

IT-205 Fiduciary Income Tax Return

For calendar year 1986 or fiscal year beginning 1986
and ending, 19

1986

Name of estate or trust		Employer identification number
Name and title of fiduciary		
Address of fiduciary (number and street or rural route)		
City, village or post office	State	ZIP code

- A. Check whether:**
- Estate Simple trust
- Complex trust
- If trust, check:
- Testamentary Inter vivos

- B.** If inter vivos trust, enter name and address of grantor: _____
- C.** If revocable trust which changed state or city residence during the year, enter the date of the change of residence (see inst.): _____
- D. Resident status — check all boxes that apply:**
- (1) NY State resident estate or trust (3) City of NY full-year resident estate or trust (6) City of Yonkers full-year resident estate or trust
- (2) NY State nonresident estate or trust (4) City of NY part-year resident estate or trust (7) City of Yonkers part-year resident estate or trust
- (Attach Form IT-205-A) (5) City of NY nonresident estate or trust (8) City of Yonkers nonresident estate or trust
- (Attach NYC-206 if required) (Attach Y-206 if required)
- E.** Date trust created or, if estate, date of decedent's death: _____ If estate was closed, or trust terminated, enter date: _____
- F.** Was a New York State fiduciary return filed for 1984? _____ 1985? _____ If "No," state reason: _____
- If "Yes," give complete title under which it was filed: _____
- G.** Does the estate or trust have an interest in real property located in New York State? YES (attach details, see inst.) NO
- H.** Has there been an acquisition of a controlling interest in the estate or trust during the tax year? YES (attach details, see inst.) NO

Computation of NY taxable income of a resident estate or trust (Nonresident estates or trusts use Form IT-205-A)	1	Federal taxable income of fiduciary (from page 2, line 24)	1		
	2	Exemption claimed on federal return (from page 2, line 22)	2		
	3	Add lines 1 and 2	3		
	4	New York exemption	4	600	00
	5	Subtract line 4 from line 3	5		
	6	New York modifications relating to amounts allocated to principal (see instructions)	6		
	7	Balance (line 5 and add or subtract line 6)	7		
	8	Fiduciary's share of New York fiduciary adjustment (from page 2, Schedule C, column 5)	8		
	9	New York taxable income of fiduciary (line 7 and add or subtract line 8). Enter on line 10 below	9		
Computation of tax. To be completed for resident and nonresident estates and trusts.	10	New York taxable income of fiduciary (from line 9 above or line 12, Schedule 1, of Form IT-205-A)	10		
	11	State tax on line 10 amount (use State Tax Rate Schedule in inst.) OR Maximum tax (Form IT-250)	11		
	12	State credits (see instructions — attach schedule)	12		
	13	Subtract line 12 from line 11	13		
	14	State separate tax on lump sum distributions and other add-backs (see instructions)	14		
	15	State separate tax on PASS funds (see instructions)	15		
	16	State minimum income tax (see instructions)	16		
	17	Total New York State tax (add lines 13 through 16)	17		
	18	City of NY resident tax on line 10 amount (use City of NY Tax Rate Schedule)	18		
	19	City of NY nonresident fiduciary earnings tax (from Form NYC-206)	19		
	20	City of NY minimum income tax (see instructions)	20		
	21	City of NY separate tax on lump sum distributions and/or on PASS funds (see instructions)	21		
	22	City of Yonkers resident income tax surcharge (multiply line 17 by 15% (.15))	22		
	23	City of Yonkers nonresident fiduciary earnings tax (from Form Y-206)	23		
24	Total New York State, City of New York and City of Yonkers tax (add lines 17 through 23)	24			
25	NY State tax withheld	25			
26	City of NY tax withheld	26			
27	City of Yonkers tax withheld	27			
28	Estimated tax paid (including payments made with IT-370)	28			
29	Total (add lines 25 through 28)	29			
30	If line 29 is larger than line 24, enter amount OVERPAID	30			
31	Amount of line 30 to be REFUNDED TO YOU	31			
32	Amount of line 30 to be credited on 1987 estimated tax	32			
33	If line 24 is larger than line 29, enter AMOUNT YOU OWE (enclose check or money order payable to NY State Income Tax)	33			

