



**KNOX
LAW**

Estate Planning • Elder Law • Guardianships • Medicaid

16 Towne Place Drive, Suite 100 Hendersonville, NC 28792

Phone: 828.513.1600 Fax: 828.513.1616

cknoxelderlaw.com

CONFIDENTIAL ESTATE ADMINISTRATION WORKSHEET

The purpose of this Estate Administration Worksheet is to help prepare you for our upcoming meeting and to provide us with important personal and asset information concerning the estate you are administering. This information is needed to properly advise you regarding the estate administration process. Please complete and return prior to our meeting. If additional space is needed for any subject, please add extra sheets or continue on the reverse of any page. All information provided here will be kept confidential and is part of your potential attorney-client relationship with The Law Office of Caroline Knox, PLLC. Any disclosure of this information to third parties must be expressly authorized by you prior to said disclosure.

Please return this form with the following items at our meeting:

- Death Certificate
- Original Last Will and Testament (or location of it)
- Original trust agreements (or locations) of any trusts that the decedent was the creator, trustee, or beneficiary

Other information that will be needed during the course of the estate administration include:

- Prior 3 years of tax returns
- Copies of most recent financial statements
- Copies of signature cards for bank accounts
- Records showing beneficiary designations for retirement plans, IRA accounts, life insurance policies, etc.
- Copies of deeds to any real estate

DISCLAIMER: *Contacting The Law Office of Caroline Knox, PLLC does NOT establish an attorney-client relationship. The attorney-client relationship is created only after our firm has the opportunity to ensure no conflicts of interest exist and you are notified that our firm has agreed to represent you for your legal matter(s).*

TELL US ABOUT THE TRUST AND/OR ESTATE YOU ARE ADMINISTERING

Full Legal Name of Decedent (per Social Security Card)

Name as Listed on Last Will and Testament

Did the decedent have a Last Will and Testament?

YES NO

Date of Last Will and Testament (if applicable)

Was the decedent a client of Attorney Caroline T. Knox?

YES NO

Home Address

Mailing Address (if different from home address)

State/County of Residence

Place of Death (if different than state/county of residence)

SSN

Date of Birth

Date of Death

Veteran Status

(Former) Employer

Former Occupation

IF DECEDENT WAS MARRIED, PLEASE COMPLETE THE FOLLOWING SECTION

Spouse's Name

Date and place of marriage

Did the decedent have a pre- or post- nuptial agreement?

Was the decedent previously married?

If yes, name of former spouse

If yes, date and place of termination

Was marriage terminated by death or divorce?

Did the decedent have support obligations to or from a former spouse (e.g. child support, alimony)?

TELL US ABOUT YOU—Executor/Administrator/Trustee's Information

Full Name

SSN

Mailing Address

State/County of Residence

Email Address

Relationship to Decedent

Are you the primary Executor/Trustee named in the Will/Trust?

Home Phone

Work Phone

Cell Phone

Was the decedent the creator, trustee, or beneficiary of a trust?

YES NO *(if yes, please provide a copy of the trust and all amendments)*

Did the decedent have a safe deposit box?

YES NO *(if yes, please indicate the name of the bank and location of key)*

Was the decedent a recipient of SSI and/or Medicaid at the time of death?

YES NO *(if yes, please indicate which programs)*

Did the decedent own any rental properties?

YES NO *(if yes, please provide information about those properties)*

Did the decedent own any business interests?

YES NO *(if yes, provide operating agreements, bylaws, buy/sell agreements, etc.)*

Do you anticipate that anyone will challenge the decedent's Will?

YES NO *(if yes, please tell us more about that information at our meeting)*

TELL US ABOUT THE ESTATE/TRUST ASSETS

REAL ESTATE

(Note: If real estate is owned by a company, such as corporation, partnership, or LLC, then do not list it here. Instead, include the real estate value as part of the company's value as listed in the "closely-held business" section.)

| Property Description | Ownership Type (joint with another owner?) | Mortgage Amount | Estimated Market Value |
|----------------------|-----------------------------------------------|-----------------|------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

BROKERAGE ACCOUNTS

(Note: List IRAs and 401(k)s under the "retirement benefits" table.)

| Brokerage Company | Ownership Type (joint with another owner?) | Date of Death Value | Transfer on Death/Beneficiary Designation |
|-------------------|-----------------------------------------------|---------------------|-------------------------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

PENSION, SEVERANCE, OR OTHER INCOME DUE DECEDENT?

| Source/Payor | Description | Amount |
|--------------|-------------|--------|
| | | |
| | | |
| | | |

**CLOSELY-HELD BUSINESS, INCLUDING CORPORATION, PARTNERSHIP, OR LLC ,
AND ANY OTHER STOCKS AND BONDS HELD OUTSIDE BROKERAGE ACCOUNTS**
(if yes, provide operating agreements, bylaws, buy/sell agreements, etc.)

| Name of Corporation, Partnership, or LLC | Ownership Percentage | Estimated Market Value |
|---------------------------------------------|----------------------|------------------------|
| | | |
| | | |
| | | |
| | | |

BANK ACCOUNTS

(Note: List IRAs and 401(k)s under the "retirement benefits" table.)

| Name of Bank | Ownership Type (joint with another owner?) | Type of Account (checking, savings, etc.) | Date of Death Balance | Pay on Death/Beneficiary Designation |
|--------------|-----------------------------------------------|-------------------------------------------------|--------------------------|--------------------------------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Notes And Other Money Owed To Decedent

(insurance premium refunds, tax refunds, unclaimed property, etc.)

| Debtor | Ownership Type (Joint With Another Owner?) | BALANCE |
|--------|-----------------------------------------------|---------|
| | | |
| | | |
| | | |

| LIFE INSURANCE (please provide the beneficiary information for each policy) | | | | | |
|---------------------------------------------------------------------------------------|--------------|---------------|---------------|---------------------|------------------------|
| Company | Policy Owner | Term or Whole | Death Benefit | Primary Beneficiary | Contingent Beneficiary |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| IRA, 401(k) & RETIREMENT ACCOUNTS (Profit Sharing, 403(b), SEP, etc.) | | | | | |
|----------------------------------------------------------------------------------|-----------------|-----------------------------------------------|------------------------|---------------------|------------------------|
| Company | Type of Account | Ownership Type (joint with another owner?) | Date of Death Value | Primary Beneficiary | Contingent Beneficiary |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| TELL US ABOUT THE ESTATE/TRUST TANGIBLE PERSONAL PROPERTY (specific items of value such as vehicles, artwork, jewelry, family heirlooms, etc.) | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-----------------|
| Description (vehicle, artwork, etc.) | Year/Make/Model/Additional Information (if applicable) | Estimated Value |
| | | |
| | | |
| | | |
| | | |

