOTAL COLUMN II:AMOUNT ALLOCATED 12. NET FIDUCIARY MODIFICATIONS (Line 6 minus Line 11) Direct Deposit of Refund CHECKING SAVINGS ROUTING NUMBER PLEASE REVIEW YOUR ACCOUNT INFORMATION FOR ACCURACY. INCORRECT ACCOUNT INFORMATION MAY RESULT IN A \$15.00 RETURNED PAYMENT CHARGE. I authorize the State Tax Division to discuss my return with my preparer VES NO Under penalty of perjury, I declare that I have examined this return, accompanying schedules, and statements, and to the best of my knowledge and belief, it is true, correct and complete. Paid (Signature of Fiduciary or Officer Representing Fiduciary) (Date) (Cafe)	9. Other subtr	actions – state nature and source			
(Signature of Prepager) NET FIDUCIARY MODIFICATIONS COLUMN I:TOTAL COLUMN I:TOTAL COLUMN I:TOTAL COLUMN II:AMOUNT ALLOCATED COLUMN II:TOTAL COLUMN II:AMOUNT ALLOCATED COLUMN II:TOTAL COLUMN III:TOTAL COLUMN IIII COLUMN IIIII COLUMN IIIII COLUMN IIIII COLUMN IIIIII COLUMN IIIIIIII COLUMN IIIIIIIIII COLUMN IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	10. Electing sm	all business trusts subtractions			
NET FIDUCIARY MODIFICATIONS (Line 6 minus Line 11) Direct Deposit of Refund CHECKING SAVINGS ROUTING NUMBER PLEASE REVIEW YOUR ACCOUNT INFORMATION FOR ACCURACY, INCORRECT ACCOUNT INFORMATION MAY RESULT IN A \$15.00 RETURNED PAYMENT CHARGE. Lauthorize the State Tax Division to discuss my return with my preparer YES NO Under penalty of perjury, I declare that I have examined this return, accompanying schedules, and statements, and to the best of my knowledge and belief, it is true, correct and complete. (Signature of Fiduciary or Officer Representing Fiduciary) (Date) (Column I:AMOUNT ALLOCATED COLUMN I:AMOUNT ALLOCATED COL			ue 1 Line 3)		
Direct Deposit of Refund CHECKING SAVINGS ROUTING NUMBER PLEASE REVIEW YOUR ACCOUNT INFORMATION FOR ACCURACY. INCORRECT ACCOUNT INFORMATION MAY RESULT IN A \$15.00 RETURNED PAYMENT CHARGE. I authorize the State Tax Division to discuss my return with my preparer YES NO Under penalty of perjury, I declare that I have examined this return, accompanying schedules, and statements, and to the best of my knowledge and belief, it is true, correct and complete. (Signature of Fiduciary or Officer Representing Fiduciary) (Date) (Cate)				COLUMN I:TOTAL	COLUMN II:AMOUNT ALLOCATED
Direct Deposit of Refund CHECKING SAVINGS ROUTING NUMBER ACCOUNT NUMBER PLEASE REVIEW YOUR ACCOUNT INFORMATION FOR ACCURACY. INCORRECT ACCOUNT INFORMATION MAY RESULT IN A \$15.00 RETURNED PAYMENT CHARGE. I authorize the State Tax Division to discuss my return with my preparer YES NO Under penalty of perjury, I declare that I have examined this return, accompanying schedules, and statements, and to the best of my knowledge and belief, it is true, correct and complete. (Signature of Fiduciary or Officer Representing Fiduciary) (Date) (Pate)					
Of Refund CHECKING SAVINGS ROUTING NUMBER PLEASE REVIEW YOUR ACCOUNT INFORMATION FOR ACCURACY. INCORRECT ACCOUNT INFORMATION MAY RESULT IN A \$15.00 RETURNED PAYMENT CHARGE. I authorize the State Tax Division to discuss my return with my preparer YES NO Under penalty of perjury, I declare that I have examined this return, accompanying schedules, and statements, and to the best of my knowledge and belief, it is true, correct and complete. (Signature of Fiduciary or Officer Representing Fiduciary) (Date) (Pate)	12. NET FIDU	CIARY MODIFICATIONS (Line 6 minus Line 1	1)		
Of Refund CHECKING SAVINGS ROUTING NUMBER PLEASE REVIEW YOUR ACCOUNT INFORMATION FOR ACCURACY. INCORRECT ACCOUNT INFORMATION MAY RESULT IN A \$15.00 RETURNED PAYMENT CHARGE. I authorize the State Tax Division to discuss my return with my preparer YES NO Under penalty of perjury, I declare that I have examined this return, accompanying schedules, and statements, and to the best of my knowledge and belief, it is true, correct and complete. (Signature of Fiduciary or Officer Representing Fiduciary) (Date) (Pate)	Direct Depo	sit			
PLEASE REVIEW YOUR ACCOUNT INFORMATION FOR ACCURACY. INCORRECT ACCOUNT INFORMATION MAY RESULT IN A \$15.00 RETURNED PAYMENT CHARGE. I authorize the State Tax Division to discuss my return with my preparer YES NO Under penalty of perjury, I declare that I have examined this return, accompanying schedules, and statements, and to the best of my knowledge and belief, it is true, correct and complete. (Signature of Fiduciary or Officer Representing Fiduciary) (Date) (Email)			S ROUTING NUMBER	3	ACCOUNT NUMBER
Under penalty of perjury, I declare that I have examined this return, accompanying schedules, and statements, and to the best of my knowledge and belief, it is true, correct and complete. (Signature of Fiduciary or Officer Representing Fiduciary) (Date) (Figure type of Preparer)	PLEASE RE	/IEW YOUR ACCOUNT INFORMATION FOR ACCURACY.			
(Signature of Fiduciary or Officer Representing Fiduciary) (Date) (Email) Paid (Signature of Preparer)	I authorize the State	Tax Division to discuss my return with my preparer YES	NO		
Paid (Signature of Prenarer) (Date)	Under penalty of per	ury, I declare that I have examined this return, accompanying s	schedules, and statements, and to the	best of my knowledge and b	elief, it is true, correct and complete.
Paid (Signature of Prenarer) (Date)					
	(Signature of Fid	uciary or Officer Representing Fiduciary)	(Date)	(Email)	
Preparer's (Suitable of Preparer)	Preparer's	(Signature of Preparer)			(Date)
(Preparer's EIN) (Printed Name) (Telephone Number)	USE Only	(Preparer's EIN)	(Printed Name)		(Telephone Number)

