### WEST VIRGINIA FIDUCIARY INCOME TAX RETURN 2025

FINAL INDIVIDUAL RETURN MUST BE FILED FOR DECEDENT

| Estate or<br>Trust Name   |                                       |   |                      |                     | FEIN       |               |                    |              |              |   |
|---|---------------------------------------|---|----------------------|---------------------|------------|---------------|--------------------|--------------|--------------|---|
| Trustee Executor<br>Name  |                                       |   |                      |                     |            |               |                    |              |              |   |
| FIRST LINE OF<br>ADDRESS  |                                       |   |                      | ID LINE OF<br>DRESS |            |               |                    |              |              |   |
| CITY  |                                       |   | STATE                |                     | ZIP        |               |                    |              |              |   |
| FILING PERIOD<br>ENDED  | EXTENDEI<br>DUE DATE                  |   | FISCAL               | YEAR FILER          | CHECK      | ONE:          |                    | CHECK IF APP | LICABLE:     | - |
| MM DD YYYY  TYPE OF ENTITY  | MM DD YYY                             |   |                      |                     | Re         | sident Non-Re | esident            | Final        | Amended      |   |
| SIMPLE  | COMPLEX DECEDENT'S TRUST ESTATE       | □ch/ □chii □Di                            | JALIFIED<br>SABILITY |                     | POOLE      |               | ESBT<br>(S portion | n only) GRAN |              |   |
|   | of Death<br>DD/YYYY                   | Bankruptcy estate                         |                      |                     | QFT C      | OMPOSITE      | QFT                | NON (TRUS    | GRANTOR<br>T |   |
| Federal ta  | xable income (enter line 23, Feder    | ral Form 1041 or line 11 1                | 041-QF               | T)                  |            | 1             |                    |              | .00          | _ |
|   | nia fiduciary additions (Schedule E   | ·   |                      | ,                   |            |               |                    |              | .00          |   |
| · ·   | ·                                     | ,   |                      |                     |            |               |                    |              |              |   |
| · ·   | nia fiduciary subtractions (Schedu    | ,   |                      |                     |            |               | 3                  |              | .00          |   |
| 4. West Virgi   | nia taxable income (sum of lines 1    | and 2 minus line 3)<br>LE TRUST HAVING NO |                      |                     |            |               | ļ                  |              | .00          |   |
|   | IF THIS IS A SIMP                     | LE TRUST HAVING NO                        | IAAAI                | SLE INCC            | JIVIE, OIV | III LINES 5-7 | Т                  |              |              |   |
| 5. West Virgir  | nia tax (check one) Rate Sche         | dule Schedule N                           | IR .                 |                     |            | 5             | 5                  |              | .00          |   |
| 6. Credits from   | m Tax Credit Recap Schedule (see      | e schedule page 6)                        |                      |                     |            | 6             | 3                  |              | .00          |   |
| 7. Adjusted ta  | x due (line 5 minus line 6)           |   |                      |                     |            |               | 7                  |              | .00          |   |
| 8. Income sul   | oject to tax (total of income for Ber | neficiaries, column F)                    |                      |                     |            | 8             | 3                  |              | .00          |   |
| 9. West Virgir  | nia income tax paid for beneficiarie  | es (total of Withholding for              | Benefic              | iaries, Col         | lumn H) .  |               | 9                  |              | .00          |   |
| 10 Combined   | tax due (sum of lines 7 and 9)        |   |                      |                     |            | 1             | 0                  |              | .00          |   |
|   | ia fiduciary income tax withheld (\$  |   |                      |                     |            |               |                    |              |              |   |
|   | ERE IF WITHHOLDING IS FROM NRSR (N    |   | ESTATE               | )                   |            | 1             | 1                  |              | .00          |   |
| 12. Refundable  |                                       | MOTOR VEHICLE<br>ROPERTY CREDIT           |                      | L BUSINESS<br>REDIT |            | 1             | 2                  |              | .00          |   |
| 13. Estimated բ   | payments/payments with extension      | of time                                   |                      |                     |            | 1             | 3                  |              | .00          |   |
| 14. Paid with original return (amended return only)                   |                                       |   |                      |                     |            | 1             | 4                  |              | .00          |   |
| 15. Overpayment previously refunded or credited (amended return only) |                                       |   |                      |                     |            | 1             | 5                  |              | .00          |   |
| 16. Total payments (sum of lines 11, 12, 13, and 14 minus line 15)    |                                       |   |                      |                     |            | 1             | 6                  |              | .00          |   |
| 17. Balance of tax due (line 10 minus line 16)                        |                                       |   |                      |                     |            |               |                    |              | .00          |   |
|   | 225 (5 15 minus into 10)              | 18. Overpayr                              | ment (if             | line 16 is          | larger th  | an line 10,   |                    |              | .00          |   |
|   |                                       | enter amount)  19. Amount of tax          |                      |                     |            | -             |                    |              | .00          |   |
| <b>      </b>   | 5 2 0 2 5 0 1 W                       | 20. Amount to                             | be refi              | unded (line         | e 18 minı  | _             |                    |              | .00          |   |

