

DR 0105 (10/25/21)
COLORADO DEPARTMENT OF REVENUE Tax.Colorado.gov Page 1 of 8

2021 Colorado Fiduciary Income Tax Return

(0033)

		Fiscal Year Beginning (MM/DD/21)		Fiscal Ye	ar Ending (N	MM/DD/YY)	
Mai	k box here if this is a:						
	• Final R	eturn • Amended	I Return				
Nar	ne of estate or trust				Colorado A	Account Number	er
Mar	ne of fiduciary				● Federal Er	nployer ID Nur	mher
IVAI	ic of inductary				r cuciai Li	inployer ID ING	niber
					•		
Add	ress				Date estate	e or trust create	ed (MM/DD/YY)
City					State	ZIP	
mo	h respect to the tax year, did or will the estate re than \$1,000 in Colorado-source income to reficiaries? (mark one)		⁄es No			nd All Amou Nearest D	
-	- Charles Control of the Control of						
	Federal taxable income from federal for	m 1041 line 23		• 1			00
2.	Additions to federal taxable			• 2			0.0
	income Explain:			• 2			00
3.	Colorado Marijuana Business Deduction	n		• 3			00
	Subtractions from federal						
_	taxable income Explain:		- Line - O	• 4			0.0
5.	Net modifications: sum lines 3 and 4. The Use brackets for negative numbers.	nen, subtract that sum fron	n line 2.	5			00
	OSC DIRECTOR TO TIEGULIVE HUMBERS.						
6.	Net modifications allocated to beneficial	ries		• 6			00
_	Net modifications allocated to the cotate	an truck as bireast line C fro	ana lina F	7			0.0
7.	Net modifications allocated to the estate	e or trust, subtract line 6 irc	om ime 5	7			00
8.	Colorado taxable income of the estate of	or trust, sum of lines 1 and	7	• 8			00
9.	Normal Tax, 4.5% of the amount on line						
	tax from Schedule E, line 8. You must s	ubmit Schedule E for nonre	esident	•			0.0
10	estates or trusts with your return. Alternative Minimum Tax from Schedule	F line 8 You must submit		• 9			00
10.	Schedule F with your return.	, i, iiile o. Tod mast sabiiii	·	• 10			00
11.	Sum of lines 9 and 10			11			00
12	Credits from Schedule G, line 13. You n	nust submit Schedule G wi	th vour return	a 12			00
	Non-refundable Enterprise Zone credits		ar your return	. + 12			
	DR 1366 line 84. You must submit the D			a 13			0.0



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Nam	ne l	Account Number		
11	Strategic capital tax credit from DR 1330, you must submit the		<u> </u>	
	DR 1330 with your return.	• 14	1	00
	BIC 1000 With your retain.		<u>r</u>	
15.	Sum of lines 12, 13, and 14. This total cannot exceed line 11.	15	5	0.0
16.	Net tax, subtract line 15 from line 11	16	3	00
	·			
17.	Estimated tax, extension payments, and credits	• 17	7	00
	Colorado income tax withheld from wages, you must submit the W	/-2s		
	and/or 1099s claiming Colorado withholding with your return.	• 18	3	0.0
	W-2G withholding from lottery winnings, you must submit each W-			
	with your return.	• 19)	0.0
	Gross conservation easement credit from form DR 1305G line 33.			0.0
	You must submit the DR 1305G with your return. Innovative Motor Vehicle and Innovative Truck Credit from form Di	● 20)	00
	you must submit each DR 0617 with your return.	€ 0017, • 2 1		00
	Business Personal Property Credit: Use the worksheet in the 105 B		1	00
	to calculate, you must submit copy of assessor's statement with you		,	00
	Refundable Renewable Energy Tax Credit from form DR 1366, lin		-	
	you must submit the DR 1366 with your return.	• 23	3	0.0
	,			
24.	Sum of lines 17 through 23	24	t	00
25.	Penalty, also include on line 27 if applicable	• 25	5	00
	Interest, also include on line 27 if applicable	• 26	5	0.0
	If amount on line 16 is greater than amount on line 24, enter amount on line 24, enter amount of line 24, enter amount of line 25, and 26		7	
\vdash	Include amounts, if any, from lines 25 and 26.	• 27	<u> </u>	
28	If line 24 is larger than line 16, enter overpayment	28	2	00
	Time 24 to larger than line 10, enter overpayment			
29.	Overpayment to be credited to 2022 estimated tax	• 29	.	00
30.	Overpayment to be refunded	• 30)	00
	Direct Routing Number	Type:	Checking	Savings
	Deposit Account Number			
<u></u>				
	you want to allow the paid preparer entered below to cuss this return and any related information with the	• Voc	□ No	
	lorado Department of Revenue? See the instructions.	• Yes •	No	
<u></u>	clare under penalty of perjury in the second degree, that this return is true, co	prrect and complete to t	he hest of my kno	wledge and helief
	aration of preparer is based on all information of which the preparer has any		ne best of my kno	wiedge and belief.
\vdash	mit to Colorado.gov/RevenueOnline or mail to: If you are filing this re		payment, please	mail the return to:
	ORADO DEPARTMENT OF REVENUE Denver, CO 80261-0006. If you			
mail	the return to: COLORADO DEPARTMENT OF REVENUE Denver, CO 80)261-000 5 .		
Sign	ature of fiduciary or officer representing fiduciary			Date (MM/DD/YY)
Pers	on or firm preparing return			Date (MM/DD/YY)
1				

