

# ESTATE / TRUST TAX ORGANIZER

**Name Of Trust / Estate**

**Fiduciary Information:** *if same as last year check*

Name

Soc. Sec. #

Address

Phone #

**Address Of Trust / Estate**

**Beneficiaries:** *if same as last year check*

Name

Soc. Sec. #

Birth Date

Relationship to Donor

U.S. Citizen Y/N

Income & Expense Allocation %

Ben. 1:

Address:

Ben. 2:

Address

Ben. 3:

Address:

**If this is your first year filing a Trust / Estate Return, please provide:**

1. IRS Form 56 - Notice Concerning Fiduciary Relationship
2. Notice CP 575 A - assignment of employer identification number by the IRS
3. The trust instrument (if a trust)

**Important Information:** *Answer every year*

- Did this trust / estate have financial interest or signature authority over a foreign financial account or have any involvement with a foreign trust during the tax year? \_\_\_\_\_
- What was the total amount distributed to beneficiaries for the tax year? \_\_\_\_\_ Was this amount distributed equally amongst beneficiaries? \_\_\_\_\_
- Have any modifications been made to the trust instrument since filing the last trust return? \_\_\_\_\_

**Income:**

**Interest Income (Attach Forms 1099-INT):**

**Dividends (Attach Forms 1099-DIV):**

Name of Payer

Amount

Name of Payer/Amts

1a

1b

2a

**Sale of Real-Estate, Stocks or Other Property (Attach Forms 1099-B)**

Description

Date Purchased

Date Sold

Sales Price

Cost

**Other Income:**

**Deductions:** Legal Fees \$

Accounting Fees \$

Fiduciary Fees \$

Other Ded. \$

**Estimated Tax & Extension Payment (please list dates & amounts)**

Carryforwards of prior year overpayments: Federal \$ \_\_\_\_\_ State \$ \_\_\_\_\_

Date Federal Amt. State Amt. Date Federal Amt. State Amt.

Any payments made with extensions? Federal Amt \$ \_\_\_\_\_ State Amt \$ \_\_\_\_\_