



# ZACHARIA BROWN & BRATKOVICH, PC

Estate Planning & Elder Law Attorneys  
McMurray | Delmont | Cranberry Twp, PA  
724-942-6200 | ZacBrownLaw.com

## ESTATE & TRUST ADMINISTRATION — CLIENT INTAKE

Please complete this form and return it to our office before your appointment.  
Do your best — estimates are fine. We will review everything together at your appointment.

### TYPE OF MATTER (Check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Estate Administration — Probate (with or without a Will)           | <input type="checkbox"/> Trust Administration                 |
| <input type="checkbox"/> Estate Administration — Non-Probate (assets pass outside of court) | <input type="checkbox"/> Out-of-State Property Administration |

PA County of Administration:

Register of Wills File #:

### ABOUT THE PERSON WHO PASSED AWAY (Decedent)

Full Legal Name				
Date of Birth	Date of Death	Age at Death	Last 4 of SSN	County of Residence
Last Address				
Marital Status at Death		Surviving Spouse Name		

### LEGAL DOCUMENTS

Last Will & Testament — Date:	
Codicil(s) to Will — Date(s):	
Revocable Living Trust — Date:	
Irrevocable Trust — Date:	
Other Governing Document:	

Where are original documents kept?

### PERSON IN CHARGE (Executor / Trustee / Administrator)

Executor / Personal Representative		Ph.	
Successor Executor		Ph.	
Trustee		Ph.	
Successor Trustee		Ph.	
Administrator (no Will)		Ph.	

Address:			
Email:		Relationship to Decedent:	

### ADDITIONAL CONTACT (if different)

Name	Relationship	Phone
Email		

### FINANCIAL ADVISOR & ACCOUNTANT / CPA

Financial Advisor	Firm	Ph.
CPA / Accountant	Firm	Ph.





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List everything owned. Estimates are fine. Attach extra sheets if needed.

### REAL ESTATE

Property Address / Description	Owner(s) on Deed	How Titled (Joint/Sole/TOD)	Est. Value	Mortgage / Lien	In Trust?
					<input type="checkbox"/> Y <input type="checkbox"/> N
					<input type="checkbox"/> Y <input type="checkbox"/> N
					<input type="checkbox"/> Y <input type="checkbox"/> N
					<input type="checkbox"/> Y <input type="checkbox"/> N
					<input type="checkbox"/> Y <input type="checkbox"/> N

### BANK ACCOUNTS

Institution	Account Type	Account # (Last 4)	Owner(s)	Beneficiary / POD	Est. Value

### INVESTMENTS & RETIREMENT ACCOUNTS

Institution / Company	Account Type (IRA, 401k, etc.)	Account # (Last 4)	Owner	Beneficiary	Est. Value

### LIFE INSURANCE

Insurance Company	Policy #	Policy Owner	Insured	Beneficiary	Death Benefit

### VEHICLES & PERSONAL PROPERTY

Description / Make & Model	Year	Title Owner	Est. Value	Lien?	Jointly Held?



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### DEBTS & BILLS

Creditor / Description	Debt Type	Account #	Balance Owed	Secured?
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

### FUNERAL & BURIAL EXPENSES

Funeral Home / Cemetery	Pre-Paid?	Amount Paid / Owed	Paid By	Receipt?
	<input type="checkbox"/> Y <input type="checkbox"/> N			<input type="checkbox"/> Y <input type="checkbox"/> N
	<input type="checkbox"/> Y <input type="checkbox"/> N			<input type="checkbox"/> Y <input type="checkbox"/> N

### PENNSYLVANIA INHERITANCE TAX

#### Pennsylvania Inheritance Tax Rates — Reference Only (your attorney will calculate the exact amount)

- Surviving Spouse / Charitable Organizations: 0%
- Lineal Heirs (children, grandchildren, parents): 4.5%
- Siblings: 12%
- All Other Beneficiaries: 15%
- Transfers to certain family farms / small businesses: 0% (if qualified)

Answer as best you can — your attorney will review everything with you.

Were gifts of money or property made within 1 year of death?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were assets transferred when the person knew they were seriously ill?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did the person own any property jointly with another person?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were any assets placed into an irrevocable trust?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has a PA Inheritance Tax return already been filed?	<input type="checkbox"/> Yes <input type="checkbox"/> No

### BUSINESS INTERESTS

Business Name	Entity Type (LLC, Corp, etc.)	Ownership %	Est. Value	Buy-Sell Agreement?	Other Owner(s)
				<input type="checkbox"/> Y <input type="checkbox"/> N	
				<input type="checkbox"/> Y <input type="checkbox"/> N	
				<input type="checkbox"/> Y <input type="checkbox"/> N	



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### DOCUMENTS — Check all that apply

- Original Will / Codicil(s)
- Original Trust Agreement
- Death Certificate (certified)
- Deed(s) to Real Property
- Recent Bank / Investment Statements
- Life Insurance Policies
- Vehicle Titles
- Prior Tax Returns (Federal & PA)
- Funeral / Burial Receipt
- Business / Operating Agreements
- Retirement Account Statements
- Annuity Contracts
- Prior PA Inheritance Tax Return
- Pre-Nuptial / Post-Nuptial Agreement
- Promissory Notes / Loans Owed to Decedent

### STATUS CHECKLIST — Yes or No

Has the estate been filed at the Register of Wills?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have Letters Testamentary or Letters of Administration been issued?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has a Notice to Creditors been published in a newspaper?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has a PA Inheritance Tax return been filed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has a Federal Estate Tax return (Form 706) been filed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have the final income tax returns been filed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any pending lawsuits or claims against the estate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are there any assets located outside of Pennsylvania?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Was the person receiving Medicaid at the time of death?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have any assets already been distributed to beneficiaries?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

### YOUR QUESTIONS & CONCERNS

### HOW DID YOU HEAR ABOUT US?

- KDKA Radio
  - IN Magazine
  - Friend
  - Family
  - Financial Advisor
  - Seminar or Webinar
  - Web Search
  - Other:
- Referred by (Name):

Signature of Executor / Trustee / Contact \_\_\_\_\_

Printed Name \_\_\_\_\_

Date \_\_\_\_\_