AREA RESERVED
FOR 2-D BARCODE

2023 Schedule B/R

XXXXXXXXXXXX

Beneficiary/Remainderman

NAMEOFENTITYXXXXXXXXXXXXXXXXXXXXXXXXX FEDERALIDNO

NAMEOFBENEFICIARYREMAINDERMANXXXXXXX SOCIALSECNO
MAILINGADDRESSOFBENEFICI CITYTOWNPOSTOFFICEXXXXXX ST ZIP+FOURX

State of legal domicile XX Select applicable items: X Beneficiary X Remainderman

Total income XXXXXXXXXXXX Percentage of income X.XXXX Percentage of taxable income X.XXXX

NAMEOFBENEFICIARYREMAINDERMANXXXXXXX SOCIALSECNO
MAILINGADDRESSOFBENEFICI CITYTOWNPOSTOFFICEXXXXXX ST ZIP+FOURX

State of legal domicile XX Select applicable items: X Beneficiary X Remainderman

Total income XXXXXXXXXXXX Percentage of income X.XXXX Percentage of taxable income X.XXXX

NAMEOFBENEFICIARYREMAINDERMANXXXXXXX SOCIALSECNO
MAILINGADDRESSOFBENEFICI CITYTOWNPOSTOFFICEXXXXXX ST ZIP+FOURX

State of legal domicile XX Select applicable items: X Beneficiary X Remainderman

Total income XXXXXXXXXXXX Percentage of income X.XXXX Percentage of taxable income X.XXXX

NAMEOFBENEFICIARYREMAINDERMANXXXXXXX SOCIALSECNO
MAILINGADDRESSOFBENEFICI CITYTOWNPOSTOFFICEXXXXXX ST ZIP+FOURX

State of legal domicile XX Select applicable items: X Beneficiary X Remainderman

Total income XXXXXXXXXXXX Percentage of income X.XXXX Percentage of taxable income X.XXXX

Income Summary

1.	Accumulated income	1	XXXXXXXXXXX
2.	Total of beneficiaries' income	2	XXXXXXXXXXX
3.	Accumulated capital gain	3	XXXXXXXXXXX
4.	Total remainderman's income	4	XXXXXXXXXXX

XXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX