storenfinancial

Tax Return Prep

HOW-TO INFORMATION FOR TRUSTS & ESTATES

Thank you for choosing Storen Financial for your tax planning and preparation needs! In order to make your yearly tax requirement easier, we've compiled everything you need into a simple step-by-step process on our website (visit www.storenfinancial.com/tax-season). Here are the highlights...

A) DETERMINE PREFERRED METHOD - OPTIONS:

- Drop Off Program (Submit documents. Pick up and sign completed return at our office.)
- Digital Experience (Upload/download via our Client Portal and sign return digitally.)
- Appointment with Tax Accountant (Submit documents 2 weeks prior and complete return during appointment.)

B) PREPARE DOCUMENTS

- Completed New Trust & Estate Client Packet Forms (Data Sheet, Engagement Letter)
- Legal Copy of Trust or Will for an Estate
- Copy of Prior 2 Years Tax Returns (if applicable)
- Trust & Estate Related Documents (IRS confirmation of tax ID, copy of check register, income and expense statements, balance sheets and bank statements, if applicable)

C) SUBMIT DOCUMENTS - OPTIONS:

- Upload to your secure Storen Financial Client Portal (Please contact us to request access.)
- Drop off documents at our office in Zionsville
- Place documents in one of our secure lockboxes (Located in Brownsburg or Zionsville. See instructions on our website.)

For data security purposes, please do NOT email personal or financial information.

OTHER QUESTIONS / RESOURCES

Have guestions or need to schedule appointment? Contact our team!

Visit www.storenfinancial.com/tax-season for more information...

- New Client Pricing
- FAQs and Helpful Links
- Tools, Forms and Worksheets

Does your investment advisor consider your long-term TAX impact?

Our team of experienced professionals work with you to develop a comprehensive, long-term financial plan that implements customized tax-saving strategies that fit your unique situation.

These strategies not only focus on investments and stock portfolios, but factor in elements such as Medicare, Social Security, legacy planning, and much more.

DID YOU KNOW?

Greg Storen is a long-term member of Ed Slott's Elite IRA Advisor Group, an exclusive organization dedicated to the ongoing study and mastery of constantly changing and complex tax laws impacting your retirement savings.





1120 W Oak St, Suite 200 Zionsville, IN 46077 317.852.7000 Storen@storenfinancial.com



Income Tax Return Engagement Letter

Name(s) on Tax Return	lax year
Thank you for selecting Storen Financial to assist you with tax compliance. This nature and extent of services we will provide.	s letter confirms the terms of our engagement and the
We will prepare your federal, state, and local income tax returns with supporting also perform a limited amount of business accounting and analysis necessary for	
We may ask for clarification of some items, but we will not audit or otherwresponsibility to provide accurate information required for the preparation	
You must keep all documents, canceled checks, receipts, and other data that s be necessary to prove accuracy and completeness of the returns to a taxing au of transactions in the accounts, safeguarding assets, and for the substantial accresponsibility for the tax returns, you should review them carefully before you si	Ithority. Management is responsible for proper recording curacy of the financial records. Because you have final
We must use our judgment in resolving questions where the tax law is unclear, authorities' interpretations of the law and other supportable positions. Pursuant forbidden from signing a tax return unless we have a reasonable belief that a ta than not" probability of being sustained on its merits. Under no circumstances n reasonable basis. You agree to honor our decisions regarding disclosure of tax event you ask us to take a tax position that in our professional judgment will not promulgated, we reserve the right to stop work and shall not be liable to you for services. In addition, you will be liable for payment of any fee incurred to the day	to standards in IRS Circular 230 and IRC 6694, we are ax position taken on the return will have a "more likely may we sign a tax return with a tax position that has no return positions to avoid or mitigate penalties. In the t meet the applicable laws and standards as r any damages that occur as a result of ceasing to render
Currently the IRS and state taxing agencies are aggressive in assessing penalt imposed when taxpayers understate their tax liability. If any tax authority should assessment of additional tax plus interest and/or penalties. You acknowledge the and/or penalty thereon, are your responsibility, and that we assume no liability for	d later contest a position taken, there may be an hat any such understated tax, and any imposed interest
Our work is not intended to benefit or influence any third party, either to obtain a verify third party requests for any information reported on these tax returns. In a procedures designed to detect errors, fraud, or theft. Therefore, our engagement	addition, our engagement does not include any
Your returns may be selected for audit by a taxing authority, or you may receive information or supporting documentation. Any proposed adjustments are subject examination, we may be able to assist you upon request to represent you. Such we would render additional fees based upon the time and expenses required for	ct to certain appeal. Should your returns be selected for h representation would be a separate engagement, and
Our fee for preparation of your tax returns described above will be based upon be filed, as well as the complexity of the work to be performed. All invoices are depends upon the timely delivery, availability, quality, and completeness of the	due and payable upon presentation. In addition, this fee
We retain copies of the records you have supplied to us along with our work pa After three years, our work papers and engagement files may be destroyed. Yo this engagement. Our work papers and files are not a substitute for your record originals.	our original records will be returned to you at the end of
To affirm that this letter correctly summarizes your understanding of the arrange copy of this letter in the space indicated.	ements for this engagement, please sign the enclosed
Signature	Date





Thank you for choosing Storen Financial for your trust and/or estate tax return preparation. Please complete the form below and note that we may need additional information from you (if applicable) such as: legal trust/estate document, IRS confirmation of tax id, trustee and beneficiary information, grantor information, copy of check register, income and expense statements, balance sheets, bank statements or copy of prior tax returns for the past 2 years.

