

## Trust Transmittal Checklist

### LIMITED PARTNERSHIP INTERESTS

**NOTE:** THE FOLLOWING ITEMS MUST BE RECEIVED IN ORDER TO PROCESS THE TRUST'S FIRST DISTRIBUTION.

Return this completed checklist with the listed documents to Gift Administration Services Inc., 6100 W. 96th St., Suite 100, Indianapolis, IN 46278. For further assistance, contact a Trust Coordinator at 800-843-7997.

**NOTE:** The donor(s) is responsible for filing gift tax Form 8283.

### Trust Documentation

- Executed trust document with COMPLETED and signed *Schedule A*
- Executed *Administration Agreement* with all dates and signatures completed
- Executed *Contribution Agreement* (if applicable)
- Limited Power of Attorney* -- signed and notarized
- Copy of Form SS-4 if you have applied for the Employer Identification Number (EIN) for the trust **or Form 2848 and Form SS-4 signed by trustee(s) for Gift Administration to apply for EIN**
- Completed *Renaissance Service Evaluation Questionnaire*

### Asset Information

- Gift Administration Services' *Contribution Information Form* signed by the donor(s) complete with acquisition date and original cost basis
- Copy of certificate endorsed to the Trustee\* in the name of the trust or other evidence of the date the asset was delivered to the trustee to verify the contribution date (the date the asset was unconditionally delivered to the Trustee\* within the meaning of Reg. §1.170A-1(b)) (This date should be noted in the designated area of the *Contribution Information Form*)
- Written information as to the fair market value of the property as of the date of contribution
- Names and addresses of all institutions holding trust assets (Photocopies of new account applications are preferred)
- Account(s) from which Gift Administration Services Inc. should make its requests for the trust distribution and administration fees (This information should include the account number, address, contact person, phone and fax number)
- Copy of annuity application and check payable to the insurance carrier (if applicable)
- IST-deferred letter for net income trusts attempting to defer income (if applicable)

**NOTE:** All asset accounts MUST reflect Gift Administration Services Inc. as the registered address of record. Gift Administration must receive all trust account statements produced from trust inception. A sample follows:

**Trustee (or IST)**  
**John & Mary Doe CRT U/A 01/01/00**  
**c/o Gift Administration Services, Inc.**  
**6100 W. 96th St., Suite 100**  
**Indianapolis, IN 46278**

\*Or Independent Special Trustee if required by the document