SCHEDULE J (Form 1041)

Accumulation Distribution for a Complex Trust

► File with Form 1041.

► See the separate Form 1041 instructions.

OMB No. 1545-0092

Department of the Treasury Internal Revenue Service Name of trust Employer identification number

Pa	art I Accumulation Distri	butio	on in 1993				
See	e the Form 4970 instructions for	certa	in income that mi	nors may exclude	and special rules	for multiple trusts	•
1	Other amounts paid, credited, Form 1041, line 12)					edule B of	
	Distributable net income for 19 Income required to be distribut 1041, line 11)						
4	Subtract line 3 from line 2. If ze	ero or	less, enter -0			4	
5	Accumulation distribution for 1	993. (Subtract line 4 fro	m line 1.)		5	
Pa	art II Ordinary Income Ac	cum	ulation Distribu	tion (Enter the	applicable thro	wback years b	elow.)
If the distribution is thrown back to more than five years (starting with the earliest applicable tax year beginning after December 31, 1968), attach additional schedules. (If the trust was a simple trust, see Regulations section 1.665(e)-1A(b).)			Throwback year ending 19	Throwback year ending	Throwback year ending 19	Throwback year ending 19	Throwback year ending 19
6	Distributable net income (see instructions)	6					
7	Distributions (see instructions) .	7					
	Subtract line 7 from line 6. Enter amount from page 2, line 25 or line 31, as applicable	8					
10	Undistributed net income (Subtract line 9 from line 8.)	10					
11	Enter amount of prior accumulation distributions thrown back to any of these years	11					
	Subtract line 11 from line 10 Allocate the amount on line 5 to the earliest applicable year first. Do not allocate an amount greater than line 12 for the	12					
14	Same year (see instructions) Divide line 13 by line 10 and multiply result by amount on line 9	13					
	Add lines 13 and 14	15					
16	Tax-exempt interest included on line 13 (see instructions) .	16					
17	Subtract line 16 from line 15	17					

Schedule J (Form 1041) 1993 Page 2

Part III Taxes Imposed on Undistributed Net Income (Enter the applicable throwback years below.) (see instructions)

If more than five throwback years are involved, attach additional schedules. If the trust received an accumulation distribution from another trust, see Regulations section 1.665 (d)-1A.

If the trust elected the alternative tax on capital gains, SKIP lines 18			Throwback year ending	Throwback year ending		Throwback year ending	Throwback year ending	Throwback year ending
	through 25 AND complete lines 26 through 31.		19	19		19	19	19
(The alternative tax on capital gains was repealed for tax years beginning after December 31, 1978.)								
	Regular tax	18						
	Trust's share of net short-term gain	19						
20	Trust's share of net long-term gain	20						
21	Add lines 19 and 20	21						
22	Taxable income	22						
23	Enter percent (divide line 21 by line 22, but not more than 100%)	23	%		%	%	%	%
	Multiply line 18 by the percentage on line 23	24						
25	Tax on undistributed net income. (Subtract line 24 from line 18. Enter here and on page 1, line 9.)	25						
Complete lines 26 through 31 only if the trust elected the alternative tax on long-term capital gain.								
26	Tax on income other than long-term capital gain	26						
27	Trust's share of net short-term gain	27						
	Trust's share of taxable income less section 1202 deduction	28						
29	Enter percent (divide line 27 by line 28, but not more than 100%)	29	%		%	%	%	%
	Multiply line 26 by the percentage on line 29	30						
31	Tax on undistributed net income. (Subtract line 30 from line 26. Enter here and on page 1, line 9.)	31						
	rt IV Allocation to Benefic	iary						
	e : Be sure to complete Form 497 eficiary's name	70 , Tax	on Accumulation	Distribution of 1	Trust	ts.	Identifying number	
Beneficiary's address (number and street including apartm			partment number or P.	.O. box)		(a) This	(b) This	(c) This
City, state, and ZIP code						beneficiary's share of line 13	beneficiary's share of line 14	beneficiary's share of line 16
	Throwback year 19			–	32			
	Throwback year 19				33			
	Throwback year 19			–	34			
	Throwback year 19			–	35 36			
	Total (Add lines 32 through 36. lines of Form 4970.)	Enter	here and on the ap	opropriate -	37			