DO NOT ATTACH SCHEDULE CC TO FORM 2 (see instructions)

Schedule

Request for a Closing Certificate for Fiduciaries

Use BLACK INK

Wisconsin Department of Revenue

7	N	7	2
_	U	_	J

TRU	TRUSTS ONLY – Legal name				Estate's/1	Estate's/Trust's federal EIN			
Indiv	dividual or firm to whom the closing certificate should be mailed Attention or c/o				County of	jurisdiction (Name Only)			
Addr	Address				Probate c	ase number			
City		State	Zip code		Date of de	ecedent's death (MM DD YY)			
PA	RT I Information Required When Requ	uesting	a Closing Cert	ificate for Es	tates				
	pplete lines 1 through 11 and sign.								
	Is a certificate required by the court?								
	If no, <u>DO NOT</u> submit Schedule CC. The departm	-	_		•	it to close a proceedi			
	Does the decedent have a will?	_		f yes, include a	і сору)				
	Type of probate Formal Informal								
	If the decedent did not file tax returns for the 4 y			•					
	20		, 20\$_		, 20	_ \$			
<u>5</u>	Was the decedent contacted by the IRS and/or	Wis. Dep	ot. of Revenue in	the last 3 years	s? Yes	s No			
	If yes, explain:								
6	6 Is the gross income of the estate less than \$600?								
	iess than \$600?	10	s NO						
	Will a final Form 2 be filed at a later date?								
<u>7</u> 8		Ye	s No						
<u>7</u> <u>8</u>	Will a final Form 2 be filed at a later date? Was the decedent a resident of Wisconsin	Ye	s No						
<u>7</u> <u>8</u> <u>9</u>	Will a final Form 2 be filed at a later date? Was the decedent a resident of Wisconsin at the time of death?	Ye Ye Ye	s No						
7 8 9	Will a final Form 2 be filed at a later date? Was the decedent a resident of Wisconsin at the time of death? Did the decedent own an interest in any partnership, S corporation, LLC, or LLP?	Ye Ye Ye w.	s No s No s No	NO COMMAS; N					
7 8 9	Will a final Form 2 be filed at a later date? Was the decedent a resident of Wisconsin at the time of death? Did the decedent own an interest in any partnership, S corporation, LLC, or LLP? Enter the totals of each of the assets listed belo	Ye Ye Ye Ye w.	s No s No s No tory)						
7 8 9	Will a final Form 2 be filed at a later date? Was the decedent a resident of Wisconsin at the time of death? Did the decedent own an interest in any partnership, S corporation, LLC, or LLP? Enter the totals of each of the assets listed below Probate Assets (Required: Include a copy of the second secon	Ye Ye Ye Ye Ye	s No s No s No tory) !		O CENTS				
7 8 9	Will a final Form 2 be filed at a later date? Was the decedent a resident of Wisconsin at the time of death? Did the decedent own an interest in any partnership, S corporation, LLC, or LLP? Enter the totals of each of the assets listed belo Probate Assets (Required: Include a copy of total state)	Ye Ye Ye Ye Ye Ye	s		<u>o</u> cents .00				
7 8 9	Will a final Form 2 be filed at a later date? Was the decedent a resident of Wisconsin at the time of death? Did the decedent own an interest in any partnership, S corporation, LLC, or LLP? Enter the totals of each of the assets listed below th	Ye Ye Ye W.	s	<u>NO</u> COMMAS; <u>N</u>	<u>o</u> cents .00 .00	NOTE			
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7 8 9	Will a final Form 2 be filed at a later date? Was the decedent a resident of Wisconsin at the time of death? Did the decedent own an interest in any partnership, S corporation, LLC, or LLP? Enter the totals of each of the assets listed belowerobate Assets (Required: Include a copy of the assets and Bonds	Ye Ye Ye Ye W. the inven	s	NO COMMAS; N	O CENTS .00 .00 .00 .00 .00 .00	NOTE Where any lir from 10a throug 10L is left blan it will be deementhat NONE is the			
7 8 9 10	Will a final Form 2 be filed at a later date? Was the decedent a resident of Wisconsin at the time of death? Did the decedent own an interest in any partnership, S corporation, LLC, or LLP? Enter the totals of each of the assets listed belo Probate Assets (Required: Include a copy of tag. Real Estate	Ye Ye Ye Ye W. the inven	s	NO COMMAS; N	O CENTS .00 .00 .00 .00 .00 .00	NOTE Where any lir from 10a throug 10L is left blan it will be deemed that NONE is the			
7 8 9 10	Will a final Form 2 be filed at a later date? Was the decedent a resident of Wisconsin at the time of death?	Ye Ye Ye Ye Ye W. the inven	s	NO COMMAS; N	0 CENTS .00 .00 .00 .00 .00 .00 .00	NOTE Where any ling from 10a through 10L is left blarged it will be deemed that NONE is the DECLARATION for that line by the person(s) signing the significant in the			
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2023 Schedule CC Page 2

P	ART II Information Required when Requesting	g a Closing Certii	icate for Trusts						
Col	mplete lines 1 through 10 and sign.								
1	Is a certificate required by the court?								
	If yes, include a statement from the court verifying that a Closing Certificate is required to close a proceeding.								
	If no, DO NOT submit Schedule CC. The department only	y issues a Closing Ce	ertificate if a court requi	res it to close a proceeding					
2	Include a copy of the trust instrument with amendments	s (will/codicils).							
3	a Grantor(s) name(s)								
	Grantor(s) Social Security number(s) (SSN)								
	b Grantee(s) name(s)								
	Grantee(s) Social Security number(s) (SSN)								
<u>4</u>	On what date was the trust funded?			4					
	Was the trust contacted by the IRS and/or Wis. Dept. or								
_	If yes, explain:		•						
6	State reason for closing the trust. If death of beneficiary								
	and date of death.								
7	Have you petitioned the court to close the trust?			7 Yes No					
	If yes, include a copy of the petition. If no, explain why	no petition has been	filed:						
<u>8</u>	Has the trust filed fiduciary income tax returns with Wis	sconsin in any of the	last four years?	8 Yes No					
	If no, provide either a) copies of informal or formal annuand expenses for each of the past four years.	ual accountings for th	ne past four years, or s	howing the trust's income					
9	Enter the total fair market value of each of the assets list final year of the trust. (NOTE Where any line from 9a thre for that line by the person(s) signing Schedule CC.)								
	<u>a</u> Real Estate	9a	.00	$\underline{\text{NO}}$ COMMAS; $\underline{\text{NO}}$ CENTS					
	b Stocks and Bonds								
	c Mortgages, Notes, and Cash								
	d Annuities and Life Insurance								
	Interest in Partnerships, LLCs, and S Corporations		.00						
	f Other Miscellaneous Property		.00						
				0.0					
40	g Total Assets (add lines 9a through 9f)		_	.00.					
10	Fiduciary fees paid or payable to the personal represer	itative of trustee	10 _	.00.					
Th	ird Do you want to allow another person to discuss this schedule	e with the department (se	e instructions)? Yes(Complete the following No					
Pa	n rty Designee's	Phone	Personal identification						
De	esignee name	no. ▶ ()	number (PII)						
	as fiduciary, declare under penalties of law that I have tements) and to the best of my knowledge and belief it is			mpanying documents and					
You	ur signature		Date	Daytime phone					
		La		()					
Fid	uciary's address	City	State	Zip code					
PEF	RSON PREPARING FORM if other than the preceding signer Sig	gnature of preparer	Date	Daytime phone					

Mail completed form to: