Form **56-F**
(Rev. June 2026)
Department of the Treasury
Internal Revenue Service

Notice Concerning Fiduciary Relationship of Financial Institution

(Internal Revenue Code sections 6036, 6402, and 6903)
Go to *www.irs.gov/Form56F* for instructions and the latest information.

OMB No. 1545-0013

For IRS Use Only

Part I Identification

1	Name of person for whom you're acting (as shown on the tax return)		**2** Employer identification number	
3a	Address of financial institution (number and street)			**3b** Room or suite no.
4a	City	**4b** State	**4c** ZIP code	**5** Telephone no.

6 Check the applicable box for the type of financial institution: ☐ Bank ☐ Thrift
7 Check here if the financial institution is insolvent . . . . ☐
8 Enter the ending date of the financial institution's tax year (MM/DD/YYYY): _____

9	Fiduciary's name		**10** Contact person	
11a	Address of fiduciary (number and street)			**11b** Room or suite no.
12a	City or town	**12b** State	**12c** ZIP code	**13** Telephone no.

14 Check the applicable box if the fiduciary is a:
☐ Receiver ☐ Conservator

15 Check this box if the financial institution is or was a member of a group filing a consolidated return and complete lines 16 to 21 below. ☐
Lines 16 through 21 are to be completed only if the financial institution is or was a member of a group filing a consolidated return.

16	Name of person for whom you're acting (as shown on the tax return)		**17** Employer identification number	
18a	Address of the common parent (number and street)			**18b** Room or suite no.
19a	City	**19b** State		**19c** ZIP code

20 Check here if a copy of this form has been sent to the common parent of the group . . . ☐
21 Enter the tax year(s) that the financial institution is or was a member of the consolidated group: _____

Part II Authority

22 Evidence of fiduciary authority. Check applicable box(es), and attach copy of applicable orders:
a ☐ Appointment of conservator **b** ☐ Replacement of conservator
c ☐ Appointment of receiver **d** ☐ Order of insolvency
e ☐ Other evidence of creation of fiduciary relationship (describe): _____

Part III Tax Notices

23 All notices and other written communications with regard to income, employment, and excise taxes of the financial institution (listed on line 1) will be addressed to the fiduciary. Indicate below if other notices and written communications should be addressed to the fiduciary. Include the type of tax, tax periods, or years involved.

_____
_____
_____

Part IV Total Revocation or Termination of Notice

24 Evidence of termination or revocation of fiduciary authority. Check the applicable box(es):
a ☐ Certified copy of court order revoking fiduciary authority attached.
b ☐ Copy of certificate of dissolution or termination of a business entity attached.
c ☐ Other evidence of termination of fiduciary relationship (describe):

_____
_____

Please Sign Here

Under penalties of perjury, I declare that I have examined this document, including any accompanying statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Fiduciary's signature	Title, if applicable	Date