Form **1041-N**

December 2019)
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Department of the Treasury Internal Revenue Service

U.S. Income Tax Return for Electing Alaska Native Settlement Trusts

OMB No. 1545-1776

► Go to www.irs.gov/Form1041N for instructions and the latest information.

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-	calenda		and ending				, 20		
Pa	art I	General Information		-					
1 Name of trust 2 Employer								r	
3a	Name an	d title of trustee		4 Name	of sponsoring	Alaska	Native Co	orpora	tion
3b	Number,	street, and room or suite no. (If a P.O. box, see the instructions.)							
3c	City or to	own, state, and ZIP code		5 Was	Form 1041 fi	led in t	he prior	year	?
				🗆 Y	'es		No		
6 C	heck appl	licable boxes: Amended return Final return Change in fiduciar	y's name	Chano	ge in fiduciary	's add	ress		
-	art II	Tax Computation	,						
					. 1a				
		Tax-exempt interest. Don't include on line 1a	1 1						
Ð		Total ordinary dividends			. 2a				
Income		Qualified dividends (see instructions)	. 2 b		. 2a				
ĕ		Capital gain or (loss) (Schedule D)			. 3				
-		Other income List turns and amount							
		Total income. Combine lines 1a, 2a, 3, and 4			-				
ŝ					. 7				
Ĕ		Attorney, accountant, and return preparer fees			. 8				
ň		Other deductions (attach schedule)			. 9				_
Deductions		Reserved for future use			. 10				
		Exemption (see instructions)			. 11				
		Total deductions. Add lines 6 through 11			► 12				
		Taxable income. Subtract line 12 from line 5							
		Tax. If line 13 is a (loss), enter -0 Otherwise, see the instructions a			ıble				
ts		box: 🗌 Multiply line 13 by 10% (0.10) or 🗌 Schedule D			▶ 14				
Payments	15	Credits (see instructions). Specify ►			15				
ξ	16	Subtract line 15 from line 14							
a)	17	Reserved for future use			. 17				
σ	18	Total tax. Add line 16 and line 17. See instructions			. 18				
and	19	Current year net 965 tax liability paid from Form 965-A, Part II, column (k)) (see instructio	ns) .	. 19				
Тах	20	Payments. See instructions			▶ 20				
Ĕ	21	Tax due. If line 20 is smaller than the total of lines 18 and 19, enter amount	unt owed .		. 21				
	22	Overpayment. If line 20 is larger than the total of lines 18 and 19, enter a	amount overpa	id	. 22				
	23	Amount of line 22 to be: a Credited to next year's estimated tax >	b Re	funded	▶ 23				
Pa	rt III	Other Information							
1	Dur	ing the tax year, did the trust receive property or an assignment of incom	ne from an Alas	ka Nativ	ve Corpora	ation?	Yes	s N	0
		Yes," see the instructions for the required attachments			· · ·			Ι	
2		ing the year, did the trust receive a distribution from, or was it the grantor							
3	At a	any time during the calendar year, did the trust have an interest in or	a signature or	other a	authority c	ver a	1		
		ncial account in a foreign country (such as a bank account, securities acc instructions for exceptions and filing requirements for FinCEN Form 114					;		
		Yes," enter the name of the foreign country ►							
4		s the trust a specified domestic entity required to file Form 8938 for the tax ye	ear? See Instruc	tions for	r Form 893	8.			
5	То	make a section 643(e)(3) election, complete Schedule D and check here.	See instruction	s				•	
		Under penalties of perjury, I declare that I have examined this return, including accompany	ying schedules and	l statemer	nts, and to the	e best o	of my kn	owlee	dge
Sig	nn	and belief, it is true, correct, and complete. Declaration of preparer (other than trustee) is Also, under section 646(c)(2) of the Internal Revenue Code, if this is the initial Form 10							
-	-	signing and filing this return will serve as the statement by the trustee electing to treat suc							,
He	ere	ι κ					scuss this		
		Signature of trustee or officer representing trustee	ate		 with the See inst 		er shown		v? No
D -	: പ	Print/Type preparer's name Preparer's signature	Date			PTIN	#		<u> </u>
Pa					heck 🔝 if elf-employed				
	epare		I	Firm's E		1			
US	e Only	y							
		Firm's address 🕨		Phone n	0.				

Schedule D Capital Gains and Losses

Part I-Short-Term Capital Gains and Losses-Assets Held One Year or Less

	(a) Description of property (Example, 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) for the entire year (col. (d) less col. (e))
1						
2	Short-term capital gain or (loss) from other for	orms or schedu	lles		2	
3	3 Short-term capital loss carryover				3	()
4	Net short-term capital gain or (loss). Comb	oine lines 1 thr	ouah 3 in colur	mn (f)	4	

Part II-Long-Term Capital Gains and Losses-Assets Held More Than One Year

	(a) Description of property (Example, 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	ce (e) Cost or other (see instruction		(f) Gain or (loss) for the entire year (col. (d) less col. (e))
5							
6	Long-term capital gain or (loss) from other fo	rms or schedu	les			6	
7	Capital gain distributions					7	
8	B Enter gain, if applicable, from Form 4797					8	
9	Long-term capital loss carryover					9	()
10	Net long-term capital gain or (loss). Comb	ine lines 5 thro	ugh 9 in colum	ın (f)		10	

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Part	III—Summary of Parts I and II		
11	Combine lines 4 and 10 and enter the result. If a loss, go to line 12. If a gain, also enter the gain		
	on page 1, line 3, and complete page 1 through line 13	11	
Next:			
line 21			
12	If line 11 is a loss, enter here and on page 1, line 3, the smaller of the loss on line 11 or (\$3,000).		
	Then complete page 1 through line 13	12	()
	If the loss on line 11 is more than (\$3,000), or if page 1, line 13, is less than zero, skip Part IV below		
	omplete the Capital Loss Carryover Worksheet in the instructions before completing the rest of Form		
	N. Otherwise, skip Part IV below and complete the rest of Form 1041-N.		
Part	IV—Tax Computation Using Maximum Capital Gains Rates		
13	Enter the taxable income from page 1, line 13	13	
14	Enter the qualified dividends from page 1, line 2b		
15	Enter the amount from Form 4952, line 4g 15		
16	Enter the amount from Form 4952, line 4e 16		
17	Subtract line 16 from line 15. If zero or less, enter -0		
18	Subtract line 17 from line 14. If zero or less, enter -0		
19	Enter the smaller of line 10 or line 11		
00	Enter the smaller of line 15 or line 16 20		
20	Enter the smaller of line 15 or line 16 20		
21	Subtract line 20 from line 19. If zero or less, enter -0		
21			
22	Add lines 18 and 21		
~~			
23	Add line 18 from the Unrecaptured Section 1250 Gain		
	Worksheet and line 7 from the 28% Rate Gain		
	Worksheet and enter the amount here		
24	Enter the smaller of line 21 or line 23		
25	Subtract line 24 from line 22		
26	Enter the smaller of line 13 or line 25	26	
27	Subtract line 26 from line 13	27	
28	Multiply line 27 by 10% (0.10). Enter here and on page 1, line 14. Also check the Schedule D box on		
	that line	28	
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	utions to Beneficiaries				Page of
(a) Beneficiary's name, street	ciary's name, street address, city, state, and ZIP code		(b) Benefi	ciary's SSN	(g) Total distributions (Add amounts in (c) through (f))
(c) Tier I distributions	(d) Tier II distributions	(e) Tier III distr	ributions	(f) Tier IV distributions	
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