Form **706-D**

United States Additional Estate Tax Return Under Code Section 2057

OMB No. 1545-1680

	tment of the		Officer Gode Section 2007			
Pa			Information			
1a i	Name of qu	ualified heir		2 0	Qualified heir's	social security number
1b /	Address of	qualified he	3 C	Commencement date (see instructions)		
1c (City, town o	or post offic	e, state, and ZIP code			
4 [Decedent's	name repor	tted on Form 706 5 Decedent's social security number : ;	6 D	Date of death	
Pai	rt II	Tax Con	nputation (First complete Schedules A and B—see instructions.)			
1		d heir's sl lecedent's	1			
2	Total re	ported va	s estate tax return)	the	2	
3		nt's estat				
	deducti	on (attach	chout the qualified family-owned business interest computation)	1		
D C			n 706 (or as finally agreed to)		3c	
4	Qualifie	d heir's pe	ercentage of qualified family-owned business interests. Divide line 1 by line 2. Entage (carry out your answer to at least the nearest tenth of a percent)	nter	4	%
5	Qualifie	d heir's sł	nare of total reduction in estate tax. Multiply line 3c by line 4		5	
6	Enter th	ne Total fr	om column (E), Schedule A, page 2		6	
7		ine 6 by li				
	tenth of	a percen	t)		7	<u>%</u>
8	Multiply	line 5 by	8			
9	Applica	ble percei		9	%	
10			estate tax. Multiply line 8 by the percentage on line 9		10	
•	•	ine 10 or	dule B, complete lines 11 through 15. If you did not complete Schedule B, skip in line 15.	lines	s 11 through	14 and enter the
11	Enter th	ne total co	st or fair market value (FMV) from column (C), Schedule B, page 2		11	
12	Enter th	ne total of	column (D), Schedule A, page 2		12	
13	Divide line 11 by line 12. Enter the result as a percentage (carry out your answer to at least the neares tenth of a percent) (do not enter more than 100%)				13	%
14	Multiply	line 10 b	14			
15	Λdditio	nal ostate	e tax due. Subtract line 14 from line 10 (do not enter less than zero)		15	
Unde	r penalties	of perjury, I	declare that I have examined this return, including accompanying schedules and statements, and lete. Declaration of preparer (other than taxpayer) is based on all information of which preparer h	d to the tage of tage	he best of my	knowledge and belief,
Sig						
He	re	Clanati	re of taxpayer or person filing on behalf of taxpayer D			
Pai		Preparer' signature	s D	Date Date		
Preparer's Use Only		Preparer'	s name			
		and addr	ess 🔻	IP cod	de ►	

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Schedule A. Disposition of Qualified Family-Owned Business Interest, Failure to Materially Participate, or Disqualifying Act (Taxable Under Section 2057(f)(1))

(A) Item number	(B) Description of property and explanation of disqualifyir) if	(E) Date of death value (see instructions)		
1	Form 706, Schedule, Item Description —						
Total. Er	nter the total of column (D) on line 12 of	f Part II	, Tax Computation,		_		
page 1, a	and the total of column (E) on line 6 of the Taule B. Involuntary Conversions or E	ax Comp	outation				
	<u>-</u>						
Check i	if for □ Involuntary Conversion □	E	kchange			T (0)	
(A) Item	Description of qualified ((C) Cost or fair market value (FMV)				
	ter the total of column (C) on line 11 of Part	t II, Tax (Computation, page 1.				
Schedu	ıle C. Nontaxable Transfers						
	Last name	First na	me	Middle II	nitial		
Transferee ·	Social security number	Relation	nship to the qualified heir	'			
Check if	for Disposition to Family Member	☐ Qua	alified Conservation (Contribution [] Los	ss of U.S. Citizer	nship
(A) Item	(B) Description of property and explanation of nontaxable transfers					(C) Date of dispositio contribution, trust agre or bond	
1	Form 706, Schedule, Item Description —						

