

Form **770** 2014 Virginia Fiduciary Income Tax Return



Enter Fiscal Year: From _____/_____/2014 To _____/_____/_____, AND check here
 (if applicable) month/day/year month/day/year

| | |
|--|--|
| Name of Estate or Trust | Locality Code (See Instructions) |
| Name and Title of Fiduciary | FEIN of the Estate or Trust |
| Address of Fiduciary (Number and Street) | Check all that apply: <input type="checkbox"/> Resident or <input type="checkbox"/> Nonresident <input type="checkbox"/> Amended Return <input type="checkbox"/> Exempt - Charitable Remainder Trust |
| City, Town or Post Office State ZIP Code | |

Due May 1, 2015 - Important: Attach a Complete Copy of the Federal Return

Schedule 1 — Computation of Taxable Income and Tax of Fiduciary

| | | |
|--|------|------------------|
| 1. Federal taxable income of estate or trust (from federal Form 1041) - OR - if a nonresident, the amount on Schedule 2, Line 8. | 1 | .00 |
| 2. Fiduciary's share of Virginia modifications (Schedule 3, Line 12) (a) if a net addition..... | 2(a) | .00 |
| [2FA _____ 2FS _____ See Schedule 3 on Page 2] (b) if a net subtraction..... | 2(b) | .00 |
| 3. Virginia taxable income of fiduciary. Line 1 plus Line 2(a) - OR - Line 1 minus Line 2(b)..... | 3 | .00 |
| 4. Compute tax on Virginia taxable income. Use the tax rate schedule in the instructions | 4 | .00 |
| 5. PAYMENTS AND CREDITS: See instructions. | | |
| (a) Virginia income tax withheld..... (a) | | .00 |
| (b) 2014 Virginia estimated tax payments. Include credit from 2013..... (b) | | .00 |
| (c) Extension payments made with Form 770IP..... (c) | | .00 |
| (d) Credit for tax paid to another state from Schedule 4, Line 7. Attach other state's return..... (d) | | .00 |
| (e) Neighborhood Assistance Act Tax Credit. Attach certificate..... (e) | | .00 |
| (f) Enterprise Zone Act Tax Credit from Form 301, Line 32. Attach certificate and Form 301..... (f) | | .00 |
| (g) Major Business Facility Job Tax Credit allowable from Form 304. Attach certification letter..... (g) | | .00 |
| (h) Historic Rehabilitation Tax Credit. Attach certificate..... (h) | | .00 |
| (i) Low-Income Housing Tax Credit. Attach certificate..... (i) | | .00 |
| (j) Barge and Rail Usage Tax Credit..... (j) | | .00 |
| (k) Reserved for future use..... (k) | | _____ |
| (l) Worker Retraining Tax Credit..... (l) | | .00 |
| (m) Qualified Equity and Subordinated Debt Investments Tax Credit..... (m) | | .00 |
| (n) i) 100% Coalfield Employment Enhancement and Virginia Coal Employment and Production Incentive Credits - Schedule 306B, Line 2. (n)i | | .00 |
| ii) Reserved for future use..... (n)ii | | _____ |
| iii) Full credit - From your 2014 Form 306, Line 12. (n)iii | | .00 |
| iv) Reserved for future use..... (n)iv | | _____ |
| v) Reserved for future use. (n)v | | _____ |
| (o) i) 85% credit - From your 2014 Form 306, Line 13. (o)i | | .00 |
| ii) Reserved for future use..... (o)ii | | _____ |
| iii) Excess Coalfield Employment Enhancement Credit and Virginia Coal Employment and Production Incentive Credit - Add Lines (n)iii and (o)i. Attach Form 306. (o)iii | | .00 |
| (p) Reserved for future use. (p) | | _____ |
| (q) Land Preservation Tax Credit. Attach certificate. (q) | | .00 |
| Total payments and credits. Add Lines 5(a) through 5(q)..... | 5 | .00 |
| 6. BALANCE DUE If Line 4 is larger than Line 5, subtract Line 5 from Line 4. | 6 | .00 |
| 7. OVERPAYMENT If Line 5 is larger than Line 4, subtract Line 4 from Line 5. | 7 | .00 |
| 8. Amount of overpayment to be CREDITED to 2015 Estimated Income Tax. | 8 | .00 |
| 9. AMOUNT TO BE REFUNDED Subtract Line 8 from Line 7..... | 9 | .00 |
| 10. Coalfield Employment Enhancement Tax Credit earned in 2014 from Form 306, Line 11. Attach Form 306..... | 10 | .00 |
| 11. Amount from Form 760C or Form 760F. Attach Form 760C or Form 760F..... | 11 | .00 |

