(Rev. May 1999)

U.S. Income Tax Return for Settlement Funds (Under Section 468B)

OMB	Nο	1545-	130/

		of the Treasury enue Service	For calendar year	or tax year	beginning		, , aı	nd ending		,			
1	Nam	ne of fund						Empl	oyer ide	ntificatio	on num	nber of fund (see instru	ıctions)
5	Num	nber, street, and ro	oom or suite no. (If a P.C). box, see in:	structions.)				· ·				
קל - א	City	or town, state, an	d ZIP code										
LICES	Nam	ne and address of	administrator (defined or	n page 2 of th	ne instructions)								
D	Che art I	eck applicable	boxes: (1)	Final r		(2)	☐ Ch	ange of a	addres	S		(3) Amended	d return
псоте	1 2 3 4 5	Taxable intere Dividends . Capital gain n Items of incor Other income		 Schedule [partnership		 O)) 		 	 		1 2 3 4 5		
Deductions	7 8 9 10 11 12 13	Trustee/admin Taxes	istrator fees	ttach sche m process it from a p ile)	dule) . dule) . sing expenso artnership in	es	· · · · · · · · · · · · · · · · · · ·				7 8 9 10 11 12 13		
Pa	art II	Tax Com					-						
			ss income. Subtrac								15		
	17 a	Credits and p Overpayment as a credit	ter 39.6% of line 1 payments: from prior year allo	owed <u>1</u>	7a 7b						16		
	С	Refund of o	verpaid estimated Form 4466	I tax	7c								
	e f 18	Tax deposited Total credits a Estimated tax	17c from the total of with Form 7004, and payments (add penalty (see page total of lines 16	ines 17d a d of instru	 and 17e). actions). Che	 eck if Fo	. 176 rm 222	 0 is attac			17f 18 19		
	20	Overpayment	—If line 17f is more	than the t	otal of lines	16 and 1	8, ente	r amount	overp	aid .	20		
			line 20 you want: Cro		-		ax ►_			_	21		
Si	ease gn ere	Under penal belief, it is tr	ties of perjury, I declare the ue, correct, and complete e of person filing return	nat I have exan	nined this return	, including			formation		nts, and		
	id	Preparer's signature					Date		Che if se	ck		Preparer's SSN or PTIN	<u> </u>
	epare e Onl	er's Firm's nam	f-employed)							E.I. No.			

Use Only

Form 1120-SF (Rev. 5-99) Page **2**

Schedule L Balance Sheets		Beginning of year	End of year					
	Assets	1						
1	Cash	1						
2	U.S. Government obligations	2						
3	State and local government obligations	3						
4	Other investments (attach schedule)							
5	Other assets (attach schedule)	5						
6	Total assets. Add lines 1 through 5	6						
_	Liabilities and Fund Balance	7						
7	Liabilities							
8	Fund balance	8						
9	Total. Add lines 7 and 8	9						
Add	litional Information				Yes	No		
b c 2 3a b 4a b	Enter the amount of cash and the fair market value of property, valued at the date of the transfer, transferred to the fund during the tax year							
b 6	☐ Breach of Contract ☐ Violation of Law ☐ CERCLA ☐ Other If "Other" is checked, enter the percent (by value) of the assets of the liability	umb	er under which the	%				