

DECEASED TAXPAYER INFORMATION SHEET

Income Tax Filing Cover & Control Template

1. DECEASED TAXPAYER DETAILS

Full Legal Name: _____

Date of Birth: _____

Date of Death: _____

Social Security No: _____

Tax Year of Return: _____

Last Known Address: _____

City, State, Zip: _____

2. FIDUCIARY / REPRESENTATIVE DETAILS

Specify the person filing the return (Executor, Administrator, or Surviving Spouse).

Representative Name: _____

Relationship to Deceased: _____

Phone Number: _____

Mailing Address: _____

City, State, Zip: _____

Email Address: _____

3. FILING DETAILS & STATUS

- Married Filing Jointly (Surviving Spouse)
- Court-Appointed Executor/Administrator
- Personal Representative (Non-court appointed)
- Other Beneficiary / Claimant

4. REQUIRED ATTACHMENTS & CHECKLIST

- Copy of Death Certificate
- Form 56 (Notice Concerning Fiduciary Relationship)
- Letters Testamentary / Court Appointment Papers
- Form 1310 (Claiming Refund Due a Deceased Taxpayer)
- Final Form 1040 (with "Deceased" written at top)
- W-2 / 1099 Statements of Deceased

5. SIGNATURES AND DATE

Sign below as the legal representative filing on behalf of the deceased taxpayer.

Representative Signature: _____

Date: _____

Preparer Signature:

Date:
