• Ohio	Departme Taxation			2015	IT 10 Fiducia	ary
Check here if an	nended returr	ı 15	190106		Income	e Tax Return
Check here if fir	nal return		Use only	black ink.		
Federal employer I.D. Use UPPERCASE		Social Security no.	of decedent (estat	es only)		For taxable year beginning in M M / 2 0 1 5
Name of trust or estate	е					
Name of trust or estat	e (second line)				
Fiduciary name and ti	tle					
Address (if address c	hange, check	box)				
City				State ZIP code		
E-mail address						
Check Applicable B	Box(es)			Do not	staple or other	wise attach.
Simple trust	OR	Complex tru	ıst		oorting docume <u>he last page</u> of	ents, including K-1's, this return.
Resident trust	OR	Nonresiden	t trust		Mail to:	:
Irrevocable trust		Testamenta	ry trust		o Dept. of 1 P.O. Box 2	619
Bankruptcy esta	te	Decedent's	estate		nbus, OH 43 form are on ou	3216-2619 r Web site at tax.ohio.gov
INCOME AND TA	X INFORM	ATION – If amour	nt is negative, typ	e the negative sign ("–")	before the figure	е.
Federal taxable inc	ome (from line	22 of IRS form 1041).	Attach page 1 of	IRS form 1041	1.	00
2. Net adjustments from	om Schedule /	A, line 42		:	2.	00
3. Ohio taxable incon	ne (line 1 plus	or minus line 2). Esta	tes should skip lin	es 4-7	3.	00
4. Allocated qualifying	g trust amount	from Schedule F, line	e 58 (trusts only)	4	4.	0 0
5. Apportioned trust in	ncome from S	chedule G, line 61 (tre	usts only)		5.	0 0
6. Allocated trust inco	ome from Sche	edule H, line 64 (trust	s only)		6.	00
				ro, enter -0-)	7.	0 0
	•	,		exable income (trusts,	8.	0 0
9. Credits from Scheo	dule B, line 47	(estates only)			9.	0 0
	ates and trusts	from Schedule E (at	tach Schedule E);	dule D (estates); busi- and Schedule I credit	0.	00



