For office use only



NEW YORK STATE CITY OF NEW YORK CITY OF YONKERS FIDUCIARY INCOME TAX RETURN

For Jan 1 — Dec 31, 1987 or fiscal tax year beginning

IT-205

,1987, ending

			Attach packet label or print below					E	Employer identification number			
	Name of estate or trust								T_			
			Name and title of fi	duciary				· · · · · · · · · · · · · · · · · · ·	\dashv			
			Address of fiduciary	(number and s	treet or rural rou	te)			_			
									1			
			City, village or post	office		State		ZIP code				
Date trust cre	ated o	r, if estate	e, date of decedent's de	eath:	If	estate was clo	osed, o	r trust terminated	 . enter	date:		
	1		al taxable income of									
rtation of NY income of a estate or trust dent estates or Form IT-205-A.	2	Exemption claimed on federal return (from page 2, line 19)							2		+	
of N e of t or t or t T-20	3	Add lines 1 and 2							3			
on om om om om om om om om om om om om om	4	New York exemption							. 4	600	00	
Computation of NY taxable income of a resident estate or true (Nonresident estates:	5	Subtract line 4 from line 3							5			
	6	New York modifications relating to amounts allocated to principal (see instructions)										
	7								. 7			
T S S E	8	adjustment page 2, denedule 0, column 5,							8			
·	9	interest and and an about addition of Enter of the obligation							9			
	10	the interest in the state of the state of the first the state of the first the state of the stat						10				
	11	State tax on line 10 amount (use State Tax Rate Schedule in inst.)						11				
	12	Additional tax on unearned income (see Instructions)						12				
	12a 13	a Unearned income, if any (from IT-205-I, page 4)										
	14											
	15								-	<u> </u>	+	
	16											
it .	17	State separate tax on PASS funds (see instructions)							16			
şiç	18	State separate tax on PASS funds (see instructions) State minimum income tax (see instructions)							17	<u> </u>	 	
r re its.	19	Total New York State tax (add lines 15 through 18)							18	I	+	
Computation of tax. Tobe completed for resident and nonresiden: estates and trusts.	20	City of	New York resident to	ax on line 10 ar	nount				19			
plet and	[(use City	y of New York lax Hate :	Schedule)		20						
om) tes	21	City of New York capital gain credit (see instructions) 21										
e e Seta	22	Subtract line 21 from line 20						22		T		
To b	23	City of I	City of New York nonresident fiduciary earnings tax (from Form NYC-206)						23			
šide.	24	City of New York minimum income tax (see instructions)						24				
of ta	25	City of NY separate tax on lump sum distributions and/or on PASS funds (see instructions)						25	J			
<u>و</u> 2	26	The state of the s						26				
ıtati and		City of Yonkers nonresident fiduciary earnings tax (from Form Y-206) Total New York State, City of New York and City of Yonkers tax (add lines 19 and 22 through 27)						27				
ndu	28 29							22 through 27): .	28	•		
Son			rk State tax withheld New York tax withhel				29	I				
			Yonkers tax withheld				30	!				
					do with IT 270		31	Į			# 10 m	
		Estimated tax paid (including payments made with IT-370)						20		7		
		If line 33 is larger than line 28, enter amount overpaid						33				
		Amount of line 34 to be refunded to you										
		Amount of line 34 to be credited on 1988 estimated tax 36										
	37											
Sign Your Return			nature of fiduciary or c				<u> </u>	Coss CN :	Date	and the state of t		
Paid Preparer's		Pre	eparer's signature		l . 3	Date :	o e e	Check if self- employed	Prepa	arer's social security nu	mber	
		Firr							E.I. No			

neduk	A Details of federal taxable income	for each beneficiary. fa fiduciary of a reside	ent estate ot trust. Er	iter items as repor	tea for f	cutial	my barbos	
	copy of federal Schedule K-1 (Form 104 A – Details of federal taxable income attach federal Form 1041.			I				
1								
2			<u> </u>		+			
3		ther estates or other trus	SIS		11			
4	Net cont and royalty income (or loss)		· · · · · · · · · · · · · · · · · · ·				7 12 (2)	
5					<u> </u>			
	40401							
6	Cand F, Form 1040) Capital gain (or loss) (attach copy of fede	ral Schedule D, Form 1041)	7					
7	lead (attach conv. of fee	ieral Form 4/9/1	· · · · · · · · · · · · · · · · · · ·					
8	Other income (state nature of income)				9	L		
9	Other income (state nature of income) Total income (add lines 1 through 8)		1	0				
10	Interest		1					Žį.
11	Fiduciary fees	1011 Cabadula A line 61	1					
12	Charitable deduction (from federal Form	1041, Schedule A, Ilile V	1					4.
13	Attorney, accountant, and return prepa	irer tees	1	4				
14	Other deductions (including taxes) (ite				. 15			-
15	Total (add lines 10 through 14) Adjusted total income (or loss) (subtract	at line 15 from line Q1		<u> </u>	16			
16	Adjusted total income (or loss) (subtract	A THE TO HOLL THE ST	3 line 17)					
15 16 17	Income distribution deduction (from fee (attach copy of federal Schedule K-1, F	deral Form 1041, Scriedule E Form 1041)		7				
_	t the care computation	n)		18				
18				9				Ī
19					20	+-		\vdash
20	Total (add lines 17 through 19) Federal taxable income of fiduciary (s	ubtract line 20 from line 16).	Enter on line 1, page	<u> 1 </u>	21	<u> </u>	- efician/	
	Federal taxable income of fiduciary (sale B - New York fiduciary adjustment of	of a resident estate or tru	ist or a nonresident	estate or trust with	a lesiu			
Subtra 26	actions: Interest income on United States obli	gations included in feder	ral income	26	1			
		gations increase	-	27				
27					28	(
2	7 Other (identify) 3 Total subtractions (add lines 26 and 2	27)		at of column 5 below	v 29			
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