

New York State Department of Taxation and Finance

Fiduciary Allocation

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|---|----|----|---|---|----|---|
|---|----|----|---|---|----|---|

Attach to Form IT-205

| For the full year January 1, 2011, through December 31, 2011 or fiscal year beginning | 1 1 and ending |
|---|--|
| Name of estate or trust (as shown on federal Form SS-4) | Identification number of estate or trust |
| Complete this form on follows: | |

Complete this form as follows

Resident estate or trust with any nonresident beneficiaries

If any of the income distributable to the nonresident beneficiaries is derived from New York State sources, complete Schedules 4, 2, and 3, in that order. Then complete any of Schedules 5, 6, 7, and 8 that apply, as described below.

However, do not complete Form IT-205-A if none of the income distributable to the nonresident beneficiaries is derived from New York State sources, even if other income is distributable to those beneficiaries. In this case, include a statement with Form IT-205, *Fiduciary Income Tax Return*, to the effect that the distributable income of the nonresident beneficiaries consists only of income that is not taxable to nonresident individuals.

- Nonresident estate or trust and part-year resident trust

Complete Schedules 4, 2, 3, and 1, in that order. Then complete any of Schedules 5, 6, 7, and 8 that apply, as follows:

Schedules 5, 6, 7, and 8 referred to above are to be completed under the following circumstances:

Schedule 5 — If the estate or trust carries on business both in and out of New York State but does not maintain books and records from which the New York income of the business can be determined.

Schedule 6- If the estate or trust claims a deduction for New York charitable contributions.

Schedules 7 and 8 — If the estate or trust has gains or losses from the sale or disposition of New York property.

Instructions for completing the various schedules of this form can be found in Form IT-205-A-I, Instructions for Form IT-205-A.

| Scł | nedule 1 — Computation of New York tax of a nonresident estate or trust or part-year resident trust | | a Total federal amount | | b Amount from New Yo resident period | |
|-----|---|-------|-------------------------------------|---|---|--|
| 1 | Adjusted total income (or loss) (from line 30, column a; see instructions) | 1. | | | | |
| 2 | Income distribution deduction (from federal Form 1041, Schedule B, line 15; attach copy of each | | | | | |
| | federal Schedule K-1 (Form 1041)) | 2. | | | | |
| 3 | Estate tax deduction (attach computation) | 3. | | | | |
| | Exemption (federal) | 4. | | | | |
| | Total (add lines 2 through 4) | 5. | | | | |
| 6 | Federal taxable income of fiduciary (subtract line 5 from line 1; enter column a | | | | | |
| | amount on Form IT-205, front page, line 1) | 6. | | | | |
| 7 | New York modifications relating to amounts allocated to principal (see instructions) | 7. | | | | |
| 8 | Balance (line 6 and add or subtract line 7) | 8. | | | | |
| 9 | Fiduciary's share of New York fiduciary adjustment (from Form IT-205, Schedule C, column 5) | 9. | | | | |
| 10 | New York taxable income of fiduciary (line 8 and add or subtract line 9; see instructions) | 10. | | | | |
| 11 | New York State base tax on line 10 amount (see instructions) | 11. | | | | |
| 12 | Income percentage - income percentage may be greater than 100% (see instructions) | 12. | | | | |
| 13 | Allocated New York State tax (multiply line 11 by the decimal on line 12; enter here and | | | | | |
| | on Form IT-205, line 9) | 13. | | | | |
| 2 | adula O Fiducional and hanaficional above of income from New York Ctate of | 01180 | / ! | 1 | | |

Schedule 2 — Fiduciary's and beneficiary's share of income from New York State sources (see instructions)

| | | | | | (000 |
|---------------------------------------|----------------------------------|-----------------|-----------------------|----------------------|--|
| Beneficiary - same as on Form IT-205. | Shares of federa net income (see | | 3 Shares of income | 4 Shares of | Enter the amount from Schedule 4, line 38, column a, on Schedule 2 at the <i>Totals</i> line of column 1. Enter |
| Schedule C | 1 Amount | 2 Percentage | from New York sources | fiduciary adjustment | the amount from Schedule 4, line 38, column b, on Schedule 2 at the <i>Totals</i> line of column 3. Enter the amount from Form IT-205, line 70 on Schedule 2, at |
| а | | | | | the Totals line of column 4. Enter the fiduciary's share |
| b | | | | | of fiduciary adjustment on Form IT-205-A-I, page 3, New York State income percentage worksheet, line e. |
| Fiduciary | | | | | If the fiduciary adjustment is a positive amount, it must be added to income; if it is a negative amount, |
| Totals | | 100% | | | it must be subtracted from income. |