Schedule SB Form IT-141

### WITHHOLDING FOR BENEFICIARIES AND NON-RESIDENT TAX PAID FOR WITHHOLDING

2025

ATTACH ADDITIONAL COPIES OF WITHHOLDING FOR BENEFICIARIES AS NEEDED

|      | NAME AND ADDRESS OF EACH BENEFICIARY |              |                           |      |                                 |                                    |             |  |  |  |
|------|--------------------------------------|--------------|---------------------------|------|---------------------------------|------------------------------------|-------------|--|--|--|
| NAME |                                      |              | STREET OR MAILING ADDRESS |      |                                 | CITY                               | STATE       | ZIP CODE   |  |  |
| 1    |                                      |              |                           |      |                                 |                                    |             |  |  |  |
| 2    |                                      |              |                           |      |                                 |                                    |             |  |  |  |
| 3    |                                      |              |                           |      |                                 |                                    |             |  |  |  |
| 4    |                                      |              |                           |      |                                 |                                    |             |  |  |  |
| 5    |                                      |              |                           |      |                                 |                                    |             |  |  |  |
| 6    |                                      |              |                           |      |                                 |                                    |             |  |  |  |
| 7    |                                      |              |                           |      |                                 |                                    |             |  |  |  |
| 8    |                                      |              |                           |      |                                 |                                    |             |  |  |  |
| 9    |                                      |              |                           |      |                                 |                                    |             |  |  |  |
| 10   |                                      |              |                           |      |                                 |                                    |             |  |  |  |
|      |                                      |              | T VIRGINIA FILING METHOD  |      | (E)<br>✓ IF NRW-4<br>PREVIOUSLY | (F) BENEFICIARY SHARE OF WV INCOME | (G)<br>RATE | (H)<br>TAX PAID FOR<br>BENEFICIARIES'<br>WITHHOLDING |  |  |
| 1    | "                                    | (B) RESIDENT | (C) COMPO                 | SIIE | (D) NONRES                      | FILED                              |             | 4.82%  |  |  |
| 2    |                                      |              |                           |      |                                 |                                    |             | 4.82%  |  |  |
| 3    |                                      |              |                           |      |                                 |                                    |             | 4.82%  |  |  |
| 4    |                                      |              |                           |      |                                 |                                    |             | 4.82%  |  |  |
| 5    |                                      |              |                           |      |                                 |                                    |             | 4.82%  |  |  |
| 6    |                                      |              |                           |      |                                 |                                    |             | 4.82%  |  |  |
| 7    |                                      |              |                           |      |                                 |                                    |             | 4.82%  |  |  |
| 8    |                                      |              |                           |      |                                 |                                    |             | 4.82%  |  |  |
| 9    |                                      |              |                           |      |                                 |                                    |             | 4.82%  |  |  |
|      |                                      |              |                           |      |                                 |                                    |             |  |  |  |
| 10   |                                      |              |                           |      |                                 |                                    |             | 4.82%  |  |  |
| LO.  | TALS                                 |              |                           |      |                                 |                                    |             | 4.82%  |  |  |



