Illinois Department of Revenue 2014 Form IL-1041

## Fiduciary Income and Replacement Tax Return

Due on or before the 15th day of the 4th month following the close of the tax year.

| If this return is not for calendar year 2014, enter your fiscal tax year here. | Enter the amount you are paying. |
| :---: | :---: |
| Tax year beginning $\qquad$ $\qquad$ 20 $\qquad$ , ending $\qquad$ 20 $\qquad$ |  |
| For tax years ending on or after December 31, 2014. For prior years, use the form for that year. | \$ |

## Step 1: Identify your fiduciary

A Check the box that identifies your fiduciary.


Trust


Estate

B Enter your complete legal business name.
If you have a name change, check this box.
Name:

C Enter your mailing address.
If you have an address change or this is a first return, check this box.
c/o:

Mailing address:
City: $\qquad$ State: $\qquad$ ZIP: $\qquad$

D Check the box if one of the following apply.
First return

Final return (If final, enter the date. $\overline{\mathrm{mm}} \frac{}{\mathrm{dd}} \frac{\text { yyyy }}{}$ )
E Check your method of accounting.
Cash
Accrual
$\square$ Other $\qquad$
F Check this box if you completed federal Form 8886, and attach a copy to this return.

G Enter your federal employer identification no. (FEIN).

H Check the box if you are an:
Electing small business trust (ESBT) Individual bankruptcy estate

I Check this box if your residency is not in Illinois and you attached Illinois Schedule NR.

J Check this box if you attached Illinois Schedule 1299-D.

K Check this box if you attached Illinois Schedule I.

L Check this box if you attached Form IL-4562.
M Check this box if you attached Illinois Schedule M (for businesses).

N Check this box if you attached Schedule 80/20.

O If you are making a Discharge of Indebtedness adjustment on Schedule NLD or Form IL-1041, Line 28, check this box and attach federal Form 982.

Step 2: Figure your income or loss

1 Federal taxable income from U.S. Form 1041, Line 22.
2 Federal net operating loss deduction from
U.S. Form 1041, Line 15b. This amount cannot be negative.

3 Taxable income of ESBT, if required. See instructions.
4 Exemption claimed on U.S. Form 1041, Line 20.
5 Illinois income and replacement tax and surcharge deducted in arriving at Line 1.

6 State, municipal, and other interest income excluded from Line 1.
7 Illinois Special Depreciation addition. Attach Form IL-4562.
8 Related-party expenses addition. Attach Schedule 80/20.
9 Distributive share of additions. Attach Schedule(s) K-1-P or K-1-T.
10 Other additions. Attach Illinois Schedule M (for businesses).
11 Add Column B, Lines 1 through 10b. This amount is your income or loss. Report Column A, Lines 5a through 10a, on Schedule K-1-T, Step 5.

## A Beneficiaries

B Fiduciary
$\qquad$

2 00

3

-00

4 .00

5b .00
00

6b
$\qquad$

7b .00

8b $\qquad$
9b $\qquad$
10b
11
. 00

Step 3: Figure your base income or loss

13 August 1, 1969, valuation limitation amount. Attach Schedule F.
14 Payments from certain retirement plans. See instructions.
15 Interest income from U.S. Treasury and other exempt federal obligations.
16 Retirement payments to retired partners.
17 River Edge Redevelopment Zone Dividend subtraction. Attach Schedule 1299-B.

18 High Impact Business Dividend subtraction. Attach Schedule 1299-B.
19 Contributions to certain job training projects. See instructions.
20 Illinois Special Depreciation subtraction. Attach Form IL-4562.
21 Related-party expenses subtraction. Attach Schedule 80/20.
22 Distributive share of subtractions. Attach Schedule(s) K-1-P or K-1-T.
23 ESBT loss amount. See instructions.
24 Other subtractions. Attach Illinois Schedule M (for businesses).
25 Total subtractions. Add Column B, Lines 13b through 24b.
Report Column A, Lines 13a through 24a, on Schedule K-1-T, Step 5.
26 Base income or loss. Subtract Line 25 from Line 12.

