

FIDUCIARY ALLOCATION

IT-205-A

| 4 | | | | 1 TO FO | | | | | | | | |
|----------|---------------------------------------|--|-----------------------------|---|----------------------|---|--|--------------------------|---|--------------------------|---|----------------------------|
| | Y | | | | | | | | 19 | 87 , | | |
| | | and e | nding | | | 19 | • | | | | | |
| | ork State Department of To | | | | - | | | | | mnlove | r identification number | er |
| Na | ame of estate or ti | rust | | | | | | | | трюуе | HIGHINGALOH HUMOG | 5 1 |
| | | | | | | | | | | | | |
| Co | mplete this fo | orm as follows: | | | | | | | | | | |
| | Resident es | tate or trust wi | th an | y nonresiden | t be | neficiaries | | | _ | | | |
| | and 3 in that | t order. Then co | mplet | e any of Sche | edule | es 6, 7, 8 and 9 tl | hat apply as de | escribe | ork State sources, ed below. | | | |
| | State cource | e avan if other | incom | ne is distribut: | able | to those benefici | aries. In this ca | ase. In | sident beneficiarie sclude a statemen ne that is not taxa | t With | Form 11-205 to ti | he |
| | □ Nonresident estate or trust | | | | | | | | | | | |
| | Complete So | chedules 4, 5, 2, | , 3 an | d 1 in that or | der. | Then complete a | ny of Schedule | s 6, 7, | , 8 and 9 that app | ly as | follows: | |
| | Schedule 7 | If the estate of the from which the estate of the estate of the estate of the front in the front in the front in the front in the estate of the front in the fron | or trus he Ne or trus | st carries on l w York incom st claims a de | busii e of duc | the business car tion for New York | out of New Yor n be determined ccharitable con | k Stat d. Itributi | e but does not m ons. | | | ords |
| | Schedules 8 | and 9 — If the | estat | e or trust has | gai | ns or losses from | the sale or dis | spositi | on of New York p | ropert | y . | |
| | Instructions Form IT-205- | for completing t <i>A (Inst.)</i> . If Sche | he va edules | rious schedul s 7, 8 and 9 a | es o re n | f this form are or ot required to be | o a separate ins completed, def | tach a | on sneet, nd file only page: | s 1 an | d 2 with Form IT | -205. |
| Sc | hedule 1 — | Computation | of N | lew York tax | cabl | e income of a | nonresident | estat | e or trust | | | |
| 1 | Fiduciary's | share of distrib | utable | e net income | from | New York State | sources | | | | | |
| | (from Scheo | lule 2, column 3 | helow) | 1 | | | | | | 2 | | |
| 2 | | | | | | | | | | _ | | |
| 3 | | | | | | | | | d in line 1 above | | | |
| 4 | Net gain (ii see instruct) | oss) allocated to tions) | prine | cipai from disp | posii | or New York | | | above | 4 | | ļ |
| 5 | Balance (li | ne 3 and add or s | subtrac | ct line 4) | | | | | | 5 | | - |
| 6 | New York | modifications re | lating | to amounts a | alloc | ated to principal | (see instructions) |) | | 7 | | - |
| 7 | | | | | | | | | | | | - |
| 8 | Fiduciary's | share of federa | al esta | ate tax | • • • • | | | | 600 | 00 | | |
| 9 | New York | exemption | | | | | | | | 10 | | |
| 10 11 | i intal of line | es 8 and 9 | | | | | | | page 1, line 10 | | | |
| Sc | hedule 2 — | Fiduciary's a | nd b | eneficiary's | sh | are of income | from New Yo | rk Sta | ate sources and | d of r | et | |
| | | change (see | instru | ctions) | | | | | Note—Enter the amount f | | | n Schedul |
| as | neficiary — same s in Schedule C, | Shares of fed net income (| | | (| 3) Shares of income from NY sources | (4) Shares net chan | | 2, at the total line of colu 24, column b on Schedu amount from Schedule 5. | mn 1. Ent ıle 2, at t | er the amount from Sche he total line of column 3 | dule 4, lin 3. Enter th |
| pag | ge 2, Form IT-205 | (1) Amount | | (2) Percentage | | | | | 4. Transfer the fiduciary (Schedule 2, column 3) | 's share | of income from New Yo | rk source |
| a) — | | | | | L. | | | | of Schedule 2, column 4 of net change on Sched | is a plus | amount, enter the fiduci | iary's shar |
| b) | | | | | | | | ļ | 1. Also, where the net | change | is a plus amount, a r | nonresider |
| | uciary | | | 100% | | | | | beneficiary's share must sources on his NY State | return. If | | |
| lot | | N | | | | of important | duction and | lov n | subtract their respective | | New York St | eto. |
| So | chedule 3 — | Nonresident sources (see | | | are | or income, de | auction and | ах р | reference items | | | |
| | neficiary — same | (1) Dividends from | n NY | (2) Short-term c | | (3) Long-term capita | (4) Other taxable | | | perty) | (6) Federal amoun preference item NY sources an | ns from |
| | s in Schedule C, ge 2, Form IT-205 | sources | | gain from NY proper | | gain from NY property | HOITINT SO | -u10 6 5 | Other deduction of the from NY source | | applicable NY modifications | |
| a) | | | | | | | | | See instruction | ns | See instructi | ons. |

