## Form **1120-ND**

## Return for Nuclear Decommissioning Funds and Certain Related Persons

(Rev. December 2011)
Department of the Treasury
Internal Revenue Service

OMB No. 1545-0954

For c	alenc	dar year 2	20 , or fiscal year beginning		, 20	, and e	ending		, 20						
	Name of fund		d						A Employer	identif	ication numb	er of fund			
nt									(see instruc	tions)					
Pri	Name of twister or diagnalified paragraphose if filling to report continued 4051 toward														
Please Type or Print	Name of trustee or disqualified person (complete if filing to report section 4951 taxes)														
ě															
Ž	Address of filer. Number, street, and room or suite no. If a P.O. box, see instructions.									B Identifying number of trustee or disqualified person (see instructions)					
ē															
as	City or town, state, and ZID code								-						
품	City or town, state, and ZIP code														
									•						
CB	2dti irr	n filed fo	or (see Specific Instructions, che	ck applica	able boy).	Fund		Trustee	□ Die	enualif	ied person				
	Cturi	T IIICG IC	or (see opecine mandenons, ene	ск арріісе	abic box).					quaiii	ica person				
_			(n) 🖂 = 1		(a) —			(a) —							
D Check applicable boxes: (1) ☐ Final return (2) ☐ Name change (3) ☐ Address change										(4) Amended return					
ΕT	he bo	ooks are	e in care of ►				Ph	one no. ►							
L	.ocat	ed at ►													
				Part I –	Computa	tion of I	-und	Income Tax	(						
_	-	Т	alala internat							4			$\overline{}$		
e	1		able interest							1			+		
ŭ	2	Cap	oital gain net income (attach s	Schedule	D (Form 1	120)) .				2					
Income	3	Oth	er income (attach schedule)							3					
므	4		ss income. Add lines 1 thro							4					
			stees fees										+		
	5									5					
ns	6	Tax	es							6					
<u>ō</u>	7	Acc	ounting and legal services .							7					
ct	8	Oth	er deductions (attach schedu	ıle)						8					
q	9	,								9			+		
Deductions				-									+-		
_	10		dified gross income before no							10			+		
	11		operating loss deduction (se							11					
	12	Mo	<b>dified gross income.</b> Subtra	ct line 11	1 from line 1	10				12					
	13	Tot	al tax. Multiply line 12 by 209	%						13					
	14	Pav	ments:												
	a	-	erpayment from prior year												
			wed as a credit	440											
				14a											
S	k		rent year estimated tax												
nt		pay	ments	14b											
ne	(	Ref	und applied for on Form												
ayments		446	6	14c (											
Ра	(	sub	tract line 14c from the total of		4a and 14b			14d							
	ě		deposited with Form 7004	) III 100 T	ia ana i ib			14e							
an			•				- L	146		4 4 6			1		
Tax and	f		al payments. Add lines 14d a							14f			+		
Ta	15	Esti	mated tax penalty. Check if I	orm 222	20 is attache	ed 🔲				15					
	<b>Tax due.</b> If line 14f is smaller than the total of lines 13 and 15, enter amount owed							ed	16						
	17 Overpayment. If line 14f is larger than the total of lines 13 and 15, enter amount overpaid						overnaid	17			1				
							overpara				+				
	40	Гntо	w amount of line 17 year wents Or		masst search a		tov N	,	Defineded <b>•</b>	40			1		
	18		r amount of line 17 you want: Cr						Refunded ►	18			<u></u>		
o: -		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any known of the preparer to the correct of the preparer to the preparer t									my knowledge	and belief,	it is true,		
Siç	- 1	2311001,	Troot, and complete. Decidiation of prepared found than taxpayer) is based on all illiothiation of which prepared has ally knowledge.							May the IRS discuss this return v			turn with		
He	re	<b>L</b>					<b>\</b>				the preparer	shown belo	ow_(see		
_		Sid	gnature of officer		Date		Titl	e		_	instructions)?	☐ Yes	☐ No		
_			Print/Type preparer's name		Preparer's sig	nature			Date			PTIN			
Pa	ıd				. 1000101010101	g. /atai 0			2410		eck L if				
Pre	epa	rer								self	f-employed				
	-	nly	Firm's name ►							Firn	n's EIN ►				
_		,	Firm's address ►							Pho	ne no.				
											4400 1	ID -			

Sch	nedule L Balance Sheets		(	a) Beginning of yea	ar	(b) End of	year			
	Assets									
1	Cash	1								
2	Certificates of deposit									
3	U.S. government obligations									
4	State and local government obligations									
5	Other assets (attach schedule)									
6	Total assets. Add lines 1 through 5	6								
	Liabilities and Fund Balance									
7	Liabilities									
8	Fund balance									
9	Total liabilities and fund balance. Add lines 7 and 8	9								
Sch	edule M Other Information						Yes	No		
1a	9 1 7									
b	, ,									
2a										
b	Enter the ruling amount for the tax year under section 468				\$					
C	Enter the amount of distributions includible in income by the electing taxpayer under section 468A(c)(1) \$									
d	Enter the amount of tax-exempt interest received or accrued for the year									
3	During the year were any contributions received other than cash payments deductible by the electing taxpayer under section 468A?									
4	During the year were fund assets used for any purpose other than paying the fund's administrative or incidental									
	expenses (including taxes), for making investments, or for direct or indirect payment of decommissioning costs of a nuclear power plant owned or leased by the electing taxpayer? If "Yes," attach an explanation									
5	Self-dealing (see instructions):	payor. II	100,	attaori ari oxpiane						
5 a		n the vear	eithe	r directly or indire	actly wit	h one or more				
u	disqualified persons?	g the year	, Citilo	ancony or mand	Jony, wit	in one or more				
	(i) Sale, exchange, or leasing of property									
	(ii) Borrowing or lending of money or other extension of									
	(iii) Furnishing of goods, services, or facilities									
	(v) Transfer to, or use by or for the benefit of, a disqualified person of any part of the fund's income or assets.									
b	If any of lines 5a(i) through 5a(v) are answered "Yes," were all of the acts self-dealing exceptions? (see inst.)									
С										
	identifying number of each trustee and/or disqualified pers	son who e	ngage	d in the act.						
d	d Has any self-dealer or trustee taken any action to "correct" any act of self-dealing? See instructions for the									
	definition of "correct."									
If "Yes," attach complete details of the corrective action. Also explain any uncorrected acts.										
	Part II—Initial Taxes on									
	Section A. – Acts of Self-	Dealing a	ind I							
	ct number (b) Date of act			(c) Description of act	t					
1										
2	(d) Names of disqualified persons liable for tax (e) Names of trustees liable for									
	(u) Names of disqualined persons habite for tax			(e) Names of the	usices liab	ie ioi tax				
(	(f) Amount involved in act (g) Initial tax on self-dealing disqualified pe	rson (10% of	column	(f)) <b>(h)</b> Tax on tr	ustee (if ap	plicable) (2 <sup>1</sup> / <sub>2</sub> % of co	olumn (f	))		
		· ·								
Total										
Section B. – Summary of Initial Taxes										
1	Enter section 4951 tax on disqualified person (Section A, column (g))									
2	Enter section 4951 tax on trustee (Section A, column (h))									
3	Total section 4951 taxes (add lines 1 and 2)									
4	Tax paid with Form 7004									
5	full with return. (Make check or money order payable to "United States Treasury.")									
6	6 Overpayment. Enter the excess, if any, of line 4 over line 3									