

**U.S. Fiduciary Income Tax Return
for Nontaxable Simple Trusts**

For the calendar year 1987, or short year

beginning, 1987, and ending December 31, 1987.

Check here if this return is for a short taxable year under section 645

| | | |
|--|--|--|
| Name of simple trust | | Employer identification number |
| Name and title of fiduciary | | Date trust created |
| Address of fiduciary (number and street) | | Check applicable box(es): <input type="checkbox"/> Initial return <input type="checkbox"/> Amended return <input type="checkbox"/> Final return |
| City, state, and ZIP code | | |

Caution: Complex trusts, grantor trusts, and estates must use Form 1041.

| | | | | | | | |
|-------------------|---|----|--|--|----|--|--|
| Income | 1 Dividends | | | | 1 | | |
| | 2 Interest income | | | | 2 | | |
| | 3 Income (or losses) from partnerships, estates, or other trusts | | | | 3 | | |
| | 4 Net royalty income (or loss) (attach Schedule E (Form 1040)) | | | | 4 | | |
| | 5 Net business and farm income (or loss) (attach Schedules C and F (Form 1040)) | | | | 5 | | |
| | 6 Ordinary gain (or loss) (attach Form 4797) | | | | 6 | | |
| | 7 Other income (state nature of income) | | | | 7 | | |
| | 8 Total income (add lines 1 through 7) | | | | 8 | | |
| Deductions | 9 Interest | 9 | | | | | |
| | 10 Taxes | 10 | | | | | |
| | 11 Fiduciary fees | 11 | | | | | |
| | 12 Accountant, attorney, and return preparer fees | 12 | | | | | |
| | 13 Other deductions (itemize on a separate sheet) | 13 | | | | | |
| | 14 Total (add lines 9 through 13) | | | | 14 | | |
| | 15 Adjusted total income (or loss) (subtract line 14 from line 8) | | | | 15 | | |
| | 16 Income distribution deduction (attach Schedule K-1 (Form 1041)) | | | | 16 | | |
| | 17 Balance (subtract line 16 from line 15) (see instructions) | | | | 17 | | |

| Other Information | | Yes | No |
|-------------------|---|-----|----|
| 1 | If the fiduciary's name or address has changed enter the old information <input type="checkbox"/> | | |
| 2 | Did the trust receive tax-exempt income? (If "Yes," attach a computation of the allocation of expenses.) Enter the amount of tax-exempt interest income <input type="checkbox"/> \$ | | |
| 3 | Did the trust receive all or any part of the earnings (salary, wages, and other compensation) of any individual by reason of a contract assignment or similar arrangement? | | |
| 4 | Was the trust the grantor of, or transferor to, a foreign trust which existed during the current tax year, whether or not the trust has any beneficial interest in it? (If "Yes," you may have to file Form 3520, 3520-A, or 926) | | |
| 5 | At any time during the tax year, did the trust have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? (See the Instructions for exceptions and filing requirements for Form TD F 90-22.1.) If "Yes," write the name of the foreign country <input type="checkbox"/> | | |
| 6 | Check this box if this trust has filed or is required to file Form 8264 , Application for Registration of a Tax Shelter <input type="checkbox"/> | | |

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.

| | | | |
|---|------|---|--------------------------------|
| <input type="checkbox"/> Signature of fiduciary or officer representing fiduciary | | <input type="checkbox"/> Date | |
| <input type="checkbox"/> Preparer's signature | Date | Check if self-employed <input type="checkbox"/> | Preparer's social security no. |
| <input type="checkbox"/> Firm's name (or yours, if self-employed) and address | | E.I. No. <input type="checkbox"/> | |
| | | ZIP code <input type="checkbox"/> | |