Organizer

<u>Estate</u>



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 and date 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 date and submit the engagement letter. Please electronically sign the agreement as soon as possible.

The filing deadline for the estate return is ______. Your completed tax organizer needs to be received no later than _______. Any information received after that date may require an extension to be filed for this return. Note that there may be situations where an estate tax return is not required, but in order to preserve the portability of the decedent's unused exclusion amount, an estate tax return must be filed.

If an extension of time to file is required, any tax that may be due with this return must be paid with that extension. Any taxes not paid by the filing deadline may be subject to penalties and interest.

We look forward to providing services to you. Should you have any questions regarding any items, please do not hesitate to contact

Email Phone

Certification:

The undersigned certifies, to the best of his or her knowledge, that the information documented in and provided with this organizer is complete and accurate.

Certified by

Title

Date ____

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 of birth Date of death Occupation (former occupation if retired)
Date of death Occupation (former occupation if retired)
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 primary 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) 6	General information				Yes/	NI / A
•••••	Provide a certified copy	of		••••••	Done	N/A
P 101)	- Will and any codicil(s)					
	– Death certificate					
	– Letters testamentary	or letters of administration				
▶ 102)	Provide a copy of any tr decedent held any inter	ust of which the decedent was a est or power.	a grantor, trustee, beneficiary	or in which the		
▶ 103)	Provide beneficiary info	ormation below (note if benefic	iary is a non-US citizen):			
Full na	ame	Address (city/state/zip)	Relationship to decedent	Taxpayer ID number	Birth	n date
•••••					·····	
					Yes/ Done	No/ N/A
▶ 104)	If the decedent or spou request if returns were	se has ever filed any federal gift previously provided).	tax returns, provide copies (disregard this		
▶ 105)		ny gifts valued in the aggregate or her death, complete the gift t				
▶ 106)	decedent and one or mo with rights of survivorsh	edent's assets, including all prop pre individuals, and indicate how nip, community property, etc.) ar d to a specific beneficiary).	v such property was owned (separate, joint		
▶ 107)	plan assets, IRA distribu	any income in respect of deced utions and wages or other incon describing the amount of the in	ne earned prior to death but p	oaid after death. If		
▶ 108)	Provide a copy of any pe	ersonal property insurance float	er that lists specific items of	^f property.		
▶ 109)	If the decedent had ac	cess to a safety deposit box,	provide the following:	•••••••	•••••	,
	- Location					
	– Joint owner or deposi	tor, if any, and relationship to th	e decedent			
	 Detailed list of content 	S				

Yes/

		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) 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)	Real estate	Done	N/A
▶ 201) Provide copies of all deeds.		
▶ 202	2) 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	B) 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	i) Include a description of real estate (and length of ownership) subject to a qualified conservation easement.		

300) St	tocks, 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. Include digital asset investments held. 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 		
	 Information regarding any digital assets 		
▶ 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. \$		
▶ 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) Life insurance

▶ 501) Complete the following schedule of life insurance policies.

Insured		Amount	Ownership	Beneficiaries (primary and conditional)	Company	Policy numbe	er
						Done	N/A
•	the decedent	surance statements (I (Form 712 is required company prior to requ	for every policy). Verif		panies for policies on er and beneficiary witl	'n	
	If the deceder the owner.	nt was not the owner c	of the policy, provide th	e date and circumsta	nces of acquisition by		
	the premium	a split-dollar arrangen cost, cash value and/ or endorsements.	• -				
600) Joi	ntly owned pi	roperty				Done	N/A
		owned jointly by the d indicate the date and			(joint with right of		
		es, addresses and Soc o the decedent, if any.	ial Security numbers	of co-owners other th	an the spouse. State t	he	
,	Provide docu deeds, vehicle	mentation of assets o e titles, etc.	wned jointly, such as b	ank statements, broke	erage statements,		
700) Mi	scellaneous	property				Done	N/A
▶ 701) F	Provide copies	s of any available appr	aisals of:				
-	– Art						
-	– Antiques						
-	– Jewelry						
-	– Other colled	ctibles					
-	– Other prope	erty					
•••••						•••••	

		Yes/ Done	N/A
•••••		Done	IN/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 provided by a qualified appraiser 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.		
800) A	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) Administrative expenses

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 services agreement)	Markers	Flowers	Thank-you notes and postage	Obituary	Clergy or rabbi honoraria	Other expenses (provide details)

902) Complete the below schedule of other administration expenses which were not paid through the estate checking account or

have yet to be paid.

Legal fees	Accounting fees	Maintenance of estate property	Appraisal fees	Personal representative fees (paid and estimated) and out-of-pocket expenses (travel, postage, etc.)	Court costs	Other expenses (provide details)

1000) Debts, mortgages and liens of decedent	Done	N/A
1001) Provide copies of all notes, mortgages, etc., owed by the decedent and a schedule of balances at the date of death including the date of the last payment.		

▶ 1002) Complete the below schedule of all other debts owed by the decedent.

To whom owed	Amount of debt	Interest rate	Due date	Payment amounts

1100) Losses during administration	Done	N/A
1101) Provide a schedule of any losses, including casualty losses, incurred during the administration of the estate.		
1200) Charitable bequests	Done	N/A
 1201) Attach a schedule of charities listed in the will or trust including name, address and type of organization. 		
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 estates of others, provide copies of the prior decedents' estate tax returns and will.		
1400) Generation-skipping transfer tax	Yes/ Done	No/ N/A
▶ 1401) Did the decedent make any gifts under the filing threshold of \$18,000 to trusts? If so, provide details.		
 1402) Provide the federal tax identification number of any trust to which the generation-skipping exemption 		
will be currently allocated.		
Comments/explanations		

In applying the tax guidance included in this resource, the practitioner should, using professional judgment, assess the relevance and appropriateness of such guidance to specific circumstances. The tax guidance in this document has been reviewed by the AICPA Tax Division staff and the Tax Practice Management committee and the Annual Tax Compliance Kit task force associated with this subject.

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