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If you have any comments on this draft, you can email us at taxforms@irs.gov or submit them to us on our IRS.gov page titled [Comment on Forms and Publications](#). Please include the form or publication number in the subject. We cannot respond to all comments due to the high volume we receive, but we will carefully consider each suggestion. Please note that we may not be able to consider many suggestions until the subsequent revision.

Part I General Information

1a Name of trust _____ 1b Trust's employer identification number (see instructions) _____

2a Name of trustee _____

2b Trustee's address (number and street or P.O. box; apt. or suite no.; city, town or post office; state and ZIP code) If you have a foreign address, also complete the spaces below (see instructions).

Foreign country name	Foreign province/county	Foreign postal code

Part II Trust Information (see the instructions)

	Yes	No	Sch. A number(s)
3 Has any exemption been allocated to this trust by reason of the deemed allocation rules of section 2632? If "Yes," describe the allocation on the line 7, Schedule A, attachment showing how the inclusion ratio was calculated			
4 Has property been contributed to this trust since the last Form 706-GS(T) or 706-GS(D-1) was filed? If "Yes," attach a schedule showing how the inclusion ratio was calculated			
5 Have any terminations occurred that are not reported on this return because of the exceptions in section 2611(b)(1) or (2) relating to medical and educational exclusions and prior payment of Generation-Skipping Transfer (GST) tax? If "Yes," attach a statement describing the termination			
6 Have any contributions been made to this trust that were not included in calculating the trust's inclusion ratio? If "Yes," attach a statement explaining why the contribution was not included			
7 Has the special QTIP election in section 2652(a)(3) been made for this trust?			
8 If this is not an explicit trust (see the instructions under <i>Who Must File</i>), check here and attach a statement describing the trust arrangement that makes its effect substantially similar to an explicit trust <input type="checkbox"/>			

Part III Tax Computation

9a Summary of attached Schedules A (see instructions for line 9b)

Schedule A No.	GST tax (from Sch. A, line 10)
1	9a1
2	9a2
3	9a3
4	9a4
5	9a5
6	9a6
9b Total from all additional Schedules A, in excess of six, attached to this form ▶	9b
10 Total GST tax (add lines 9a1 through 9b)	10
11 Payment, if any, made with Form 7004	11
12 Tax due. If line 10 is larger than line 11, enter the amount owed	12
13 Overpayment. If line 11 is larger than line 10, enter amount to be refunded	13

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer other than fiduciary is based on all information of which preparer has any knowledge.

Signature of fiduciary or officer representing fiduciary _____ Date _____

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶	Firm's EIN ▶		Phone no.	
Firm's address ▶				

Name of trust | EIN of trust

Schedule A No. | **Note.** Make copies of this schedule before completing it if you will need more than one Schedule A.

Schedule A—Taxable Terminations

(See the instructions before completing this schedule.)

Table with columns: a Name of skip persons, b SSN or EIN of skip person, c Item no. from line 4 below in which interest held. Includes a large 'DRAFT AS OF July 18, 2013' watermark.

2 Describe the terminating power or interest. If you need more space, attach an additional sheet.

Large dashed area for providing details on terminating power or interest.

3 If you elect alternate valuation, check here (see the instructions)

4 Describe each taxable termination below (see the instructions)

Table with columns: a Item no., b Description of property subject to termination, c Date of termination, d Valuation date, e Value.

Summary table with rows for Total, Total deductions applicable (5), Taxable amount (6), Inclusion ratio (7), Maximum federal estate tax rate (8), Applicable rate (9), and GST tax (10).

Name of trust

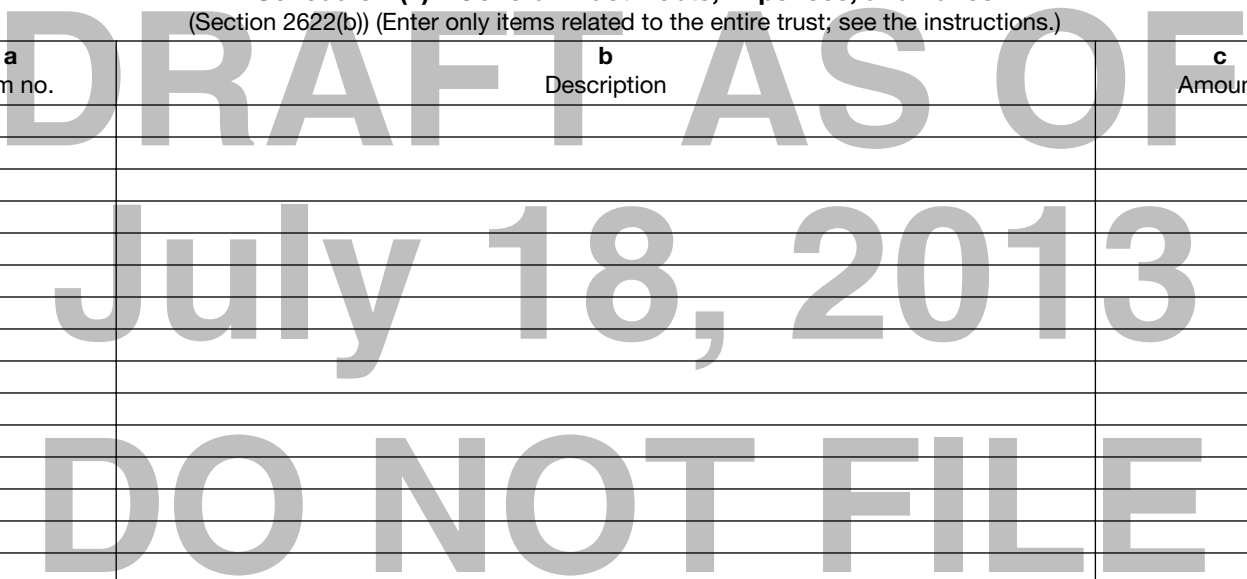
Schedule A No.
 EIN of trust

Note. Make copies of this schedule before completing it if you will need more than one Schedule B.

Schedule B(1) – General Trust Debts, Expenses, and Taxes

(Section 2622(b)) (Enter only items related to the entire trust; see the instructions.)

a Item no.	b Description	c Amount



1	Total of Schedule B(1)	1	
2	Percentage allocated to corresponding Schedule A	2	%
3	Net deduction (multiply line 1 by line 2)	3	

Schedule B(2) – Specific Termination-Related Debts, Expenses, and Taxes

(Section 2622(b)) (Enter only items related solely to terminations appearing on corresponding Schedule A; see the instructions.)

a Item no.	b Description	c Amount

4	Total of Schedule B(2)	4	
5	Total. Add lines 3 and 4 (enter here and on line 5 of the corresponding Schedule A)	5	