## Form **741**42A741

Typed or printed name of preparer other than fiduciary or agent

## KENTUCKY FIDUCIARY INCOME TAX RETURN

➤ Attach a copy of the federal return including all schedules and statements.

REVENUE CABINET	For calendar year or	other tayahle year					
HIGHER KY		, 2003, and ending	, 2004.		2003		
Check applicable box:	Name of Estate or Trust		Fed	deral Employer	Identification Number		
☐ Decedent's estate							
☐ Simple trust	Name and Title of Fiducians		Date	to Emtity Croats	al .		
☐ Complex trust	- I warne and thie of Hadelary				Date Entity Created		
☐ Grantor trust							
☐ Bankruptcy estate	Address of Fiduciary (Number	and Street or P.O. Box)		Roc	om or Suite Number		
☐ Pooled income fund	radioss of Fladelary (Namber	and street of 1 .e. Boxy		Noo	in or Suite Number		
Check applicable boxes:	City, State and ZIP Code		Telephone Number				
☐ Initial return							
☐ Amended return							
☐ Final return	Number of Schedules	K-1 attached. >					
	•						
		2					
		3					
				5			
		6					
		7					
				8			
		usted total income (loss). Enter h					
. 0		do D. lino 15)		9			
10. Income distribution dedu		10					
· · · · · · · · · · · · · · · · · · ·		re than \$39,400) 11					
		12					
		12		13			
13. Add lifes 10, 11 and 12				13			
14. Total income of fiduciary	(subtract line 13 from line	9)		14			
INTANGIBLE INCOME ATTRI	BUTABLE TO NONRESIDEN	TS INCLUDED IN LINE 14					
15. Trusts or estates with in	come attributable to nonre	sident beneficiaries. Enter the po	rtion of				
		able to <b>nonresident beneficiaries</b> .					
Enter zero if not applicab	le. See instructions			15			
16. Taxable income of fiduci	ary (subtract line 15 from li	ne 14) <b>This is your taxable incom</b>	e	16			
TAX COMPUTATION		-					
17. Tax: (a) tax rate schedule	·	(b) Form 4972-K	Tota	al 17c			
18. Enter Tax Credit (\$2 for a	trust; \$20 for an estate)			18			
19. TOTAL TAX (subtract line	e 18 from line 17c; if line 18	exceeds line 17c, enter zero)					
20. (a) Estimated tax payme		(b) Withholding		_			
(c) Other credit(s) (spec	J		Tota	al 20d			
21. Subtract line 20d from lin	ne 19. Enter amount of $\Box$ t	ax due ☐ refund ☐ credit	forward	21			
		rn (including any accompanying sc le, correct and complete return.	hedules and state	ments) has be	een examined by me		
Signature of fiducions or agent		DTIN or identification number of fiduction	or agent		Date		
Signature of fiduciary or agent		PTIN or identification number of fiduciary	or agent		Date		

Identification number of preparer

Date

For	m 741 (2003)		Page		
SC	HEDULE A—CHARITABLE DEDUCTION (Do not complete for a	simple	e trust or pooled income fund	d.)	
	mplete Schedule A only if you made additions to or subtractions duction on federal Form 1041.	from	total income on page 1, lines 2	2 or 6 and clain	ned a charitab
	Kentucky taxable income that was paid or set aside for charitable prome 1041, Schedule A, including additional capital gains. Enter he Kentucky tax-exempt income that was paid or set aside for charit federal Form 1041, Schedule A. Enter here and include on Schedule	1			
SC	HEDULE B—INCOME DISTRIBUTION DEDUCTION (See federal	instru	ctions.)		
<ol> <li>Adjusted total income (enter amount from page 1, line 9)</li> <li>Adjusted tax-exempt interest</li> <li>Net gain shown on Schedule D, Form 741, column 1, line 17 (if net loss, enter zero)</li> <li>Enter amount included from federal Schedule A, line 4</li> <li>Enter net capital gains included on Kentucky Schedule A, line 1 or line 2</li> <li>Enter any Kentucky gains included on page 1, line 9 as a negative figure. If capital loss, enter as a positive figure. (Kentucky gain/loss includes federal figures plus Kentucky adjustments.)</li> <li>Distributable net income (combine lines 1 through 6)</li> <li>If complex trust, enter accounting income for tax years as determined under the governing instrument and applicable law</li> <li>Amount of income required to be distributed currently</li> <li>Other amounts paid, credited or otherwise required to be distributed</li> <li>Total distributions (add lines 9 and 10) (If greater than line 8, see federal instructions.)</li> <li>Enter the amount of tax-exempt income included on line 11</li> <li>Tentative income distribution deduction (subtract line 12 from line 11)</li> <li>Income distribution deduction (enter the smaller of line 13 or line 14 here and on page 1, line 10)</li> </ol>					
	HEDULE M (FORM 741)		, , , , , , , , , , , , , , , , , , , ,	- 1	
Part I—Additions to Federal Adjusted Total Income  1. Enter interest from bonds issued by other states and their political subdivisions					
Par	t II—Subtractions from Federal Adjusted Total Income				
5. 6. 7.	5. Enter interest from U.S. government obligations (attach schedule)				
1.	DITIONAL INFORMATION REQUIRED  Was a Kentucky fiduciary income tax return filed for 2002?  Yes No. If "No," state reason.	3.	Did the estate or trust have ☐ Yes ☐ No. (If "Yes," enter Kentucky Passive Activity L the allowable loss.)	er the loss(es) o	n Form 8582-I
		4.	If a federal audit changed the reported for any prior year,		

If the fiduciary has income not taxed by Kentucky, have you deducted only that portion of expenses allocable to taxable income? ☐ Yes ☐ No. If "Yes," attach computation.

- Report must be submitted to the Revenue Cabinet. Do not attach to this return.
- During the taxable year did you make an accumulation distribution as defined in Sec. 665(b), Internal Revenue Code? ☐ Yes ☐ No. If "Yes," attach federal Schedule J (Form 1041).
- 6. If this is an amended return, check the appropriate box on page 1. Write the word "AMENDED" at top of page 1 and attach a copy of original return clearly identified as "COPY OF ORIGINAL."