Form 1041 - Estate Worksheet **Summary of Will Provisions DECEDENT NAME** DATE OF DEATH **DECEDENT RESIDENCY DECEDENT SSN** PERSONAL REPRESENTATIVE(S) **PHONE** NAME TITLE SSN **ADDRESS** SPECIFIC AND GENERAL MONETARY (CASH) BEQUESTS **NAME RELATIONSHIP** SSN **DESCRIPTION ADDRESS CHARITABLE BEQUESTS CHARITY AMOUNT TIMING ADDRESS RESIDUAL HEIRS** NAME **RELATIONSHIP** SSN % **ADDRESS**

CLASSIFICATION OF INCOME AND PRINCIPAL IN WILL

TYPE OF INCOME	INCOME	PRINCIPAL	WILL IS SILENT
RENT			
INTEREST			
DIVIDENDS			
BUSINESS INCOME			
FARMING INCOME			
OIL AND GAS ROYALTIES			
CAPITAL GAINS			
SECTION 1231 GAINS			
OTHER (LIST)			

ADMINISTRATION EXPENSES - LEGAL, ACCOUNTING, FIDUCIARY, OTHER (LIST)

PAYEE	DATE	AMOUNT	TYPE

IDEN	TIFY ANY SPECIAL ACCOUNTING TREATMENT REQUIRED BY THE WILL:

ATTACH SCHEDULE OF PROBATE ASSETS