| Schedule 4 - | _ Details of | federal distribu | itable net ir | ncome and | amounts from | n New | York State | sources / | 'see | instructions |
|--------------|--------------|------------------|---------------|-------------|-----------------|----------|------------|-----------|------|---|
| acheome 4 | - Delaus OI | reuerai distribi | JIADIE HEL H | ILUITE ATTU | ailivulits livi | 11 14644 | IOIR CLARE | acultos (| 300 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |

| ine | es 1 — 16 (column a) are similar to entries on page 1, federal Form 1041. | | a) Federal amou | nt | b) | Amount from N York sources | |
|------------|---|----------------------------|-----------------|----------|----------|-------------------------------|----|
| T | 1 Dividends | 1 | | L | <u> </u> | | ot |
| | 2 Interest income | 2 | | <u> </u> | <u> </u> | | ot |
| | 3 Income (or losses) from partnerships, other estates or other trusts | 3 | | | ļ | | _ |
| Ĕ۱ | 4 Net rent and royalty income (or loss) | 4 | | | <u> </u> | | |
| | 5 Net business and farm income (or loss) (attach copy of federal Schedules C and F, Form 1040). | 5 | | | | | L |
| Ž | 6 Capital gain (or loss) (attach copy of federal Schedule D, Form 1041) | 6 | | | | | _ |
| ł | 7 Ordinary gain (or loss) (attach federal Form 4797) | 7 | | | | | |
| | 8 Other income (state nature of income) | 9 | | <u> </u> | | | L |
| | 9 Total income (add lines 1 through 6) | 9 | | | | | L |
| آم: | 10 Interest | 10 | | | | | L |
| DEDUCTIONS | 11 Fiduciary fees | 11 | | | <u> </u> | | L |
| ≝ | 12 Charitable deduction (from federal Form 1041, Schedule A, line 6) | 12 | | | | | L |
| 3 | 13 Attorney, accountant and return preparers fees | 13 | | | | | |
| 3 | 14 Other deductions (including taxes) (itemize on attached sheet) | 14 | | | | | |
| ב | · · · · · · · · · · · · · · · · · · · | 15 | | | | | |
| 6 | | 16 | | | | | |
| ine | es 17-24 (column a) are similar to entries on Schedule B, federal Form 1041. | | | | | | _ |
| 7 | Tax-exempt interest (as adjusted) | 17 | | | | | L |
| 8 | Net gain shown on line 60, column 1. If net loss, enter zero | 18 | | | | | L |
| 9 | Add line 41 and line 35, 36 or 37 whichever is less | 19 | | | | | L |
| 0 | Short-term capital gain included on line 33 | 20 | | | | | |
| 21 | If amount on line 6 above is a loss, enter amount here (as a positive figure) | 21 | | | | | |
| 2 | Total (add lines 16 through 21) | 22 | | | | | L |
| 3 | If amount on line 6 above is a gain, enter amount here | 23 | | | | | |
| 4 | Distributable net income (subtract line 23 from line 22.) Enter column (a) amount as | | | | | | Γ |
| | total of column 1, Schedule 2 and column (b) amount as total of col. 3, Sched. 2 | 24 | | ļ | <u> </u> | | |
| ch | nedule 5 — Modification of amounts from New York State sources (Schedule | 4, cc | olumn b) (see i | nstruc | tions |) | |
| 25 | Additions (specify) | | | | | | |
| | | | | 25 | <u> </u> | | |
| 6 | Subtractions (specifiy) | | | | | | |
| | | | | 26 | 1 | | |
| 7 | Combine lines 25 and 26 and enter the net addition or (subtraction) as the total of colur | mn 4 i | n Schedule 2 | 27 | | | Т |
| ich lev | hedule 6 — Formula basis allocation of business income. Complete if buw York State (attach list giving locations and descriptions of all places both in and out of Ne | ı sine s əw Yorl | ss is carried | on bo | on bu | n and out o |)f |
| | Items Used as Factors (1) Totals – In and 6 New Yo | Out of | | | tate | (3) Percent Column | |
| 28 | Average value of the real and tangible personal property of the business: a) Real property owned | | | | | is of Column | (1 |
| | b) Real property rented from others b | | 1 | | | | |