Schedule 3 — Nonresident beneficiary's share of income, deduction, and tax preference items from New York State sources (see instructions)

| Beneficiary - same as on Form IT-205, Schedule C | Dividorida iroi | Short-term of gain from New York pro | n ['] | 3 Long-term ca gain from New York pro | i I | 4 Other taxable ir from New York s | 5 Other deductions from New York sources | Federal amount of tax preference items from New York sources and applicable New York modifications |
|--|-----------------|--------------------------------------|----------------|--|--------|--|--|--|
| а | | | | | | | (see instructions; | (see instructions; |
| b | | | | | | | attach schedule) | attach schedule) |

Nonresident beneficiaries must report items of income and deduction stated on Schedule 3 on lines 1 through 18 of their New York State returns as items derived from or connected with New York State sources.

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Schedule 4 — Details of federal distributable net income and amounts from New York State sources (see instructions)

| | | s 14 through 30, column a are similar to entries ederal Form 1041, page 1. | | a — Federal amount | b — Amount of co | c — Amount of co for New York (resident period | City | d — Amount of confor Yonkers resident period | 3 |
|------------|----|--|-----|--------------------|-------------------------|---|------|---|---|
| | 14 | Interest income | 14. | | | | | | |
| | 15 | Dividends | 15. | | | | | | |
| | 16 | Business income (or loss) (attach copy of federal | | | | | | | |
| | | Schedule C or C-EZ, Form 1040) | 16. | | | | | | |
| | 17 | Capital gain (or loss) (attach copy of federal | | | | | | | |
| | | Schedule D, Form 1041) | 17. | | | | | | |
| me | 18 | Rents, royalties, partnerships, other estates and trusts, | | | | | | | |
| Income | | etc. (attach copy of federal Schedule E, Form 1040) | 18. | | | | | | |
| 드 | 19 | Farm income (or loss) (attach copy of federal | | | | | | | |
| | | Schedule F, Form 1040) | 19. | | | | | | |
| | 20 | Ordinary gain (or loss) (attach federal Form 4797) | 20. | | | | | | |
| | 21 | Other income (state nature of income) | 21. | | | | | | |
| | 22 | Total income (add lines 14 through 21; enter column a | | | | | | | |
| | | amount on Form IT-205, front page, item A) | 22. | | | | | | |
| | 23 | Interest | 23. | | | | | | |
| " | 24 | Taxes | 24. | | | | | | |
| ous | 25 | Fiduciary fees | 25. | | | | | | |
| Ę | 26 | Charitable deduction | 26. | | | | | | |
| Deductions | 27 | Attorney's, accountant's, and return preparer's fees | 27. | | | | | | |
| ۵ | 28 | Other deductions (attach schedule; see instructions) | 28. | | | | | | |
| | 29 | Total (add lines 23 through 28) | 29. | | | | | | |
| | 30 | Adjusted total income (or loss) (subtract line 29 from line 22) | 30. | | | | | | |

Lines 31 through 38, column a, are similar to entries on federal Form 1041, Schedule B.

| 31 | Adjusted tax-exempt interest | 31. | | | |
|----|---|-----|--|--|--|
| 32 | Net gain shown on Schedule 7, line 75, column 1 | | | | |
| | (if net loss, enter 0) | 32. | | | |
| 33 | Enter the sum of lines 52 and 55 from Schedule 6 | 33. | | | |
| 34 | Short-term capital gain included on Schedule 6, line 47 | 34. | | | |
| 35 | If amount on line 17 above is a capital loss, enter | | | | |
| | amount here (as a positive figure) | 35. | | | |
| 36 | Total (add lines 30 through 35) | 36. | | | |
| 37 | If amount on line 17 above is a capital gain, enter | | | | |
| | that amount here | 37. | | | |
| 38 | Distributable net income (subtract line 37 from | | | | |
| | line 36) - Enter column a amount as total of | | | | |
| | Schedule 2, column 1 and enter column b | | | | |
| | amount on Schedule 2, column 3, Totals line | 38. | | | |

Schedule 5 — Formula basis allocation of business income. Complete if business is carried on both in and out of New York State (attach list giving locations and descriptions of all places, both in and out of New York State, where you carry on business).

