State of Rhode Island and Providence Plantations

2014 RI-1041

Fiduciary Income Tax Return

You must check a		а	Name of estate or trust	Federal er	leral employer identification number							
box: Estates and Trusts			Name and title of fiducia									
		,										
Bank Estat		'	Address 1									
Amer	nded											
Retur			Address 2									
			City, town or post office		State	ZIP code	9	E-mail address				
Year End			Calendar Year: 01/01/20	14 through 12/31/2014	Fis	scal Year:	beginr	ning $MM/DD/20$	L4 throu	gh $MM/DD/2$	015	
Income	1	Fed	leral total income of fiduc	iary from Federal Form 104	41, line	9			1			
	2			eral total income from page								
	3			eral total income from pag								
	4		_	lines 2 and 3					4			
	5	Мо	Modified federal total income. Combine lines 1 and 4 (add net increases or subtract net decreases)									
	6		leral total deductions fron									
	7											
Tax and	8		axable income. Subtract line 6 from line 5									
Credits	9			m page 2, line 34 (residen								
Orouno	10			er allocation. Multiply line 8								
	11			other states from pg 2, line 4	-							
	12		•	rom page 5, Schedule CR,	•							
	13			Add lines 11 and 12					13			
	14:		ode Island income tax after									
				er Rhode Island Credits from				,				
c Electing Small Business Trust Tax. (see instructions)												
Payments				withheld from page 3, Scheo					140			
ayıncık	3 100			withholding AND Schedule W			15a					
	h			-						Check √ i	f	
		b Payments on 2014 Form RI-1041ES and credits carried forward from 2013 15b c Nonresident real estate withholding (nonresident estate or trust only) 15c								extension i	S	
		Other payments								attached.		
				5a, 15b, 15c and 15d					15e			
Amount				an line 15e, SUBTRACT line					100			
Due				ached. Enter underestimatir								
			I to line 16a or subtract from		.9		16b					
				d lines 16a and 16b					16c			
Refund												
rveiuliu	••		If line 15e is larger than line 14d, SUBTRACT line 14d from 15e. This is the amount you overpaid . If there is an amount due for underestimating interest on line 16b, subtract line 16b from line 17									
	18		mount of overpayment to be refunded									
			ount of overpayment to b	19								
I Indox n = =										hoot of my Imposite	dan end	
				ve examined this return and claration of preparer (other								
Authorized officer s			curate and complete. Declaration of preparer (other than taxpayer) is based on all information of which Print name Date							Telephone number		
			•									
Paid prepa	arer	siana	ature	Print name	Э			Date	Tele	phone number		
, , , , , , , , , , , , , , , , , , ,	-	J. 74										
Paid prepa	arer	addr	ess	City, town or post off	ice	State		ZIP Code		PTIN		
J				,								

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Fiduciary Income Tax Return

Name of estate or trust	Federal employer identification number

sc	HED	OULE I		BENEFIC	IARY INFOR	MA	TION (All estates a	and trus	sts must complete th		ıle)	
			Name				Addr	State of Residence	Social Security N	lumber		
20	20 Beneficiary											
21	21 Beneficiary											
00 Danistian												
22		ficiary		dad places attac	ah tha maguirad infam	m atia	n an a concrete chaot e	of none				
-				· ·			on on a separate sheet o					
3C	HEL	OULE II	A		Column B		CATION (To be co Column C	mplete	d by trusts and esta Column D	and estates with nonresident beneficiaries		
		Column A Percent of beneficiaries'		Column A times total federal income page 1, line 1		Column A times total net modifications page 1, line 4		Combine Columns B	and C			
								(add net increases or subtract net decreases.)		col D. Nonresidents enter RI source income from col B.		
			interest (must equal 100%)		Total Federal Income		Modifications to Federal Income		Modified Federal Income		Total RI Source Income	
Resident Beneficiaries	23	23 Beneficiary										
	24	24 Beneficiary										
	25	Beneficiary	/									
	26	Beneficiary	/									
resic eficia	27	Beneficiary	/									
	28	Beneficiar	y									
	29	Beneficiary	/									
	30	Beneficiary	/									
31	Tota	al		100%								
32 Modifications to Rhode Island source income. Enter amount from column C that is included in column E									32			
33 Modified Rhode Island source income. Combine lines 31, col E and 32 (add net increases - subtract net decreases)								es) 33				
34 RI allocation. Divide line 33 by line 31, col D (not greater than 1.000). Enter here and on RI-1041, page 1, line 9								9 34				
SC	HED	OULE III		CREDIT F	OR INCOME	T/	XES PAID TO	ANC	THER STAT	E (reside	nt estates or trusts	only)
35 Rhode Island income tax from page 1, line 8												
36	· · · · · · · · · · · · · · · · · · ·											
37												
38 Divide line 36 by line 37												
39	Multiply line 35 by line 38						39					
40			id to other state Insert name of state paid						40			
41 Maximum tax credit (line 35, 39 or 40, whichever is the SMALLEST). Enter here and on RI-1041, page 1, line 11								1. 41				