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FE	:IN	15180206			Fiduciary Income Tax Return		
INC	COME AND TAX INFORMATION	cont.					
						0	0
11.	Tax after nonrefundable credits (line 8 minus	s the amount on lines 9 and 10)		11.			
12. l	nterest penalty on underpayment of estimated	d tax (attach Ohio form IT/SD 2210)		12.		0	0
13.	Total Ohio tax (sum of lines 11 and 12)			13.		0	0
44 1	Not no monto from line 77 on none 5	14	0	0			
	Net payments from line 77 on page 5 Refundable business credits (attach docun	000	Λ	Ω			
t	ation)	15.	0				
16.	Total (sum of lines 14 and 15)	16.	0	0			
17 I	If line 16 is more than line 13, subtract line 1	3 from line 16. This is your overpayment		17		0	0
18. /	Amount of line 17 to be credited to 2016 estin	nated		0			
t	ax liabilityCREDIT TO 201	16 ▶ 18.	0				0
	`	ne 18 from line 17) YOUR REFUND				U	0
		an line 16, subtract line 16 from line 13, but not le				0	0
04.1	,			0.4		0	0
		ed return, if any		21.			
i		on checkTOTAL AMOUNT DUE				U	0
_	•	ss, no refund will be issued. If you owe \$1.00	or	less,	no payment is necessary.	_	
O.	GN HERE (required)		4				
I de sta rec	eclare under penalties of perjury that this re tements, has been examined by me and to bot and complete return and report.	port, including any accompanying schedules and the best of my knowledge and belief is a true, cor			For Department Use On	ly	
I de sta rec	eclare under penalties of perjury that this re tements, has been examined by me and to to that and complete return and report.	the best of my knowledge and belief is a true, cor Preparer's name (please print)			For Department Use On	ily	
I de sta rec	eclare under penalties of perjury that this re tements, has been examined by me and to to that and complete return and report.	the best of my knowledge and belief is a true, cor			For Department Use On	lly	
Sig	eclare under penalties of perjury that this restements, has been examined by me and to be and complete return and report. Ignature of fiduciary or trust officer Date Luciary's or trust officer's phone number	Preparer's name (please print) Preparer's address (including ZIP code) Preparer's phone number				ily	
Sig	eclare under penalties of perjury that this re stements, has been examined by me and to to ect and complete return and report. gnature of fiduciary or trust officer Date	Preparer's name (please print) Preparer's address (including ZIP code) Preparer's phone number			For Department Use On	ily	
Sig Title	eclare under penalties of perjury that this restements, has been examined by me and to the stand complete return and report. Inature of fiduciary or trust officer Date Juciary's or trust officer's phone number you authorize your preparer to contact us re	Preparer's name (please print) Preparer's address (including ZIP code) Preparer's phone number	- -	REL	Code	ily	
Sig Titl Fid Do	eclare under penalties of perjury that this restements, has been examined by me and to extrand complete return and report. Institute of fiduciary or trust officer Bate Luciary's or trust officer's phone number you authorize your preparer to contact us recommended. CHEDULE A – ADJUSTMENTS TO	Preparer's name (please print) Preparer's address (including ZIP code) Preparer's phone number egarding this return? Yes No FEDERAL TAXABLE INCOME NET	- - OF	П	Code		0
Sig Titl Fid Do	eclare under penalties of perjury that this restements, has been examined by me and to extrand complete return and report. Institute of fiduciary or trust officer Bate Luciary's or trust officer's phone number you authorize your preparer to contact us recommended. CHEDULE A – ADJUSTMENTS TO	Preparer's name (please print) Preparer's address (including ZIP code) Preparer's phone number egarding this return? Yes No	- - OF	П	Code	0	H
Sig Titl Do SO Add 23.	eclare under penalties of perjury that this restements, has been examined by me and to extrand complete return and report. Inature of fiduciary or trust officer Bate Luciary's or trust officer's phone number you authorize your preparer to contact us received. CHEDULE A — ADJUSTMENTS TO Stitions Federal and/or non-Ohio state or local gove	Preparer's name (please print) Preparer's address (including ZIP code) Preparer's phone number egarding this return? Yes No FEDERAL TAXABLE INCOME NET	- - -	23.	Code	0 0	0
I dd sta reconstruction Sig Titl Do SC Add 23.	eclare under penalties of perjury that this restements, has been examined by me and to extrand complete return and report. Inature of fiduciary or trust officer Bate Luciary's or trust officer's phone number you authorize your preparer to contact us received. CHEDULE A — ADJUSTMENTS TO ditions Federal and/or non-Ohio state or local governments.	Preparer's name (please print) Preparer's address (including ZIP code) Preparer's phone number egarding this return? Yes No PEDERAL TAXABLE INCOME NET (emment interest and dividends not distributed	- - -	23.	Code	0 0	H
I dd sta recommend of state of	eclare under penalties of perjury that this restements, has been examined by me and to extra and complete return and report. Inature of fiduciary or trust officer Buciary's or trust officer's phone number you authorize your preparer to contact us received. CHEDULE A — ADJUSTMENTS TO ditions Federal and/or non-Ohio state or local governments. Pass-through entity and financial institutions. Income from an ESBT not shown in federal	Preparer's name (please print) Preparer's address (including ZIP code) Preparer's phone number egarding this return? Yes No FEDERAL TAXABLE INCOME NET (emment interest and dividends not distributed	- - -	23. 24. 25.	Code	0 0	0
