

# West Virginia Fiduciary Income Tax Return (for resident and non-resident estates and trusts) 2019



Estate or Trust Name	FEIN							
Trustee Executor Name	tor							
FIRST LINE OF ADDRESS		COND LINE OF ADDRESS						
CITY	STA							
FILING PERIOD ENDED MM/DD/YYYY	EXTENDED FISC DUE DATE YEAR MM/DD/YYYY FILER	R APPLICAE		ended CHECK ONE:	Resident Non- Resident			
TYPE OF ENTITY:	IRC § 671-678 Grantor Trust	Grantor Trust Election						
DECEDENT INFO:	Date of Death: MM/DD/YYYY				ndividual Return for Decendent			
Federal taxa	ble income (enter line 22, Federal Form 1041 or line 12, 1041-0	QFT)		1	.00			
West Virgini	a fiduciary additions (Schedule B, line 6)			2	.00			
West Virgini	a fiduciary subtractions (Schedule B, line 11)			3	.00			
4. West Virgini	a taxable income (sum of lines 1 and 2 minus line 3)			4	.00			
	IF THIS IS A SIMPLE TRUST HAVING NO 1	TAXABLE INCC	ME, OMIT LINES	5-7				
5. West Virgini	a tax (check one) Rate Schedule 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-residen	t income subject to tax (total of Withholding for Beneficiaries, co	8	.00					
9. West Virgini	a income tax paid for non-resident beneficiaries (total of Withhol	9	.00					
	x due (sum of lines 7 and 9)			10	.00			
	a fiduciary income tax withheld ( <b>See Instructions</b> ) RE IF WITHHOLDING IS FROM NRSR (NON RESIDENT SALE OF REAL ESTA	11	.00					
12. Estimated p	ayments/payments with extension of time	12	.00					
13. Paid with ori	ginal return (amended return only)	13	.00					
14. Overpayme	nt previously refunded or credited (amended return only)	14	.00					
15. Total payme	nts (sum of lines 11, 12, and 13 minus line 14)	15	.00					
16. Balance of t	ax due (line 10 minus line 15)	16	.00					
17. Overpayme	nt (if line 15 is larger than line 10, enter amount)	17	.00					
18. Amount of li	ne 17 to be credited to next year's tax	18	.00					
	19. Amount to be r	19	.00					
P 3 5 2 0 1 9 0 1 W -1-								

#### **SCHEDULE SB:**

#### WITHHOLDING FOR BENEFICIARIES AND NON-RESIDENT TAX PAID FOR WITHHOLDING

	F		AME AND A				EFICIARIESS NE	EDEL			
NAME	-		T OR OTHER I			CIVE	CITY	1	STAT	F	ZIP CODE
1.		0					<u> </u>		<u> </u>		
2.											
3.											
4.											
5.					<del>/=</del> >			<u> </u>	(2)		4.0
SOCIAL SEC		<b>√</b> wes	T VIRGINIA FILING	METHOD	(E)		(F) BENEFICIARY SHA	ARE	(G) RATE	T.	(H) AX PAID FOR
SOCIAL SEC	JUNIII # F	(B) RESIDENT	(C) COMPOSITE	(D) NONRES	F NRV PREVIOUSLY F		OF WV INCOMI	E			ENEFICIARIES ITHHOLDING
1.									6.5%		
2.									6.5%		
3.									6.5%		
4.									6.5%		
5.									6.5%		
6. TOTALS									6.5%		
SCHEDULE B	- WEST VIR	GINIA FIDUCI	ARY MODIFIC	ATIONS			COLUMN I TOTAL				OLUMN II IT ALLOCATED
ADDITIONS.											
<ol> <li>Interest inco</li> </ol>	me on state and	d municipal bon	ds, other than We	est Virginia							
0   1   1   1   1   1   1   1   1   1	::::	(070)									
2. Lump sum d	listribution (Fed	erai Form 4972)						If this	s a		
<ol><li>Federal exer</li></ol>	mption (Form 1)	041. line 20)						Simple having			
								Taxab	le 🗀		
4. Other addition	ons – state natu	ire and source _						Incom OMIT C			
<ol><li>Electing small</li></ol>	all business trus	t additions									
Total addition	ne (add lings 1 :	through 5 and 1	and enter here a	and on page 1 li	20 2)						
SUBTRACTIO	•	unough 5, coi. i	and enter here a	and on page 1, ii					$\vdash$		
		ations specifica	lly exempt from s	tate tax							
8. West Virginia exemption								600.00			
9. Other subtractions – state nature and source											
					-						
<ol><li>Electing small</li></ol>	all business trus	sts subtractions.									
11. Total subtrac	rtions (add lines	7 through 10	ol II and antar b	ore and an near	1 line 2)						
11. TOTAL SUBTRAC	Juons (aud iines	s / unough to, c	oi. Il aliu elilei il	ere and on page	1, 11116 3)						
12. Net fiduciary	modifications (	line 6 minus line	e 11)								
•			.,								
Direct Deposit											
of Refund	CHECK	ING	SAVINGS		DOLLE	NO NII	IMPER		100	011NIT A	
DI EAGE DES	VIEW VOUR AGG	OUNT INCORRE	ON FOR ACCURA	CV INCORPECT :			JMBER May besult in a \$1	E 00 D.			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 Department 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 Fidu	uciary or Office	er Representin	g Fiduciary)		(Date	)	(Email)				
Paid	(Signature of	f Preparer)							(1	Date)	
Preparer's	(2.31.4.4.0								(1	_ ===/	
Use Only											
	(Preparer's E	EIN)		(Printed Na	ame)				(Telep	hone Nu	ımber)



