Wisconsin fiduciary income tax

2	0	1	1

.00

Use	
BLACK	INK

For 2011 or taxable year beginning and ending

BLACK INK $\overline{M} \overline{M} \overline{D} \overline{D} \overline{Y} \overline{Y} \overline{Y} \overline{Y} \overline{Y} \overline{Y} \overline{Y} Y$							
EST	ATES ONLY – Legal last name	Legal first name	M.I.		ent's social security number		
TRU	STS ONLY – Legal name		-				
Nam	e of personal representative, petitioner, or trustee						
Addr	ress of personal representative, petitioner, or trustee	City		State	Zip code		
Cour	nty of jurisdiction	Probate case number		Estate's	 s/Trust's federal EIN		
 Chec	k if applicable Initial return Final retur	n Amended return #	Amended return Address or name change		Check one		
Dat	te trust or bankruptcy estate was created or date o		iaine enange	ا س ا	Electing small business trust		
	n estate, enter age of decedent at date of death	$\overline{M} \overline{M} \overline{D} \overline{D}$	$\overline{Y} \overline{Y} \overline{Y} \overline{Y}$	<u> </u>	Qualified funeral trust		
	f this is a trust return, is the trust Revocable Irrevocable? If a trust, is the grantor a resident of Wisconsin? Yes No Has Form W706 been filed? Yes No		ا _ل ا	Bankruptcy estate			
If a				Inter vivos trust			
Has			ا ·	Testamentary trust			
Spe	ecial Conditions] , , ;	Section 645 election		
Addr	ess where decedent lived at time of death	Zip code			Decedent's estate		
Prin	nt numbers like this → 0 1 23 4 5 6 7 8	Not like this $\rightarrow \emptyset14$	7		NO COMMAS; NO CENTS		
1	Federal taxable income of fiduciary (see instr	uctions)		,	1 .0		
2	Additions (from Schedule A or NR)						
3	Add lines 1 and 2						
4	Subtractions (from Schedule A or NR)						
5	Wisconsin taxable income of fiduciary (subtra						
_	Gross tax (see instructions, page 4)				6a .0		
	ESBT (see instructions, page 4)			(.U		
		. 00		00			
7	Supplement to federal historic rehabilitation of Certain nonrefundable credits from line 6 of S						
8					•		
9	Add credits on lines 7 and 8						
10	Subtract line 9 from line 6a. If line 9 is larger						
11	Alternative minimum tax. Enclose Schedule						
	Add lines 10 and 11				.0		
13	Other credits from Schedule CR, line 19						
	Net tax paid to another state. Enclose Scheo						
15	Add credits on lines 13 and 14						
16	Subtract line 15 from line 12. If line 15 is large				.00		



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OTTE	orm 2		Page Z OI 3
			NO COMMAS; NO CENTS
17	Enter amount from line 16		17 .00
18	Economic development surcharge. Enclose Schedule EDS		.00
19	Recapture of investment credit (see instructions, page 6)		19
20	Add lines 17 through 19		2000
21	Wisconsin income tax withheld (see instructions)	210	0
22	2011 estimated payments and amount applied from 2010 return	220	<u>0</u>
23	Farmland preservation credit. a Schedule FC, line 18	23a 0	<u>0</u>
	b Schedule FC-A, line 13	23b 0	<u>0</u>
24	Other credits from Schedule CR, line 29	240	<u>0</u>
25	AMENDED RETURN ONLY – amount paid with the original return .	250	<u>0</u>
26	Add lines 21 through 25	260	<u>0</u>
27	AMENDED RETURN ONLY – refund from original return less amount applied to 2012 estimated tax	270	0
28	Subtract line 27 from line 26		2800
29	If line 28 is larger than line 20, subtract line 20 from line 28	AMOUNT OVERPAID	2900
30	Amount of line 29 to be REFUNDED TO YOU		.00
31	Amount of line 29 to be applied to your 2012 ESTIMATED TAX	310	<u>0</u>
32	If line 28 is less than line 20, subtract line 28 from line 20	BALANCE DUE	.00
33	Underpayment interest. Exception code – See Schedule U ▶Also include on line 32 (see instructions, page 7)	330	0

Ì	Paper clip copies of federal Form 1041 and schedules to this return.
	Also paper clip copies of Wisconsin Schedules 2K-1, NR, and WD (Form 2) and other documents, if required.
	A request for a closing certificate for fiduciaries must be made on Schedule CC. See instructions.

