NOTICE FORM 141AZ

Laws 2012, Ch 257, § 11 (HB 2779), repealed the Arizona Revised Statutes that authorize the Clean Elections Fund Tax Reduction optional check-off box, the Clean Elections Fund Tax Credit, the Citizens Clean Elections Fund donation line on the corporate income tax returns and the Citizens Clean Elections Voluntary Gift line on the individual income and fiduciary tax returns. The changes are effective from and after August 2, 2012.

If your fiscal year ends after August 2, 2012 do not check box 17 and do not include any amount on line 18 (Clean Elections Fund Tax Reduction).

Do not claim a credit on line 22 for any amounts donated to the Citizens Clean Elections Fund after August 2, 2012.

If you are filing after August 2, 2012, do not make a voluntary gift to the Citizens Clean Elections Fund on line 31 of the return. Any amount designated on line 31 in an amended return postmarked after August 2, 2012 will not go to the Citizens Clean Elections Fund: the amount designated will be returned to the taxpayer.

If you are filing an amended return, enter the amount from line 31 of the original return on line 31 of the amended return. Changes cannot be made to designations made on the original return.





Arizona Fiduciary Income Tax Return

FOR CALENDAR YEAR **2011**

	OR FISCAL YEAR BEGINNIN	NG [M₁N	[D,D,Y,Y,Y,Y] and ending	G [M₁M]	$D_1D_1Y_1Y_1Y_1Y_1$. [66]
8	Check box 82E if filing und	ler exte	nsion			
	rint Name of Estate or Trust			Em	nployer Identification	Number (required)
	rint Name and Title of Fiduciary			I		
A	ddress of Fiduciary - number and street, or rura	al route		RE	VENUE USE ONLY. DO	NOT MARK IN THIS AREA.
	City, Town or Post Office	State	Zip Code			
	Paytime Phone Number of Fiduciary/Representa	itive – <i>incl</i>	ude area code	88	1	
_	Check <u>only one</u> box:				•	
[55 ☐ Resident Estate	=	ident Trust resident Trust	81]	80
	Check applicable box(es): 6 1 ☐ Amended Return	Прес	edent's Estate	□Simn	ole Trust	
-	₂ ☐ Final Return		kruptcy Estate		plex Trust	
	☐ Initial Return		ntor Trust		itable Remainder T	ruct
		ПОІАІ	itoi iiust	Попа	itable itemaniaer i	1031
	Federal taxable income: Resident estates Nonresident estates or trusts, <i>enter the al</i>	mount fro	om Arizona Form 141AZ, Sched	lule A, liր		7
0	Net fiduciary adjustment: Enter the amou					
٥	If a negative number, enter that number in Net fiduciary adjustment allocated to bene			I .	8	
9	Schedule C, line C15			I .	9	
10					9	
10	Net fiduciary adjustment allocated to <u>fiduc</u>	-				10
44	Schedule C, line C16					10
11	Subtotal: If the amount on line 10 is a pos					44
42	on line 10 is a negative number, <i>subtract</i>					11 12
	Electing Small Business Trust (ESBT) inc					13
	Add line 11 and line 12. Enter the result Income of a trust established as a Medica					14
		U				15
	Arizona Taxable Income: Subtract line					16
	Tax on amount on line 15. See Tax Table					10
17	- 18 Clean Elections Fund Tax Reduction	. See III	structions, page 9		17 🗌	40
40	Dadward tow Cubtract line 40 from line 4	0				18
	Reduced tax: Subtract line 18 from line 1					19
	Credit for taxes paid to other states or cou					20
	Subtract line 20 from line 19. If line 20 is					21
	Clean Elections Fund Tax Credit from wol					22
	Balance of tax: Subtract line 22 from line					23
	Arizona estimated tax payments				24	
	Payment with extension				25	\dashv
					26	
	Payment with original return (if amending)				27	
	Total payments: <i>Add</i> lines 24 through 27. Refund from original return (if amending)				28 29	
						30
	Balance of payments: <i>Subtract</i> line 29 fro Voluntary gift to the Citizen's Clean Election					31
s۷	Balance due: Subtract line 30 from line 2					22
22	Department of Revenue; write your EIN Refund due: Subtract lines 23 and 31 from					32
	Amount of line 33 to be applied to your 20					33
J+	ATTICULE OF THE 33 TO DE ADDITED TO VOUE AT	7 I & COUII	IULUU LUN			JTI

NAME OF ESTATE OR TRUST AS SHOWN ON PAGE 1	EMPLOYER IDENTIFICATION NUMBER

SCHEDULE A: Nonresident Estate or Trust Source Income Schedule

Only nonresident estates and nonresident trusts should complete Schedule A. Arizona resident estates and Arizona resident trusts should not complete Schedule A.