| _ | Items used as factors | | 1 Totals - in and out of New York State | 2 New York State amounts | | 3 |
|----|--|--------|---|--------------------------------|-----|-------------------|
| | Property percentage (see instructions) | | | | | Percent |
| 39 | Real property owned | 39. | | | | column 2 |
| 40 | Real property rented from others | 40. | | | | is of column 1 |
| 41 | Tangible personal property owned | 41. | | | | ooidiiii i |
| 42 | Property percentage (add lines 39, 40, and 41; see instructions) | 42. | | | | % |
| 43 | Payroll percentage (see instructions) | 43. | | | | % |
| 44 | Gross income percentage (see instructions) | 44. | | | | % |
| 45 | Total of percentages (add lines 42, 43, and 44, column 3) | | | | 45. | % |
| 46 | Business allocation percentage (divide total percentage on line | e 45 b | y 3 or by actual number of perc | centages if less than 3) | 46. | % |

| To determine the amount | unts from New Yor | k State sources in Schedule 4, column | b, apply the p | ercentage on line 46 | in the manner shown |
|-------------------------|-------------------|---|----------------|--------------------------|---------------------|
| below to each item of | income or deducti | on that is both reported in Schedule 4, | column a, and | required to be allocated | ated. |
| Erom line number | ¢. | · · | 0/ _ C | | |

| Scl | nedule 6 — Computation of New York | charitable dec | luction | | | | | | | |
|-----|--|-------------------------|------------|-------------|-----------|---------------------|------------------------|---------|----------------------------|--------|
| 47 | Amounts paid or permanently set aside for I | New York charital | ble purpo | ses from | gross ir | ncome (se | ee instructions) | . 47. | | |
| 48 | Tax-exempt income from sources outside N | ew York State all | ocable | | | | | | | |
| | to New York charitable contribution | | | | | 48. | | | | |
| | | | | | | | | _ | | |
| | | | | | | | | | | |
| | (Complete lines 49 through 52 below only if | gain on line 74, o | column 2, | | | | | | | |
| | exceeds loss on line 73, column 2.) | | | | | | | | | |
| 49 | Long-term capital gain included on line 47 | | | | | 49. | | | | |
| 50 | Enter gain from line 74, column 2, minus los | s from line 73, co | olumn 2 | | | 50. | | | | |
| 51 | Enter gain from line 74, column 3, minus los | s from line 73, co | olumn 3 | | | 51. | | | | |
| 52 | Enter the amount from line 49, 50, or 51, wh | nichever is less | | | | 52. | | | | |
| 53 | Add lines 48 and 52 | | | | | | | . 53. | | |
| 54 | Balance (subtract line 53 from line 47) | | | | | | | . 54. | | |
| 55 | Capital gains for the tax year allocated to co | rpus and paid or | permane | ntly set as | side for | New York | charitable purposes | 55. | | |
| 56 | Add lines 54 and 55 | | | | | | | . 56. | | |
| 57 | Section 1202 exclusion allocable to capital | gains paid or per | manently | set aside | for Nev | v York ch | aritable purposes | . 57. | | |
| 58 | Total (subtract line 57 from line 56) | | | | | | | · 58. | | |
| Scl | nedule 7 - Capital gains and losses fr | om sales or ex | change | of New | York o | capital a | ssets (see instruction | ns con | cerning tangible | |
| | and intangible personal prop | erty carried as bu | ısiness as | ssets) | | | | | | |
| Pai | rt 1 — Short-term capital gains and lo | sses — assets | of New | York nr | operty | held or | ne vear or less | | | |
| | | Τ | | 10111 | | | | | | |
| | a Kind of property and description | b Date acquired | Date | | Gros | d s sales | e Federal cost or | | f Gain (or loss) | |
| | (if necessary, attach statement of descriptive | (mm-dd-yyyy) | (mm-do | | | rice | other basis, plus | S | (d minus e) | |
| | details not shown below) | | | | | | expense of sale |) | | |
| 59 | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | 1 | | |
| 60 | Short-term capital gain (or loss) from installr | | | _ | | | | . 60. | | |
| 61 | Net short-term gain (or loss) from New York | | | | | | | | | |
| | other estates or trusts | | | | | | | | | |
| 62 | Net gain (or loss) (combine lines 59 through 61) | | | | | | | | | |
| 63 | Short-term capital loss carryover (attach com | | | | | | | | | |
| 64 | Net short-term gain (or loss) (combine lines 62 | z and 63; enter nere | ana on iir | e 73 below | v) | | | 64. | | |
| Pa | rt 2 — Long-term capital gains and los | ses – assets | of New | York pro | operty | held mo | ore than one year | | | |
| 65 | | | | | | | | | | |
| 05 | | | | | | | | | | |
| | | | | | | | | | | |
| 66 | Long-term capital gain (or loss) from installn | l nent sales and lik | e-kind ev | rchanges | of New | Vork pro | nerty | . 66. | | |
| 67 | Net long-term gain (or loss) from New York | | | - | | | • | . 00. | | |
| ٠. | other estates or trusts | | | | | - | | . 67. | | |
| 68 | Capital gain distributions | | | | | | | . 68. | | |
| 69 | Enter gain, if any, from Schedule 8, line 81 | | | | | | | . 69. | | |
| 70 | Net gain (or loss) (combine lines 65 through 69) | | | | | | | | | |
| 71 | Long-term capital loss carryover from 2010 | | | | | | | | | |
| 72 | Net long-term gain (or loss) (combine lines 70 | ' | , | | | | | | | |
| - | | | | <i>,</i> | • | | | 1 | . | |
| Pa | rt 3 — Summary of Parts 1 and 2 | | | | | | | | | |
| | | | | 1 – E | Beneficia | ries | 2 - Fiduciary | | 3 - Total | |
| 73 | Net short-term gain (or loss) from line 64, co | olumn f, above | 73. | | | | | | | |
| 74 | Net long-term gain (or loss) from line 72, col | | | | | | | | | |
| 75 | Total net gain (or loss) (line 73 and add or subtr | | | | | | | | | |
| F | inter on Schedule 4. line 17. column b. the | net gain shown (| on line 7! | 5. column | 3. abo | ve If line | e 75. column 3. abo | ve is a | net loss, see instru | ctions |

