

REV-516

BUREAU OF INDIVIDUAL TAXES
PO BOX 280601
HARRISBURG, PA 17128-0601

NOTICE OF TRANSFER
(FOR STOCKS, BONDS, SECURITIES OR
SECURITY ACCOUNTS HELD IN
BENEFICIARY FORM)

OFFICIAL USE ONLY

File Number

SECTION I DECEDENT INFORMATION

Decedent's Last Name Suffix Decedent's First Name MI
Social Security Number Date of Death (MMDDYYYY) County
Decedent's Street Address
City State ZIP Code

SECTION II CORPORATION, FINANCIAL INSTITUTION OR BROKER INFORMATION

Name of Corporation, Financial Institution, Broker or Similar Entity Telephone Number
Firm's Street Address
City State ZIP Code

SECTION III ACCOUNT INFORMATION

Account Title
Account Number Number of Beneficiaries Account Balance
(Include accrued interest through date of death)

Account Type:

Capital Stock Registered Bond Security Account Other _____

SECTION IV RECIPIENT OF LETTER/PROOF OF NOTIFICATION

Recipient's Last Name Suffix Recipient's First Name MI
Recipient's Street Address
City State ZIP Code



REV-516 (EX) MOD 05-19 (FI)

SECTION V PREPARER INFORMATION (Complete if Name and Address is different than Recipient information.)

Preparer's Last Name Suffix Preparer's First Name MI

Preparer's Street Address

City State ZIP Code

Preparer Signature Date (MMDDYYYY) Daytime Telephone Number

SECTION VI BENEFICIARY INFORMATION (List additional beneficiaries on Page 3.)

Beneficiary's Last Name Suffix Beneficiary's First Name MI

Relationship to Decedent Beneficiary's Social Security Number

Beneficiary's Street Address Percent Taxable

City State ZIP Code

Beneficiary's Last Name Suffix Beneficiary's First Name MI

Relationship to Decedent Beneficiary's Social Security Number

Beneficiary's Street Address Percent Taxable

City State ZIP Code

Beneficiary's Last Name Suffix Beneficiary's First Name MI

Relationship to Decedent Beneficiary's Social Security Number

Beneficiary's Street Address Percent Taxable

City State ZIP Code



REV-516 (EX) MOD 05-19 (FI)

SECTION VI cont. BENEFICIARY INFORMATION (Attach copies of page 3 to list additional beneficiaries.)

Beneficiary's Last Name	Suffix	Beneficiary's First Name	MI
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Relationship to Decedent	Beneficiary's Social Security Number
<input type="text"/>	<input type="text"/>

Beneficiary's Street Address	Percent Taxable
<input type="text"/>	<input type="text"/>

City	State	ZIP Code
<input type="text"/>	<input type="text"/>	<input type="text"/>

Beneficiary's Last Name	Suffix	Beneficiary's First Name	MI
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Relationship to Decedent	Beneficiary's Social Security Number
<input type="text"/>	<input type="text"/>

Beneficiary's Street Address	Percent Taxable
<input type="text"/>	<input type="text"/>

City	State	ZIP Code
<input type="text"/>	<input type="text"/>	<input type="text"/>

Beneficiary's Last Name	Suffix	Beneficiary's First Name	MI
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Relationship to Decedent	Beneficiary's Social Security Number
<input type="text"/>	<input type="text"/>

Beneficiary's Street Address	Percent Taxable
<input type="text"/>	<input type="text"/>

City	State	ZIP Code
<input type="text"/>	<input type="text"/>	<input type="text"/>

Beneficiary's Last Name	Suffix	Beneficiary's First Name	MI
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Relationship to Decedent	Beneficiary's Social Security Number
<input type="text"/>	<input type="text"/>

Beneficiary's Street Address	Percent Taxable
<input type="text"/>	<input type="text"/>

City	State	ZIP Code
<input type="text"/>	<input type="text"/>	<input type="text"/>





pennsylvania
DEPARTMENT OF REVENUE

Instructions for REV-516

Notice of Transfer

REV-516 IN (EX) 05-19

GENERAL INFORMATION

PURPOSE

Section 6411 of the Probate, Estates and Fiduciaries Code (Title 20, Chapter 64, Pennsylvania Consolidated Statutes) sets forth the requirement of reporting to the Department of Revenue the transfer of securities.

WHO MUST FILE

Corporations, financial institutions, brokers, or similar entities are required to report. **The beneficiary, trustee or representative of the estate may also notify the department if all the necessary information is available to them.**

WHAT TO REPORT

Capital stock, registered bonds, a security or a security account which are held as follows:

- Held as sole owner by the decedent with a sole beneficiary clause which controls distribution at the death of the decedent.
- Held as a sole owner by the decedent with a primary and secondary (contingent) beneficiaries clause which controls distribution at the death of the decedent.

INSTRUCTIONS

If reporting more than one account, use a separate form for reporting each account. If there is a main account made up of sub-accounts, only report the main account number and total value including the value of all sub-accounts. Assets must be reported at their value as of the decedent's date of death, including any accrued interest not yet credited or any dividend earned but not issued as of the date of death. If available, include a copy of the valuation report.

Once a review of the form is complete, an acknowledgment letter, confirming notification of the asset to the department, will be issued to the person or entity reported in Section IV. The letter may be used to demonstrate compliance of section 6411. To ensure timely processing, each section of this form must be completed as instructed below.

LINE INSTRUCTIONS

SECTION I

Enter the information for the decedent associated with the asset being reported.

SECTION II

Enter the information of the entity that maintains the account.

SECTION III

Enter the information for the asset being reported.

Account Title: Enter the name or title of the account.

Account Number: Enter the identifying number of the account being reported.

Number of Beneficiaries: Enter the total number of beneficiaries of the account being reported.

Account Balance: Enter the value of the account including any accrued interest not yet credited or any dividend earned but not issued as of the date of death.

Account Type: Select the type of account that most closely describes the account being reported. If "Other" is used, enter the type of account in the space provided.

SECTION IV

Enter the information for the person or entity who should receive the acknowledgment letter that the asset has been reported to the department.

SECTION V

Enter the name and address of the person preparing this notice if the person is different from the person in Section IV. The preparer must sign and date the form and provide a daytime telephone number.

SECTION VI

Enter the information for each beneficiary of the account being reported. If additional beneficiary space is needed, use a separate sheet of Page 3 of this form.

Mail completed form to:

**PENNSYLVANIA DEPARTMENT OF REVENUE
BUREAU OF INDIVIDUAL TAXES
INHERITANCE TAX DIVISION
PO BOX 280601
HARRISBURG PA 17128-0601**