3030 E. Market St • York, PA 17402
(717) 757-5482 • TEXT (717) 759-4227
We'll count the beans... You enjoy the coffee!

All returns will be delivered digitally in SmartVault unless this box is checked. ☐ **Hard copy**

Trust and Estate Tax Intake

Complete one intake for each trust or estate and tax period. Complete the sections that apply and upload the form and supporting documents through SmartVault.

Required for each trust or estate: Attach a copy of the IRS letter confirming the EIN. If you do not have the letter, contact our office.

Trust or Estate Information

This intake is for ☐ Trust ☐ Estate

Legal name _____ EIN _____

Tax period beginning _____ Ending _____

Mailing address _____

City _____ State _____ ZIP _____

Trustee or Estate Representative

Name _____

Role ☐ Trustee ☐ Executor ☐ Administrator ☐ Other _____

Phone _____ Email _____

Fiduciary mailing address (if different from above) _____

City _____ State _____ ZIP _____ Address changed? ☐ Yes ☐ No

Is anyone else authorized to act with you? ☐ Yes ☐ No If yes, list name and role.

_____

Trusts Only

Date trust was created _____ Grantor or settlor _____

Is the trust revocable or irrevocable? ☐ Revocable ☐ Irrevocable ☐ Unsure

Did the trust change from revocable to irrevocable? ☐ Yes ☐ No ☐ Unsure

If yes, provide the date and reason _____

Did the trust previously report income under the grantor's SSN? ☐ Yes ☐ No ☐ Unsure

Has Form 8855 been filed to treat the trust as part of the estate for income tax purposes?

☐ Yes ☐ No ☐ Unsure If yes, upload a copy through SmartVault.

Estates Only

Decedent's legal name _____

Date of death _____ State of residence at death _____

Date you were appointed _____ County and state _____

For a first-year estate, has a tax year-end been selected? ☐ Yes ☐ No ☐ Unsure

If yes, enter the tax year-end _____

Will ASY prepare and file the decedent's final Form 1040? ☐ Yes ☐ No ☐ Unsure

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Distributions and Records

Legal name of trust or estate _____

Beneficiary Distributions

Were any distributions made during this tax period? ☐ Yes ☐ No ☐ Unsure

Will any distributions be made during the rest of this tax period?

☐ Yes ☐ No ☐ Undecided ☐ Tax period has ended

Does the trust or will require income to be distributed currently, even if unpaid? ☐ Yes ☐ No ☐ Unsure

For an estate or complex trust, were any distributions made in the first 65 days after year-end?

☐ Yes ☐ No ☐ Unsure If yes, include each date and amount in the distribution records.

Complete one entry per beneficiary. Attach a schedule for additional beneficiaries or multiple payments showing each date and amount. For property, include a description, distribution-date value, and available basis records. Upload applicable Forms W-9 through SmartVault.

Full legal name _____ Taxpayer ID (SSN, ITIN, or EIN) _____

Mailing address (street, city, state, ZIP) _____

State of residence _____ Foreign beneficiary? ☐ Yes ☐ No ☐ Unsure

Actual or expected distribution date _____ Cash amount or property _____

Full legal name _____ Taxpayer ID (SSN, ITIN, or EIN) _____

Mailing address (street, city, state, ZIP) _____

State of residence _____ Foreign beneficiary? ☐ Yes ☐ No ☐ Unsure

Actual or expected distribution date _____ Cash amount or property _____

Full legal name _____ Taxpayer ID (SSN, ITIN, or EIN) _____

Mailing address (street, city, state, ZIP) _____

State of residence _____ Foreign beneficiary? ☐ Yes ☐ No ☐ Unsure

Actual or expected distribution date _____ Cash amount or property _____

Filing History

Is this the first return for the trust or estate? ☐ Yes ☐ No ☐ Unsure

Is this expected to be the final return? ☐ Yes ☐ No ☐ Unsure

If final, enter the termination date _____ and attach final distribution records.

Do any assets or liabilities remain? ☐ Yes ☐ No ☐ Unsure If yes, describe in Additional Notes.

Are there tax notices or filing deadlines we should know about? If so, list them below.

_____

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Tax Payments and Supporting Documents

Legal name of trust or estate _____

Federal and State Tax Payments

List federal and state estimated and extension payments. Include the jurisdiction, payment type, date, and amount. Also list withholding and any prior-year overpayment applied to this year. Attach a schedule or payment confirmations if available.

_____

_____

_____

Documents to Include

☐ IRS letter confirming the EIN (required)
☐ For a trust, the signed trust agreement and all amendments or restatements
☐ For an estate, the death certificate, will if available, and court appointment papers
☐ **Prior-year federal and state trust or estate returns, including beneficiary schedules** (required if a prior-year return was filed)
☐ Forms 1099, incoming Schedules K-1, and bank and brokerage statements
☐ Asset inventory, purchase and basis records, appraisals, and date-of-death values, if applicable
☐ Records of fiduciary, legal, accounting, and other administration expenses
☐ Closing statements and brokerage statements for assets sold
☐ Distribution ledger and property valuation records, if applicable
☐ For an estate, records showing when income near the date of death was earned and received, plus any Forms 1099 issued under the decedent's SSN
☐ For a final return, prior-year workpapers showing carryovers, if available
☐ Any tax notices or correspondence related to this filing

Additional Notes

_____

Completed by _____ Date _____