#### WEST VIRGINIA FIDUCIARY MODIFICATIONS

# 

| ADDITIONS:                    |  |                | COLUMN               | I I:TOTAL            | <b>&gt;</b>    | COLUMN II:AMOUNT ALLOCATED If this is a Simple Trust having NO Taxable Income, OMIT Col. II |
|-------------------------------|--|----------------|----------------------|----------------------|----------------|---|
| 7.5511101101                  |  |                |                      |                      |                | TWO TAXABLE ITICOTTIC, OWITT GOL. IT  |
| Interest incor                | me on state and municipal bonds, other than West Virgi                     | inia           |                      |                      |                |   |
| 2. Lump sum di                | stribution (Federal Form 4972)   |                |                      |                      |                |   |
| 3. Federal exen               | nption (Form 1041, line 21)  |                |                      |                      |                |   |
| 4. Other additio              | ns – state nature and source   |                |                      |                      |                |   |
| 5. Electing sma               | Il business trust additions  |                |                      |                      |                |   |
| 6. TOTAL ADD (Add Lines 1     | ITIONS through 5, Col. II and enter here and on Page 1, Line 2             | 2)             |                      |                      |                |   |
| SUBTRACTION                   | IS:  |                | COLUMN               | I I:TOTAL            |                | COLUMN II:AMOUNT ALLOCATED  |
|                               | me on US obligations specifically exempt from state tax                    | L              |                      | 600.00               |                | 600.00  |
| 9. Other subtract             | ctions – state nature and source   |                |                      |                      |                |   |
| 10. Electing sma              | Il business trust subtractions   |                |                      |                      |                |   |
| 11. TOTAL SUB<br>(Add Lines 7 | TRACTIONS<br>through 10, Col. II and enter here and on Page 1, Line        | 3)             |                      |                      |                |   |
| NET FIDUCIAR                  | Y MODIFICATIONS  |                | COLUMN               | I I:TOTAL            |                | COLUMN II:AMOUNT ALLOCATED  |
| 12. NET FIDUC                 | IARY MODIFICATIONS (Line 6 minus Line 11)                                  |                |                      |                      |                |   |
| Direct Depos<br>of Refund     | CHECKING SAVINGS   | ROUTING        | S NUMBER             |                      | ACCOUN         | T NUMBER  |
| PLEASE REVI                   | EW YOUR ACCOUNT INFORMATION FOR ACCURACY. INCORREC                         | CT ACCOUNT     | INFORMATION M        | IAY RESULT IN A \$1  | 5.00 RE        | TURNED PAYMENT CHARGE.  |
|                               | ision to discuss my return with my preparer YES NO                         |                |                      |                      |                |   |
| Under penalty of perjui       | ry, I declare that I have examined this return, accompanying schedules, ar | nd statements, | and to the best of n | ny knowledge and bel | iet, it is tri | ue, correct and complete.   |
| (Signature of Fidu            | ciary or Officer Representing Fiduciary)                                   |                | (Date)               | (Email)              |                |   |
| Paid                          |  |                |                      |                      |                |   |
| Preparer's<br>Use Only        | (Signature of Preparer)  |                |                      |                      |                | (Date)  |
|                               | (Prenarer's FIN) (Printe   | ed Name)       |                      |                      |                | (Telephone Number)  |



SCHEDULE NR FORM IT-141

# NONRESIDENT INCOME, ALLOCATION, AND CALCULATIONS

2025

| PART I – NONRESIDENT INCOME AND ALLOCATION (To be completed by nonresident estates and trusts only) |  |     |     |   |  |  |  |  |
|---|--|-----|-----|---|--|--|--|--|
| INCOME  | COLUMN I<br>REPORTED ON FEDERAL RETURN |     |     | COLUMN II<br>ALLOCATED TO WEST VIRGINIA |  |  |  |  |
| Interest income (includes QFT)  | 1                                      | .00 | 1   | .00                                     |  |  |  |  |
| Dividends (includes QFT)  | 2                                      | .00 | 2   | .00                                     |  |  |  |  |
| Business income or loss   | 3                                      | .00 | 3   | .00                                     |  |  |  |  |
| Capital gain or loss (includes QFT)   | 4                                      | .00 | 4   | .00                                     |  |  |  |  |
| Rents, royalties, partnerships, other estates and trusts, etc  5.                                   | 5                                      | .00 | 5   | .00                                     |  |  |  |  |
| 6. Farm income or loss  | 6                                      | .00 | 6   | .00                                     |  |  |  |  |
| 7. Ordinary gain or loss  | 7                                      | .00 | 7   | .00                                     |  |  |  |  |
| Other income (state nature of income)   | 8                                      | .00 | 8   | .00                                     |  |  |  |  |
| 9. Total income (add lines 1 through 8)   | 9                                      | .00 | 9   | .00                                     |  |  |  |  |
| DEDUCTIONS  | COLUMN I<br>REPORTED ON FEDERAL RETURN |     |     | COLUMN II ALLOCATED TO WEST VIRGINIA    |  |  |  |  |
| 10. Interest  | 10                                     | .00 | 10  | .00                                     |  |  |  |  |
| 11. Taxes (includes QFT)  | 11                                     | .00 | 11  | .00                                     |  |  |  |  |
| 12. Fiduciary fees (includes QFT)   | 12                                     | .00 | 12  | .00                                     |  |  |  |  |
| 13. Charitable deduction  | 13                                     | .00 | 13  | .00                                     |  |  |  |  |
| 14. Attorney, accountant, and return preparer fees (includes QFT)                                   | 14                                     | .00 | 14  | .00                                     |  |  |  |  |
| 15. A. Other deductions (see instructions for QFT)  | 15A                                    | .00 | 15A | .00                                     |  |  |  |  |
| B. Net operating loss deduction   | 15B                                    | .00 | 15B | .00                                     |  |  |  |  |
| 16. Total (sum of lines 10 through 15)  | 16                                     | .00 | 16  | .00                                     |  |  |  |  |
| 17. Adjusted total income or loss (line 9 minus line 16)  | 17                                     | .00 | 17  | .00                                     |  |  |  |  |
| 18. Income distribution deduction   | 18                                     | .00 | 18  | .00                                     |  |  |  |  |
| 19. Estate tax deduction including certain generation-skipping taxes                                | 19                                     | .00 | 19  | .00                                     |  |  |  |  |
| 20. Qualified business income deduction. Attach copy of IRS Form 8995 or 8995-A                     | 20                                     | .00 | 20  | .00                                     |  |  |  |  |
| 21. Federal exemption   | 21                                     | .00 | 21  | .00                                     |  |  |  |  |
| 22. Total deductions (sum of lines 18 through 21)   | 22                                     | .00 | 22  | .00                                     |  |  |  |  |
| 23. Taxable income of fiduciary (line 17 minus line 22)   | 23                                     | .00 | 23  | .00                                     |  |  |  |  |





