

**COMMONWEALTH OF VIRGINIA
PROBATE TAX RETURN**

This return must be filed at the time a will is offered for probate or the grant of administration is sought when the estate shall exceed \$15,000 in value at the time of death of the decedent. See Section 58.1-1714 of the Code of Virginia of 1950 as amended.

IN THE CIRCUIT COURT OF THE CITY/COUNTY OF: _____

Name of Decedent: _____

His/Her Last Place of Residence: _____

Date of Decedent's Death: _____

Decedent's Social Security No.: _____

STATE THE VALUE OF DECEDENT'S ESTATE AS OF DATE OF DEATH:

a. Personal Property (*Estimated Value*)\$ _____

b. Real Property Located in Virginia (*Appraised Value*)\$ _____

TOTAL VALUE OF DECEDENT'S ESTATE\$ _____

I (We) the undersigned, declare under penalty of law that I (we) have examined this return and to the best of my (our) belief it is a true, correct, and complete return.

Given under my (our) hand this _____ day of _____.

*Signature of Person(s) offering will for Probate
or seeking grant of Administration*

Street Address

City, State and ZIP code

State Tax \$ _____

Local Tax \$ _____

Transfer \$ _____

Clerk's fees \$ _____

TOTAL \$ _____

Form PT-1

VA DEPT OF TAXATION 8101003
REV 6/03