The State may convert your check to a one-time electronic banking transaction. Your bank account may be debited as early as the same day received by the State. If converted, your check will not be returned. If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment amount directly from your bank account electronically.



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Schedules A and B (DR 0105)

Page 3 of 8 Note: If any Income Distribution Deduction was claimed for Federal Tax purposes, this page must be completed and submitted with your return.

Name			Account Number	
Sche	dule A—	Names and Addresses of Beneficiaries—Use lines (a)	through (e) for	resident beneficiaries
(a)				
(b)				
(c)				
(d)				
(e)				
— Us	e lines (f)	through (j) for nonresident beneficiaries		
(f)				
(g)				
(h)				
(i)				
(j)				
		Computation of the shares of the Colorado fiduciary adjustme		
	ied among neficiary	the beneficiaries and the fiduciary in proportion to their share Share of federal distributa		distributable net income.
as per	schedule A	Amount	10 1100 111001110	Percent
(a)		\$		%
(b)				%
(c)				%
(d)				%
(e)				%
(f)				%
(g)				%
(h)				%
(i)				%
(j)				%
Subto	tal	\$		%
Fiduci				%
	Total	\$		100%
		n ·		



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Schedules C and D (DR 0105) Note: If you utilize either of these schedules, this page must be submitted with your return.

210103 4993	7 7				uno page					your return.		
Name					Account Number							
Schedule C—Computation of t	the percent	tage of federa	al distri	buta eral	ble net inco	ont	e from	n Colorado	SOL	urces for use	e in t beneficiarie	26
Concadio B, columno 7 ana o, ii	Tacterriiii		odified federal income reportable to Colorado by nonresident bene er Applicable Federal Form 2. From Colorado Source									
												\top
1. Dividends		\$						\$				+
2. Interest (Include exempt in	terest)											$\perp \perp$
3. Partnership/Fiduciary incor	ne											
4. Net rents and royalties												
5. Net profit (loss) business												
6. Other income												
7. Total lines 1 through 6		\$						\$				
8. Expenses												
9. Federal distributable net in	come	\$						\$				
Percent of federal distributable	net incon	ne from Colo	rado s	sourc	ces:							
(Divide line 9, column 2 by line												%
Schedule D—Beneficiaries					s, Income,	Me	odific	cations a	nd \	Withholdin	g	
1. Resident Beneficiary's SSN or ITIN	2. Federa	al Fiduciary Ir	ncome		3. Schedu	ıle	в Ре	rcentage	4.	Fiduciary A	djustment	
(a)	\$							%	\$			
(b)	\$							%	\$			
(c)	\$							%	\$			
(d)	\$					%	\$					
(e)	\$							%	\$			
• 5. Nonresident Beneficiary's SSN or ITIN	6. Federa Net Inc		e 7.		nedule C rcentage	•	R	come eportable olorado			ado Withhold ired 4.55% c nn 8	
(f)	\$				%	ά \$;			\$		00
(g)	\$				%	ώ \$	 i			\$		0.0
(h)	\$					ώ \$				\$		0.0
(i)	\$				%	ώ \$	<u> </u>			\$		00
(j)	\$					6 \$			-	\$		00



DR 0105 line 9

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Schedule E (DR 0105)

Note: If you utilize this schedule, this page must be submitted with your return.

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Name Account Number Schedule E—Part-Year Resident/Nonresident Estate or Trust Apportionment Schedule Federal Column Colorado Column 1. Income, specify type: 0 0 00 0 0 00 0 0 00 00 00 00 00 00 00 **Total Income** • 1 00 00 2. Deductions, specify: 00 00 00 00 00 00 00 00 0 0 00 00 00 **Total Deductions** 2 00 00 3. Taxable income, subtract line 2 from line 1 • 3 00 00 Modifications from DR 0105 line 7 • 4 0 0 00 5. Modified taxable income, sum of lines 3 and 4 • 5 00 00 6. Amount on line 5, Colorado Column divided by amount on line 5, Federal Column 6 % 7. 4.5% of the amount on DR 0105 line 8 7 00 8. Amount on line 7 multiplied by percentage on line 6, enter here and on the





Enter here and on DR 0105 line 10

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Schedule F (DR 0105)

Note: If you utilize this schedule, this page must be submitted with your return.

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Name Account Number Schedule F—Fiduciary Alternative Minimum Tax Computation Schedule Federal Column Colorado Column 1. Fiduciary's share of federal alternative taxable income minus federal AMT exemption 0 0 00 1 2. Modifications from DR 0105 line 7 2 00 00 3. Sum of lines 1 and 2 3 00 00 **4.** 3.47% of the amount on line 3, federal column 4 00 **5. Part-year/Nonresident estate or trust only**, amount on line 3, Colorado column divided by amount on line 3, federal column 5 % 6. Part-year/Nonresident estate or trust only, amount on line 4 multiplied by percentage on line 5 6 00 7 7. Enter normal tax from DR 0105 line 9 00 8. Resident estate or trust enter amount by which line 4 is greater than line 7. Nonresident estate or trust enter amount by which line 6 is greater than line 7.



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Schedule G (DR 0105)

Note: If you utilize this schedule, both pages must be submitted with your return.

Name Account Number Schedule G—Fiduciary Credit Schedule 1. Credit for Tax Paid to Another State - Submit a copy of the relevant pages of each state's tax return when claiming this credit. Such pages must include the adjusted gross income calculation, any disallowed federal deductions and the tax calculation for each state. Compute a separate credit for each state. The Department strongly recommends electronic filing for taxpayers with credits for more than one state. Failure to file electronically may result in delays processing your return. (a) Name of other state • (a) (b) Total tax from the DR 0105 line 11 00 (b) (c) Modified federal taxable income from sources in the other state 00 • (c) (d) Total modified federal taxable income 00 • (d) (e) Amount on line 1(c) divided by amount on line 1(d) % (e) **(f)** Amount on line 1(b) multiplied by percentage on line 1(e) (f) 00 (g) Tax liability to other state 00 (g) **(h)** Allowable credit the smaller of lines 1(f) or line 1(g) (h) 00 Dual Resident Trust Credit for the state of: Attach a copy of the tax return filed with the other state. (a) Colorado tax on income subject to tax in both states (a) 00 (b) Other state's effective tax rate • (b) % (c) Total of both states' tax rates, line 2(b) plus 4.5% (c) % (d) Percentage of credit, line 2(b) divided by line 2(c) (d) % (e) Total credit, line 2(a) multiplied by percentage on line 2(d) (e) 00 3. Credit for prior year alternative minimum tax. See instructions 00 Subtotal of Credits unavailable for carryforward. Add lines 1(h), 2(e), and 3. 00 • Column A - Credit Available • Column B - Credit Used Credit for Remediation of Contaminated Land, you must submit the DR 0349 with your return 00 • 5 00 6. Preservation of Historic Structures credit (per §39-22- 514.5, C.R.S.) carried forward 00 from a prior year. • 6 00 Preservation of Historic Structures credit per §39-22-514.5, C.R.S., (attach certificate from Office of Economic Development or local granting authority) • 7 00 00 If you are claiming the Preservation of Historic Structures credit, enter your credit certificate number issued by OEDIT or History Colorado. • 8



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Schedule G (DR 0105) (cont'd) Note: If you utilize this schedule, both pages must be submitted with your return.

Name			Account Number		
		• Column A -	Credit Availabl	e • Column B	- Credit Used
9. Credit for employer contributions to employee	e 529				
plan, you must submit DR 0289 with your retu	urn. • 9		0	0	00
10. Credit for employer paid leave of absence for organ donation. Employer must complete and					
submit form DR 0375 with their return.	• 10		0	0	00
11. Other Credits, explain below:	• 11		0	0	00
12. Subtotal of Credits available for carryforward.					
Add lines 5, 6, 7, 9, 10, and 11 column A and	B • 12		0	0	00
13. Total credit used, sum of line 4 and line 12,					
column B. Enter the result here and transfer	40				0.0
that amount to the DR 0105 line 12.	• 13				00

File and pay at: Colorado.gov/RevenueOnline

If you are filing this return with a check or payment, please mail the return to:	If you are filing this return without a check or payment, please mail the return to:				
COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-000 6	COLORADO DEPARTMENT OF REVENUE Denver, CO 80261-000 5				
These addresses and zip codes are exclusive to the Colorado Department of Revenue, so a street address is not required.					