Check here if farming, fishing or being a merchant seaman accounts for at least two-thirds of the income.

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Schedule 2 — Virginia Taxable Income of a Nonresident Estate or Trust

| | Net Virginia Source Income | |
|--|----------------------------|---------------------|
| | A. Distributable | B. Nondistributable |
| 1. Income from sources within Virginia..... 1 | .00 | .00 |
| 2. Federal deductions attributable to income from sources within Virginia..... 2 | .00 | .00 |
| 3. Net Virginia source income. Subtract Line 2 from Line 1..... 3 | .00 | .00 |

4. Virginia source income allocation schedule. When completing Column 4, multiply Line 3A above by the percentage in Column 3 below and enter the result in Column 4. Enter the amount from Line 3B above in Line 4b, Column 5.

| Column 1 | Column 2 Federal Distributable Net Income | Column 3 Percentage | Column 4 Virginia Source Distributable Net Income | Column 5 Virginia Source Nondistributable Net Income |
|--|---|------------------------|---|--|
| a. Beneficiaries (Total for all beneficiaries) | .00 | % | .00 | |
| b. Fiduciary | .00 | % | .00 | .00 |
| c. Total | .00 | 100% | .00 | .00 |

| | |
|--|-----|
| 5. Deduction for distributions to beneficiaries. Enter the amount in Line 4a, Column 4, or Line 4a, Column 2, whichever is less..... 5 | .00 |
| 6. Fiduciary's share of Virginia source income. Sum of Line 4b, Column 4 <u>or</u> Line 4b, Column 2, whichever is less, plus Line 5..... 6 | .00 |
| 7. Exemption from federal Form 1041..... 7 | .00 |
| 8. Income taxable to fiduciary. Subtract Line 7 from Line 6. Enter here and on Schedule 1, Line 1..... 8 | .00 |

Schedule 3 — Modifications

PART I — Additions to Federal Taxable Income

| | |
|---|-----|
| 1. Interest on obligations of other states..... 1 | .00 |
| 2. Income taxes of this state or any other taxing jurisdiction..... 2 | .00 |
| 3. Fixed Date Conformity Additions. See instructions. Enter here and on Line 2FA of Schedule 1..... 3 | .00 |
| 4. Other additions to federal taxable income as provided in the instructions. Attach explanation..... 4 | .00 |
| 5. TOTAL ADDITIONS. Add Lines 1 through 4..... 5 | .00 |

PART II — Subtractions from Federal Taxable Income

| | |
|---|-----|
| 6. Income (interest, dividends or gains) on obligations or securities of the U.S..... 6 | .00 |
| 7. Any state income tax refund or credit that was reported as "other income" on federal Form 1041..... 7 | .00 |
| 8. Fixed Date Conformity Subtractions. See instructions. Enter here and on Line 2FS of Schedule 1..... 8 | .00 |
| 9. Other subtractions from federal taxable income as provided in the instructions. Attach explanation..... 9 | .00 |
| 10. TOTAL SUBTRACTIONS. Add Lines 6 through 9..... 10 | .00 |
| 11. Net Virginia modifications. Subtract Line 10 from Line 5..... 11 | .00 |
| 12. Net Virginia modifications allocated to the fiduciary. Multiply Line 11 by the fiduciary's percentage of federal distributable net income..... 12 | .00 |

If Line 12 is a net addition, enter on Line 2(a) of Schedule 1. If Line 12 is a net subtraction, enter on Line 2(b) of Schedule 1.

