



Enter Name Of Estate Or Trust	Federal Employer Identification Number
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Schedule BI Beneficiary information

All estates and trusts must complete this schedule. Complete Columns 1 through 4 for all beneficiaries. Complete Column 5 for a nonresident beneficiary. If applicable, complete Column 6 or Column 7 for a nonresident beneficiary. See instructions for the definition of a "nonresident beneficiary," which includes entities other than individuals.

All Beneficiaries					
Beneficiary	Column 1			Column 2	Column 3
	Name and address of beneficiary <i>If additional lines are needed, attach additional pages</i>			Social Security Number/FEIN	Type of entity <i>(See instructions)</i>
A	Name _____ Address _____ State _____ Zip Code _____				
B	Name _____ Address _____ State _____ Zip Code _____				
C	Name _____ Address _____ State _____ Zip Code _____				
D	Name _____ Address _____ State _____ Zip Code _____				

Beneficiary	All Beneficiaries <i>Complete Column 4 for ALL beneficiaries</i>	Nonresident Beneficiaries Only <i>Important: Columns 5 through 7 are for a NONRESIDENT BENEFICIARY only. See instructions for which beneficiaries to include in Columns 5, 6, and 7.</i>		
	Column 4 Federal distributive share of income (loss)	Column 5 North Dakota distributive share of income (loss)	Column 6 North Dakota income tax withheld (2.90%)	Column 7 Form PWA or Form PWE (Attach copy) North Dakota composite income tax (2.90%)
A			<input type="radio"/>	
B			<input type="radio"/>	
C			<input type="radio"/>	
D			<input type="radio"/>	
1 Total for Column 4 1				
2 Total for Column 5 2				
3 Total for Column 6 . Enter this amount on Form 38, page 1, line 5 3				
4 Total for Column 7 . Enter this amount on Form 38, page 1, line 6 4				

Schedule CR Credit for income tax paid to another state or local jurisdiction

- ▶ Enter the name of the other state in which income tax was paid to the state and/or local jurisdiction ▶ _____
- 1** Fiduciary's share of total income from page 2, Tax Computation Schedule, Part 2, line 11, Column A ▶ **1** _____
- 2** Portion of amount on line 1 that has its source in the other state *(See instructions)* ▶ **2** _____
- 3** Credit ratio. Divide line 2 by line 1 and round to the nearest four decimal places **3** _____
- 4** Tax on fiduciary's North Dakota taxable income from page 1, line 1 **4** _____
- 5** Multiply line 3 by line 4 ▶ **5** _____
- 6** Amount of income tax paid to the other state and its local jurisdictions *(See instructions)* ▶ **6** _____
- 7** Credit for income tax paid to another state and/or local jurisdiction. Enter lesser of line 5 or line 6. Enter this amount on page 1, line 2 **7** _____

Important: Attach a copy of the income tax return filed with the other state and/or local jurisdiction