1004110019

# PA-41 - 2010 (09–10)

**PA Fiduciary Income Tax Return**
**PA Department of Revenue**
**Harrisburg, PA 17128-0413**
**PLEASE PRINT IN BLACK INK**

OFFICIAL USE ONLY

START HERE →

| Federal Employer Identification Number | Decedent's Social Security Number | Fiduciary's Daytime Telephone Number |
|---|---|---|
| | | |

PLEASE WRITE IN THE EIN & SOCIAL SECURITY NUMBER ABOVE

PLACE LABEL HERE

Name of Estate or Trust (See Online Detailed Instructions)

Name and Title of Fiduciary

Address of Fiduciary (Street Number and Name, etc.)

City or Post Office | State | ZIP Code

- ○ **Extension Requested.**
- ○ **Amended PA-41.**
- ○ **Fiscal Year Filer.** FY beginning ___ ___ and ending ___ ___ ___

**Residency Status.** Fill in only one oval.
- ○ **R** Pennsylvania Resident
- ○ **N** Nonresident
  If "N", Name of State _____

**Final Return.**
- ○ **F** Enter Ending Date: ___ ___ ___

○ **Estate or Trust Identification Change.** Fill in this oval if any of the identification or filing information you entered is different from the 2009 PA-41, or if the estate or trust did not file a 2009 PA-41.

○ NO **Do You Want a 2011 PA-41 Booklet?**

Submit all required Pennsylvania supporting schedules. | If Line 3, 4 or 5 is a LOSS, fill in the oval next to the amount.

| | | | DOLLARS | CENTS |
|---|---|---|---|---|
| 1. | **PA TAXABLE INTEREST INCOME and GAMBLING and LOTTERY WINNINGS.** | 1. | | |
| 2. | **PA TAXABLE DIVIDEND INCOME.** | 2. | | |
| 3. | **NET INCOME or LOSS from the Operation of a Business, Profession or Farm.** ○ LOSS | 3. | | |
| 4. | **NET GAIN or LOSS from the Sale, Exchange or Disposition of Property.** ○ LOSS | 4. | | |
| 5. | **NET INCOME or LOSS from Rents, Royalties, Patents or Copyrights.** ○ LOSS | 5. | | |
| 6. | **ESTATE or TRUST INCOME.** | 6. | | |
| 7. | **TOTAL TAXABLE INCOME.** Add only the positive income amounts from Lines 1, 2, 3, 4, 5 and 6. Do not add losses. | 7. | | |
| 8. | **DEDUCTIONS from PA SCHEDULE DD.** | 8. | | |
| 9. | **NET PA TAXABLE INCOME.** Subtract Line 8 from Line 7. | 9. | | |
| 10. | **TOTAL PA TAX LIABILITY.** Multiply Line 9 by the tax rate 3.07 percent (0.0307). | 10. | | |
| 11. | **2010 ESTIMATED PAYMENTS and CREDITS.** | 11. | | |
| 12. | **NONRESIDENT TAX WITHHELD from PA SCHEDULE(S) NRK-1.** | 12. | | |
| 13. | **TOTAL CREDIT for TAXES PAID by PA RESIDENT ESTATES or TRUSTS to OTHER STATES or COUNTRIES** | 13. | | |
| 14. | **TOTAL OTHER CREDITS from PA SCHEDULE OC.** | 14. | | |
| 15. | **PA INCOME TAX WITHHELD.** | 15. | | |
| 16. | **2010 PAYMENTS and CREDITS.** Add Lines 11, 12, 13, 14 and 15. | 16. | | |
| 17. | **TAX DUE.** If Line 10 is more than Line 16, enter the difference here. | 17. | | |

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**PA Fiduciary Income Tax Return**
**PA Department of Revenue**
**PLEASE PRINT IN BLACK INK**

START HERE →

| Name as shown on **PA-41** | Federal EIN or Decedent's Social Security Number |
|---|---|
| | |

| | | |
|---|---|---|
| **18. PENALTIES AND INTEREST.** See online instructions for additional information. If including REV-1630F fill in oval. . . . . | 18. | |
| **19. TOTAL PAYMENT** – Add Lines 17 and 18. Make check or money order payable to **PA DEPT. OF REVENUE. Use your PA-V form.** See the instructions on **HOW TO PAY**. . . | 19. | |
| **20. OVERPAYMENT.** If Line 16 is more than the total of Line 10 and Line 18, enter the difference here. **The total of Lines 21 and 22 must equal Line 20**. . . . . | 20. | |
| **21. REFUND** – AMOUNT of LINE 20 you want as a check mailed to the estate or trust. . . . . **REFUND** | 21. | |
| **22. CREDIT –** AMOUNT of LINE 20 you want as a credit to the 2011 Estimated Tax Account of the estate or trust. . . . . | 22. | |

**Signature(s). Under penalties of perjury, I have examined this return, including all accompanying schedules and statements, and to the best of my belief, it is true, correct and complete.**

| **Signature of Fiduciary** | Please remember to sign your PA-41 after printing. | Date |
|---|---|---|
| | | |

**Name of preparer or his or her company name, based on all information on this return of which the preparer has any knowledge.**

| Preparer's Name and Telephone Number | Firm FEIN | Preparer's SSN / PTIN |
|---|---|---|
| | | |

**PA-41** Other Information (09-10)

## PA SCHEDULE OI - Other Information 2010

| | YES | NO |
|---|---|---|
| 1. Is this a revocable trust? | | |
| 2. Is this an irrevocable trust? | | |
| 3. Does the estate/trust receive income from or pay income to a foreign entity? If "Yes," include a supplemental statement with this return. See the instructions for what to include with that statement. | | |
| 4. Has the federal government made an additional assessment on the income of this estate/trust in the last four years? If "Yes," include a supplemental statement with this return explaining such adjustments. | | |
| 5. Did this estate/trust receive income from a partnership, S corporation, LLC, or another estate/trust? If "Yes," list all such partnerships, S corporations, LLCs, estates/trusts, showing the FEIN, name and address of each below. If additional space is necessary, include a supplemental statement (in the same format) with this return. | | |

| | FEIN | Name | Address |
|---|---|---|---|
| a. | | | |
| b. | | | |
| c. | | | |
| d. | | | |
| e. | | | |
| f. | | | |

6. If this return is for a trust, state the name and address of the grantor below.

| Name of Grantor: | Address of Grantor: |
|---|---|
| | |

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