Organizer





The filing deadline for the estate return is

This organizer is designed to assist you, the personal representative, in gathering the information required for preparation of the appropriate estate and inheritance tax returns. Please complete it in full and provide details and documentation as requested.

An engagement letter explains the services that will be provided to the estate. (If sending a hard copy) Please sign a copy of the enclosed engagement letter and return it in the enclosed envelope and maintain the other copy for your records. (If sending an electronic copy) You should have received a link to electronically sign and submit the engagement letter. Please electronically sign the agreement as soon as possible.

. Your completed tax organizer needs to be received no

later thanreturn.	Any information received after that date may require an extension to be filed for this	
Note that there may be situations where decedent's unused exclusion amount, an	an estate tax return is not required, but in order to preserve the portability of the estate tax return must be filed.	
If an extension of time to file is required, paid by the filing deadline may be subject	any tax that may be due with this return must be paid with that extension. Any taxes not to penalties and interest.	
We look forward to providing services to contact	you. Should you have any questions regarding any items, please do not hesitate to	
Email	Phone	
Certification:		
The undersigned certifies, to the best of is complete and accurate.	nis or her knowledge, that the information documented in and provided with this organiz	er
Certified by		
Title		

For decedents dying after Dec. 31, 2021
Decedent's full name
Decedent's Social Security number
Date of birth
Date of death
Occupation (former occupation if retired)
Decedent's legal residence at date of death (city, county, state and ZIP code or foreign country)
Date domicile established
Did the decedent ever reside in a community property state?
Citizenship:
Decedent
Spouse
Name(s) of personal representative
Address
Social Security/Federal ID number
Phone
Fax
Email
Attorney's name, address and telephone number
Broker's name, address and telephone number
Name and location of court(s) where the will was or will be probated, or the estate was administered
Case number(s)

100) G	eneral information					Yes Don		N/A
► 101)	Provide a certified copy	of:			•••••••••••••••••••••••••••••••••••••••	•••••	•••••	• • • • • • • • • • • • • • • • • • • •
	- Will and any codicil(s)]	
	– Death certificate]	
	– Letters testamentary	or letters of administration						
▶ 102)	Provide a copy of any tro	ust of which the decedent was a gest or power.	rantor, trust	ee, beneficiary or in	which the]	
▶ 103)	Provide beneficiary info	ormation below (note if beneficial	ry is a non-l	JS citizen):	•••••••••••••••••••••••••••••••••••••••	•••••	• • • • • •	••••••
Full na	ame	Address (city/state/zip)		ationship to cedent	Taxpayer ID number		Birth	date
•••••						Yes		No/ N/A
▶ 104)	If the decedent or spous request if returns were p	se has ever filed any federal gift ta previously provided).	x returns, pı	rovide copies (disre	gard this]	
▶ 105)		ny gifts valued in the aggregate at or her death, complete the gift tax			person during]	
▶ 106)	decedent and one or mo	edent's assets, including all prope ore individuals, and indicate how s ommunity property, etc.) and wher d to a specific beneficiary).	uch propert	y was owned (separ	rate, joint with]	
▶ 107)	plan assets, IRA distribu	any income in respect of deceder itions and wages or other income describing the amount of the inco	earned prio	r to death but paid a	after death. If]	
▶ 108)	Provide a copy of any pe	ersonal property insurance floater	that lists sp	pecific items of prop	erty.]	
▶ 109)	If the decedent had ac	cess to a safety deposit box, pr	ovide the f	ollowing:	•••••••••••••••••••••••••••••••••••••••		· · · · · · · ·	
	- Location							
	– Joint owner or deposi	tor, if any, and relationship to the c	lecedent]	
	 Detailed list of contents 	S					1	

