

2017 MICHIGAN Fiduciary Income Tax Return

Issued under authority of Public Act 281 of 1967, as amended. Penalty and interest apply for failure to file (see instructions).

Type or print in blue or black ink.

This is an amended return. This is the final return.

OFFICE USE ONLY		
a.		
b.		

1. For 2017, or taxable year beginning - 2017, and ending .

PART 1: NAME AND IDENTIFICATION

2. Name of Estate or Trust		3. Federal Employer Identification Number (FEIN)	
4. Name, Address and Title of Fiduciary		Estate Information	
		5a. County	
		5b. Probate File No.	
		5c. Date of Death (MM-DD-YYYY)	
6. Residency Status of Estate or Trust		Trust Information	
<input type="checkbox"/> a. Resident Estate <input type="checkbox"/> c. Resident Trust <input type="checkbox"/> b. Nonresident Estate * <input type="checkbox"/> d. Nonresident Trust *		7. Date Trust Was Created (MM-DD-YYYY)	

PART 2: INCOME AND ADJUSTMENTS (Include a copy of your U.S. Form 1041 and supporting schedules.)

8. Federal taxable income of fiduciary (from U.S. Form 1041, line 22 or U.S. Form 990-T)	8.		00
9. Federal taxable income of Electing Small Business Trust (from Sec. 641(c) worksheet)	9.		00
10. Fiduciary's share of Michigan net adjustments (from Schedule 3, line 41, column C, or Schedule 1, line 39)	10.		00
11. Capital gain or (loss) adjustment for resident estates or trusts (from MI-1041D, line 21)	11.		00
12. Taxable income. Add lines 8 through 11 or enter amount from MI-1041 Schedule NR, line 27 .	12.		00
13. Tax. Multiply line 12 by 4.25% (0.0425)	13.		00

PART 3: CREDITS AND PAYMENTS

	Amount	Credit	
14. Income tax paid to another state (include copy of return)	14a. <input type="text" value="00"/>	14b. <input type="text" value="00"/>	
15. Michigan Historic Preservation Tax Credit.....	15a. <input type="text" value="00"/>	15b. <input type="text" value="00"/>	
16. Small Business Investment Tax Credit		16. <input type="text" value="00"/>	
17. Total nonrefundable credits. Add 14b, 15b, and 16			17. <input type="text" value="00"/>
18. Income tax. Subtract line 17 from line 13. If line 17 is greater than 13, enter "0"			18. <input type="text" value="00"/>
19. Michigan Historic Preservation Tax Credit (refundable)		19. <input type="text" value="00"/>	
20. Income tax withheld (include MI-1041 Schedule W)		20. <input type="text" value="00"/>	
21. Michigan estimated tax and extension payments.....		21. <input type="text" value="00"/>	
22. 2016 overpayments credited to 2017		22. <input type="text" value="00"/>	
23. Total Refundable Credits and Payments. Add lines 19 through 22			23. <input type="text" value="00"/>

PART 4: BALANCE DUE OR REFUND

24. If line 23 is less than line 18 enter TAX DUE. <input type="checkbox"/> Check if MI-2210 is included. Include interest <input type="text"/> and penalty <input type="text"/> if applicable.....	PAY	24.	<input type="text" value="00"/>
25. If line 23 is greater than line 18, enter overpayment		25.	<input type="text" value="00"/>
26. Amount of line 25 to be credited to your 2018 fiduciary return		26.	<input type="text" value="00"/>
27. Subtract line 26 from line 25.....	REFUND	27.	<input type="text" value="00"/>

Federal Employer Identification Number (FEIN)

SCHEDULE 1: NET MICHIGAN ADJUSTMENT FOR RESIDENT ESTATES OR TRUSTS

Additions

28. Gross interest and dividends from obligations issued by states other than Michigan or their political subdivisions.....	28.		00
29. Taxes imposed on or measured by income deducted on U.S. Form 1041.....	29.		00
30. Expenses included in U.S. Form 1041 attributable to income from sources outside of Michigan..	30.		00
31. Expenses and interest incurred in production of income from U.S. government obligations on U.S. Form 1041.....	31.		00
32. Other (Include supporting documentation) Describe: _____	32.		00
33. Total additions. Add lines 28 through 32.....	33.		00

Subtractions

34. Income from U.S. government bonds and other obligations to the extent included in federal taxable income	34.		00
35. Income attributable to another state. Explain type and source: _____	35.		00
36. Expenses related to obligations of other states not deducted on U.S. Form 1041	36.		00
37. Other (Include supporting documentation) Describe: _____	37.		00
38. Total Subtractions. Add lines 34 through 37	38.		00
39. Net Michigan Adjustment. Subtract line 38 from line 33. If no distribution to beneficiaries, carry this amount to line 10. Otherwise, complete Schedules 2 and 3	39.		00

EXPLANATION OF CHANGES. If filing an amended return, complete this section.

40. Explain changes to income, deductions and credits. Show computations in detail and include a copy of the amended U.S. Form 1041 and all supporting schedules.

SIGNATURES AND DECLARATIONS

I declare under penalty of perjury that the information in this return and attachments is true and complete to the best of my knowledge.		I declare under penalty of perjury that this return is based on all information of which I have any knowledge.	
Signature of Fiduciary or Officer Representing Fiduciary	Date	Preparer's PTIN, FEIN or SSN	
<input type="checkbox"/> By checking this box, I authorize Treasury to discuss my return with my preparer.		Preparer's Name (print or type)	
This return is due April 17, 2018, or on the 15th day of the fourth month after the close of the tax year. WITHOUT PAYMENT: Mail return to: Michigan Department of Treasury P.O. Box 30058 Lansing, MI 48909		Preparer's Business Name, Address and Telephone Number	
WITH PAYMENT: Pay amount on line 24. Mail check and return to: Michigan Department of Treasury Department 781041 P.O. Box 78000 Detroit, MI 48278			

Make check payable to "State of Michigan" and write the estate's or trust's FEIN and "2017 MI-1041" on the front of the check.

Federal Employer Identification Number (FEIN)

SCHEDULE 2: BENEFICIARY IDENTIFICATION

Complete for each beneficiary if any income is distributed.

A Name and Residency Status R= Resident NR= Nonresident		B Address (Number, Street, Apt. #, City, State, ZIP Code)	C Social Security number or FEIN	
Example:	Joseph Smith	R	123 Main Street, Anywhere, MI 12345	111-11-1111
a.				
b.				
c.				
d.				

SCHEDULE 3: ALLOCATION OF NET MICHIGAN ADJUSTMENT FOR RESIDENT ESTATES OR TRUSTS

Beneficiary Identification from Schedule 2	A Federal Distributable Net Income			B Percentage of Amount in Column A		C Allocation of Net Michigan Adjustment (Multiply amount on line 39 by percentage in Column B.)
	Type of Income (Dividend, Interest, Rent, etc.)	Location (City, State)	Amount		%	
a.					%	
b.					%	
c.					%	
d.					%	
41. Fiduciary's Share					%	
42. Total				100	%	

SCHEDULE 4: CAPITAL GAIN OR (LOSS) DISTRIBUTED TO BENEFICIARIES WHEN FORM MI-1041D IS FILED

Schedule 4 must be completed for resident or nonresident estates and trusts if capital gains/losses were distributed to beneficiaries and a Michigan Adjustments of Capital Gains and Losses (Form MI-1041D) was filed.

Beneficiary Identification from Schedule 2	A Federal Gain or (Loss)	B Michigan Gain or (Loss)
a.		
b.		
c.		
d.		
43. Total		