SIGN YOUR RETURN	Signature of fiduciary or officer representing fiduciary		Date	
	Preparer's signature		Date	Check if self-employed <input type="checkbox"/>
PAID PREPARER'S USE ONLY	Firm's name (or yours, if self-employed)		Preparer's social security number	
	Address		E.I. No. 141	

Attach a copy of federal Schedule K-1 (Form 1041) for each beneficiary.

Schedule A – Details of federal taxable income of a fiduciary of a resident estate or trust. Enter items as reported for federal tax purposes or attach federal Form 1041.

INCOME	1	Dividends (enter full amount before exclusion)	1			
	2	Interest Income	2			
	3	Partnership income or (loss) and income from another estate or trust	3			
	4	Net rent and royalty income or (loss)	4			
	5	Net business and farm income or (loss) (attach copy of federal Schedules C and F, Form 1040)	5			
	6	Capital gain or (loss) (attach copy of federal Schedule D, Form 1041)	6			
	7	Ordinary gain or (loss) (attach copy of federal Form 4797)	7			
	8	Other income (state nature of income)	8			
	9	Total income (add lines 1 through 8)	9			
DEDUCTIONS	10	Interest	10			
	11	Taxes	11			
	12	Fiduciary fees	12			
	13	Charitable deduction (from federal Form 1041, Schedule A, line 11)	13			
	14	Attorney, accountant, and return preparer fees	14			
	15	Other deductions (itemize on attached sheet)	15			
	16	Total (add lines 10 through 15)	16			
	17	Adjusted total income or (loss) (subtract line 16 from line 9)	17			
	18	Income distribution deduction (from federal Form 1041, Schedule B, line 17) (attach copy of federal Schedule K-1, Form 1041)	18			
	19	Dividend exclusion	19			
	20	Estate tax deduction (attach computation)	20			
	21	Long-term capital gain deduction (from federal Schedule D, Form 1041) (Charity <input type="checkbox"/>)	21			
	22	Exemption (federal)	22			
	23	Total (add lines 18 through 22)	23			
24	Federal taxable income of fiduciary (subtract line 23 from line 17). Enter on line 1, page 1	24				

Schedule B – New York fiduciary adjustment of a resident estate or trust or a nonresident estate or trust with a resident beneficiary

Additions:

25	Interest income on state and local bonds other than New York (gross amount not included in federal income)	25		
26	Income taxes deducted on federal Fiduciary Return (see instructions)	26		
27	Other (identify)	27		
28	Total additions (add lines 25, 26 and 27)	28		

Subtractions:

29	Interest income on United States obligations included in federal income	29		
30	Other (identify)	30		
31	Total subtractions (add lines 29 and 30)	31		
32	New York fiduciary adjustment—difference between lines 28 and 31 to be entered as total of column 5 below	32		

Schedule C – Shares of New York fiduciary adjustment of a resident estate or trust or a nonresident estate or trust having any resident beneficiaries

(1) Name and address of each beneficiary. Check box if beneficiary is a nonresident of → NY State City of NY City of Yonkers	(2) Identifying number of each beneficiary	Shares of federal distributable net income (see instructions)		(5) Shares of New York fiduciary adjustment
		(3) Amount	(4) Percent	
a)				
b)				
c)				
d)				
Fiduciary				
Totals			100%	

The total of column 5, Schedule C, should be the same as line 32 above. If the New York fiduciary adjustment is a plus amount, add the fiduciary's share at line 8, page 1, and add a resident beneficiary's share to the total federal income on his New York return. If the fiduciary adjustment is a minus amount, subtract their respective shares.