		Yes/ Done	N/A
▶ 110)	If the decedent's spouse predeceased the decedent, provide a copy of the spouse's estate tax return (Form 706), allocation of increase in basis for property acquired from a decedent (Form 8939), state estate and inheritance tax returns and any estate/trust returns (Form 1041).		
	Is there an unused exclusion (DSUE) from the deceased spouse?		
▶ 111)	If the decedent was divorced, provide the date of divorce or legal separation		
▶ 112)	Provide a copy of any pre-nuptial agreement, post-nuptial or separate/community property agreement, if applicable.		
▶ 113)	Furnish copies of employment agreements, deferred compensation and any contracts where not all benefits due were received.		
▶ 114	Provide a copy of federal and state income tax returns for the prior three years (disregard this request if the returns were prepared by us or previously provided).		
► 115 ₁	Provide the federal tax identification number for any partnerships, closely held corporations or LLCs owned by the decedent during his or her lifetime.		
	a) Were any pass-through entity tax elections made by the entity?		
▶ 116)	If the decedent was involved in any litigation, provide details.		
▶ 117	Provide copies of any disclaimers executed.		
▶ 118)	Provide information needed to access electronically stored documents (who has access, passwords, etc.).		
▶ 119)	Provide a copy of any completed Form 8822-B, <i>Change of Address or Responsible Party – Business</i> (This form is used to update the address for the entity).		
▶ 120) Provide detail if the decedent ever possessed, exercised, or released any general power of appointment.		
200) F	Real estate	Done	N/A
▶ 201) Provide copies of all deeds.		
▶ 202	Provide a schedule of all real estate owned or under contract to purchase with the following information:		••••••••
	Legal description and or street address, if applicable		
	Assessed value for property tax purposes (copy of latest tax assessment notice)		
▶ 203	Provide copies of the most recent appraisal of real estate owned by the decedent or request appraisals as of date of death.		
▶ 204	Provide lease documents for real estate owned subject to a lease and the status of security deposits and the date of the last rent payment.		
▶ 205) Include a description of real estate (and length of ownership) subject to a qualified conservation easement.		

300) St	ocks, bonds and mutual funds	Done	N/A
▶ 301)	Provide copies of all brokerage and mutual fund statements for the month prior to the date of death and six months after the date of death. If available, provide estate valuation reports from the brokerage firm.		
▶ 302)	Provide a list and copies of all stock and bond certificates held by the decedent that were not listed on the brokerage statements. Also, provide a list of any subject to transfer on the death designation.		
▶ 303)	If the decedent owned stock in a closely held corporation, provide copies of:		
	- Stock certificates		
	— Buy-sell agreements		
	— Tax returns and financial statements for the prior five years plus a qualified appraisal		
	- Any recent sales of stock by the decedent or other shareholders		
	- Other stockholders and shares held		
	— appraisal		
▶ 304)	Provide documentation of any securities that were owned by the decedent but had no value as of the date of death (i.e., worthless securities).		
▶ 305)	Provide a list of U.S. savings bonds with the face amount and month and year of purchase.		
▶ 306)	Determine accrued interest on bonds and money market funds and includible dividends paid after death to stockholders of record as of the date of death.		
400) M	ortgages, notes and cash	Done	N/A
401	Provide copies of the following statements for all accounts for the period beginning two months prior to death through the present:		
	- Checking accounts		
	- Savings accounts		
	- Certificates of deposits		
	- Money market accounts		
	- Brokerage accounts with cash investments		
▶ 402)	Provide a copy of the current check registers for the above accounts and list any outstanding checks.		
▶ 403)	Provide the amount of cash (currency), traveler's checks and undeposited checks held by the decedent		
•••••	at death. \$	ш	
404	Provide copies of all notes and mortgages owed to the decedent, including amortization schedules, if available, and the date of the last interest payment.		

500) Lif	fe insurance							
▶ 501)	Complete the	following schedule	of life insurance policie	es.				
Insure	Insured Amount Ownership Beneficiaries (primary and conditional) Company Po							
						Done	N/A	
▶ 502)	the decedent	(Form 712 is require	•	-	npanies for policies on ner and beneficiary with			
➤ 503) If the decedent was not the owner of the policy, provide the date and circumstances of acquisition by the owner.								
▶ 504) If subject to a split-dollar arrangement (meaning that the employer and employee may share the premium cost, cash value and/or death benefit), provide the agreement and any separate assignments or endorsements.								
600) Jo	intly owned p	roperty				Done	N/A	
▶ 601)			e decedent and others ad amount contributed	(other than the spouse) by each.	(joint with right of			
		es, addresses and Soothe decedent, if ar		s of co-owners other tl	nan the spouse. State th	ne 🔲		
▶ 603)	Provide docu deeds, vehicle		owned jointly, such as	bank statements, brok	cerage statements,			
700) M	iscellaneous	property				Done	N/A	
▶ 701)	Provide copie	s of any available a	opraisals of:			•••••••	• • • • • • • • • • • • •	
	— Art							
	- Antiques							
	– Jewelry							
	– Other collec	ctibles						
	— Other prope	erty						