| | Items Used as Factors | (1 |) Totals — in and Out of New York State | (2) New York Stat Amounts | a (3) | Column (2) |
|----|---|-------|---|------------------------------|-------|---------------------|
| 28 | Average value of the real and tangible personal property of the business: a) Real property owned | | | | | is of Column (1) |
| | b) Real property rented from othersb | | | | | |
| | c) Tangible personal property owned | | | | | |
| | Add lines a, b and c | | | | | % |
| 29 | Wages, salaries and other personal service compensation paid during the year29 | , | | | | % |
| 30 | Gross sales of merchandise, or charges for services, during the year | | | | | % |
| 31 | Total of percentages (add column 3, lines 28, 29 and 30) | | | | | % |
| 32 | Business allocation percentage (divide total percentage on line 31 by 3 or b | | | | | % |
| | etermine the amounts from New York sources in column (b) of Schedu | le 4, | , apply the percenta | age on line 32 In the | man | ner shown |

%=\$

From line no._____\$_____×_

41

Schedule 7 — Computation of New York charitable deduction Amounts paid or permanently set aside for NY charitable purposes from current year's income (see inst.) Tax exempt income and income from sources outside NY State allocable to NY 34 charitable distribution..... (Complete lines 35-38 below only if gain on line 59, column 2, exceeds loss on line 58, column 2.) Long-term capital gain included on line 33..... 35 Enter gain on line 59, column 2, minus loss on 36 36 line 58, column 2..... 37 Enter gain on line 59, column 3, minus loss on 37 line 58, column 3..... Enter the amount on line 35, 36 or 37, whichever is less....... 38 Add lines 34 and 38..... 39 39 40 Balance (subtract line 39 from line 33)..... Enter the short-term capital gain and the net long-term capital gain of the current taxable year from NY

Schedule 8 — Capital gains and losses from sales or exchanges of New York capital assets (see instructions concerning tangible and intangible personal property carried as business assets.)

sources allocable to corpus, paid or permanently set aside for NY charitable purposes.....

Total (add lines 40, 41 and 42). Enter here and on Schedule 4, line 12, column b.

42

43

Amounts paid or pormanontly set aside for NY charitable purposes other than from income of the current year 42

| | a) Kind of property and description | erty and description b) Date acquired (mo/day/yr) c) Date sold (mo/day/yr) d) Gross sales price | | e) Federal cost or other basis, plus expense of sale | | f) Gain (or loss (d less e) | |
|--|---|--|---|--|---------------------------------------|--------------------------------|-----------|
| 4 | | | | | | | |
| 5 | Short-term capital gain from installment sale: | s of New York | property | · · · · · · · · · · · · · · · · · · · | | 45 | |
| 6 | Net short-term gain (or loss) from NY proper | | | | , , , , , , , , , , , , , , , , , , , | | |
| 7 | Net gain (or loss) (combine lines 44 through 46 | | | | | 47 | |
| 8 | Short-term capital loss carryover (see instruct | • | | | ŀ | 48 | |
| 19 | Net short-term gain (or loss) (combine lines 47 | | | | | 49 | |
| art | II — Long-term capital gains and losse | es — assets | of New Yor | rk property hel | d more than 6 | mon | ths |
| | | | | | | - 1 | |
| 0 | | | | | | - | |
| 0 | | | | | | | |
| | Long term capital gain from installment sales | | | | | 51 | |
| i1 | Net long-term gain (or loss) from NY propert | y derived fror | n partnerships | s, S corporations | and fiduciaries. | 52 | |
| 51 52 53 | Net long-term gain (or loss) from NY propert Capital gain distributions | y derived fror | n partnerships | s, S corporations | and fiduciaries. | 52 53 | |
| 51 52 53 | Net long-term gain (or loss) from NY propert Capital gain distributions | y derived fror | n partnerships | s, S corporations | and fiduciaries. | 52 53 54 | |
| 51 52 53 54 55 | Net long-term gain (or loss) from NY propert Capital gain distributions | y derived fror | n partnerships | s, S corporations | and fiduciaries. | 52 53 54 55 | |
| 51 52 53 54 55 56 | Net long-term gain (or loss) from NY propert Capital gain distributions | y derived fror 54 ions; attach co | n partnerships | s, S corporations | and fiduciaries | 52 53 54 55 56 | |
| 51 52 53 54 55 56 57 | Net long-term gain (or loss) from NY propert Capital gain distributions Enter gain, if any, from line 66 Net gain (or loss), combine lines 50 through Long-term capital loss carryover (see instruct Net long-term gain (or loss) (combine lines 55) | y derived fror 54 ions; attach co | n partnerships | s, S corporations | and fiduciaries | 52 53 54 55 | |
| 51 52 53 54 55 56 57 | Net long-term gain (or loss) from NY propert Capital gain distributions | y derived fror 54 ions; attach co | n partnerships mputation) here and on lir | s, S corporations | and fiduciaries | 52 53 54 55 56 | (3) Total |
| 51 52 53 54 55 56 57 Part | Net long-term gain (or loss) from NY propert Capital gain distributions Enter gain, if any, from line 66 Net gain (or loss), combine lines 50 through Long-term capital loss carryover (see instruct Net long-term gain (or loss) (combine lines 55 III — Summary of Parts I and II | y derived fror 54 | n partnerships mputation) here and on lir | s, S corporations | and fiduciaries | 52 53 54 55 56 | (3) Total |
| 50 51 52 53 54 55 56 57 Part | Net long-term gain (or loss) from NY propert Capital gain distributions Enter gain, if any, from line 66 Net gain (or loss), combine lines 50 through Long-term capital loss carryover (see instruct Net long-term gain (or loss) (combine lines 55) | y derived from 54 and 56). Enter | mputation). | s, S corporations | and fiduciaries | 52 53 54 55 56 | (3) Total |

