



Estate of: _____ Date of Death: _____

- Identify policy or contract, designated beneficiary, amount, and show value.
- Include federal form 712 for each policy.

Item Number	Description	Value at Date of Death	Taxable Value

a. Total value of all insurance \$ _____

b. Amounts excluded for Iowa inheritance tax \$ _____

Amount subject to tax. Subtract line b from line a..... \$ _____

Enter the total on IA 706, page 2, line 29, Insurance on Decedent's Life

If more space is needed, include additional sheets.