			Yes/ Done	N/A
>	702)	If the decedent had an interest in a partnership, LLC and/or other unincorporated business, provide a copy of the following:		
		- Partnership or other ownership agreement		
		— Tax returns and/or financial statements for the prior five years		
		- Buy-sell agreements		
		- Appraisal		
		Life insurance policies (with incidences of ownership in corporations)		
>	703)	Provide information on any virtual currency or digital assets owned by the decedent, including valuation and instructions provided to enable administrator access.		
>	704)	Please provide the percentage of ownership interest in the partnership, LLC and/or other unincorporated business.		
>	705)	Did the decedent have any accrued employee benefits, such as accrued salary, vacation, non-qualified deferred compensation, stock options or unreimbursed expenses outstanding at date of death?		
>	706)	Provide a list of any refunds or reimbursements received or receivable by the estate or checks written by decedent and not cleared by the bank prior to the date of death.		
>	707)	Provide a list of household furnishings and personal assets owned by the decedent and the value of each. Separately list any one item or collection of similar items valued at more than \$3,000.		
>	708)	Provide a list of vehicles owned by the decedent with make, model, year, odometer reading, vehicle identification number (VIN), general condition, Blue Book values at the date of death and copies of certificates of title, if available.		
>	709)	Provide a list of all other assets including description and fair market value as of date of death.		
80	0) Ar	nnuities and retirement benefits	Done	N/A
>	801)	Provide copies of the last brokerage, mutual funds, bank or plan participant statements before date of death for all IRAs, 401(k)s and other retirement plans.		
>	802)	Provide copies of commercial annuity contracts and the last statement indicating balance of account.		
>	803)	Obtain the date of death value from the plan administrator or annuity provider.		
>	804)	Provide a copy of all beneficiary designations. Verify payor has the correct beneficiary.		

900) Autililistiative	e expe	11562								
▶ 901) Complete the below schedule regarding funeral-related expenses (paid by the estate or reimbursed to the payor). Provide support (receipts, etc.) for the expenses.										
Funeral arrangements (include a copy of the funeral service agreement)		rkers	Flowers		Thank-you notes and postage	Obituary	Clergy or honoraria		Other exp	
									• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •
▶ 902) Complete the			f other admini	istrati	on expenses which	were not paid thro	ough the es	tate che	cking acco	ount or
Legal fees	Ассоц	ınting fees	Maintenance estate prope		Appraisal fees	Personal representative fees (paid and estimated) and out-of-pocket expenses (trave postage, etc.)		Other expense (provide details)		ises de
1000) Debts, mortg	jages a	and liens of d	ecedent						Done	N/A
▶ 1001) Provide co date of dea	-		ortgages, etc. te of the last		-	and a schedule of	balances a	at the		
▶ 1002) Complete	the bel	ow schedule	of all other d	ebts o	owed by the decede	ent.		••••		
To whom owed Amou		Amount of c	f debt Inter		rest rate	Due date		Payment amounts		ts

1100) Losses during administration	Done	N/A
▶ 1101) Provide a schedule of any losses, including casualty losses, incurred during the administrates estate.	ation of the	
1200) Charitable bequests	Done	N/A
▶ 1201) Attach a schedule of charities listed in the will or trust including name, address and type o organization.	of	
1300) Credit for prior transfers	Done	N/A
▶ 1301) If the decedent received property during the 10 years prior to the date of death from the es others, provide copies of the prior decedents' estate tax returns and will.	states of	
1400) Generation-skipping transfer tax	Yes/ Done	
▶ 1401) Did the decedent make any gifts under the filing threshold of \$16,000 to trusts? If so, provi	ide details.	
▶ 1402) Provide the federal tax identification number of any trust to which the generation-skipping will be currently allocated.	g exemption	
Comments/explanations		

This copyrighted resource is provided exclusively to AICPA Tax Section members and should not be shared, reproduced or used by anyone who is not a member of the AICPA Tax Section without explicit consent from the AICPA Tax Section. See our <u>terms and conditions</u>. For information about content licensing, please email <u>copyright-permissions@aicpa-cima.com</u>.