Schedule 4 — Computation of the Credit for Tax Paid to Another State (See Instructions)

| | |
|--|-----|
| 1. Taxable income reported on the other state's fiduciary income tax return. Attach a copy of the other return..... 1 | .00 |
| 2. Virginia taxable income. Enter the taxable income from Schedule 1, Line 3..... 2 | .00 |
| 3. Total income tax paid to another state. Enter the name of the other state: _____ 3 | .00 |
| 4. Virginia income tax. Enter the tax from Schedule 1, Line 4..... 4 | .00 |
| 5. Allowable percentage for credit. Compute to one decimal place (e.g., 10.5%). Maximum: 100% <i>Resident estate or trust:</i> Divide Line 1 by Line 2. <i>Nonresident estate or trust:</i> Divide Line 2 by Line 1..... 5 | % |
| 6. <i>Resident estate or trust:</i> Multiply Line 5 by Line 4. <i>Nonresident estate or trust:</i> Multiply Line 5 by Line 3..... 6 | .00 |
| 7. Allowable credit. <i>Resident estate or trust:</i> Enter the smaller amount from Line 3 or Line 6. <i>Nonresident estate or trust:</i> Enter the smaller amount from Line 4 or Line 6. Also enter this amount on Schedule 1, Line 5(d)..... 7 | .00 |

I declare under the penalties provided by law that this return, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is true, correct and complete. I (we) authorize the Department of Taxation to discuss this return with my (our) preparer. If yes, check here.

| | | | |
|----------------------------|--|--------------------------|----------------------|
| Please Sign Here | Signature of Fiduciary or Officer Representing Fiduciary | Date | Daytime Phone Number |
| | X | | () |
| Preparer's Use Only | Signature of Preparer Other Than Fiduciary | Date | Daytime Phone Number |
| | X | | () |
| | Firm's Name (or Yours if Self-Employed) and Address | Firm's SSN, FEIN or PTIN | |



NAME & FEIN FROM PAGE 1 _____

Schedule 5 — Computation of Credits and Qualifying Income (See Instructions)

| Line | Column 1 Name and Social Security Number of Each Beneficiary (Fiduciary Use Line e) | Column 2 Percentage | Column 3 Allocation of Virginia Neighborhood Assistance Act Tax Credit |
|------|---|-------------------------------|--|
| a. | | % | .00 |
| b. | | % | .00 |
| c. | | % | .00 |
| d. | | % | .00 |
| e. | Fiduciary | % | .00 |
| f. | Total | 100 % | .00 |

| Line | Column 4 Allocation of Enterprise Zone Qualifying Income | Column 5 Allocation of Enterprise Zone State Unemployment Tax Credit | Column 6 | Column 7 Allocation of Enterprise Zone Investment Tax Credit |
|------|--|--|-----------------------------------|--|
| a. | .00 | .00 | Space reserved for future use. | .00 |
| b. | .00 | .00 | | .00 |
| c. | .00 | .00 | | .00 |
| d. | .00 | .00 | | .00 |
| e. | .00 | .00 | | .00 |
| f. | .00 | .00 | | .00 |

| Line | Column 8 - Other Allocation of: | Column 9 - Other Allocation of: | Column 10 - Other Allocation of: | Column 11 - Other Allocation of: |
|------|---|---|--|--|
| a. | .00 | .00 | .00 | .00 |
| b. | .00 | .00 | .00 | .00 |
| c. | .00 | .00 | .00 | .00 |
| d. | .00 | .00 | .00 | .00 |
| e. | .00 | .00 | .00 | .00 |
| f. | .00 | .00 | .00 | .00 |