TAXABLE YEAR

## CALIFORNIA SCHEDULE

## Beneficiary's Share of Income, Deductions, Credits, etc.

<b>K</b> -1	(541)

2	01	<b>7</b>	ductions, Credits, $\epsilon$	etc.				K-1 (541)
For ca	alei	ndar year 2017	or fiscal year beginning (mm/dd/	/yyy)		, and ending	(mm/dd/yyyy)	
			a <b>separate</b> Schedule K-1 (541) fo		neficiary.		7,7,7	
			the instructions for Schedule K-1					
Name	e of	estate or trust						
Beneficiary's SSN/ITIN, California corporation no., California SOS file no., or FEIN				, or FEIN	Estate's or trust's FEIN			
Beneficiary's name, address (number and street, suite, Apt., PO box, or PMB no.), City, State, and ZIP code				Fiduciary's name, address (number and street, suite, Apt., PO box, or PMB no.), City, State, and ZIP code. If there is more than one fiduciary or trustee, list all of the fiduciaries or trustees' names, addresses, and indicate if fiduciary is a nonresident. If more space is needed, add an attachment. Include the estate's or trust's FEIN at the top of each separate attachment.				
A Ber	nefic	ciary's percentage	of distribution at year end				/R.•	
			s beneficiary?●(1) □ Individual					
			dent of California?					
E Ist	he f	iduciary a residen	t of California?					● □ Yes ▶ □ No
			(a) Allocable share item	(b) Amount f		(c) California	(d) Total amounts using	(e) California
			7 mosable share item	federal Sch	edule	Adjustments	California law	source amounts
	1	Interest		K-1 (Form	1041)		Combine col (b) and col (c	and credits
								•
(sso	1		r (loss)				•	•
ncome (Loss)	1		nd nonbusiness income					•
E00			s income				6	•
=			tate income					
	8	Other rental incor	ne		1			
ined ion	9	a Depreciation						
Directly apportioned								
<u></u>		c Amortization				) ·		
_	11	a Excess deducti	on on termination					
cţio		(Attach compu	tation)					
ledu			rryover					
m Final year deduction		c Net operating I	oss (NOL) carryover for regular					
			for alternative minimum					
	12	tax purposes.	alternative minimum tax purposes					
Alternative minimum tax adjustment			preciation					
e mi justr		c Denletion	preciation					
nativ x adj		d Amortization						
llterr ta		e Exclusion item:	s					
			s of estimated tax credited					
Credits			ng (equals amount on Form 592-B,					
			r)					
		c Taxes paid to o	ther states. Attach Schedule S					
		d Other credits. A	Attach schedule					
Other Information	14	a Tax-exempt int	erest					
			income					
			d fishing income					
		d Other informat	ion					