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For Calendar Year 2022 or tax year beginning/, 2022, and en	nding /, 20
Return Type (Check Applicable Boxes):	
Initial Return □ Final Return □ Amended Return (Include IA102) □ Section 6	645 Election ☐ Short Period ☐
Tax Certificate of Acquittance Requested? Yes □ No □	
Is an IA 706 being filed? Yes □ No □	
Entity Type (Mark all that apply):	
Estate □ Grantor Trust □ Simple Trust □ Complex Trust □ Bankruptcy I	Estate □ Burial Trust Fund □
If a trust, check one: Testamentary $\Box$ Inter Vivos $\Box$	
<b>Residency Status:</b> Resident □ Nonresident □ Part-year resident	dent □
Name of estate or trust: FE	EIN:
Name and title of fiduciary: De	ecedent's SSN:
Address of fiduciary (city, state, zip):	
lowa County in which estate is pending: Probate number:	Date of Death:
Composite Return Requirement - Does the trust or estate have any of the	following in the tax year?
1 A poprocident individual as a bonefician/2	Vos □ No □
A nonresident individual as a beneficiary?  An estate or trust without a situa in lowe as a beneficiary?	
2. An estate or trust without a situs in lowa as a beneficiary?	
3. A C or S corporation without a commercial domicile in Iowa as a benefic	•
4. A partnership without a commercial domicile in Iowa as a beneficiary?	
5. A composite credit received from another entity on an Iowa K-1?	Yes
If you answered yes to any of "1" through "5" you may have a composite return	requirement see instructions

Name of estate or trust:	FE	:IN:
POWER OF ATTORNEY AUTHORIZATION (POA	)	
Authorization is granted to the person listed below to a Revenue, to make written or oral presentation or information under lowa Code section 450.68, includ is limited to those acts and information relevant to the federal tax information.	act as the estate's representant behalf of the estate, and ing an income tax certificate	to receive confidential state tax of acquittance. This authorization
Representative Name:		
Representative identification number:		
ID Type, check one: SSN/ITIN □	PTIN 🗆 IAN 🗆	
Phone:	Email:	-
Address:		
City:	State:	Zip:
<b>DESIGNATION FOR TAX DISCLOSURE (for indi</b> This designation allows for the designee to receive return. This designation does not authorize a desig	the estate's confidential state	e tax information in regard to this
Representative Name:		
Representative identification number:		
ID Type, check one: SSN/ITIN □	PTIN 🗆 IAN 🗆	
Phone:	Email:	
Address:		
City:	State:	Zip:



		2022 IA 1041, p	ag
Name	of estate or trust:	FEIN:	
1.	Interest income	1.	
2.	Ordinary dividends		
3.	Business income	·	
4.	Capital gain or (loss)		
5.	Rents, royalties, partnerships, other estate and trusts, etc		
6.	Farm income or (loss)		
7.	Ordinary gain or (loss)		
8.	Other income. List type		
9.	Total federal income. Add lines 1 through 8		
10.	Interest	10.	
	Taxes		
	Fiduciary fees		
	Charitable deduction		
14.	Attorney, accountant, and return preparer fees	14	
	Other deductions		
	Net operating loss (NOL) deduction (see instructions)		
17.	Total federal deductions. Add lines 10 through 16	17	
18.	Federal adjusted total income or (loss). Subtract line 17 from line 9	18	
19.	Iowa net modification from Schedule A, Part II, line 8	19	
	lowa adjusted total income or (loss). Add lines 18 and 19		
21.	Iowa income distribution deduction from Schedule B, line 15, but not I	ess than 021.	
22.	Qualified business income deduction	22.	
23.	RESERVED FOR FUTURE USE	23.	

24. RESERVED FOR FUTURE USE ......24.

26. Tax from tax table. If line 25 is zero or less, enter 0.......26. 28. lowa lump sum tax. Include federal Schedule 4972......28. 31. Tax before credits. Add lines 26 through 30......31.

25. Iowa taxable income. Subtract lines 21, 22, 23 and 24 from line 20 .......25.

32. Personal exemption. Enter \$40 or the amount on line 31, whichever is smaller......32.

33. Nonresident, part-year resident tax credit, Schedule C, line 30 .......33. 35. Out of State tax credit. Include IA 130......35.

