

Mail completed form to: NH Attorney General's Office Attn: Charitable Trusts Unit One Granite Place South Concord, NH 03301

| FORM NHCT-17 NOTICE AS TO ESTATES WITH CHARITABLE BEQUEST | | | | | | |
|---|-----------------------|---------------|--|-----|--|--|
| ESTATE INFORMATION | I | | | | | |
| Is this an initial notice or d | istribution notice? | | | | | |
| ☐ Initial Notice | □ Distribution Notice | | | | | |
| DECEDENT INFORMAT | ION | | | | | |
| Name of Decedent | | | | | | |
| Decedent's Last Known Address | | | | | | |
| City | | State | | Zip | | |
| ADMINISTRATOR INFO | RMATION | | | | | |
| Administrator's Address | | | | | | |
| City | | State | | Zip | | |
| Phone Number | | Email Address | | | | |
| CONTACT INFORMATI | | trator) | | | | |
| Name of Attorney or Other Conta | Ci | | | | | |
| Contact Address | | | | | | |
| City | | State | | Zip | | |

Telephone Number

Email Address

COURT FILINGS

| Court Docket No. | | | | |
|---|-------------------------------|--|------------------|--|
| Name of Court (select one) | | | | |
| ☐ 1 st Circuit – Probate – Lancaster | | ☐ 6 th Circuit – Probate – Concord | | |
| ☐ 2 nd Circuit – Probate – Haverhill | | □ 7 th Circuit – Probate – Dover | | |
| ☐ 3 rd Circuit – Probate – Ossipee | | □ 8 th Circuit – Probate – Keene | | |
| ☐ 4 th Circuit – Probate – Laconia | | □ 9 th Circuit – Probate – Nashua | | |
| ☐ 5 th Circuit – Probate – Newport | h Circuit – Probate – Newport | | | |
| CHARITABLE BENEFICIARIES | , | | | |
| Name of Charity Amount of Bequest | | Please indicate if part or all of the rest, residue and remainder of the estate is left to charity | | |
| | | | | |
| | | | | |
| | | | | |
| Is a Testamentary Trust created? | | ☐ Yes | □ No | |
| ATTACHMENTS | | | | |
| Initial Notice | | | | |
| ☐ Attach copy of will | | | | |
| ☐ Attach copy of Petition for E | Estate Administration | | | |
| Distribution Notice | | | | |
| ☐ Attach copy of final probate ac | • | | | |
| ☐ Attach copy of receipt(s) from | | | | |
| ☐ Complete table below <i>(use extra</i> | a paper, if necessary, to li | st all beneficiaries) | | |
| Charitable Benefic | ciary | Distribution Amount | Date Distributed | |
| | | | | |
| | | | | |

Note: if the will creates a charitable trust, and the final distributions to charitable beneficiaries will not be made within one (1) year from the inception of the trustee's power, the trust shall register with the Charitable Trusts Unit by filing Form NHCT-11: Application for Registration.

Signature of Administrator Date Name of Administrator