

Form 1041-QFT

Department of the Treasury
Internal Revenue Service

U.S. Income Tax Return for Qualified Funeral Trusts

Go to www.irs.gov/Form1041QFT for instructions and the latest information.

OMB No. 1545-0092



Form 1041-QFT (Rev.12-2025) Catalog Number 73472A
Department of the Treasury **Internal Revenue Service** www.irs.gov



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For calendar year _____ or short year beginning _____, 20 _____ and ending _____, 20 _____

Part I General Information

1 Name of trust or other entity filing return			2 Employer identification number (EIN)	
3a Name and title of trustee				
3b Number and street (If a P.O. box, see the instructions.)			3c Room or suite no.	
3d City or town		3e State	3f ZIP code	4 Number of QFTs included on this return
5 Check applicable boxes: <input type="checkbox"/> Initial return <input type="checkbox"/> Amended return <input type="checkbox"/> Final return <input type="checkbox"/> Change in the fiduciary or fiduciary's name <input type="checkbox"/> Change in fiduciary's address				

Part II Tax Computation

Income	1a	Interest income	1a	
	b	Tax-exempt interest. Don't include on line 1a	1b	
	2a	Total ordinary dividends	2a	
	b	Qualified dividends	2b	
	3	Capital gain or (loss) (attach Schedule D (Form 1041))	3	
	4	Other income. List type and amount _____	4	
	5	Total income. Combine lines 1a, 2a, 3, and 4	5	

Deductions	6	Taxes	6		
	7	Trustee fees	7		
	8	Attorney, accountant, and return preparer fees	8		
	9	Other deductions	9		
	10	Total deductions. Add lines 6 through 9	10		
Tax and Payments	11	Taxable income. Subtract line 10 from line 5		11	
	12	Tax. (If this is a composite return, check here <input type="checkbox"/>)		12	
	13	Credits (see instructions). Specify the credits claimed _____		13	
	14	Subtract line 13 from line 12		14	
	15	Net Investment Income Tax from Form 8960, line 21		15	
	16	Total tax. Add lines 14 and 15		16	
	17	Payments (see instructions)		17	
	18	Elective payment election amount from Form 3800		18	
	19	Tax due. If the total of lines 17 and 18 is smaller than line 16, enter amount owed. For details on how to pay, go to www.irs.gov/Payments or see the instructions		19	
	20	Overpayment. If the total of lines 17 and 18 is larger than line 16, enter amount overpaid		20	
	21	Amount of line 20 to be: a Credited to next year's estimated tax _____ b Refunded _____ If completing line 21b, also complete lines 21c, 21d, and 21e.		21b	
c	Routing number		d	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
e	Account number				
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 trustee) is based on all information of which preparer has any knowledge.				
	_____ Signature of trustee or officer representing trustee		_____ Date		
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature		
	Firm's name		Firm's EIN		
	Firm's address		Phone no.		
		Check <input type="checkbox"/> if self-employed		PTIN	

May the IRS discuss this return with the preparer shown below? See instr. <input type="checkbox"/> Yes <input type="checkbox"/> No
