

Form Department of the Treasury Internal Revenue Service

For the calendar year 1984 or fiscal year

beginning....., 1984, and ending....., 19.....

Check applicable boxes:

- Decedent's estate
Simple trust (\$300)
Complex trust (\$100)
Complex trust (\$300)
Grantor type trust
Ancillary return
Bankruptcy estate
Generation-skipping trust
Testamentary trust
Family estate trust
Pooled income fund

Name of estate or trust (Grantor type trust, see instructions)
Name and title of fiduciary
Address of fiduciary (number and street)
City, State, and ZIP code

Employer identification number
Nonexempt charitable and split-interest trusts check applicable boxes (See instructions):
Described in section 4947(a)(1)
Not treated as a private foundation
Described in section 4947(a)(2)

- First return
Final return
Amended return
Change in fiduciary's Name or Address

For Paperwork Reduction Act Notice, see page 1 of the instructions.

Income section table with rows 1-10: Dividends, Interest income, Partnership income, Income from another estate or trust, Gross rent and royalty income, Net rent and royalty income, Net business and farm income, Capital gain, Ordinary gain, Other income, Total income.

Deductions section table with rows 11-25: Interest, Taxes, Fiduciary fees, Charitable deduction, Attorney fees, Other deductions, Adjusted total income, Income distribution deduction, Dividend and interest exclusion, Estate tax deduction, Long-term capital gain deduction, Exemption, Total, Taxable income of fiduciary.

Computation of Tax section table with rows 26-38: Tax rate schedule, Credits (Foreign tax, Nonconventional Fuel, Research), Balance, Recapture of investment credit, Alternative minimum tax, Federal income tax (Previously paid, Withheld), Balance of tax due, Overpayment.

Please Sign Here: Declaration of preparer, Signature of fiduciary, Date, Preparer's signature, Date, Firm's name, E.I. No., ZIP code, Preparer's social security no.

Do not complete Schedules A and B for a simple trust or a pooled income fund.

SCHEDULE A.—Charitable Deduction

(Write the name and address of each charitable organization to whom your contributions total \$3,000 or more on an attached sheet.)

Table with 11 rows for SCHEDULE A. Columns include line numbers and corresponding descriptions of charitable contributions and deductions.

SCHEDULE B.—Income Distribution Deduction

Check box, if Section 643(d)(3) election is made (Attach Schedule D (Form 1041))

Table with 19 rows for SCHEDULE B. Columns include line numbers and descriptions of income distribution deductions.

Other Information

Table with 7 rows for Other Information. Columns include questions and Yes/No response boxes.