SCHEDULE NR FORM IT-141

NONRESIDENT INCOME, ALLOCATION, AND CALCULATIONS

2022

PART I - NONRESIDENT INCOME AND AL	COL	UMN I FEDERAL RETURN	CO	LUMN II TO WEST VIRGINIA
Interest income (includes QFT)	. 1	.00	1	.00
2. Dividends (includes QFT)	. 2	.00	2	.00
3. Business income or loss	3	.00	3	.00
4. Capital gain or loss (includes QFT)	. 4	.00	4	.00
5. Rents, royalties, partnerships, other estates and trusts, etc	5	.00	5	.00
6. Farm income or loss	. 6	.00	6	.00
7. Ordinary gain or loss	7	.00	7	.00
Other income (state nature of income)	. 8	.00	8	.00
D. Total income (add lines 1 through 8)	9	.00	9	.00
DEDUCTIONS		UMN I FEDERAL RETURN		LUMN II FO WEST VIRGINIA
10. Interest	. 10	.00	10	.0
11. Taxes (includes QFT)	11	.00	11	.0
12. Fiduciary fees (includes QFT)	. 12	.00	12	.00
13. Charitable deduction	. 13	.00	13	.00
14. Attorney, accountant, and return preparer fees (includes QFT)	. 14	.00	14	.00
15. A. Other deductions (see instructions for QFT)	15A	.00	15A	.00
B. Net operating loss deduction	15B	.00	15B	.00
16. Total (sum of lines 10 through 15)	. 16	.00	16	.00
17. Adjusted total income or loss (line 9 minus line 16)	17	.00	17	.00
18. Income distribution deduction	. 18	.00	18	.00
9. Estate tax deduction including certain generation-skipping taxes	19	.00	19	.0
20. Qualified business income deduction. Attach copy of IRS Form 8995 or 8995-A	20	.00	20	.00
21. Federal exemption	. 21	.00	21	.00
22. Total deductions (sum of lines 18 through 21)	22	.00	22	.0
23. Taxable income of fiduciary (line 17 minus line 22)	. 23	.00	23	.00

