



Trust Tax Organizer

Rev 1-6-20

Dear

Enclosed you will find an Engagement Letter or Continuation and Services Summary in a separate file. Also enclosed are your Logistics and Charge Authorization, Extension Policy, Notes & Additional Information and a Required Items Checklist. Please sign the Engagement Letter or Continuation and Services Summary and check off the services you will require for this year so we can confirm that the work we have scheduled is consistent with your expectations. Please call if you are uncertain what services you require.

We have scheduled the receipt of your accounting and tax data for and have staff time set aside to serve you at that time. Please let us know as soon as possible if you need to reschedule and what your obstacles are. Please note we require a meeting for the first year for all new clients

Please consider the 3.8% Medicare surtax on investment income. You may need to make a distribution before March 5, 2020 to draw income out to the beneficiaries to avoid this tax which starts when trust income exceeds \$12,750.

Also, the top rate of 20% for net long-term capital gains and qualified dividends applies when income reaches the top marginal bracket for ordinary income of 37%. Due to the relatively compressed brackets, this means the 20% rate goes into effect if taxable income of trusts and estates exceeds \$12,750 in 2019.

Use the Checklist to help gather the relevant information together for submission at one time. If you have substantially everything except a Schedule K-1 or brokerage 1099 please send what you have as we can get a head start and easily add the missing data later.

If you need us to prepare your probate accounting, or write-up of trust income and expenses, please send your bank statements including cancelled checks, credit card statements (with descriptive notations where needed) and a list of expenses paid by you personally on behalf of the trust as soon as possible. We will advise you what the prospective cost of the accounting work will be when we have the opportunity to review your material.

If you have any questions, please call or send a message using Liscio.

Sincerely,

Your tax & accounting team at Wilhelm & Associates, Ltd.



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Logistics & Charge Authorization Information

Name:

Availability and Special Needs: I require special handling as follows:

Preferred Method of Contact: Liscio phone mail

Payment:

We require payment before releasing tax returns **and a \$300 deposit when information is submitted.**

I enclose a check in the amount equal to last year's charge. Additional charges will be billed with the completed return.

I authorize Wilhelm & Associates, Ltd. to charge my credit card or debit card for the \$300 and the remaining cost of preparation at the time the return is completed or my e-file authorization is returned. (American Express, MasterCard, VISA or Discover only)

Name as it appears on your card: _____

Card Number: _____

Expiration Date: _____ Security Number: _____ Zip Code: _____

Tax Return Format & Extra Copies:

Electronic aka E-Filing Paper Filing (certain states require E-Filing)

Extra Copies (\$5 per copy) # of copies _____

Please provide a copy to your financial advisor as we are prevented from doing so without specific consent per §7519.

Delivery:

Please note if you are e-filing your return, your tax return copy and forms for you to sign to authorize the filing will be sent to your web portal, if possible. If you are not e-filing we may call you when ready to confirm your delivery instructions at that time.

Via Liscio Pick-up at Office Mail

Courier (\$30 charge for metro area) Fed EX (\$30 - \$50 domestic, overseas at cost)

Tax Data Handling:

Shred Pick-up at Office Mail back

Please note we send important information only as needed by Liscio. If you opt out of our Liscio communications you will not receive this important information.

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Extension Policy

Name:

If our office does not receive complete information with adequate lead-time prior to the filing deadline (our target date) an extension of time to file will be required. If you cannot obtain accurate information within a few weeks time before the initial filing deadline an automatic extension of time is preferable as the additional time may reduce your chances of audit and allow you to discover deductions you might otherwise have missed. We will not rush and attempt to file prematurely.

Our target dates are March 6 for calendar year entities and 6 weeks prior to the filing deadline for fiscal year entities or probate accounting.

We will prepare extensions based on information available as of 5 business days prior to the filing deadline.

We must have income, deduction and distribution information to prepare extensions and we will rely on your numbers as stated by you without review.

If we do not have adequate information from you, or have not contacted you, by 5 business days prior to the filing deadline you will need to file your own extension (please send us a copy).

An extension does not extend the time for payment of tax. If our initial preparation based on the partial information available indicates that a payment will be due, we will advise you to make that payment by the due date. Any further balance due will bear interest from the due date at a simple annual interest rate (currently at 3%) plus a late payment interest of ½ % per month.

Delay Items to Avoid:



Missing accounting information. We need a copy of your accounting (if applicable) and the required schedules and information as listed in the Fiduciary Organizer.



Your accounting needs corrections. Distributions are not shown.



Unsigned Engagement Letters and unanswered questions. We would appreciate not having to call and delay your return for these items.



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Notes and Additional Information

Name:

Tax elections:

Please send us a copy of any tax elections you made.

If not furnished previously please send:

Original and amended trust documents or change in trustees.

Plans of dissolution, bankruptcy and any other legal filings made during the current year.

Loan documents and payment details for all loans.

IRS or state notices, including FEIN letter for the trust.

Provide any additional relevant and necessary details that may assist us in understanding the transactions for the year or notes regarding the activities during the tax year at hand or future years.



