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2021 FIDUCIARY TAX ORGANIZER

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This tax organizer has been prepared for your use in gathering the information needed for the 2021 Fiduciary tax return.

To save you time, selected information from the 2020 tax return has been entered within this organizer. Please line through any information which does not apply to the 2021 tax return.

In some cases, 2020 amounts have been included in a separate column. These amounts are for comparison purposes only. You do not need to change these prior year amounts.

If we may be of further assistance, please contact us at your convenience.

REMOVE THIS SHEET PRIOR TO RETURNING THE COMPLETED ORGANIZER

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2021 FIDUCIARY TAX ORGANIZER

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I have submitted this information for the sole purpose of preparing the fiduciary tax return. Each item can be substantiated by receipts, canceled checks, or other documents. This information is true, correct, and complete to the best of my knowledge.

Trustee - Executor Signature	Date
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E-mail Address	Telephone Number
Preferred Method of Contact	



2021

Beneficiary's Information

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Did any beneficiaries change?

If yes, please designate below.

Please indicate if there were any distributions made to a beneficiary below.
 Distributions may be required, discretionary, or made under the 65-day rule.
 Distributions made on or before March 6, 2022 may be included as a 2021 distribution under the 65-day rule.

Beneficiary's Personal Information

		Distributions	2020 Amount
Name	<input type="text"/>	Required	
Name (continued)	<input type="text"/>	Discretionary	
Address	<input type="text"/>	65-Day	
City, State, ZIP code	<input type="text"/>		
SSN/Tax ID number	<input type="text"/>		
Name	<input type="text"/>	Required	
Name (continued)	<input type="text"/>	Discretionary	
Address	<input type="text"/>	65-Day	
City, State, ZIP code	<input type="text"/>		
SSN/Tax ID number	<input type="text"/>		
Name	<input type="text"/>	Required	
Name (continued)	<input type="text"/>	Discretionary	
Address	<input type="text"/>	65-Day	
City, State, ZIP code	<input type="text"/>		
SSN/Tax ID number	<input type="text"/>		
Name	<input type="text"/>	Required	
Name (continued)	<input type="text"/>	Discretionary	
Address	<input type="text"/>	65-Day	
City, State, ZIP code	<input type="text"/>		
SSN/Tax ID number	<input type="text"/>		
Name	<input type="text"/>	Required	
Name (continued)	<input type="text"/>	Discretionary	
Address	<input type="text"/>	65-Day	
City, State, ZIP code	<input type="text"/>		
SSN/Tax ID number	<input type="text"/>		



- | | Yes | No |
|---|--------------------------|--------------------------|
| 1. Is there a new fiduciary? | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | | |
| _____ | | |
| _____ | | |
| 2. Has the trustee or executor changed? | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | | |
| _____ | | |
| _____ | | |
| 3. Has the trustee's/executor's address changed? | <input type="checkbox"/> | <input type="checkbox"/> |
| _____ | | |
| _____ | | |
| _____ | | |
| 4. Did you receive correspondence from the IRS or any state taxing authority? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, please provide a copy. | | |
| 5. Do you maintain a bank account for the trust? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Have you received any foreign income or paid any foreign taxes? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Is this the initial year for the trust/estate? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, please provide a copy of the trust document or decedent's will. | | |
| 8. Is this the final year of the trust/estate? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, please provide a listing of expenses incurred but unpaid at the end of the year. | | |
| 9. Was the estate or trust the grantor or transferor to a foreign trust which existed during the year? | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. At any time during the tax year, did the estate or trust have an interest in or a signature or other authority over a financial account in a foreign country? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, please identify: _____ | | |
| 11. Did you receive any distributions from foreign trusts? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, from whom? _____ | | |
| Amount _____ | | |
| 12. Does the estate or trust have an interest in a partnership, S corporation, or another estate/trust? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, please provide a copy of the Federal and State Form(s) K-1. Pass-through entities reported on last year's return have been listed on an attached Form 9 for your convenience. | | |
| 13. Did you receive any tax refunds from any state taxing authority? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, please attach details. | | |
| 14. Did the estate or trust receive any income or contribution not reported on this organizer? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, please attach details. | | |



2021

Electronic Filing

Electronic Filing:

Electronic filing is the means by which your return is transmitted directly to the IRS. The IRS has implemented an electronic filing mandate requiring certain preparers to file all returns that they prepare electronically. Some states also require certain preparers to electronically file state returns prepared. The IRS and some states allow taxpayers to elect not to file their returns electronically. If you prefer not to electronically file your return, please refer to and sign the opt-out statement below. Because some states have official opt-out forms, additional signatures may be necessary before your return can be filed.

Do not electronically file the federal return

Do not electronically file the state return(s)

Opt-Out Statement:

_____ has informed me (us) that my (our) 2021 Fiduciary Income Tax return may be required to be electronically filed if the firm files the return on my (our) behalf. I (We) understand that electronic filing may provide a number of benefits to taxpayers, including an acknowledgment that the IRS received the return, a reduced chance of errors in processing, and faster refunds. I (We) do not want to file my (our) return electronically and will personally file the paper return. My (Our) signature(s) below represent(s) my (our) agreement that I (we) was (were) not influenced by my (our) preparer or any other member of the firm to sign this statement.

Fiduciary signature: _____ Date: _____

The IRS requires the use of a 5-digit self-selected Personal Identification Number (PIN) in lieu of mailing a signature document when electronically filing.

Would you like to use a randomly generated PIN?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

If No, please enter a 5-digit self-selected PIN: _____



2021

Tax Payments and Refunds

Federal Estimated Tax Payments	Amount Due	Date Paid if Not By Date Due (Mo/Da/Yr)	Amount Paid
2021 1st Quarter Estimate			
2021 2nd Quarter Estimate			
2021 3rd Quarter Estimate			
2021 4th Quarter Estimate			

State Estimated Tax Payments	Amount Due	Date Paid if Not By Date Due (Mo/Da/Yr)	Amount Paid
2021 1st Quarter Estimate			
2021 2nd Quarter Estimate			
2021 3rd Quarter Estimate			
2021 4th Quarter Estimate			
2020 state extension payment			

Tax Refunds	Amount
State and local income tax refunds	

If you have an overpayment of 2021 taxes, do you want the excess:

	Yes	No
Refunded	<input type="checkbox"/>	<input type="checkbox"/>
Applied to your 2022 estimated tax liability	<input type="checkbox"/>	<input type="checkbox"/>