## NONRESIDENT INCOME, ALLOCATION, AND CALCULATIONS

| PART II – CALCULATION OF WEST VIRGINIA TAX  |    |     |  |  |  |  |  |
|---|----|-----|--|--|--|--|--|
| 24. West Virginia taxable income (page 1, line 4)   | 24 | .00 |  |  |  |  |  |
| 25. Tentative tax (apply rate schedule to amount on line 24)  | 25 | .00 |  |  |  |  |  |
| 26. Income percentage (carry to four decimal places) = WV income (line 23, col. II)  Federal income (line 23, col. I) | 26 | •   |  |  |  |  |  |
| 27. West Virginia tax (line 25 times line 26) – enter here and on page 1, line 5                                      | 27 | .00 |  |  |  |  |  |





#### TAX CREDIT RECAP SCHEDULE

2025

| TAX CREDIT  | SCHEDULE    | APPLICABLE C | REDIT |
|---|-------------|--------------|-------|
| Credit for Income Tax paid to another state(s)  | Е           | 1            | .00   |
| General Economic Opportunity Tax Credit   | EOTC-PIT    | 2            | .00   |
| High Technology Manufacturing Business  | EOTC-HTM    | 3            | .00   |
| WV Environmental Agricultural Equipment Credit  | AG-1        | 4            | .00   |
| 5. WV Military Incentive Credit   | J           | 5            | .00   |
| 6. Neighborhood Investment Program Credit   | NIPA-2      | 6            | .00   |
| 7. Historic Rehabilitated Buildings Investment Credit (income producing)                  | RBIC        | 7            | .00   |
| Residential Historic Rehabilitated Buildings Investment Credit     (not income producing) | RBIC-A      | 8            | .00   |
| 9. Apprenticeship Training Tax Credit   | ATTC-1      | 9            | .00   |
| 10. Farm to Food Bank Tax Credit  |             | 10           | .00   |
| 11. Downstream Natural Gas Manufacturing Investment Tax Credit                            | DNG-2       | 11           | .00   |
| 12. Post Coal Mine Site Business Credit   | PCM-2       | 12           | .00   |
| 13. Natural Gas Liquids   | NGL-2       | 13           | .00   |
| 14. Donation or Sale of Vehicle to Qualified Charitable Organizations                     | DSV-1       | 14           | .00   |
| 15. Small Arms And Ammunition Manufacturers Credit  | SAAM-1      | 15           | .00   |
| 16. West Virginia Jumpstart Savings Program Credit (Employer Use Only)                    | JSP-1       | 16           | .00   |
| 17. Capital Investment in Child-Care Property Tax Credit                                  | CIP         | 17           | .00   |
| 18. Operating Costs of Child Care Facility Tax Credit                                     | OCF         | 18           | .00   |
| 19. Industrial Advancement Act Tax Credit   |             | 19           | .00   |
| 20. West Virginia Film Industry Investment Tax Credit                                     | WV FIIA-TCS | 20           | .00   |
| 21. Volunteer Firefighter Tax Credit  | VFTC-1      | 21           | .00   |
| 22. Build WV Property Value Adjustment Tax Credit   | PVA-2       | 22           | .00   |
| 23. Elective Income Credit for tax paid by a Pass-through Entity                          | EK-1        | 23           | .00   |
| 24.TOTAL CREDITS — add all credits above. Enter on Form WV/IT-141, line                   | 24          | .00          |       |

This summary form and the appropriate credit calculation schedule(s) or form(s) MUST be enclosed with your return to claim a tax credit. Information for these tax credits may be obtained by visiting our website at tax.wv.gov or by calling the Taxpayer Services Division at 1-800-982-8297.