I dd sta reconstruction Sig Titll Do SC Add 23. 24. 25. 26.	eclare under penalties of perjury that this restements, has been examined by me and to ext and complete return and report. Inature of fiduciary or trust officer Bate Luciary's or trust officer's phone number you authorize your preparer to contact us received and/or non-Ohio state or local governments. Pass-through entity and financial institutions. Income from an ESBT not shown in federal Losses from sale or other disposition of Ohio	Preparer's name (please print) Preparer's address (including ZIP code) Preparer's phone number egarding this return? Yes No PEDERAL TAXABLE INCOME NET (ernment interest and dividends not distributed s taxes paid and related member add-back to public obligations	OF	23. 24. 25. 26.	Code	0 0 0	0
Sig Titl Do SC Add 23. 24. 25. 26. 27.	eclare under penalties of perjury that this restements, has been examined by me and to ext and complete return and report. Inature of fiduciary or trust officer Bate Luciary's or trust officer's phone number you authorize your preparer to contact us received and/or non-Ohio state or local governments. Pass-through entity and financial institutions. Income from an ESBT not shown in federal Losses from sale or other disposition of Ohio	Preparer's name (please print) Preparer's address (including ZIP code) Preparer's phone number egarding this return? Yes No FEDERAL TAXABLE INCOME NET (emment interest and dividends not distributed	OF	23. 24. 25. 26.	Code	0 0 0	0 0 0
I do starred Sig	eclare under penalties of perjury that this restements, has been examined by me and to ext and complete return and report. Inature of fiduciary or trust officer Bate Luciary's or trust officer's phone number you authorize your preparer to contact us receptable. CHEDULE A — ADJUSTMENTS TO Sitions Federal and/or non-Ohio state or local gove Pass-through entity and financial institutions. Income from an ESBT not shown in federal Losses from sale or other disposition of Ohio Recovery of amount previously deducted on Adjustment for Internal Revenue Code sect 2/3, 5/6 or 6/6 (check applicable)	Preparer's name (please print) Preparer's address (including ZIP code) Preparer's phone number egarding this return? Yes No Preparer and dividends not distributed staxes paid and related member add-back to public obligations	OF	23. 24. 25. 26. 27.	Code	0 0 0 0 0	0 0 0 0
Sig ————————————————————————————————————	eclare under penalties of perjury that this restements, has been examined by me and to ext and complete return and report. Inature of fiduciary or trust officer Bate Luciary's or trust officer's phone number you authorize your preparer to contact us receptable. CHEDULE A — ADJUSTMENTS TO Sitions Federal and/or non-Ohio state or local gove Pass-through entity and financial institutions. Income from an ESBT not shown in federal Losses from sale or other disposition of Ohi Recovery of amount previously deducted or Adjustment for Internal Revenue Code sect 2/3, 5/6 or 6/6 (check applicable Federal personal exemption (estates only), left and complete returns and the second of the content of the second of the content of the second of the content of the second of	Preparer's name (please print) Preparer's address (including ZIP code) Preparer's phone number egarding this return? Yes No Preparer and dividends not distributed staxes paid and related member add-back to public obligations	OF	23. 24. 25. 26. 27.	Code	0 0 0	0 0 0 0
Sig Titl Do SO Add 23. 24. 25. 26. 27. 28. 29.	eclare under penalties of perjury that this restements, has been examined by me and to ext and complete return and report. Inature of fiduciary or trust officer Bate Luciary's or trust officer's phone number you authorize your preparer to contact us received and/or non-Ohio state or local governments. Pass-through entity and financial institutions. Income from an ESBT not shown in federal Losses from sale or other disposition of Ohio Recovery of amount previously deducted or Adjustment for Internal Revenue Code sect 2/3, 5/6 or 6/6 (check applicable Federal personal exemption (estates only), lefederal tax adjustments	Preparer's name (please print) Preparer's address (including ZIP code) Preparer's phone number egarding this return? Yes No Preparer and dividends not distributed staxes paid and related member add-back to public obligations	OF	23. 24. 25. 26. 27. 28. 29.	Code	0 0 0 0 0	0 0 0 0 0
Sig Titl Do SC Add 23. 24. 25. 26. 27. 28. 29. 30.	eclare under penalties of perjury that this restements, has been examined by me and to extements, has been examined by me and to exte and complete return and report. Inature of fiduciary or trust officer But Date Juciary's or trust officer's phone number you authorize your preparer to contact us restricted and/or non-Ohio state or local gover pease-through entity and financial institutions. Pass-through entity and financial institutions. Income from an ESBT not shown in federal Losses from sale or other disposition of Ohio Recovery of amount previously deducted or Adjustment for Internal Revenue Code sect 2/3, 5/6 or 6/6 (check applicable federal tax adjustments	Preparer's name (please print) Preparer's address (including ZIP code) Preparer's phone number egarding this return? Yes No PEDERAL TAXABLE INCOME NET (PERMENTAL TAXABLE INCOME NET (OF	23. 24. 25. 26. 27. 28. 29.	Code	0 0 0 0 0 0	0 0 0 0 0





