





Print in CAPITAL letters using black ink.

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Information Fill in: if amended return See instructions Fill in: if this is you	our 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 Dayti	me 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 (MMDDYYYY) Complete if entity	(MMDDYYYY)
is a trust is an estate Date created Date of decease	ed's death
(AMADDY/V/V)	(MMDDYYYY)
If trust ended in 2023, enter date If estate ended	in 2023,
Name of grantor enter date	
Has a DC D-76 or D-	76EZ estate tax return been filed? Yes No
Address of grantor (number, street and suite/apartment number if applicable) If no, will one be filed	d? Yes No
City State Zip Code	
	Round cents to nearest dollar. If amount is zero, leave line blank;
	if minus, enter amount and fill oval.
1 Federal total income from federal Form 1041. Fill in if loss	1 \$.00
2 Additions to federal total income	
(a) Capital gains deferred on federal return due to investment in a federal	2a\$.00
Qualified Opportunity Fund.	2a\$.00
(b) Other additions to federal total income from Calculation A, Line f, page 8	2b\$.00
3 Add Lines 1, 2a and 2b. Fill in if loss	3 \$.00
4 Subtractions from federal total income	
(a) Capital gains deferred due to DC approved investment in a DC Qualified Opportunity Fund.	4a \$.00
(b) Other subtractions to federal total income from Calculation B, Line d, page 8	4b \$.00
5 Add Lines 4a and 4b.	5 \$.00
C T-t-I DO Siducione incomo a del 111 5 C 11 2 M	
stop here; do not fill in rest of form.	6 \$.00
Deductions 7 Interest from federal Form 1041.	7 \$.00
	8 \$.00
8 Taxes Subtract the state, local and DC franchise tax entered on federal Form 1041	
9 Deduction for distributions to beneficiaries from federal Form 1041.	9 \$.00

D-41 PAGE 2			
Name			
FEIN	2 3 0 4 1 0 1 2 0 0 0 0		
10 Other deductions Enter total of Lines 12,13,14, 15a, 15b and 19 from federal Form 1041	10 \$	00	
11 Trust deduction Enter \$100 for trusts. See page 7 for instructions.	11 \$	00	
12 Total deductions Add Lines 7-11	12 \$.00	
13 Taxable fiduciary income Subtract Line 12 from Line 6. Fill in if loss	13 \$.00	
Tax and payments			
14 Tax on fiduciary income. Use Calculation C/Tax Schedule to determine tax	14 \$.00	
15 Credit for taxes paid to other states Credit may not exceed amount on Line 14. See instructions, page 7. Attach copy of state return.	15 \$.00	
16 DC Low-Income Housing Tax Credit (see instructions).	16 \$.00	
17 Net tax on fiduciary income Line 14 minus Lines 15 and 16, if less than 0, enter 0.	17 \$	00	
18a Income tax withheld	18a \$.00	
18b 2023 estimated fiduciary income tax payments	18b \$.00	
19 Payments made with extension of time to file from FR-127F calculation, Line 3	19 \$.00	
20 If this is an amended 2023 return, payments with original 2023 D-41 return.	20 \$	00	
21 If this is an amended 2023 return, enter refunds requested with original 2023 D-41 return.	21 \$.00	
22 Total payments Add Lines 18a - 20, do not include Line 21.	22 \$.00	
If Line 22 is more than Line 17 subtract Line 17 from Line 22. If Line 22 is Management Solution 17 from Line 22. If Line 22 is Management Solution 17 from Line 22. If Line 22 is Management Solution 17 from Line 22. If Line 22 is Management Solution 17 from Line 22.	ess than Line 17 subtract Line 22 from Line 17. Amount	.00	
24 Amount, if any, to be applied to 2024 estimated tax \$			
Refund Options:			
Mark <u>one</u> refund choice: Direct deposit or Paper check Direct Deposit. To have your refund deposited to your checking or savings account, fill in o	upland arter hank routing and account numbers. Can instru	vations	
Routing Number Account Number	val and enter bank routing and account numbers. See instru	ictions.	
Third party designee To authorize another person to discuss this return with OTR, fill in here and enter Designee's name	r the name and phone number of that person. See instruction Phone number	75.	
Signature Under penalties of law, I declare that I have examined this return and, to the bes Declaration of paid preparer is based on the information available to the preparer			
Signature of fiduciary or officer representing the fiduciary Date			
Contract of side and	durif attended (CIN)		
Signature of paid preparer Preparer's Tax Id	dentification Number (PTIN)		
Preparer's address (number and street) City	State Zip Code		
Email Address			
Send your signed and completed original return to: Office of Tax and Revenue PO Box 96153			

Washington DC 20090-6153