

U.S. Fiduciary Income Tax Return

for the year January 1–December 31, 1968, or other taxable year



1968

beginning 1968, ending 19.....

PLEASE PRINT OR TYPE

Check whether:

- Estate
- Simple trust
- Complex trust

If trust, check whether:

- Testamentary
- Inter vivos

	Name of estate or trust	Employer Identification Number
	Name and title of fiduciary	
	Address of fiduciary (number and street)	
	City, State, and ZIP code	

Simple trusts are not required to fill in Schedules B and C.

INCOME	1 Dividends (Enter full amount before exclusion)		
	2 Interest		
	3 Income from partnerships and other fiduciaries		
	4 Gross rents and royalties		
	5 Gross profit (loss) from trade or business		
	6 Net gain (loss) from capital assets (line 12, column 3, Schedule D, Form 1041)		
	7 Net gain (loss) from property other than capital assets (line 24, Schedule D, Form 1041)		
	8 Other income (State nature of income)		
	9 Total income (lines 1 to 8, inclusive)		
	10 Interest		
	11 Taxes		
	12 Fiduciary's portion of depreciation (Schedule A) and depletion. Explain depletion		
	13 Charitable deduction (line 9, Schedule B)		
	14 Other deductions (itemize)		
	15 Total (lines 10 to 14, inclusive)		
	16 Line 9 minus line 15 (Complex trusts and estates enter this amount on line 1 in Schedule C also)		
	17 Deduction for distributions to beneficiaries		
	18 Adjustment of dividend exclusion		
	19 Federal estate tax attributable to income in respect of a decedent (Fiduciary's share)		
	20 Long-term capital gain deduction. Enter 50% of line 13(e), Schedule D, Form 1041		
	21 Exemption		
	22 Total (lines 17 to 21, inclusive)		
	23 Taxable income of fiduciary (line 16 minus line 22)		
	24 Tax on amount on line 23 (See tax rate schedule)		
	25 If alternative tax is applicable, enter the tax from line 22, Schedule D, Form 1041		
	26 Tax surcharge (See Instruction 26)		
	27 Total (line 24 or line 25, whichever is applicable, and line 26)		
	28 Fiduciary's share of foreign tax credit (Attach Form 1116)		
	29 Fiduciary's share of investment credit (Attach Form 3468)		
	30 Total (lines 28 and 29)		
	31 Balance (line 27 less line 30)		
	32 Tax from recomputing fiduciary's share of prior year investment credit (Attach statement)		
	33 Total (lines 31 and 32)		
	34 Fiduciary's share of credit for tax paid at source on tax-free covenant bond interest		
	35 Credit for nonhighway Federal gasoline tax and lubricating oil (Attach Form 4136)		
	36 Credit for regulated investment companies (Attach Form 2439)		
	37 Tax previously paid or withheld (Attach explanation)		
	38 Total (lines 34 to 37, inclusive)		
	39 Balance of tax due (line 33 less line 38)		
	40 Overpayment (line 38 less line 33)		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. If prepared by a person other than taxpayer, his declaration is based on all information of which he has any knowledge.

Sign
here

Signature of fiduciary or officer representing fiduciary

Date

Signature of preparer other than fiduciary

Address

Date

Schedule A.—DEPRECIATION—Taxpayers using Revenue Procedures 62-21 and 65-13: Make no entry in column 2, enter the cost or other basis of assets held at end of year in column 3, and enter the accumulated depreciation at end of year in column 4.

1. Group and guideline class or description of property	2. Date acquired	3. Cost or other basis	4. Depreciation allowed or allowable in prior years	5. Method of computing depreciation	6. Life or rate	7. Depreciation for this year
1 Total additional first-year depreciation—estates only (do not include in items below)						→
2 Totals						
3 Less amount of depreciation claimed elsewhere on return						
4 Balance (line 2 less line 3)						
5 Fiduciary's portion of line 4. Enter here and on line 12, page 1						

Schedule B.—CHARITABLE DEDUCTION—(Attach statement giving name and address of charitable organization.)

1 Amounts paid or permanently set aside for charitable purposes from current year's income		
2 Tax-exempt interest allocable to charitable distribution		
(Complete lines 3 and 4 below only if gain on line 11, column 2, Schedule D, Form 1041, exceeds loss on line 10, column 2, Schedule D, Form 1041)		
3 (a) Long-term capital gain included on line 1 (Do not complete lines (b) and (c) if such amounts are greater than line (a))		
(b) Enter gain on line 11, column 2, Schedule D, Form 1041, minus loss on line 10, column 2, Schedule D, Form 1041		
(c) Enter gain on line 11, column 3, Schedule D, Form 1041, minus loss on line 10, column 3, Schedule D, Form 1041		
4 Enter 50% of the smallest of line 3(a), line 3(b), or line 3(c)		
5 Enter sum of line 2 and line 4		
6 Balance (line 1 minus line 5)		
7 Enter short-term capital gains and 50% of the long-term capital gains of the current taxable year allocable to corpus, paid or permanently set aside for charitable purposes		
8 Amounts paid or permanently set aside for charitable purposes other than from income of the current year		
9 Total (line 6 plus lines 7 and 8). Enter here and on line 13, page 1		

Schedule C.—DISTRIBUTABLE NET INCOME AND DISTRIBUTIONS DEDUCTION

1 Enter amount from line 16, page 1		
2 Add: (a) Tax-exempt interest (as adjusted)		
(b) Net gain shown on line 12, column 1, Schedule D, Form 1041. If net loss, enter zero		
(c) Lines 4 and 7, Schedule B		
(d) Short-term capital gain included on line 1, Schedule B		
(e) If amount on line 6, page 1, is a loss, enter amount here		
3 Total (line 1 through line 2(e))		
4 If amount on line 6, page 1, is a gain, enter amount here		
5 Distributable net income (line 3 minus line 4)		
6 Amount of income required to be distributed currently		
7 Other amounts paid, credited, or otherwise required to be distributed		
8 Total (lines 6 and 7)		
9 Enter the total of tax-exempt income included on lines 6 and 7		
10 Balance (line 8 minus line 9)		
11 Enter distributable net income (line 5, above)		
12 Enter the amount from line 2(a), above		
13 Balance (line 11 minus line 12)		
14 Distributions deduction. Enter here and on line 17, page 1, the lesser of line 10 or line 13 above		

- 1 Date trust was created or, if an estate, date of decedent's death.** _____
- 2 If return is for an estate, has a United States Estate Tax Return been filed? Yes No. If "No," will return be filed? Yes No Uncertain.**
- 3 If you had tax-exempt income, have you deducted only that portion of expenses allocable to taxable income? Yes No.**
- 4 Has final distribution of assets been made during the year?**
 Yes No.
- 5 If the estate or trust received income from a nominee, state name, employer identification number, and address of nominee.** _____