2011 IA 1041

	STEERING S	For Calendar Year 2011 or fiscal yea	r beginning,2011, and er	nding, ²⁰ — lowa Fi o	duciary Returr				
Naı	ne (of Estate or Trust		Federal Employer ID Number	Check one:				
Nai	ne,	Address, and Title of Fiduciary		Decedent's Social Security Number					
Name of Attorney			Attorney's Phone Number	lowa County in which estate is pending	Bankruptcy Estate If trust, check one:				
		Address (city, state, ZIP)		Probate No.	Testamentary Inter Vivos				
lowa D Have	epa pri o	rtment of Revenue and to make written or oral or returns been filed for this estate or	presentations on behalf of the trust or es trust? Yes No Is Inc	owa Code section 421.60 to act as the trust or estatate. come Tax Certificate of Acquittance requesions 706 being filed?					
13 (11)				1					
INCOME				2.					
			Jule 3						
				4.					
		. Net business and farm income or loss. At	-						
				6.					
		• , ,		7.					
	8	. Other income. State nature of income		8.	_				
	9	. Total income. Add lines 1 through 8	9 🖊						
	10	. Interest. Enter on Schedule D, page 2		10					
	11	. Taxes. Enter on Schedule D, page 2.		11	_				
	12	. Fiduciary fees. Enter on Schedule D,	_						
	13	. Charitable deduction from income in c	ıment 13	-					
လ္ခ	14	. Attorney, accountant, and return prepare	arer fees. Enter on Schedule D, pa	age 214	-				
ONS	15	. Other deductions not subject to 2% flo	oor. Enter on Schedule D, page 2.	15	-				
payment and voucher here. DEDUCTI	16	. Allowable miscellaneous itemized ded	luctions. Enter on Schedule D, pag	ge 216	-				
	17	. Total. Add lines 10 through 16			7 🖊				
	18	. Balance. Subtract line 17 from line 9.			3 🗸				
		. Distributions to beneficiaries. Complete Sch							
nt ar		20. Federal estate tax attributable to income in respect of a decedent (fiduciary's share) .20							
yme				2					
— ba									
Staple		omplete lines 23-32. Nonresidents, also	•						
0)				23					
OMPUTED TAX		•		24 25					
				25.					
				2740.00					
		. Out-of-state tax credit or nonresident			•				
				28					
	29			29.					
ပ				30.					
	31	. Total credits. Add lines 27 through 30		3 [.]	1				
	32	. Tax liability. Subtract line 31 from 26.							
$\overline{}$	33	. Tax paid with additional lowa Fiduciar	y Income Tax Payment Voucher	33	3				
	34	. Refund. If line 33 is larger than line 32	2, enter the difference	34	4 🗸				
×	35	. Amount due. If line 33 is less than line	e 32, enter the difference	35	5 🗸				
	Mail to: Fiduciary Return Processing, Iowa Department of Revenue, PO Box 10467, Des Moines, IA 50306-0467								
GN HERE	DECLARATION: The undersigned hereby certifies and declares that this return, and any schedules or papers attached hereto, has been duly examined; that to the knowledge and belief of the undersigned, it is a true, correct, and complete return for the taxable year as required by the income tax law of the State of Iowa and the rules and regulations issued under authority thereof. Note: State tax information may be disclosed to tax officials of another state or of the United States for tax administrative purposes.								
	Sig	nature of fiduciary or officer representing fidu	ciary		Date				
SIC	Sig	nature of preparer other than fiduciary	Preparer's ID No.	Address	Date				

Fiduciary Schedules A, B, D, and E

Schedule A - Backgrou	nd Information: Answer	all applicable question	ns.	<u> </u>		-, -, -,				
1. Date estate was opened	or created:		2. Date of decedent's death:							
3. Decedent's business or	occupation:		4. Decedent's age at death:							
5. Was a decedent's final i	return filed? Tyes No	6. Did will of decedent create trust?			Yes 🗌 No					
7. Did decedent file IOWA return(s) up to the date of death? 🗌 Yes 🗋 No If no, attach earnings statement or explanatory affidavit.										
8. Enter decedent's name and address:										
9. Name and Social Securi	ity Number of decedent's sp	ouse, if any:								
10. Enter name(s) of execut	tor(s):									
11. Enter date(s) and amou	nt(s) of executor's fees paid	to executor(s):								
12. Had federal audit been	made on prior returns of de	cedent or the estate or t	rust? 🗌 Yes 🔲 No	Is an audit	now in the pro	cess? 🗌 Yes 🗎 No				
13. Have expenses of admi	nistration or selling expense	s been deducted for fed	leral estate tax purpos	es? 🗌 Yes 🔲 I	No					
14. Did you as fiduciary with	nhold on income distribution	s made to nonresident b	oeneficiaries? 🗌 Yes [□No						
15. Does the estate/trust ele	ect to recognize the gain or	loss on a distribution of	property under section	IRC 643(d)(e)	? ☐ Yes ☐ N	0				
Schedule B - Beneficiar	ies' Shares of Income a	nd Credits: Attach addi	tional pages as necess	ary. In lieu of S	ch. B, attach fe	deral Sch. K-1.				
		Beneficiary A	Beneficiary B	Benef	iciary C	TOTALS				
Names of each beneficial	ary 1									
	2									
	3	1								
4. Iowa resident (Yes/No).	4									
5. Net short-term capital ga	ain5									
6. Net long-term capital ga	in (100%)6									
7. Depreciation and deplet	ion7									
8. Ordinary income subject	t to lowa income tax 8									
9. Income not subject to lo	wa income tax9									
10. Excess deductions										
	NRESIDENT INCOME									
11. Iowa income tax withhel										
12. Withholding agent's ide		.l								
Schedule D - Explanati	on of Expenses				Ī					
Line No.	Explanation					Amount				
						_				
Schedule E - Tax Rate	s									
	Taxable Income			xcess						
	Over But No		Tax Rate	Over						
			+ (0.36% x + (0.72% x	\$0) 61,439)						
	\$2,878	\$5,756 \$15.54	+ (2.43% x	62,878)						
			•	(5,756)						
			*	(2,951) 21,585)						
	\$28,780 \$4	13,170 \$1,403.90	+ (6.80% x \$2	28,780)						
			•	13,170)						
	\$64,755	over \$4,091.95	+ (8.98% x \$6	64,755)		63-001b (09/21/11)				