

2022 Fiduciary General Information

Name and Address Information												
Employer ID number	1											
Estate / trust name	2											
In care of name	3											
Street address	4										Suite #	5
City	6											
U.S. ONLY	State, ZIP, County		7		8		9					
Foreign ONLY	Province/State, Country, Postal Code		10			11		12		Entity name control		13

Fiduciary Information												
	First name	Last name										
If an individual	14				15							
If a business	16											
Fiduciary title	17	Trustee	18	Executor	19	Executrix	Other	20				
Fiduciary SSN/EIN	21			22		Fiduciary is a financial institution that submitted estimated tax payments for trusts for which it is the trustee						
Phone number	23											

General Information											If NOT Calendar Year		
A Type of entity - Mark all that apply											Fiscal begin		53
<input type="checkbox"/> 24 Decedent's estate SSN <input type="text"/> 25 Date of death <input type="text"/> 26 Name: First <input type="text"/> 27 Last <input type="text"/> 28											Fiscal end		54
<input type="checkbox"/> 29 Simple trust <input type="checkbox"/> 30 Complex trust <input type="checkbox"/> 31 Qualified disability <input type="checkbox"/> 32 ESBT (S only) <input type="checkbox"/> 33 Full Grantor <input type="checkbox"/> 34 Partial Grantor <input type="checkbox"/> 35 Bankruptcy estate - Chapter 7 <input type="checkbox"/> 36 Bankruptcy estate - Chapter 11 <input type="checkbox"/> 37 Pooled income fund											Other Information		55
D Date entity created <input type="text"/> 38											Distribute all income		56
E Nonexempt charitable and split-interest trusts. Mark applicable boxes:											Distribute NET capital gain		57
<input type="checkbox"/> 39 Described in Section 4947(a)(1) <input type="checkbox"/> 40 Not a private foundation <input type="checkbox"/> 41 Described in Section 4947(a)(2)											Carry the applicable amount of depreciation, depletion, and amortization to Schedules C, E, or F instead of to line 9 of the beneficiary's Schedule K-1.		58
F Mark applicable boxes:											Resident state		
<input type="checkbox"/> 42 Initial return <input type="checkbox"/> 43 Final return <input type="checkbox"/> 44 Amended return <input type="checkbox"/> 45 Superseding <input type="checkbox"/> 46 NOL carryback <input type="checkbox"/> 47 Change in trust's name <input type="checkbox"/> 48 Change in fiduciary <input type="checkbox"/> 49 Change in fiduciary's name <input type="checkbox"/> 50 Change in fiduciary's address											Firm number		59
G											Preparer number		60
<input type="checkbox"/> 51 Estate or filing trust made a section 645 election <input type="text"/> 52 Trust EIN if 645 election											ERO number		61
											Preparer fee		62
											Date closed / terminated		63
											Misc code 1		64
											Misc code 2		65
											Invoice number		66
Client information (for client reports only)											2210 Information		
Email <input type="text"/> 69											2021 federal tax		67
Cell <input type="text"/> 70 Fax <input type="text"/> 71											2021 state tax		68

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