## A Beneficiaries

B Fiduciary

| 13a | .00 | 13b | .00 |
| :---: | :---: | :---: | :---: |
| 14a | .00 | 14b | . 00 |
| 15a | .00 | 15b | . 00 |
| 16a | .00 | 16b | .00 |
| 17a | .00 | 17b | . 00 |
| 18a | .00 | 18b | . 00 |
| 19a | .00 | 19b | . 00 |
| 20a | .00 | 20b | . 00 |
| 21a | -00 | 21b | .00 |
| 22a | .00 | 22b | . 00 |
| 23a |  | 23b | .00 |
| 24a | . 00 | 24b | . 00 |
|  |  | 25 | . 00 |
|  |  | 26 | .00 |

[^0]
## Step 4: Figure your net income

27 Base income or net loss from Line 26, or, if a nonresident, from Schedule NR, Line 51.
27 $\qquad$
28 Discharge of Indebtedness adjustment. Attach federal Form 982. See instructions.
28 0

29 Adjusted base income or net loss. Add Lines 27 and 28.
29 $\qquad$
30 Illinois net loss deduction. Attach Schedule NLD.
If Line 29 is zero or a negative amount, enter " 0 ."
30 $\qquad$ .00
31 Standard exemption. (Short-year filers, see instructions.)
Residents only: Enter \$1,000.
Nonresidents only: Enter the amount from Schedule NR, Line 54.
31 $\qquad$
32 Add Lines 30 and 31.
32
.00
33 Net Income. Subtract Line 32 from Line 29.
If the amount is negative, enter " 0 ."

33 .00

## Step 5: Figure your net replacement tax — For trusts only, estates go to Step 6

34 Replacement tax. Multiply Line 33 by 1.5\% (.015).
35 Recapture of investment credits. Attach Schedule 4255.
36 Replacement tax before investment credits. Add Lines 34 and 35.
37 Investment credits. Attach Form IL-477.
38 Net replacement tax. Subtract Line 37 from Line 36 . If the amount is negative, enter " 0 ."

34 00

35 .00
36 . 00

37 .00

38 $\qquad$

39 Enter the amount of your net income from Line 33.
39 . 00

## Step 6: Figure your net income tax - For trusts and estates

40 Income tax. Multiply Line 39 by 5\% (.05). Fiscal filers - See instructions. $\qquad$
41 Recapture of investment credits. Attach Schedule 4255.
41
.00

42 Income tax before credits. Add Lines 40 and 41.
42 $\qquad$ .00
43 Credit for income tax paid to another state while an Illinois resident.
Attach Schedule CR.
44 Income tax credits. Attach Schedule 1299-D.

43 $\qquad$ . 00
44 $\qquad$ . 00

45 Total credits. Add Lines 43 and 44.
46 Net income tax. Subtract Line 45 from Line 42. If the amount is negative, enter " 0 ."
$\qquad$

## Step 7: Figure your refund or balance due

47 Trusts only: net replacement tax from Line 38.
47 . 00
48 Net income tax from Line 46.
48
$\qquad$
46 . -00

49 Compassionate Use of Medical Cannabis Pilot Program Act surcharge. See instructions.
49 $\qquad$
50 Pass-through withholding payments you reported on behalf of your members. Enter the amount from Schedule D, Step 1, Line 6. Attach Schedule D.

50 ._00
51 Total net income and replacement taxes, surcharge, and pass-through withholding payments. Add Lines 47, 48, 49, and 50.

51 $\qquad$
52 Payments.
a Credit from prior year overpayments.
52a $\qquad$ .00
b Form IL-505-B (extension) payment.
52b $\qquad$ .00
c Pass-through withholding payments. Attach Schedule(s) K-1-P or K-1-T. 52c _.00
d Illinois Income Tax withheld. Attach all W-2, W-2G, and 1099 forms.
52d $\qquad$ . 00
e Form IL-516-I prepayments.
52e $\qquad$
f Form IL-516-B prepayments.
52f $\qquad$
53 Total payments. Add Lines 52a through 52f.
54 Overpayment. If Line 53 is greater than Line 51, subtract Line 51 from Line 53.
53 .00

55 Amount to be credited to a subsequent period. See instructions.
56 Refund. Subtract Line 55 from Line 54. This is the amount to be refunded.

54 $\qquad$
55 _ . 00
56 $\qquad$ .00

57 Complete to direct deposit your refund Routing Number |  |  |  |  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |  |  |  |



58 Tax Due. If Line 51 is greater than Line 53, subtract Line 53 from Line 51. This is the amount you owe.

- If you owe tax on Line 58, complete a payment voucher, Form IL-1041-V, make your check payable to
"Illinois Department of Revenue" and attach them to the first page of this form.
Note马 Enter the amount of your payment on the top of Page 1 in the space provided.


## Step 8: $\quad$ Sign here

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete.


If a payment is not enclosed, mail this return to: Illinois Department of Revenue, P.O. Box 19009, Springfield, IL 62794-9009
$>$ If a payment is enclosed, mail this return to: Illinois Department of Revenue, P.O. Box 19053, Springfield, IL 62794-9053


[^0]:    sTor If you are a nonresident of Illinois, complete Schedule NR; otherwise go to Step 4.