Part I — Sales or exchanges of New York property used in a trade or business and involuntary conversions from other than casualty and theft — property held more than 6 months.

Attach a copy of federal Schedule 4684 to report involuntary conversions of New York property from casualty and thoft.

| a) Kind of property (if necessary, attach statement of descriptive details not shown below) | b) Date acquired (mo/day/yr) | c) Date sold (mo/day/yr) | d) Gross sales price | e) Federal depreciation allowed (or allowable) since acquisition | f) Federal cost or other basis, plus improvements and expense of sale | g) Loss (f minus the sum of d and e) | h) Gain (d plus e minus f) |
|---|------------------------------|-----------------------------|-------------------------|--|--|---|----------------------------------|
| 1 | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | + | |
| | | | | | | | |
| | | | | | | | |
| Gain, if any, from fede | ral Form 4684, Se | ection B, Part I | II, line 21 | | | RELATION OF THE STATE OF | |
| Section 1231 gain from | inetallment cales | from federal | Form 6252, li | ne 23 or 31 | | • | |
| 4 Gain, if any, from feder | ral Form 4797, Pa | rt III, line 32, f | rom other tha | in casualty or the | eft | | |
| 5 Add lines 61 through 6 | 4 in column g an | d column h | | | | | |
| 6 Combine line 65, colum | nn g and line 65, | column h. Ent | er gain (or los | ss) here, and app | propriate line as | | |

- a) If line 66 is a gain, enter the gain as a long-term capital gain on page 3, line 54.
- b) If line 66 is zero or a loss, enter that amount on line 67.

| a) Kind of property (if necessary, attach statement of descriptive details not shown below) | b) Date acquired (mo/day/yr) | c) Date sold (mo/day/yr) | d) Gross sales price | e) Federal depreciation allowed (or allowable) since acquisition | f) Federal cost or other basis, plus improvements and expense of sale | g) Loss (f minus the sum of d and e) | h) Gain (d plus e minus f) | | | |
|---|--|-----------------------------|-------------------------|--|--|--|----------------------------------|--|--|--|
| 7 Loss, if any, from line (| 66 | | | | | | | | | |
| B Gain, if any, from fede | ral Form 4797, Pa | rt III, line 31 | | | | Transfer of the control of the contr | | | | |
| 9 Net gain (or loss) from | federal Form 468 | 34, Section B, | Part II, lines | 13 and 20(a) | | | | | | |
| Ordinary gain from ins | tallment sales from | m federal Forn | n 6252, line 2 | 2 or 30 | | | | | | |
| 1 Recapture of Section | 179 deduction | | | | | 9 | | | | |
| 2 Other ordinary gains a | Other ordinary gains and losses (include property held 6 months or less) | | | | | | | | | |
| | <u> </u> | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 3 Add lines 67 through 7 | | | | | | | | | | |

If schedules on pages 3 and 4 do not apply, detach on perforation and discard pages 3 and 4.