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vame	or estate or trust: F	EIN:
37.	Other nonrefundable tax credits. Include IA 148	37
38.	Total fiduciary tax. Subtract line 37 from line 36	38
39.	Income tax withheld. Include federal form(s) 1099 or supporting docum	nentation 39.
40.	Estimated taxes paid to date	40
41.	Composite return credit. Include Iowa Schedule CC	41
42.	Motor fuel tax credit. Include IA 4136	42
43.	Other refundable credits. Include IA 148	43
44.	Total refundable credits. Add lines 39 through 43	44
45.	Tax Liability. If line 44 is smaller than line 38, enter the difference	45
46.	Refund. If line 44 is greater than line 38, enter the difference	46
47.	Penalty and interestPenalty Interest Add. Enter to	otal47
48.	Amount due: Add lines 45 and 47. Submit with form IA 1041V	48

Name of e	state or trust:	FEIN:
Schedule	A: Iowa Modifications	
Part I: M	odifications to Federal Taxable Income – Additions	
1. Interes	t from foreign securities and state municipal securities	1
2. Divider	nds not included in federal income	2
3. Taxabl	e federal refund	3
4. Other i	ncome	4
5. Total a	dditions (Add lines 1 through 4)	5
Part II: N	Modifications to Federal Taxable Income – Subtractions	
1. Taxabl	e interest income received from federal obligations	1
2. Divider	nd income received from federal obligations	2
3. Iowa ta	ax refund included on federal 1041, line 8	3
4. Federa	ll income tax paid	4
5. Admini	strative expenses allowed for estate tax purposes	5
6. Other	deductions	6
7. Total s	ubtractions (Add lines 1 through 6)	7
8. Net mo	odification (Subtract Part II, line 7 from Part I, line 5)	8

\*2263001059999\*

Enter this amount on page 3, line 19.

Name	e of estate or trust: FI	EIN:
Sched	dule B: Iowa Distributable Net Income:	
1.	lowa adjusted total income or (loss) from IA 1041, line 20	1
	If lowa adjusted total income and the total from IA 1041, line 4 are lossed	es, use
	the smaller loss.	
2.	Adjusted tax-exempt income	2
3.	Enter the amount from federal form 1041, Schedule B, line 3	3
4.	Enter the amount from federal form 1041, Schedule B, line 4	4
5.	Enter the amount from federal form 1041, Schedule B, line 5	5
6.	If the amount on IA 1041, line 4 is a gain, enter as a negative number.	
	If the amount on IA 1041, line 4 is a loss, enter the loss as a positive nu	umber6
7.	Combine lines 1 through 6. If zero or less, enter 0. This is your lowa dis	stributable
	net income	7
8.	If a complex trust, enter the accounting income for the tax year as deter	rmined
	under the governing instrument	8
9.	Income required to be distributed currently	9
10	Other amounts paid, credited, or otherwise required to be distributed	10
11	. Add lines 9 and 10. This is your actual total distributions for the year	11
12	2. Tax exempt income included in actual distributions included on IA 1041	, line 1812
13	3. Subtract line 12 from line 11. This is your tentative income distribution of	deduction
	based on actual distributions	13
14	Subtract line 2 from line 7. This is your tentative income distribution dec	duction14
15	5. Enter the smaller of line 13 or line 14 here, and on the IA 1041, line 21.	If zero or
	less, enter 0. This is your lowa income distribution deduction	15

Name of estate or trust:	FEIN:	
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## Schedule C: Computation of Nonresident/Part-Year Resident Tax Credit

Mc	oved into Iowa				
Mc	oved out of Iowa	Þ	Column A	Column B	
Da	te of change in residency:		from IA 1041	Iowa Source	е
1.	Interest income	1.			
2.	Ordinary dividends.	2.			
3.	Business income	3.			
4.	Capital gain or loss	4.			
	Rents, royalties, partnerships, other estates and trusts, etc				
	Farm income or (loss)				
	Ordinary gain or (loss)				
	Other income				
	Total income. Add lines 1 through 8				
	Interest				
	Taxes				
	Fiduciary fees				
	Charitable deduction				
	Attorney, accountant, and return preparer fees				
	Other deductions				
	NOL deduction				
	Total deductions. Add lines 10 through 16				
	Modifications from IA 1041 Schedule A, Part II, line 8				
	Balance. Subtract line 17 from line 9, then add line 18				
	Distribution to beneficiaries				
	Qualified business income deduction				
	RESERVED FOR FUTURE USE				
23.	Total. Add lines 20 through 22	23.			
	Taxable income of fiduciary. Subtract line 23 from line 19				
	lowa income percentage. Divide column B, line 24 by column A, line 24 and enter percentage rounded to nearest tenth of a percent. This cannot exceed 100.0%				
26.	Nonresident credit percentage. Subtract line 25 from 100.0%.		2	6	
27.	lowa tax on total income from IA 1041, line 26		2	7	
	Personal exemption credit from IA 1041, line 32				
	Tax after credits. Subtract line 28 from line 27				
30.	Nonresident tax credit. Multiply line 29 by line 26				
	Also enter this amount on IA 1041, line 33		3		