TDI	ICT/	ECT	ATE	INICOL		ION
TRU	JOI/	EOL	AIE	INLOL	CIVIA	IUI

Legal Trust/ Estate Name: Federal ID: Date Trust/Estate Created: Preferred Contact: Attorney Name: Phone: TRUST/ ESTATE MAILING ADDRESS Street City State Zip Trustee/ Executor Name: Email: Email: Is the trustee/executor also a beneficiary (yes or no)? TRUSTEE/ EXECUTOR MAILING ADDRESS Please complete if different from the trust mailing address. Street City State Zip									
Date of Death, if applicable: Preferred Contact: Attorney Name: Phone: TRUST/ ESTATE MAILING ADDRESS Street City State Zip TRUSTEE/ EXECUTOR INFORMATION Trustee/ Executor Name: S\$\text{Reationship to Grantor:} S\$\text{Strong Tax ID}\text{#:} Date of Birth: Email: Phone: Is the trustee/executor also a beneficiary (yes or no)? TRUSTEE/ EXECUTOR MAILING ADDRESS Please complete if different from the trust mailing address.	Legal Trust/ Estate Name:								
Created: Preferred Contact: Attorney Name: Phone: TRUST/ ESTATE MAILING ADDRESS Street City State Zip TRUSTEE/ EXECUTOR INFORMATION Trustee/ Executor Name: SS# or Tax ID#: Date of Birth: Email: Is the trustee/executor also a beneficiary (yes or no)? TRUSTEE/ EXECUTOR MAILING ADDRESS Please complete if different from the trust mailing address.	Federal ID:								
Attorney Name: Phone: TRUST/ ESTATE MAILING ADDRESS Street City State Zip TRUSTEE/ EXECUTOR INFORMATION Trustee/ Executor Name: S\$# or Tax ID#: Date of Birth: Email: Phone: Is the trustee/executor also a beneficiary (yes or no)? TRUSTEE/ EXECUTOR MAILING ADDRESS Please complete if different from the trust mailing address.		ate			Date of Death, if applicable:				
Street City State Zip TRUSTEE/ EXECUTOR INFORMATION Trustee/ Executor Name: Relationship to Grantor: SS# or Tax ID#: Date of Birth: Email: Phone: Is the trustee/executor also a beneficiary (yes or no)? TRUSTEE/ EXECUTOR MAILING ADDRESS Please complete if different from the trust mailing address.	Preferred Contact:			Phone:					
Street City State Zip TRUSTEE/ EXECUTOR INFORMATION Trustee/ Executor Name: Relationship to Grantor: SS# or Tax ID#: Date of Birth: Email: Phone: Is the trustee/executor also a beneficiary (yes or no)? TRUSTEE/ EXECUTOR MAILING ADDRESS Please complete if different from the trust mailing address.	Attorney Name:		Pho						
Trustee/ Executor Name: SS# or Tax ID#: Email: Is the trustee/executor also a beneficiary (yes or no)? TRUSTEE/ EXECUTOR MAILING ADDRESS Please complete if different from the trust mailing address.	TRUST/ ESTATE MAIL	ING ADDRESS							
Trustee/ Executor Name: SS# or Tax ID#: Date of Birth: Email: Phone: Is the trustee/executor also a beneficiary (yes or no)? TRUSTEE/ EXECUTOR MAILING ADDRESS Please complete if different from the trust mailing address.	Street		City		State		Zip		
Trustee/ Executor Name: SS# or Tax ID#: Date of Birth: Email: Phone: Is the trustee/executor also a beneficiary (yes or no)? TRUSTEE/ EXECUTOR MAILING ADDRESS Please complete if different from the trust mailing address.									
Trustee/ Executor Name: SS# or Tax ID#: Date of Birth: Email: Phone: Is the trustee/executor also a beneficiary (yes or no)? TRUSTEE/ EXECUTOR MAILING ADDRESS Please complete if different from the trust mailing address.	TRUSTEE/ EXECUTOR	INFORMATION	ı						
SS# or Tax ID#: Email: Phone: Is the trustee/executor also a beneficiary (yes or no)? TRUSTEE/ EXECUTOR MAILING ADDRESS Please complete if different from the trust mailing address.									
Email: Phone: Is the trustee/executor also a beneficiary (yes or no)? TRUSTEE/ EXECUTOR MAILING ADDRESS Please complete if different from the trust mailing address.	Trustee/ Executor Name:	Executor Name: Relat			elationship to Grantor:				
Is the trustee/executor also a beneficiary (yes or no)? TRUSTEE/ EXECUTOR MAILING ADDRESS Please complete if different from the trust mailing address.	SS# or Tax ID#:	Date of			of Birth:				
TRUSTEE/ EXECUTOR MAILING ADDRESS Please complete if different from the trust mailing address.	Email:	Phone:							
Please complete if different from the trust mailing address.	Is the trustee/executor also a beneficiary (yes or no)?								
	TRUSTEE/ EXECUTOR	MAILING ADDI	RESS						
Street City State Zip	Please complete if differen	t from the trust ma	iling address.						
	Street		City		State		Zip		



New Trust & Estate Data Sheet

TRUSTEE/ ESTATE BENEFICIARIES

Name:				Date of Birth:			
SS# or Tax ID#:				% of Ownership:			
Tax Entity (individual, Ilc, s corp, trust, other):							
			1				
Street		City			State		Zip
Name:				Date of	Birth:		
SS# or Tax ID#:				% of Ov	vnership:		
Tax Entity (individ	ual, llc, s corp, trust, other	·):					
							
Street		City		State			Zip
Name:	Date of Birth:						
SS# or Tax ID#:				% of Ownership:			
Tax Entity (individual, Ilc, s corp, trust, other):							
Street	City		State			Zip	
Name:				Date of Birth:			
SS# or Tax ID#:				% of Ownership:			
Tax Entity (individual, Ilc, s corp, trust, other):							
Street	City			State			Zip