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Most forms and publications have a page on IRS.gov: <u>IRS.gov/Form1040</u> for Form 1040; <u>IRS.gov/Pub501</u> for Pub. 501; <u>IRS.gov/W4</u> for Form W-4; and <u>IRS.gov/ScheduleA</u> for Schedule A (Form 1040), for example, and similarly for other forms, pubs, and schedules for Form 1040. When typing in a link, type it into the address bar of your browser, not a Search box on IRS.gov.

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SCHE	DULE J
(Form	1041)

Name of trust

Department of the Treasury Internal Revenue Service

Accumulation Distribution for Certain Complex Trusts

OMB No. 1545-0092

2023

Attach to Form 1041.

Go to www.irs.gov/Form1041 for instructions and the latest information.

Employer identification number

Par	Accumulation Distribut	ion i	n 2023				
Note:	See the Form 4970 instructions for						3.
1	Other amounts paid, credited, Schedule B, line 10)	or ot	herwise required	to be distributed	for 2023 (from F	orm 1041,	
-							
2							
3	Income required to be distributed currently for 2023 (from Form 1041, Schedule B, line 9) 3						
4	Subtract line 3 from line 2. If zero or less, enter -0						
5	Accumulation distribution for 20	23. S	ubtract line 4 from	line 1		5	
Part	Ordinary Income Accur	mula	tion Distributio	n (Enter the app	licable throwba	ck years below.)	
than 5 tax yea schedu	If the distribution is thrown back to me years (starting with the earliest applic ar beginning after 1968), attach additio lles. (If the trust was a simple trust, se ations section 1.665(e)-1A(b).)	able mal	Throwback year ending				
6	Distributable net income (see the instructions)	6	0		20	72	
7	Distributions (see the instructions)	7		,	20	60	
8	Subtract line 7 from line 6 .	8					
9	Enter amount from page 2, line 25 or line 31, as applicable	9	NC		FI		
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					
12	Subtract line 11 from line 10.	12					
13	Allocate the amount on line 5 to the earliest applicable year first. Do not allocate an amount greater than line 12 for the same year. See the instructions	13					
14	Divide line 13 by line 10 and multiply result by amount on line 9	14					
15	Add lines 13 and 14	15					
16	Tax-exempt interest included						
	on line 13 (see the instructions)	16					
17	Subtract line 16 from line 15.	17					
	perwork Reduction Act Notice, see		nstructions for Form	n 1041.	Cat. No. 11382Z	Schedu	le J (Form 1041) 2023

Taxes Imposed on Undistributed Net Income (Enter the applicable throwback years below.) (See the instructions.) Part III Note: If more than 5 throwback years are involved, attach additional schedules. If the trust received an accumulation distribution from another trust, see Regulations section 1.665(d)-1A

unoun							
on ca begin	trust elected the alternative tax bital gains (repealed for tax years hing after 1978), skip lines 18 gh 25 and complete lines 26 gh 31.		Throwback year ending				
18	Regular tax	18					
19	Trust's share of net short-term						
	gain	19					
20	Trust's share of net long-term	20					_
21	gain	20 21					
22	Taxable income	22					_
23	Enter percent. Divide line 21 by line 22, but do not enter						
	more than 100%	23	%	%	%	%	%
24	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					
unless	t complete lines 26 through 31 the trust elected the ative tax on long-term capital						
26	Tax on income other than long-term capital gain .	26					
27	Trust's share of net short-term gain	27					
28	Trust's share of taxable income less section 1202 deduction	28					
29	Enter percent. Divide line 27 by line 28, but do not enter more than 100%	29	%	%	%	%	%
30	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					
Part		ry			•		
Note:	Be sure to complete Form 4970,	Tax c	on Accumulation D	istribution of Trus	ts.		

Beneficiary's name

Benefi	Beneficiary's name					Identifying number	
Beneficiary's address (number and street including apartment number or P.O. box)				(a) This	(b) This	(c) This	
City, s	tate, and ZIP code		beneficiary's share of line 13	beneficiary's share of line 14	beneficiary's share of line 16		
32	Throwback year		32				
33	Throwback year		33				
34	Throwback year	· · · · · · · · · · · · · · ·	34				
35		· · · · · · · · · · · · · · ·	35				
36	Throwback year	· · · · · · · · · · · · · · ·	36				
37	Total. Add lines 32 thro	bugh 36. Enter here and on the appropriate	37				