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SCHEDULE A – A	DJUSTMENTS TO FEDERAL TAXABLE INCOME NET C	F RELATED EXPENSEScont.		
	educt income items described below only to the extent that those y deducted or excluded from federal taxable income after distributions.		0	0
32. Federal interest and	dividends exempt from state taxation net of related expenses	32.	0	
33. Certain state and me	unicipal income tax overpayments	33.	0	0
34. Losses from an ESE	BT not shown in federal taxable income	34.	0	0
	pense not previously deducted due to the federal targeted jobs credit or y credit		0	0
36. Interest income from	n Ohio public obligations and Ohio purchase obligations and gains from sposition of Ohio public obligations		0	0
37. Refunds or reimbur	rsements of prior year federal itemized deductions and miscellaneous ents		0	0
38 Farm income from a	farm of at least 10 acres (trusts only)	38	0	0
	al Revenue Code section 168(k) depreciation expense. Attach a separate		Ο	Ω
	calculations designating 1/2, 1/5 or 1/6		0	
40. Repayment of incom	ne reported in a prior year and not otherwise deducted	40.	0	0
41. Total deductions (su	m of lines 32 through 40)	41	0	0
			0	0
	btract line 41 from line 31). Enter here and on line 2	42.		
SCHEDULE B – E	STATE CREDITS			
43. Retirement income	credit (see instructions for credit table) (limit – \$200)	43.	0	0
44. Senior citizen's cred	lit (limit – \$50 per return)	44.	0	0
45. Child and dependent	t care credit (see instructions and worksheet in Ohio form IT 1040 booklet).	45.	0	0
	outions credit		0	0
·			0	0
	edits (sum of lines 43 through 46) – enter here and on line 9		_	
	STATE OHIO RESIDENT CREDIT — If amount is negative, type	ee the negative sign ("–") before the figure.		
-	line 3 subjected to tax by other states or the District of Columbia ent. New limitation – see instructions	48.	0	0
49. Enter Ohio taxable	income (line 3)	49.	0	0
	e 49 and enter percentage here%. Multiply this percentage vn on line 8 reduced by any amount shown on line 9	50.	0	0
51. Enter the 2015 incom	e tax, less all related credits other than withholding and estimated tax payments om previous years, paid to other states or the District of Columbia. New limita-		0	Ω
	nsline 50 or line 51. This is your Ohio resident tax credit. Enter here and on	51.		
	ine 30 of fine 31. This is your Office resident tax credit. Effect field and off	52.	0	0
SCHEDULE D - E	STATE NONRESIDENT CREDIT — If amount is negative, type	the negative sign ("-") before the figure.		
	Ohio taxable income (line 3) not earned or received in Ohio	53.	0	0
,	income (line 3)		0	0
55. Divide line 53 by lin	e 54 and enter percentage here%. Multiply this percentage	0 7.		
•	wn on line 8 reduced by the amount shown on line 9. Enter here and on	55.	0	0

