**MATTHEW P LINCOLN, EA**
**PATRICE R LINCOLN, EA**

**EXECUTORS NAME:** _____

**EMAIL ADDRESS:** _____

**(301) 371-5104          FAX (888) 897-4080**
**PATRICELINCOLNSOFFICE@GMAIL.COM**

**PHONE NUMBER:** _____

### WHAT TO BRING TO ESTATE CHECKLIST-INFO NEEDED TO COMPLETE RETURN

Decedents Name:_____

Decedents SSN:_____

Decedents most recent 2 years Tax Returns

Date of Death:_____

Date of Birth:_____

If necessary:

Estate EIN: _____

Trust EIN: _____

Estate EIN: rec'd from _____ on _____

Trust  EIN: rec'd from _____ on _____

1st appointment:

_____  1.  Copy of the will

_____  2.  Copy of Trust Documents if any

_____  3.  Copy of the Death Certificate (if available-we will need it eventually)

_____  4.  Copy of Court Appointment of personal representative or executor.

_____  5.  Please bring a copy of prior year Federal and State Returns, if not prepared by us.

_____  6.  List of questions or concerns
            (could deal with a wide range of topics: pensions, life insurance, Property transfer(real), Tax projections for
            beneficiaries, what do I do now to settle the estate, etc.)

At this appointment we will establish a timeline that will include each of the following:

| TYPE OF FILING | DUE DATE | EXTENDED DUE DATE | DATE FILED | REMARKS |
|---|---|---|---|---|
| Information Report | | | | |
| Inventory Report | | | | |
| 1st Accounting | | | | |
| Final Accounting | | | | |
| Final 1040 | | | | |
| Estate Tax Return | | | | |
| Estate Income Tax Return | | | | |
| Trust u/w Returns | | | | |

Also, we will need:

_____  1.  A list of residual beneficiaries, including their name, address, & SSN and Date of Birth

_____  2.  Estate check register and/or the Estate Bank Statements

_____  3.  List of unreimbursed expenses paid by the executor(s) or others paid on behalf of the Estate