

For the calendar year 1989 or fiscal year beginning , 1989, and ending , 19 OMB No. 1545-0092

Check applicable boxes: Decedent's estate, Simple trust, Complex trust, Grantor type trust, Bankruptcy estate, Family estate trust, Pooled income fund, Initial return, Amended return, Final return. Name of estate or trust, Employer identification number, Name and title of fiduciary, Date entity created, Address of fiduciary, Nonexempt charitable and split-interest trusts, City, state, and ZIP code, Number of Schedules K-1 attached.

Income section with rows 1-9: 1 Dividends, 2 Interest income, 3 Income (or losses) from partnerships, 4 Net rental and royalty income, 5 Net business and farm income, 6 Capital gain, 7 Ordinary gain, 8 Other income, 9 Total income.

Deductions section with rows 10-21: 10 Interest, 11 Taxes, 12 Fiduciary fees, 13 Charitable deduction, 14 Attorney, accountant, and return preparer fees, 15a Other deductions NOT subject to the 2% floor, 15b Allowable miscellaneous itemized deductions, 15c Add lines 15a and 15b, 16 Total, 17 Adjusted total income, 18 Income distribution deduction, 19 Estate tax deduction, 20 Exemption, 21 Total deductions.

Tax and Payments section with rows 22-29: 22 Taxable income of fiduciary, 23 Total tax, 24a Payments: 1989 estimated tax payments, 24b Treated as credited to beneficiaries, 24c Subtract line 24b from line 24a, 24d Tax paid with extension of time to file, 24e Federal income tax withheld, 24i Credits, 25 Total payments, 26 If line 23 is larger than line 25, enter TAX DUE, 27 If line 25 is larger than line 23, enter OVERPAYMENT, 28 Amount of line 27 to be, 29 Penalty for underpayment of estimated tax.

Please Sign Here: 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. Declaration of preparer (other than fiduciary) is based on all information of which preparer has any knowledge. Signature of fiduciary or officer representing fiduciary, Date, EIN of fiduciary, Preparer's signature, Date, Check if self-employed, Preparer's social security no., Firm's name (or yours if self-employed) and address, E.I. No., ZIP code.

**Schedule A**

**Charitable Deduction—Do not complete for a simple trust or a pooled income fund.**

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

Table with 6 rows and 3 columns. Rows include: 1 Amounts paid or permanently set aside for charitable purposes from current year's gross income; 2 Tax-exempt interest allocable to charitable distribution; 3 Subtract line 2 from line 1; 4 Enter the net short-term capital gain and the net long-term capital gain of the current tax year allocable to corpus paid or permanently set aside for charitable purposes; 5 Amounts paid or permanently set aside for charitable purposes from gross income of a prior year; 6 Total (add lines 3 through 5).

**Schedule B Income Distribution Deduction (see instructions)**

Table with 17 rows and 3 columns. Rows include: 1 Adjusted total income; 2 Adjusted tax-exempt interest; 3 Net gain shown on Schedule D; 4 Enter amount from Schedule A, line 4; 5 Long-term capital gain included on Schedule A, line 1; 6 Short-term capital gain included on Schedule A, line 1; 7 If the amount on page 1, line 6, is a capital loss, enter here as a positive figure; 8 If the amount on page 1, line 6, is a capital gain, enter here as a negative figure; 9 Distributable net income; 10 Amount of income for the tax year determined under the governing instrument; 11 Amount of income required to be distributed currently; 12 Other amounts paid, credited, or otherwise required to be distributed; 13 Total distributions; 14 Enter the total amount of tax-exempt income included on line 13; 15 Tentative income distribution deduction; 16 Tentative income distribution deduction; 17 Income distribution deduction.

**Schedule G Tax Computation (see instructions)**

Table with 7 rows and 3 columns. Rows include: 1 Tax: a Tax rate schedule; b Other taxes; 2a Foreign tax credit; b Credit for fuel produced from a nonconventional source; c General business credit; d Credit for prior year minimum tax; 3 Total credits; 4 Subtract line 3 from line 1c; 5 Recapture taxes; 6 Alternative minimum tax; 7 Total tax.

**Other Information (see instructions)**

Table with 11 rows and 3 columns. Rows include: 1 If the fiduciary's name or address has changed; 2 Did the estate or trust receive tax-exempt income?; 3 Did the estate or trust have any passive activity losses?; 4 Did the estate or trust receive all or any part of the earnings; 5 At any time during the tax year, did the estate or trust have an interest in or a signature or other authority over a financial account in a foreign country; 6 Was the estate or trust the grantor of, or transferor to, a foreign trust; 7 Check this box if this entity has filed or is required to file Form 8264; 8 Check this box if this entity is a complex trust making the section 663(b) election; 9 Check this box to make a section 643(e)(3) election; 10 Check this box if the decedent's estate has been open for more than 2 years; 11 Check this box if the trust is a participant in a Common Trust Fund.