| Illinois Department of Revenue Schedule K-1-T Beneficiary's Share of Income and To be completed by trusts or estates filing Form IL- Beneficiaries receiving Schedule K-1-T should | -1041. | Year ending Month Year IL Attachment No. 13 |
|--|--|--|
| Step 1: Identify your trust or estate 1 Check the appropriate box trust estate 2 | 3 | Line 3, of Schedule NR |
| Step 2: Identify your beneficiary 5 Name 6 Mailing address City State ZIP 7 Social Security number or FEIN | 8a Check the appropriate box (See instruction individual corporation partnership S corporation 8b To be completed by the recipient on Line I am a: grantor trust disregand the amounts on this Schedule will b Name: | trust n cestate 5 only. garded entity be reported by |
| Rental income Patent royalties Copyright royalties Other royalty income Capital gain or loss from real property Capital gain or loss from tangible personal property Capital gain or loss from intangible personal property | our nonbusiness income or lo A Beneficiary's share (see instructions) 9 10 11 12 13 14 15 16 17 18 | B Illinois share |
| 20 Dividends 21 Net short-term capital gain or loss 22 Net long-term capital gain or loss (total for year) 23 Annuities, royalties, and other nonpassive income or loss before directly apportioned deductions 24 Directly apportioned deductions — Depreciation, depletion, | Our business income or loss (s A Beneficiary's share from U.S. Schedule K-1, less nonbusiness income 19 20 21 22 23 24 | See instructions.) B Illinois share |

| 25 | Total annuities, royalties, and other nonpassive income or loss. |
|----|--|
| | Subtract Column A, Line 24 from Line 23. See Instructions. |

- **26** Trade or business, rental real estate, and other rental income or loss before directly apportioned deductions
- **27 Directly apportioned deductions** Depreciation, depletion, and amortization
- **28** Total trade or business, rental real estate, and other rental income or loss. Subtract Column A, Line 27 from Line 26.
- 29 Other income and expense ____

Specify

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|----------|---|-----------------------------------|
| 25 | | |
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| | | |
| 28 29 | | |
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| | | |
| Г | This form is authorized as outlined by the Illinois | Income Tax Act Disclosure of this |

information is REQUIRED. Failure to provide this information could result in a penalty.



Step 5: Figure your beneficiary's share of your Illinois additions and subtractions

| | I-T Recipient: Before using the information provided in Step 5, you mune nedule K-1-T(2) to correctly report the amounts listed in Columns A and | | A Beneficiary's share | В |
|----|---|--------------|---------------------------------|----------------|
| 00 | | а <u>В</u> . | from Form IL-1041 | Illinois share |
| | Additions | | | |
| 30 | Federally tax-exempt interest income | 30 | | |
| 31 | Illinois taxes and surcharge deducted. See Instructions. | 31 | | |
| 32 | Illinois Special Depreciation addition | 32 | | |
| 33 | Related-Party Expenses addition | | | |
| 34 | Distributive share of additions | 34 | | |
| 35 | Other additions from Illinois Schedule M (for businesses) | | | |
| | | | | |
| ę | Subtractions | | | |
| 36 | | | | |
| | business income | 36a | | |
| | b Interest from U.S. Treasury obligations included as | | | |
| | nonbusiness income | 36b | | |
| | Payment from certain retirement plans | | | |
| | Retirement payments to retired partners | | | |
| 39 | | 39 _ | | |
| 40 | High Impact Business within a Foreign Trade Zone | | | |
| | Dividend subtraction | 40 | | |
| 41 | | | | |
| 42 | | 42 | | |
| | Related-Party Expenses subtraction Distributive share of subtractions | 43 | | |
| | | 4 5 | | |
| 45 | Other subtractions from Illinois Schedule M (for businesses) | 45 | | |

Step 6: Figure your beneficiary's (except a corporate beneficiary) share of your Illinois August 1, 1969, appreciation amounts

| | A Beneficiary's share | В |
|--|--|----------------|
| | from Illinois Schedule F (Form IL-1041) | Illinois share |
| 46 Section 1245 and 1250 gain 47 Section 1231 gain 48 Capital gain | 46 47 48 | |

Step 7: Figure your beneficiary's share of pass-through withholding, pass-through entity tax credit, and federal income subject to surcharge

| 49 | Pass-through withholding made on behalf of your nonresident beneficiary. | | |
|----|---|----|--|
| | See instructions before completing. | 49 | |
| 50 | Pass-through entity tax credit paid on your behalf. See instructions. | 50 | |
| 51 | Federal income attributable to transactions subject to the Compassionate Use of Medical Cannabis Program Act surcharge. See instructions. | 51 | |
| 52 | Federal income attributable to the sale or exchange of assets by a gaming licensee surcharge. See instructions. | 52 | |

