(Rev. November 1992) Department of the Treasury

Internal Revenue Service

Generation-Skipping Transfer Tax Return For Distributions

Calendar year 19

Attach a copy of all Forms 706GS(D-1) to this return.

Part I General Information

1a	Name of skip person distributee	1b	SSN of individual distributee (see instructions)
2a	Name and title of person filing return (if different from 1a, see instructions)	1c	EIN of trust distributee (see instructions)

2b Address of distributee or person filing return (see instructions) (number and street or P.O. box; city, town, or post office; state; and ZIP code)

Pa	rt II	Distributions			
a Trust EIN (from line 2a,		Trust EIN (from line 2a,	b Item # (from line 3, column a,	c Tentative Transfer (from	
Form 706GS(D-1))			Form 706GS(D-1))	column f, Form 706GS(D-1))	
		Total tantativa transform (add area	unto in polymer of		
	3		unts in column c)	3	
Pa	rt II	Tax Computation			
Please attach check or money order here	4	Adjusted allowable expenses (see	instructions)		
	5	Taxable amount (subtract line 4 fr	om line 3)		
	6	Maximum Federal estate tax rate	(see instructions)	6 %	
iey oi	7	Gross GST tax (multiply line 5 by	line 6)	7	
r mor	8	Creditable state GST tax (if any)			
ieck o	9	Multiply line 7 by 5% (.05)			
ch ch	10	Allowable credit (enter the lesser	of line 8 or line 9)	10	
e atta	11	Net GST tax (subtract line 10 from	ı line 7)	11	
Pleas	12	Payment made with Form 2758		12	
	13	TAX DUE—if line 11 is larger than	line 12, enter amount owed	13	
	14	(Make the check payable to the Ir Overpayment—if line 12 is larger	<i>iternal Revenue Service.)</i> than line 11, enter amount to be refunded.	► 14	

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer other than taxpayer is based on all information of which preparer has any knowledge.

Please Sign Here	Signature of taypayer or percep filing on behalf of taypayer	Date
	Signature of taxpayer or person filing on behalf of taxpayer	Dale
Paid Proposor/o	Preparer's signature	Date
Preparer's Use Only	Firm's name (or yours if self-employed)	
	and address	ZIP code ►

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