

ESTATE PLANNING WORKSHEET

I. PERSONAL INFORMATION:

- Full Name(s): _____ Date of Birth: _____
- Phone (Home): _____ Work: _____
- Address: _____
- Email: _____ County of Residence: _____
- Date of Marriage: _____
- Occupation: Husband _____ Wife _____
- US Citizen: Husband: Y__N__ Wife: Y__N__
- Have you ever filed a gift tax return (Federal or State)? _____
- Do you currently have a will or trust? Will: Y__N__
- If married, do you have a prenuptial agreement? Y__N__
- Trust: Y__N__ (If yes, please provide a copy.)
- Have you ever lived in a community property state while married (AK, AZ, CA, ID, LA, NV, NM, TX, WA, WI)? Y__N__ If yes, where, when, and for how many years? _____
- Describe your health and life expectancy: _____

II. CHILDREN (by blood or adoption) Name and DOB by Husband, Wife, or Joint: H/W/J Married # of their children

Children (Names):

- please indicate: His child/Her child/Our child
- Do you plan to have more children? Y__N__
- Age
- Adopted Children:
- Total No. of Grandchildren: _____
- Age Range of Grandchildren:
- Are your children and grandchildren in good health? _____
- Do any of your children have taxable estates (over \$5,000,000)? _____
- Are you currently supporting anyone other than your spouse and you? Y__N__ If so, whom?

After the death of both you and your spouse:

- Guardian: 1st: _____ 2nd: _____
- Trustee: 1st: _____ 2nd: _____
- Personal Representative: Your Spouse? Y N (Please name alternates below if your spouse cannot serve.)
- His 1st Alternate: _____
- Her 1st Alt: _____
- His 2nd Alternate: _____
- Her 2nd Alt: _____

Ownership of assets can determine to whom assets will pass upon your death.

- Retirement Plans (including IRAs): Total Value: \$ _____
- Cash/Checking Accounts/Savings Accounts/Money Market Accounts/Investment Accounts:

- LIFE Insurance and Annuity Policies: Total Value: \$ _____

In the event of the simultaneous death of you, your spouse, and your children:

- (A) % or \$ to (charitable bequest)
- (B) % or \$ to (charitable bequest)
- (C) % or \$ to (charitable bequest)
- (D) % to B per stirpes LJ per capita
- (E) % to per stirpes U per capita
- (F) % to 0 per stirpes Q per capita
- (G) % to Q per stirpes D per capita
- Is your individual gross estate valued at over \$12,060,000, or \$24,1200,000 jointly? Y N Q Q
- If you are married, is your real property titled as Joint Tenants with Right of Survivorship? (Please provide a copy of your Warranty Deed so we may review this with you.) Q Q
- Do you own real estate in any state other than your state of residence? Y N Q Q
- Do you have an ownership interest in a business? Y N (If YES, please attach description or evidence of interest). 0 0
- Do you have any existing Will(s) or Trust Agreements? Y N (If YES, please provide a copy of each document so that we may properly coordinate with, amend, or replace your existing plan.) Q Q

III. GUARDIANS, FIDUCIARIES, AND ADVANCED CARE PLAN

The executor, trustee, and guardian have extensive duties, the most important of which will be noted. Although it may be an honor to be named, it also involves significant work for which the person or entity named is entitled to compensation. In selecting a person or entity to serve, give thought to the position's duties and responsibilities, the person's experience and ability, and the time that will be involved to properly execute the assigned duties.

A. EXECUTOR

- My initial executor is ___ my surviving spouse ___ other: _____ (Husband)
- My successor executor(s) is the following: _____
- EXECUTOR. My initial executor is ___ my surviving spouse ___ other: _____ (Wife)
- My successor executor(s) is the following: _____

Note: The Executor must do the following:

- Identify, collect and value each asset and debt of the decedent;
- Invest the assets to produce income and growth;
- Verify each claimed debt before paying the debt;
- Mediate disputes among beneficiaries over disputed items;
- Divide and distribute all personal property among persons designated;
- Prepare and file US and State income, gift and death tax returns and arrange to have money to pay any taxes due. Death tax returns are due nine (9) months from the date of death.

