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Government of the District of Columbia

2019 D-41 Fiduciary Income Tax Return

1 9 0 4 1 0 1 1 0 0 0 2

This is a FILL-IN format. Please do not handwrite any data on this form other than your signature.

OFFICIAL USE ONLY
Vendor ID#0002

Information

Fill in: ◯ *if* amended return *See instructions* Fill in: ◯ if this is your final return

Tax period ending (MMDDYYYY)

Fill in type of entity: ◯ Estate ◯ Simple trust ◯ Complex trust

Fill in type of trust: ◯ Testamentary (created by a will) ◯ Inter vivos (living)

Estate or trust's federal employer ID number

Daytime telephone number

Estate or trust name

Fiduciary's name and title

Fiduciary's address (number, street and suite/apartment number if applicable)

City State Zip Code +4

Complete if entity is a trust (MMDDYYYY)
Date created

If trust ended in 2019, enter date (MMDDYYYY)

Name of grantor

Address of grantor (number, street and suite/apartment number if applicable)

City State Zip Code

Complete if entity is an estate (MMDDYYYY)
Date of deceased's death

If estate ended in 2019, enter date (MMDDYYYY)

Has a DC D-76 or D-76EZ estate tax return been filed? Yes ◯ No ◯

If no, will one be filed? Yes ◯ No ◯

Round cents to nearest dollar. If amount is zero, leave line blank; if minus, enter amount and fill oval.

Income

1	Federal total income *from federal Form 1041.* Fill in if loss ◯	1 $ .00
2	Additions to federal total income *from Calculation A, Line f, page 6 of instructions.*	2 $ .00
3	*Add Lines 1 and 2.* Fill in if loss ◯	3 $ .00
4	Subtractions from federal total income *from Calculation B, Line d, page 6 of instructions.*	4 $ .00
5	Total DC fiduciary income *Subtract Line 4 from Line 3. If zero or a loss, stop here; do not fill in rest of form.* Fill in if loss ◯	5 $ .00

Deductions

6	Interest *from federal Form 1041.*	6 $ .00
7	Taxes *Subtract the state, local and DC franchise tax entered on federal Form 1041.*	7 $ .00
8	Deduction for distributions to beneficiaries *from federal Form 1041.*	8 $ .00
9	Other deductions *Enter total of Lines 12,13,14, 15a, 15b and 19 from federal Form 1041.*	9 $ .00
10	Trust deduction *Enter $100 for trusts. If the trust ended during 2019, prorate the amount. See page 7 for instructions.*	10 $ .00
11	Total deductions *Add Lines 6-10*	11 $ .00
12	Tentative taxable fiduciary income *Subtract Line 11 from Line 5.* Fill in if loss ◯	12 $ .00

Name

FEIN

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13	**Net capital gain from sale or exchange of an eligible investment in a QHTC,** *from Schedule QCGI, Line 3. See instructions.*	13	$ .00
14	**Taxable fiduciary income** *Subtract Line 13 from Line 12.* Fill in if loss ◯	14	$ .00
	Tax and payments		
15	*Tentative Tax on fiduciary income.* *Use Calculation C/Tax Schedule to determine tax*	15	$ .00
16	3% tax on eligible QHTC capital gains income *From Line 4 of Schedule QCGI*	16	$ .00
17	Tax on fiduciary income *Line 15 plus Line 16*	17	$ .00
18	Credit for taxes paid to other states *Credit may not exceed amount on Line 17. See instructions, page 7. Attach copy of state return.*	18	$ .00
19	Net tax on fiduciary income *Line 17 minus Line 18*	19	.00
20	Income tax withheld	20	$ .00
21	2019 estimated fiduciary income tax payments	21	$ .00
22	Payments made with extension of time to file *from FR-127F calculation, Line 3*	22	$ .00
23	If this is an amended 2019 return, payments made with original 2019 D-41 return.	23	$ .00
24	If this is an amended 2019 return, enter refunds requested with original 2019 D-41 return.	24	$ .00
25	Total payments *Add Lines 20 - 23, **do not include Line 24.***	25	$ .00

If Line 25 is more than Line 19 subtract Line 19 from Line 25.

26 Amount of overpayment $ .00

27 Amount, if any, to be applied to 2020 estimated tax $ .00

28 Refund *Subtract Line 27 from Line 26* $ .00

If Line 25 is less than Line 19 subtract Line 25 from Line 19.

29 Total Amount Due $ .00

Payment
Attach check or money order (US dollars) to the D-41P voucher only; make it payable to: DC Treasurer. Write the estate or trust's FEIN and "2019 D-41" on your payment.

Will this refund you requested go to an account outside the U.S.? ◯ Yes ◯ No *See instructions*

Refund Options:

Mark **one** refund choice: ◯ Direct deposit ***or*** ◯ Paper check

Direct Deposit. *To have your refund deposited to your* ◯ ***checking or*** ◯ ***savings*** *account, fill in oval and enter bank routing and account numbers. See instructions.*

Routing Number Account Number

Third party designee *To authorize another person to discuss this return with OTR, fill in here* ◯ *and enter the name and phone number of that person. See instructions.*

Designee's name Phone number

Signature Under penalties of law, I declare that I have examined this return and, to the best of my knowledge, it is correct. Declaration of paid preparer is based on the information available to the preparer.

Signature of fiduciary or officer representing the fiduciary Date

Signature of paid preparer Preparer's Tax Identification Number (PTIN)

Preparer's address (number and street) City State Zip Code

Send your signed and completed original *return to:*
Office of Tax and Revenue
PO Box 96153
Washington DC 20090-6153