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Required Items Checklist Page 1

Name:

Please provide the following, if applicable, and the items you are forwarding or under NA if not applicable:

- | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | NA |
|-----|-------------------------------------|--------------------------|---|
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | Details of the dates and amounts distributed to each beneficiary during the tax year or 65 days following year-end. This is critical see next page #23. |
| 2. | <input type="checkbox"/> | <input type="checkbox"/> | A copy of all inventories and any probate accountings filed. |
| 3. | <input type="checkbox"/> | <input type="checkbox"/> | Copies of monthly and year-end statements of all investment accounts. |
| 4. | <input type="checkbox"/> | <input type="checkbox"/> | Copies of Forms 1099-INT and 1099-DIV and statements for all interest and dividends income <u>including tax-exempt interest income</u> . |
| 5. | <input type="checkbox"/> | <input type="checkbox"/> | Copies of Forms 1099 or other forms for miscellaneous income. |
| 6. | <input type="checkbox"/> | <input type="checkbox"/> | Copies of all Schedule K-1s related to ownership in pass-through entities. |
| 7. | <input type="checkbox"/> | <input type="checkbox"/> | Schedule of contributions, if not clear in the accounting. |
| 8. | <input type="checkbox"/> | <input type="checkbox"/> | Details of miscellaneous income/expense accounts. |
| 9. | <input type="checkbox"/> | <input type="checkbox"/> | Details of and total for meal and entertainment expenses |
| 10. | <input type="checkbox"/> | <input type="checkbox"/> | Details of income from more than one state during the year. |
| 11. | <input type="checkbox"/> | <input type="checkbox"/> | A list of each type of trade or business activity or rental activity and indicate the date started or acquired if multiple activities are undertaken, |
| 12. | <input type="checkbox"/> | <input type="checkbox"/> | A list of any life insurance premiums paid. |
| 13. | <input type="checkbox"/> | <input type="checkbox"/> | A list of non-deductible expenses, such as penalties and life insurance premiums. |
| 14. | <input type="checkbox"/> | <input type="checkbox"/> | A list of any foreign income or ownership in foreign entities or financial accounts. |
| 15. | <input type="checkbox"/> | <input type="checkbox"/> | Details if the trust was a grantor, transferor or beneficiary of a foreign trust. |
| 16. | <input type="checkbox"/> | <input type="checkbox"/> | Any address changes of the existing trustee or personal representative. |
| 17. | <input type="checkbox"/> | <input type="checkbox"/> | The name, address and SSN of any change in trustee or personal representative. |
| 18. | <input type="checkbox"/> | <input type="checkbox"/> | The name, address and SSN of any change in beneficiaries. |
| 19. | <input type="checkbox"/> | <input type="checkbox"/> | A copy of any change in the trust document or other governing authority. |
| 20. | <input type="checkbox"/> | <input type="checkbox"/> | Copies of correspondence with or notices from tax authorities, including FEIN letters for new entities. |
| 21. | <input type="checkbox"/> | <input type="checkbox"/> | At any time during 2019, did you receive, sell, send, exchange or otherwise acquire any financial interest in any virtual currency? If yes provide details. |
| 22. | <input type="checkbox"/> | <input type="checkbox"/> | For each trustee or personal representative, the SSN or TIN, time devoted to the entity and detail of compensation received. |



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Required Items Checklist Page 2

Name:

23. Distributions to Beneficiaries

Name	Soc Sec Number	Amount Distributed	Address (If we don't have it)	Date of Birth	✓ if U.S. Citizen

24. Capital gains and losses - Enclose copies of all Forms 1099-B and 1099-S. Furnish all your brokerage account statements. Also provide a broker report of realized gains and losses OR enter all sales. Include sales not reported on a 1099 below.

Description	Date Acquired	Date Sold	Sales Proceeds	Cost or Basis	Gain (Loss)



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Required Items Checklist Page 3

Name:

25. Estimated tax payments made for this year (note the 4th quarter may be paid next year)

	FEDERAL		STATE	
	Date Paid	Amount Paid	Date Paid	Amount Paid
Prior year				
1st Quarter				
2nd Quarter				
3rd Quarter				
4th Quarter				

Shall we apply any overpayments to next year? Yes No W&A to decide

26. Mortgage interest paid

Payee	Amount

27. State and Local Information:

Description	City or County
City or County of residence on 1/1 of current year	
Other State information 529 plan contributions, etc.	



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Required Items Checklist Page 4

Name:

28. Deductible Taxes

Description	Amount
State and local income tax payments made this year for prior year(s).	
Real estate taxes:	
Personal property tax	
Intangible tax	
Other taxes (itemize)	
Foreign tax withheld (may be used as a credit)	

29. Specific expenses paid

Description	Amount
Income tax preparation fees	
Legal fees (provide details)	
Safe deposit box rental (if used for storage of items related to income-producing property)	
Fiduciary Fees	
Investment Fees	
Other miscellaneous deductions - Please provide itemized list unless clear in your accounting.	



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Required Items Checklist Page 5

Name:

30. Other Expenses:

Description & Payee	Amount

31. Estimated Tax: Do you expect income or distributions to change next year? Yes No

If yes, how much in long-term capital gains?	
If yes, how much in distributions?	

32. Please indicate who put the funds into the trust, when and what their domicile was at the time of the contribution to the trust.

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Thank you and may you enjoy a healthy and prosperous year ahead!