



Larry K. Anderson, P.C.  
Certified Public Accountant

## Agreement for preparation of 2018 Fiduciary Income Tax Returns

This letter is to confirm and specify the terms of our engagement for the year ended December 31, 2018 and to clarify the nature and extent of the services we will provide. In order to ensure understanding of our mutual responsibilities, we ask all clients for whom we prepare tax returns to confirm the following arrangements.

We will prepare your 2018 federal and state fiduciary income tax returns from information which you will furnish to us. We will make no audit or other verification of the data you submit, although we may need to ask you for clarification of some of the information. We will furnish you with questionnaires and/or worksheets to guide you in gathering the necessary information for us. Your use of such forms will assist us in keeping our fee to a minimum.

It is your responsibility to provide us with all the information required for the preparation of complete and accurate returns. You should retain all the documents, canceled checks and other data that form the basis of income and deductions. These may be necessary to prove the accuracy and completeness of the returns to a taxing authority. You have the final responsibility for the fiduciary income tax returns and, therefore, you should review them carefully before you sign them.

Our work in connection with the preparation of your income tax returns does not include any procedures designed to discover defalcations or other irregularities, should any exist. We will render such accounting and bookkeeping assistance as we find necessary for preparation of the income tax returns.

We will use our judgment in resolving questions where the tax law is unclear, or where there may be conflicts between the taxing authorities' interpretations of the law and other supportable positions. Unless otherwise instructed by you, we will resolve such questions in your favor wherever possible.

The law provides various penalties that may be imposed when taxpayers understate their tax liability. If you would like information on the amount or circumstances of these penalties, please contact us.

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Your returns may be selected for review by the taxing authorities. Any proposed adjustments by the examining agent are subject to certain rights of appeal. In the event of such government tax examination, we will be available upon request to represent you and will render additional invoices for the time and expenses incurred.

Our fee for these services will be based upon the amount of time required at our standard billing rates, subject to a minimum fee of \$625, plus out-of-pocket expenses. All invoices are due and payable upon presentation. A late charge of 1.5 % per month will be assessed on all past due amounts.

If the foregoing fairly sets forth your understanding, please sign this letter in the space indicated and return it to our office.

We want to express our appreciation for this opportunity to work with you.

Sincerely,

Larry K. Anderson, CPA

Accepted By:

Trust/Estate Name \_\_\_\_\_

Your signature \_\_\_\_\_

Date \_\_\_\_\_

Your name (print) \_\_\_\_\_

Your title \_\_\_\_\_



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### 2018 Fiduciary Income Tax Organizer

Trust/Estate Name(s) \_\_\_\_\_ TIN# \_\_\_\_\_

Address \_\_\_\_\_

City, Town, or Post Office	County	State	Zip Code
Telephone Number Home ( ) _____	Telephone Number Office ( ) _____	Fax Number ( ) _____	E-Mail Address _____

Fiduciary Name(s) \_\_\_\_\_ TIN# \_\_\_\_\_

If this is the first year we will prepare the tax return(s), provide the following from your file or your prior accountant:

- |  | <u>Done</u> | <u>N/A</u> |
|--|-------------|------------|
| • Will or trust agreement and amendments, if any | _____       | _____      |
| • Tax returns for the prior three years          | _____       | _____      |
| • Depreciation schedules                         | _____       | _____      |
| • Passive loss carryover information             | _____       | _____      |
| • NOL carryovers                                 | _____       | _____      |
| • Basic computations                             | _____       | _____      |
| • Capital loss carryovers                        | _____       | _____      |

If not previously furnished, provide copies of:

- |  |       |       |
|--|-------|-------|
| • Death certificate of decedent grantor or beneficiaries | _____ | _____ |
| • Birth certificates of beneficiaries                    | _____ | _____ |
| • Marriage certificates of beneficiaries                 | _____ | _____ |

1. Is the fiduciary a U.S. citizen? Yes \_\_\_\_\_ No \_\_\_\_\_
2. Has there been a change in fiduciary? If yes, provide new fiduciary information. Yes \_\_\_\_\_ No \_\_\_\_\_
3. Has there been a change in beneficiaries? If yes, provide new beneficiaries information. Yes \_\_\_\_\_ No \_\_\_\_\_
4. Is this a foreign trust? Yes \_\_\_\_\_ No \_\_\_\_\_
5. If a foreign trust, is the grantor or any beneficiary a U.S. person? Yes \_\_\_\_\_ No \_\_\_\_\_
6. Did the taxpayer receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If yes, provide details. Yes \_\_\_\_\_ No \_\_\_\_\_
7. Will the address on the current returns be different from that shown on the prior year returns? If yes, provide the new address and date of move. Yes \_\_\_\_\_ No \_\_\_\_\_
8. Did the taxpayer have any interest in, or signature, or other authority over a bank, securities, or other financial account in a foreign country? If yes, please provide details. Yes \_\_\_\_\_ No \_\_\_\_\_
9. Was the taxpayer a resident of, or receive income from, or own property in more than one state during the year? Yes \_\_\_\_\_ No \_\_\_\_\_

10. Do you want any overpayment of taxes applied to next year's estimated taxes? Yes \_\_\_\_\_ No \_\_\_\_\_
11. If a trust, or an estate in the final year, do you want any estimated tax payments made by the fiduciary treated as being made by the beneficiaries? Yes \_\_\_\_\_ No \_\_\_\_\_
12. Did the taxpayer have foreign income or pay any foreign taxes? Yes \_\_\_\_\_ No \_\_\_\_\_
13. Has the IRS, any state or local taxing authority notified you of changes to a prior year's tax return? If yes, please provide copies of all notices/correspondence received from any tax authority. Yes \_\_\_\_\_ No \_\_\_\_\_
14. Are you aware of any changes to income, deductions and credits reported on a prior year's returns? Yes \_\_\_\_\_ No \_\_\_\_\_
15. May the IRS discuss questions about this return with the preparer? Yes \_\_\_\_\_ No \_\_\_\_\_
16. Were any distributions made to beneficiaries during the tax year or within 65 days following year end? If yes, please provide details. Yes \_\_\_\_\_ No \_\_\_\_\_
17. Did the fiduciary receive any gifts? Yes \_\_\_\_\_ No \_\_\_\_\_  
 If yes, (a) how much? \_\_\_\_\_  
 (b) from whom? \_\_\_\_\_
18. Did the estate or trust receive all or any part of the earnings (salary, wages, and any other compensation) of any individual by reason of a contract assignment or similar arrangement? If yes, please provide details. Yes \_\_\_\_\_ No \_\_\_\_\_
19. Did the estate or trust receive, or pay, any mortgage interest on seller-provided financing? If yes, please provide details. Yes \_\_\_\_\_ No \_\_\_\_\_
20. If a decedent's estate, has the estate been open for more than 2 years? If yes, please provide explanation for the delay in closing the estate. Yes \_\_\_\_\_ No \_\_\_\_\_

**BENEFICIARIES** (Attach additional schedule if needed.)

Full Name	Social Security Number	Address	Date of Birth	U.S. Person	
				Yes	No
				Yes	No
				Yes	No
				Yes	No
				Yes	No
				Yes	No

If other than a U.S. citizen, provide details.

**ESTIMATED TAX PAYMENTS MADE**

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

**MISCELLANEOUS DEDUCTIONS**

Description	Amount
Tax return preparation fees	
Legal fees (provide details)	
Safe deposit box rental (if used for storage of documents or items related to income-producing property)	
Fiduciary Fees	
Investment Fees	
Other miscellaneous deductions - itemize	