SCHEDULE NR NONRESIDENT INCOME, ALLOCATION, AND CALCULATIONS

Continues on next page



SCHEDULE NR FORM IT-141

NONRESIDENT INCOME, ALLOCATION, AND CALCULATIONS

2022

	PART II – CALCULATION OF WEST VIRGINIA TAX		
,	24. West Virginia taxable income (page 1, line 4)	24	.00
1	24. West Vilginia taxable income (page 1, line 4)		.00
2	25. Tentative tax (apply rate schedule to amount on line 22)	25	.00
3	26. Income percentage (carry to four decimal places = WV income (line 21, col. II) Federal income (line 21, col. II)	26 •	
5 6	27. West Virginia tax (line 23 times line 24) – enter here and on page 1, line 5	27	.00



TAX CREDIT RECAP SCHEDULE

2022

Both this summary form and the appropriate credit calculation schedule(s) or form(s) must be enclosed with your return to claim a tax credit. Information for these tax credits may be obtained by visiting our website at tax.wv.gov or by calling the Taxpayer Services Division at 1-800-982-8297.

Note: If you are claiming the Schedule E credit(s) or the Neighborhood Investment Program Credit you are no longer required to enclose the other state(s) return(s) or the NIPA-2 schedule with your return. You must maintain the other state(s) return(s) or NIPA-2 schedule in your files.

WEST VIRGINIA TAX CREDIT RECAP SCHEDULE TAX CREDIT SCHEDULE APPLICABLE CREDIT					
TAX CREDIT	SCHEDULE	APPLICAE	BLE CREDIT		
Credit for Income Tax paid to another state(s)	E	1	.00		
* For what states?					
2. General Economic Opportunity Tax Credit	EOTC-PIT	2	.00		
3. High Technology Manufacturing Business	EOTC-HTM	3	.00		
WV Environmental Agricultural Equipment Credit	AG-1	4	.00		
5. WV Military Incentive Credit	J	5	.00		
Neighborhood Investment Program Credit	NIPA-2	6	.00		
7. Historic Rehabilitated Buildings Investment Credit (income producing)	RBIC	7	.00		
Residential Historic Rehabilitated Buildings Investment Credit (not income producing)	RBIC-A	8	.00		
Apprenticeship Training Tax Credit	ATTC-1	9	.00		
Alternative-Fuel Tax Credit	AFTC-1	10	.00		
1. Farm to Food Bank Tax Credit		11	.00		
Downstream Natural Gas Manufacturing Investment Tax Credit	DNG- 2	12	.00		
13. Post Coal Mine Site Business Credit	PCM-2	13	.00		
4. Natural Gas Liquids	NGL-2	14	.00		
5. Donation or Sale of Vehicle to Qualified Charitable Organizations	DSV-1	15	.00		
16. Small Arms And Ammunition Manufacturers Credit	SAAM-1	16	.00		
7. West Virginia Jumpstart Savings Program Credit (Employer Use Only)	JSP-1	17	.00		
Capital Investment in Child-Care Property Tax Credit	CIP	18	.00		
9. Operating Costs of Child Care Property Tax Credit	OCF	19	.00		
20. Industrial Advancement Act Tax Credit		20	.00		
21.TOTAL CREDITS — add all credits above. Enter on Form WV/IT-141, line 6	5	21	.00		