Name of estate or trust:\_\_\_\_\_\_ FEIN: \_\_\_\_\_

	lule D: Iowa Alternative Minimum Tax – Estates and Trusts rt I – Iowa Adjustments and Preferences. See Instructions		
1.	Interest from federal Schedule I (Form 1041)	1	
2.	Taxes from IA 1041 line 11, less federal income tax		
3.	Refund of taxes (exclude lowa income tax)		
3. 4.	Qualified small business stock		
5.	Exercise of incentive stock options		
Э.	(excess of AMT income over regular income tax)	5	
6	Other estates and trusts, amount from federal Schedule K-1(form 1041)		
6. 7			
7.	Disposition of property (difference between AMT and regular gain or loss)	1	
8.	Depreciation on assets placed in service after 1986	0	
0	(difference between regular tax and AMT)	· ·	
	· · · · · · · · · · · · · · · · · · ·		
	Loss limitations (difference between AMT and regular tax income or loss)		
	Circulation costs (difference between regular tax and AMT)		
	Long-term contracts (difference between AMT and regular tax income)		
	Mining costs (difference between regular tax and AMT)		
	Research and experimental costs (difference between regular tax and AMT)		
	Income from certain installment sales before January 1, 1987		
	Other adjustments, including income-based related adjustments		
	Total Adjustments and preferences. Add lines 1 through 16	17	
_	rt II - Iowa Alternative Minimum Taxable Income		
	Taxable income from IA 1041, line 25		
	NOL deduction. Do not enter as negative amount		
	Add lines 17, 18, and 19		
	Iowa alternative minimum tax NOL deduction. See instructions		
	lowa alternative minimum taxable income. Subtract line 21 from line 20	22.	
	rt III - Iowa Exemption Amount and Iowa Alternative Minimum Tax		
	Subtract \$75,000 from line 22. If zero or less, enter zero	·	
	Multiply line 23 by 25% (.25)		
	Subtract line 24 from \$17,500. If zero or less, enter zero		
	Subtract line 25 from line 22. If zero or less, enter zero		
27.	Tentative lowa alternative minimum tax. Multiply line 26 by 6.4% (.064)	27.	
28.	Regular tax less exemption credit. Enter IA 1041, line 26, less \$40.		
	If zero or less, enter zero	28	
29.	lowa alternative minimum tax. Subtract line 28 from line 27; enter here and on		
	IA 1041, line 29. If zero or less, enter zero. See instructions for lowa alternative		
	minimum tax limited to net worth	29.	
Pa	rt IV - Nonresidents Only – Complete lines 30-33		
30.	Enter lowa taxable income plus lowa adjustments and preferences.		
	If zero or less enter zero. See instructions	30.	
31.	Total taxable income plus total adjustments and preferences.		
	If zero or less enter zero. See instructions	31.	
32.	Divide line 30 by line 31 and enter the result to three decimal places.		
	If greater than one, enter one. See instructions	32.	
33.	lowa alternative minimum tax. Multiply line 29 by line 32.		
	Enter here and on IA 1041, line 29. See instructions	33.	

Name of estate or trust:	FEIN:
Schedule E: Electing Small Business Trust (ESBT) Tax	Computation
Total federal adjusted ESBT income	1
2. Iowa additions to ESBT income (include statement)	2
3. Iowa deductions to ESBT income (include statement	nt)3.
4. Iowa taxable ESBT income. Add lines 1 and 2, ther	subtract line 34.
5. Tax from tax tables. Residents enter here and on IA	A 1041, line 305.
Nonresidents and part-year residents continue to lir	ne 6
Nonresident and part-year resident trusts/estates	
6. Iowa source income	6
7. Divide line 6 by line 4 (round to two decimal places)	)7
8. Nonresident or part-year resident trust/estates. Mul	tiply line 7 by line 5.
Report this amount on IA 1041, line 30	8.
Mail to: Fiduciary Return Processing lowa Department of Revenue PO Box 10467 Des Moines, IA 50306-0467.	
When you pay by check, you authorize the Department obanking transaction.	f Revenue to convert your check to a one time electronic
<b>Sign Here Declaration:</b> I, the undersigned, declare under penalties o return and, to the best of my knowledge and belief, it is true	• • •
Signature of fiduciary or officer representing fiduciary:	
	Date:
Signature of preparer other than fiduciary:	
	Date:
Preparer PTIN: Address:	