Part 1 — 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 one year

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

| | a Kind of property (if necessary, attach statement of descriptive details not shown below) | b Date acquired (mm-dd-yyyy) | c Date sold (mm-dd-yyyy) | d Gross sales price | e Federal depreciation allowed (or allowable) since acquisition | f Federal costother basis, improvement and expensions | plus ents | g Loss (f minus the sum o d and e | of | h Gain (d plus e minus f) |
|----|--|------------------------------------|--------------------------------|---------------------------|---|---|--------------|---|-----|------------------------------------|
| 76 | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| - | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 77 | Gain, if any, from federal Form 4 | 1684, line 39 | | | | | 77. | | | |
| 78 | Section 1231 gain from installm | ent sales from fed | deral Form 6252, | line 26 or 37 | | | 78. | | | |
| 79 | Gain, if any, from federal Form 4797, line 32, from other than casualty or theft | | | | | | | | | |
| 80 | Add line 76, column g amounts, | and lines 76 thro | ough 79, column | h amounts | | | 80. | (|) | |
| 81 | Combine columns g and h of lin | ie 80. Enter gain (| or loss) here, and | d on appropriate | line as follows: | | | | 81. | |
| | | | | | | | | | | |

- a) If line 81 is a gain, enter the gain as a long-term capital gain on Schedule 7, line 69.
- b) If line 81 is zero or a loss, enter that amount on line 83.

Part 2 — Ordinary gains and losses from New York property

| | a Kind of property (if necessary, attach statement of descriptive details not shown below) | b Date acquired (mm-dd-yyyy) | c Date sold (mm-dd-yyyy) | d Gross sales price | e Federal depreciation allowed (or allowable) since acquisition | f Federal cos other basis, improveme and expens sale | plus ents | g Loss (f minus the sum of d and e) | h Gain (d plus e minus f) |
|----|--|-------------------------------------|--------------------------------|---------------------------|---|--|--------------|---|---|
| 82 | Ordinary gains and losses not in | cluded on lines 8 | 3 through 87 (inc | lude property held | one year or less) | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| - | | | | | | | | | |
| 83 | Loss, if any, from line 81 | | | | | <u> </u> | 83. | | |
| 84 | Gain, if any, from federal Form 4 | | | | | | 84. | | |
| 85 | Net gain (or loss) from federal Fo | | | | | | 85. | | |
| 86 | Ordinary gain from installment sales from federal Form 6252, line 25 or line 36, or both | | | | | | | | |
| 87 | Recapture of section 179 deduction | | | | | | | | |
| 88 | Add lines 82, 83, and 85, column | n g amounts, and | l line 82 and lines | s 84 through 87, o | column h amount | is | 88. | () | |
| 89 | Combine columns g and h of lin | e 88. Enter gain (| or loss) here and | on Schedule 4, I | ine 20, column b | | | 89. | |