New York State Department of Taxation and Finance

Fiduciary Income Tax Return



IT-205

Type of entity: New York State • City of New York • City of Yonkers For the full year Jan. 1, 2003, through Dec. 31, 2003, or fiscal tax year beginning 0 3 and ending												
Decedent's estate		1 01	Name of estate or trust						Date entity created			
	Simple trust	le trust						▼ Employer identification number				
\square	Complex trust	plex trust						- Employer identification number				
	Qualified disability trust	Name and title of fiduciary						▼ Decedent's social security number (see inst.)				
	SBT (S portion only)	P						Decedent's s	social security n	umber (see inst.)		
	Grantor type trust		Address	of fiduciary (number	and street or rural route)							
	Bankruptcy estate-Ch. 7	Print					Ма	Mark an X in the applicable box:				
	Bankruptcy estate-Ch. 11	_	City, villa	age, or post office	State	ZIP code	Init	Initial return Final return				
	Pooled income fund						If yo	ou do not need fo ou next year, ma	rms mailed			
			1 -	Amended return	Income distribution deduction		NI NI	umber of		7		
				(attach explanation)	(see instructions, Form IT-205-I)			neficiaries				
	Λ Total income	(fro	m back n	200 lino 51)		_		A.				
				-				В.				
					worksheet, line 5		-	C.				
					e 10, column a		-	_				
					pack page, line 62)		-	1.				
				-				2.		 -		
	,	alance (line 1 and add or subtract line 2)						3.		•		
S						e, Schedule C, column 5)		4.		•		
<u>.</u>	5 New York tax	New York taxable income of fiduciary (line 3 and add or subtract line 4)						5.		•		
ξ	6 State tax on	State tax on line 5 amount (full-year resident estate and trust only)						6.				
instructions	7 New York Sta	te a	amount f	from Form IT-230,	Part II, line 2 (resident	estate and trust only)		7.				
Ë.	8 Add lines 6 a	nd [·]	7					8.				
See	9 Allocated Nev	w Yo	ork State	e tax (from Form IT-	-205-A, Schedule 1, line 1	3)						
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		um income tax						14.				
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Address

Mark X if self-employed

here

Date

Date

Daytime phone number (optional)