I, as fiduciary, declare under penalties of law that I have examined this return (including accompanying schedules, statements, and copy of federal income tax return) and to the best of my knowledge and belief it is true, correct, and complete.

Your signature		Date	Daytime phone		
			()		
PERSON PREPARING RETURN (individual and firr Name	n) if other than the preceding signer Signature of preparer	Date	Daytime phone		
			()		
Mail your return to: If making a payment or submitting	Wisconsin Department of Revenue	For Departme Use Only	ent C		
0 , ,	ePO Box 8918, Madison WI 53708-8918			=	
All other trusts and estates	PO Box 8955, Madison WI 53708-8955				



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B. Wisconsin

Adjusted Basis

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.00

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.00

.00

C. Difference

.00

.00

.00

.00

.00

A. Federal

Adjusted Basis

Name(s) shown on Form 2		cedent's social security number		Estate's / Trust's FEIN		
SC	HEDULE A - Additions and Subtractions Resident estate estates and trus	s and trusts only. Part- ts must enclose Schedi	ear and rule NR.	onresiden	t }	
ADI	DITIONS:	COL. 1-Distributabl	e Income	Nondis	COL. 2 tributable Income	
1.	Adjustment to convert 2011 federal taxable income to the amount allowable for Wisconsin (Schedule B)		,		.00.	
2.	Interest (less related expenses) on state and municipal obligations .		.00		.00.	
3.			.00		.00.	
4.	Capital gain/loss adjustment (see instructions)				.00	
5.			.00		.00	
6.	Total additions (add lines 1 through 5). Enter the amount from COL. 2 on line 2 of Form 2	2	.00		.00	
SUE	BTRACTIONS:					
7.	Adjustment to convert 2011 federal taxable income to the amount allowable for Wisconsin (Schedule B)				.00	
8.	Interest (less related expenses) on obligations of the United States .		.00		.00	
9.	Capital gain/loss adjustment (see instructions)				.00	
10.	Refunds of state and local taxes (see instructions)		.00			
11.	Other (specify)		.00			
12.	Total subtractions (add lines 7 through 11). Enter the amount from COL. 2 on line 4 of Form 2		.00	.00 .00		
SC	HEDULE B – Adjustments to Convert 2011 Federal Taxable Amount Allowable for Wisconsin (see instru)			
	NATURE OF ADJUSTMENT – Explain fully on enclosed schedule.	Adjustments for 2011				
	THAT ORE OF ADJOST MENT — Explain fully on enclosed scriedule.	COL. 1 – Distrib	utable	COL. 2	– Nondistributable	
1.	TOTAL from enclosed schedule	.00		.00		
á	a. Enter total from distributable column on Wisconsin Schedule 2K-1, as a	ppropriate.				
ŀ	 If total in nondistributable column is a positive number, enter it on Sch If total in nondistributable column is a negative number, enter it on Sch 		ositive nu	mber.		
No	te: The figure in the nondistributable column must be used by part-year schedule NR.	and nonresident estate	es and tru	ısts to cor	mplete Part I of	
SC	HEDULE C – Adjustments to Capital Gains/Losses Because Had Different Basis for Wisconsin and Feder			ed of		
1.	Description of capital assets held ONE YEAR OR LESS and reason for difference in basis	A. Federal Adjusted Basis		sconsin d Basis	C. Difference	
á	a	.00		.00	.00	
).	.00		.00	.00.	
(.00		.00	.00	

2. TOTAL - Combine amounts in column C. Fill in here and on line 4 of Wisconsin Schedule WD (Form 2)

4. TOTAL - Combine amounts in column C. Fill in here and on line 12 of Wisconsin Schedule WD (Form 2)

Description of capital assets held MORE THAN ONE YEAR

and reason for difference in basis

3.