OREGON			For office use only	
Form FIDUCIARY INCOME		2000	Date received	
TAX RETURN	4		Payment	
or Fiscal Year Mo / Day / Year ● Beginning: / 00	● Endin	Mo / Day / Year	Penalty date:	
Name of Estate or Trust (first name, last name) — PRINT PLAINLY OR TYPE		<u>, </u>	1 2 3	
•			† † †	
Name of Fiduciary (first name, last name)			Business Identification Number	
Street Address or P.O. Box			Federal Employer Identification Number	ſ
City	State	ZIP Code	An extension is attached	
• A. This return is for:		A Bankruptcy Estate	e	rust
B. This is: An Amended Return A First Return	A Final Re	•	(102)	
C. This return is for: An Oregon Resident A Nonreside	ent 🗌	A Part-Year Trust (us	e Schedule P to compute the tax)	
D. If exempt organization, check federal form filed: 990-T	Other	Specify		
E. State School Fund. Check the box to donate the kicker refund t				
ATTACH A COPY OF FEDERAL FORM				
			Beneficiary Fiduciar	У
Revised distributable net income from page 2, line 25	1 📙		•	-
2. Distribution deduction from federal Form 1041, Schedule		2 <u> </u>	<u> </u>	
B, line 15, plus page 2, line 27				
a. Tax-exempt income deducted in computing distribution deduction from federal Form 1041, Schedule B, line 12	I .			
b. Add lines 2 and 2a	2b L			
O Demonstrate the Object				
3. Percentage <u>Line 2b \$</u> Line 1 \$ = 3	%			
4. Revised taxable income of fiduciary from page 2, line 28			4	
5. Fiduciary adjustment from page 2, line 40			4	
Indicate whether to be added or subtracted	5			
a. Beneficiary's share (line 5 X % on line 3—see instructions)	5 ∟	52		
			5b	
b. Fiduciary's share (line 5 minus line 5a) 6. Income to be reported by beneficiaries (Form 1041, K-1				
attached—see line 6 instructions) Line 2 plus line 5a		6Г		
		V <u>L</u>		
7. Oregon taxable income of fiduciary (total or net of lines 4 and 9	5b)		7	
	•			
8. Tax using rate schedule on page 2, or from Schedule P, lin				
9. Tax credits (no prepayments, see instructions). Identify			l l	
10. Balance of tax (line 8 minus line 9)			•10 L	
11. Oregon income tax withheld (attach form W-2 to front of return)	•11			
12. Prepayments and claim of right credit (see instructions)				
13. Total payments (line 11 plus line 12)			13	
14. Tax due. Is line 10 more than line 13? If so, line 10 minus line				
15. Overpayment. Is line 13 more than line 10? If so, line 13 minutes 15.				
16. Penalty for filing or paying late (see instructions, page 3)				
17. Interest due with this return (see instructions, page 3)				
18. Total Due (line 14 plus lines 16 and 17)			l l	

Mail this return on or before the 15th day of the fourth month after the end of the taxable year.

19. **Refund** (line 15 minus lines 16 and 17) _______Refund 19

150-101-041 (Rev. 9-00) Web

Name of Estate or Trust

Title

Federal Employer Identification Number

State

ZIP Code

S	SCHEDULE 1 — OREGON CHANGE	S TO DI		NET INCOME (DNI) AN ecific instructions)	DTAXABLE II	NCOME (OF FID	UCIARY (TIF)
					(Colum DN	-		(Column B) TIF
20.	. Distributable net income (from fede	ral Forn	n 1041, Schedul	le B, line 7)	20			
	Taxable income of fiduciary (from fe						21	
	Changes in depreciation for Oregon						22	
	Other changes. Identify						23	
	Line 22 plus line 23						24	
	Revised distributable net income (Co						- · -	
	Enter here and on line 1, page 1				25		_	
26.	Total taxable income (Column B, line					·····	26	
	Changes included in Column A, line							
	Revised taxable income of fiduciary							
	Enter here and on page 1, line 4						28	
		SC	_	IDUCIARY ADJUSTME	NT			
			(reter to sp	ecific instructions)				Subtractions
20	2000 to do not in some a toy subtraction	م داد ما	l + -	:t			₂₀ Г	
	2000 federal income tax subtraction-						∠9 ∟	
3 0.	Interest on U.S. obligations included					· a \	20 F	
less allocation of administration and miscellaneous expenses \$ (see instructions)								
31. Oregon income tax refund included as income on federal Form 1041								
	Add lines 29 through 32							
JJ.	Add lines 29 tillough 32						33 [
								Additions
34	Oregon income tax deducted on 200	n federa	l Form 1041				34	
34. Oregon income tax deducted on 2000 federal Form 1041								
36. Depletion in excess of adjusted basis								
37. Estate taxes on income in respect of a decedent not taxable by Oregon								
	Add lines 34 through 38							
40.	Fiduciary adjustment (difference bety	ween lin	es 33 and 39)				40 E	
	This fiduciary adjustment is to be							
		Con		TE SCHEDULE Ising the Following Ra	05			
	If your taxable income is:	COI	ilpute the Tax O	Your tax is:				
	If your taxable income is:				omo			
Not over \$2,450 Over \$2,450 but not over \$6,100					r \$2 /50			
Over \$6,100								
	σνει ψυ, του			\$570 plus 570 of	ne excess ove	ι ψυ, του		
acco	eclare under the penalties for false swearin ompanying schedules and statements) has beer	n examined	by me and, to the	Signature of Preparer Other	han Fiduciary		Telephor	ne Number
	t of my knowledge and belief, is true, correct, and	d complete		X				
•	nature of Fiduciary		Date	Street Address				
X Title		- ·				100	7.5.5	
Title	•	I elephon	e Number	City		State	ZIP C	ode
lh-	uroby authoriza the following individual(a) (o receive	and provide and a	onfidential toy information	alating to this ret	urn		
	ereby authorize the following individual(s) to ne (please print or type)	o receive	and provide any c	Mailing Address	eiaung to this fet	uIII.		
· vall	the (blease billir of the)			Maining Address				

City

Telephone Number