

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*

Birth

Relationship

U.S.

Income &

Citizen

Expense

Y/N

Allocation %

Name

Soc. Sec. #

Date

to Donor

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 \$ _____