#### **SCHEDULE NR**

#### PART I - NONRESIDENT INCOME AND ALLOCATION

(To be completed by nonresident estates and trusts only)

			COLUMN I		COLUMN II		
INCOME			REPORTED ON FEDERAL RETURN		ALLOCATED TO WEST VIRGINIA		
1.	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
8.	Other income (state nature of income)	8		.00	8		.00
9.	Total income (add lines 1 through 8)	9		.00	9		.00
DI	EDUCTIONS		COLUMN II ALLOCATED TO WEST VIRGINIA				
10.	Interest	10		.00	10		.00
11.	Taxes (includes QFT)	11		.00	11		.00
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) $% \label{eq:qeq} % \label{eq:qeq}$	14		.00	14		.00
15.	Other deductions (see instructions for QFT)	15		.00	15		.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
19.	Federal exemption	19		.00	19		.00
20.	Total deductions (sum of lines 18 and 19)	20		.00	20		.00
21.	Taxable income of fiduciary (line 17 minus line 20)	21		.00	21		.00
	PART II – CALCULAT	ION	OF WEST VIRGIN	IA TAX			
22. West Virginia taxable income (page 1, line 4)							.00
23.	3. Tentative tax (apply rate schedule to amount on line 22)						.00
	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							.00





### Tax Credit Recap Schedule



This form is used by individuals to summarize the tax credits that you may claim against your tax. In addition to completing this summary form, each tax credit has a schedule or form that is used to determine the amount of credit that can be claimed. Both this summary form and the appropriate credit calculation schedule(s) or form(s) MUST BE ENCLOSED with your return in order to claim a tax credit. Information for all of 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	<i>A</i>	APPLICABLE CREDIT				
Credit for Income Tax paid to another state(s)	E	1	.00				
** For what states?		,					
General Economic Opportunity Tax Credit	WV/EOTC-PIT	2	.00				
WV Environmental Agricultural Equipment Credit	WV/AG-1	3	.00				
4. WV Military Incentive Credit	J	4	.00				
Neighborhood Investment Program Credit	NIPA-2	5	.00				
6. Historic Rehabilitated Buildings Investment Credit	RBIC	6	.00				
7. Qualified Rehabilitated Buildings Investment Credit	RBIC-A	7	.00				
West Virginia Film Industry Investment Tax Credit	WV/FIIA-TCS	8	.00				
9. Apprenticeship Training Tax Credit	WV/ATTC-1	9	.00				
10. Alternative-Fuel Tax Credit	AFTC-1	10	.00				
11. Farm to Food Bank Tax Credit		11	.00				
12. <b>TOTAL CREDITS</b> — add lines 1 through 11. <i>Enter on Form WV/IT-141</i> , In	12	.00					

## **REV 5-19**

## IT-141EXT Extension of Time to File Fiduciary and Information Returns

NOTE: This form is to be used for requesting an extension of time to file the fiduciary return and for making tentative payments. This form is not a substitute for filing the annual tax returns.

WHO MAY FILE: Any Estate or Trust needing an extension of time to file the West Virginia Fiduciary Income Tax Return (Form IT-141) and expects to owe tax must file the voucher below. Any taxpayer granted an extension of time to file a federal return is granted the same extension of time to file their West Virginia return. An extension of time for filing does not extend the time for payment. To avoid interest and additions to tax for late payment, use this return to make a tentative payment pending the filing of your annual return.

WHEN TO FILE: All returns must be filed on or before the 15th day of the fourth month following the close of the taxable year or, if the due date falls on a Saturday, Sunday, or legal holiday, the next business day. The taxable year of the estate or trust for West Virginia income tax purposes is the same as the one used for federal tax purposes. For tax year 2019, the due date for an annual Estate or Trust West Virginia Fiduciary Income Tax return is April 15, 2020.

**HOW AND WHERE TO FILE:** Payment of any tax balance due may be made by completing the voucher below, detaching and mailing to:

> **West Virginia State Tax Department Tax Account Administration Division** P.O. Box 2585 **Charleston, WV 25329-2585**

Make check payable to West Virginia State Tax Department.

CLAIMING OF TENTATIVE PAYMENT: A tentative payment made by filing this voucher must be claimed on line 12 of your West Virginia Fiduciary Income Tax Return (Form IT-141).

PLEASE CUT HERE. USE BLUE OR BLACK INK TO COMPLETE VOUCHER. DO NOT WRITE IN BARCODE

		Extension of Time to File Fiduciary and Information Returns		
	Fidu	ciary Tax		
1. Period Ending		2. FEIN		
		3. Amount Enclosed	.00	
Name				
Address				
City	State Zip			