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### 2017 TAX CHECKLIST FOR TRUSTS

**Trust Type** (circle one): Simple / Grantor / Complex / Living Trust / Bankruptcy / other \_\_\_\_\_

**Trust Name** \_\_\_\_\_

**Trustee Name** \_\_\_\_\_

**Trustee mailing address** \_\_\_\_\_

**Federal Identification Number** \_\_\_\_\_ **What state was the Trust created in?** \_\_\_\_\_

**Is there a General Power of Appointment (of trust assets) or a Limited Power of Appointment** \_\_\_\_\_

**Are payments to beneficiary(s) required or discretionary** \_\_\_\_\_

**Please provide the following:**

- |   |      |     |
|---|------|-----|
| 1) Copy of the will or trust agreement – this will help answer many of the questions above.   | Done | N/A |
| 2) Copy of your most recently filed tax returns   | Done | N/A |
| 3) Any court filings  | Done | N/A |
| 4) All tax documents for the year::<br>1098, 1099A, 1099B, 1099C, 1099DIV, 1099G, 1099INT, 1099LTC, 1099MISC, 1099MSA,<br>1099OID, 1099PATR, 1099R, 1099S and K-1 | Done | N/A |

**BENEFICIARIES: number of beneficiaries** \_\_\_\_\_

1) **Name:** \_\_\_\_\_ **SSN** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**(Circle one) Required or discretionary payment amount \$** \_\_\_\_\_

2) **Name:** \_\_\_\_\_ **SSN** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**(Circle one) Required or discretionary payment amount \$** \_\_\_\_\_

**EXPENSES:**

- Legal Expenses \_\_\_\_\_
- Accounting Expenses \_\_\_\_\_
- Trustee Expenses \_\_\_\_\_
- Other Expense (please list) \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