A 1	Income (specify type):		FEDERAL COLUMN	ARIZONA COLUMN
	A1(a)	A1(a)		
	A1(b)	A1(b)		
	A1(c)	A1(c)		
	A1(d)	A1(d)		
	A1(e)	A1(e)		
A2	Total Income: Add lines A1(a) through A1(e)			
А3	Deductions (specify):			
	A3(a)	A3(a)		
	A3(b)	A3(b)		
	A3(c)			
	A3(d)	A3(d)		
	A3(e)	A3(e)		
A4				
	Total deductions: Add lines A3(a) through A3(e)			
A5 A6	Federal Taxable Income: Subtract line A4 from line A2 in the Federal column. Arizona Gross Income: Subtract line A4 from line A2 in the Arizona column. <i>E</i> here and also on Form 141AZ, page 1, line 7	Enter the		

SCHEDULE B: Fiduciary Adjustment

Fidu	ciary adjustment increasing federal taxable income		
B1	Positive Arizona fiduciary adjustment from another estate or trust	B1	
B2	Non-Arizona municipal bond interest	B2	
	Other additions to federal taxable income. See instructions	В3	
B4	Total: Add lines B1 through B3	B4	
	ciary adjustment decreasing federal taxable income Negative Arizona fiduciary adjustment from another estate or trust	B5	
	Interest received from U.S. obligations	B6	
B7	Refunds from other states	B7	
B8	Other subtractions from federal taxable income. See instructions	B8	
B9	Total: Add lines B5 through B8	В9	
B10	Net adjustment: Subtract line B9 from line B4. If the result is a negative number, enter the difference in brackets. Also, enter the difference on Form 141AZ, page 1, line 8	B10	

NAME OF ESTATE OR TRUST AS SHOWN ON PAGE 1	EMPLOYER IDENTIFICATION NUMBER					
SCHEDULE C: Fiduciary Adjustment Allocation						
The Arizona fiduciary adjustment is allocated among the beneficiaries and the fiduciary in proportion to their share of the federal distributable net income.						

alotti	diable net income.			
	(a)	(b)		(c)
		Share of Federal		
	Beneficiary	Distributable Net Incom	ne	Percent
C 1				
C2				
C2				
C3				
C4				
C 5				
C6				
C7				
C8				
C9				
C10				
C11	Subtotal: If more than 10 beneficiaries, attach an additional schedule C11			
C12	Fiduciary C12			
C13	Total: Add lines C11 and C12. This should total the federal distributable net income			
C14	Enter the fiduciary adjustment from Form 141AZ, Schedule B, line B10 here and also	o on	14	
C15	Form 141AZ Schedule K-1, line 1 <u>or</u> Form 141AZ Schedule K-1(NR), line 3			
046	Form 141AZ, page 1, line 9	C	15	
C16	Multiply the amount on line C14 by the percentage on line C12. Enter the result here	e and also on		

SCHEDULE D: Federal Distributable Net Income From Arizona Sources

Complete Schedule D only if the estate or trust has nonresident beneficiaries. Use the information in Schedule D to complete Form 141AZ, Schedule K-1(NR). Do not complete Schedule D if all of the beneficiaries are Arizona residents.

	(a)		(b)	(c)
			FEDERAL	ARIZONA
D1	Dividends	D1		
D2	Interest	D2		
D3	Partnership/fiduciary income	D3		
		D4		
		D5		
		D6		
D7	Total: Add lines D1 through D6	D7		
D8	Expenses	D8		
D9	Federal distributable income: Subtract line D8 from line D7 and enter the difference here. Also, enter the amount from column (c) on			
	Form 141AZ, Schedule K-1(NR), line 1	D9 🛚		

SCHE	DULE E: Questions			
E1	Check the box if this return is for a short taxable year		П	
E1	Check the box it this return is for a short taxable year			
E2	Have Arizona income tax returns been filed for the four (4) years	preceding date of death?	YES 	NO
	If "No", please explain:	sroodanig date or death	_	_
E3	Date of decedent's death or date the trust was established	ıM.MıD.DıY.Y.Y.Y	I	
			YES	NO
E4	Was a fiduciary return filed the preceding year?		Ш	Ш
E5	Check the box to indicate whether this return was prepared on a	each or accrual bacie:	CASH A	CCRUAL
LJ	Oneck the box to indicate whether this return was prepared on a	,asn or accrual basis		
E 6	Has the federal government made an additional assessment on t	he income of this estate in the last	YES	NO
	four (4) years?			
E7	If return is for a trust, enter the name and address of the grantor:			
	I declare under the penalties of perjury that this return, including		statements,	has been
	examined by me, and to the best of my knowledge and belief is a	true, correct and complete return.		
RE 4	SIGNATURE OF FIDUCIARY OR OFFICER REPRESENTING FIDUCIARY	DATE		
SN HERE				
<u>2</u>	SIGNATURE OF PERSON OTHER THAN TAXPAYER OR AGENT	DATE		
SE SIC				
PLEASE	ADDRESS OF FIDUCIARY OR OFFICER	NAME OF FIRM OR EMPLOYER, IF	ANY	
김 🗦	PAID PREPARER'S SIGNATURE DATE	FIRM'S NAME (PREPARER'S IF SELF-EMP	LOYED)	
	PAID PREPARER'S TIN PAID PREPARER'S ADDRESS	PAID P	PREPARER'S	PHONE NO.
	• If you are sending a payment with this return, mail to:			
	Arizona Department of Revenue, PO Box 52016, Phoenix, AZ,			
	 If you are expecting a refund or owe no tax, or owe tax but are an Arizona Department of Revenue, PO Box 52138, Phoenix, AZ, 			
	, , , , , , , , , , , , , , , , , , , ,			

EMPLOYER IDENTIFICATION NUMBER

NAME OF ESTATE OR TRUST AS SHOWN ON PAGE 1

NOTE: If an estate is being probated, the fiduciary may have to obtain a certificate from the department that shows no income tax is due. See pages 2 and 3 of the instructions for details. Make requests for an income tax certificate separately. Do not attach requests for the income tax certificate to Form 141AZ.

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