B. GUARDIAN

- If you have minor children, whom would you want to have serve as their guardians (guardian of the person, not their money) if your spouse and/or you are deceased? _____
- Second choice: _____ Only if still married? _____

Note: The person or persons to be appointed as guardian are persons who will raise your child or children in the manner you would want them raised. Since the money for your child or children can be put in trust, the guardians of the person of the child or children do not necessarily have to be a good money manager. If you name a couple, please indicate if you are comfortable with only one of them serving if only one of them can serve. Before naming anyone, it is recommended that you speak to the person whom you are considering to ensure that the person is willing to serve.

C. POWER OF ATTORNEY FOR FINANCIAL MATTERS

- Husband: In the event that you become incapacitated during your lifetime, whom would you want to manage your financial affairs? Surviving spouse is first choice. List other choices in order of priority: _____
- Wife: In the event that you become incapacitated during your lifetime, whom would you want to manage your financial affairs? Surviving spouse is first choice. List other choices in order of priority: _____

D. POWER OF ATTORNEY FOR HEALTHCARE

- Husband: In the event that you become incapacitated during your lifetime, whom would you want to make health care decisions for you? Surviving spouse is first choice. List other choices in order of priority: _____
- Wife: In the event that you become incapacitated during your lifetime, whom would you want to make health care decisions for you? Surviving spouse is first choice. List other choices in order of priority: _____

E. ADVANCE CARE PLAN

- Would you like to execute an Advance Care Plan (provides guidance on the type and scope of medical treatment you may or may not want)? Y/N

IV. ESTATE PLAN

Specific Distributions: Is there any specific property (furniture, family heirloom, bank account) or specific dollar amount that you wish to leave to a particular person before making any other distributions from your estate? Y Q_ N Q If so, please list property and person: (if additional space is needed, please write on the back of this sheet)

Other Distributions: Household goods to: spouse __ _

Remaining Property:

To my spouse first, if he/she survives me
surviving children __ _

To my children equally and outright (not held in trust)

To my children in trust

If a beneficiary predeceases you, what would you like to have happen to the property?

other ___

To beneficiary's children ___ Divided equally among surviving beneficiaries ___

Do you wish to make any bequests to a charity or your church? Y .Q_ N Q If so, describe what you would like to bequest: _____

Ultimate beneficiaries: If all beneficiaries and descendants listed above predecease you:

To my heirs (including remote relatives) only ___

50% to heirs on each spouse's side of family ___

Other (please specify) _____

KEY QUESTIONS

- Is there anyone you would like to inherit from your estate who is financially irresponsible or has a disability that would make it difficult for them to manage their inheritance?

- Is there anyone you would like to inherit from your estate currently receiving disability or other governmental benefits? _____
- Trustee: Whom do you wish to manage any trusts created in your will?
 -
 - Surviving spouse is first choice:
 - List other choices in order of priority: _____

V. FINANCIAL INFORMATION:

- What is your annual household income? (H) _____ (W) _____
- What is the source of your income (i.e., salary, retirement, passive, etc.)? Y__N__.
- If so, describe anticipated change: _____
- Do you view your assets as: equally owned by both spouses separate property

If a Revocable Living Trust is requested, please also provide the following:

- (1) a copy of the recorded Warranty Deed and tax identification number for all Real Estate in which you have a personal ownership interest, including your residence and any timeshare interest(s) you own (the latest tax bill(s) will have the ID number for each property if it is not published on the recorded deed);
- (2) evidence of any promissory notes or recorded mortgages payable to you;
- (3) evidence of interest(s) you have in any business or partnership.

NOTES/ADDITIONAL INFORMATION/QUESTIONS:

- Please attach additional sheets as necessary to provide all the information requested.