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SCHEDULE E - NONREFUNDABLE BUSINESS CREDITS

Note: Schedule E is not included in this return (see instructions).

SCHEDULE F, G, H AND I FOR TRUSTS ONLY

See instructions for a detailed explanation of "Matching, Against Income and Gain, Expense Amounts and Distribution Deduction."

SCHEDULE F – ALLOCATED QUALIFYING TRUST AMOUNTS	
This schedule is used to allocate qualifying trust amounts for trusts recognized gains or losses from the disposition of closely held	investments.
56. Enter the trust's portion of capital gains/losses recognized to the extent included in Ohio taxable income (line 3) if the location of the physical assets of the closely held investee is available	00
57. Enter the percentage of the closely held investee's physical assets located within Ohio57.	
58. Multiply the amount on line 56 by the percentage on line 57. Enter here and on line 458.	0 0
SCHEDULE G – APPORTIONED INCOME FOR TRUSTS – If amount is negative, type the negative sign ("–") before	ore the figure.
59. Enter (i) the trust's business income not included in line 56 and (ii) the trust's qualifying investment income not otherwise a part of business income and not included in line 56	00
60. Enter the Ohio apportionment ratio from line 75 of the apportionment worksheet on page 560. 61. Multiply the amount on line 59 by the apportionment ratio on line 60. Enter here and on line 5	00
SCHEDULE H — ALLOCATED NONBUSINESS INCOME FOR TRUSTS — If amount is negative, type the negative sig	n ("–") before the figure.
If distributive share is business income from a pass-through entity, please use Schedule G.	
62. Resident trusts: Enter the trust's portion of Ohio taxable income (line 3) not reported on lines 56 or 59	0 0
63. Nonresident trusts: Enter the trust's portion of Ohio taxable income (line 3) not reported on lines 56 or 59 to the extent such income (i) was derived from real or tangible property	
located in or based in Ohio or (ii) was sitused to Ohio (see instructions for line 63) or (iii) was described in Ohio Revised Code section 5747.21263.	0 0
64. Add lines 62 and 63 and enter here and on line 664.	0 0

SCHEDULE I - TAX CREDIT FOR RESIDENT TRUSTS - If amount is negative, type the negative sign ("-") before the figure.

65. Enter the amount of allocated resident trust nonbusiness income (line 62, above) subjeto tax in one or more states or in the District of Columbia		0 0
66. Enter the amount from line 8	66.	00
67. Enter the amount of modified Ohio taxable income from line 7	67.	0 0
68. Divide line 66 by line 67 and enter the percentage here. This is the average effective t rate		
69. Multiply the amount on line 65 by the percentage reported on line 68	69.	0 0
70. Enter the amount of tax actually paid by the resident trust to another state or the District Columbia on the trust's allocated nonbusiness income	t of	0 0
71. Enter the smaller of the amount on lines 69 and 70. This is the resident trust's Ohio t credit. Enter here and on line 10	tax	0 0



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se this worksheet to calculate t	KSHEET he apportionment rat	io for the trust's modifie	ed business in	come an	d qualifying investm	nent income include	d in Oh	nio
ole income. Note: All ratios are			ou 0 00011000 111		a qua,g cc		u o.	
. Property		Within Ohio			То	tal Everywhere		
a) Owned (average cost)			0 0				0	C
.,								
		Within Ohio			То	tal Everywhere		
b) Rented (annual rental X 8)			0 0				0	C
)							
		Within Ohio			То	tal Everywhere		
			0 0	÷			0	С
c) Total (lines 72a and 72b)			00	Ŧ				
			Ratio		Weight	Wainhtad Da	41.	
			Kalio		1	Weighted Ra	1110	
		=			x .20 =			
					_			
		Within Ohio			10	tal Everywhere		_
Payroll			0 0	÷			0	C
			Ratio		Weight	Weighted Ra	itio	
		=			x .20 =			
		Within Ohio			То	tal Everywhere		
			0 0	÷			0	C
Sales				•				
			Ratio		Weight	Weighted Ra	itio	
		_	Italio		x .60 =	Weighted Na	1110	
		=			X .00 -			
						Weighted Ra	itio	
Total weighted apportionmer	nt ratio (add weighted	ratio from lines 72c, 7	3 and 74). En	ter ratio h	nere and on	Weighted Na	1110	
Schedule G, line 60 (carry to								
ote: If the denominator of any							eight g	ive
	used is 100%, i.e., if	no property/payroll, us	se 25% and 7	5%; if no	sales, use 50% pro	pperty/payroll.		
e combined number of factors		F 4000(a) and 184	0/->					
e combined number of factors	IEEE INCLUE	E 1099(s) and w-						
ET PAYMENT WORKSI			over		76c. 1099 withhold	ings		
ET PAYMENT WORKSI		Prior year credit carry						٦.
		Prior year credit carry		0 0			0 (J
ET PAYMENT WORKSI a. Estimated payments	76b.	Prior year credit carry Refunds previously cl					0 0	J
ET PAYMENT WORKSI a. Estimated payments	76b.		aimed				0 0	J
ET PAYMENT WORKSI a. Estimated payments d. W-2 withholdings	76b. 0 0 76e.	Refunds previously cl	aimed	0 0			0 (J
ET PAYMENT WORKSI	76b. 0 0 76e.	Refunds previously cl	aimed	0 0			0 (J