

Brita A. Long



Attorney at Law, LLC

Estate Planning, Probate, & Trust Administration

Leave a legacy, not a mess

ESTATE PLANNING WORKSHEET

This organizer will assist us in designing an estate plan that meets your goals.
Please return the completed worksheet to our office at least a week before your appointment.

PLEASE READ BEFORE COMPLETING THIS FORM!!

This is a fillable PDF which means that you can type directly into the form and choose from predetermined fields. You may also print the form and complete it by hand. Please follow the instructions below based on how you will complete the form

IF COMPLETING THE FORM ON A COMPUTER:

NOTE: You must complete the form in one session, or leave the form open on your computer in between sessions. You cannot save the form and have it 'save' your data.

- Complete the form to the best of your abilities
- Scroll back to the cover page (this page)
- Click on 'Submit by Email' button at the top of the page.
- Follow directions. Form will be submitted to our office.

If you would like a hardcopy, or would like to send a hardcopy, please click on the 'Print Form'. For mailing, use the address at the bottom of this page.

IF COMPLETING BY HAND:

- Click on 'PRINT FORM' button at the top of page.
- Complete the form to the best of your abilities.

From here you can either: fax, mail, or send the form via email as an attachment.

Fax: (206) 623-0823

Mailing Address:

Brita A. Long, Attorney at Law, LLC
3201 First Avenue South, Suite 200
Seattle, WA 98134

Email Address: info@britalong.com

All information provided is strictly confidential.

Please note, email communication is not secure and you may wish to leave out sensitive information such as your social security number if emailing the questionnaire.

BASIC INFORMATION

Preferred Method of Contact from our office: Email Phone (Home Mobile Business)

Client's Legal Name _____
(name most often used to title property and accounts)

Also Known As _____
(other name(s) used to title property and accounts)

Prefer to be called _____ Date of Birth _____

SS# _____ US Citizen? Yes No Gender Male Female

Home Address _____ City _____ State _____ Zip _____

County of Residence _____ Home Phone _____

Mobile Phone _____ Business Phone _____

Email Address _____

Employer _____ Position _____

Business Address _____ City _____ State _____ Zip _____

Marital Status: Married Date: _____ Single/Never Married Widowed Divorced Life Partner

If Married:

Preferred Method of Contact from our office: Email Phone (Home Mobile Business)

Client's Spouse or Second Grantor's Legal Name _____
(name most often used to title property and accounts)

Also Known As _____
(other name(s) used to title property and accounts)

Prefer to be called _____ Date of Birth _____

SS# _____ US Citizen? Yes No Gender Male Female

Home Address _____ City _____ State _____ Zip _____

County of Residence _____ Home Phone _____

Mobile Phone _____ Business Phone _____

Business Address _____ City _____ State _____ Zip _____

Email Address _____

Employer _____ Position _____

BENEFICIARIES

Identify all potential individual beneficiaries of your estate. Children and grandchildren are most common, but you may have other individuals in your life who you may wish to be a beneficiary of your estate. Please provide their full legal names, last known city, and date of birth. Use additional pages if necessary.

Under relationship for children – Use “JT” if both spouses are the parents, “1” if client or first listed grantor is the parent, “2” if spouse or second grantor is the parent, “S” if a single parent.

Beneficiary 1 Full Legal Name: _____ Gender Male Female
Relationship to Client: _____ Location (city, state) _____ Date of Birth: _____
 Married Divorced Single Special Needs: Medical Educational Financial

Beneficiary 2 Full Legal Name: _____ Gender Male Female
Relationship to Client: _____ Location (city, state) _____ Date of Birth: _____
 Married Divorced Single Special Needs: Medical Educational Financial

Beneficiary 3 Full Legal Name: _____ Gender Male Female
Relationship to Client: _____ Location (city, state) _____ Date of Birth: _____
 Married Divorced Single Special Needs: Medical Educational Financial

Beneficiary 4 Full Legal Name: _____ Gender Male Female
Relationship to Client: _____ Location (city, state) _____ Date of Birth: _____
 Married Divorced Single Special Needs: Medical Educational Financial

Beneficiary 5 Full Legal Name: _____ Gender Male Female
Relationship to Client: _____ Location (city, state) _____ Date of Birth: _____
 Married Divorced Single Special Needs: Medical Educational Financial

Beneficiary 6 Full Legal Name: _____ Gender Male Female
Relationship to Client: _____ Location (city, state) _____ Date of Birth: _____
 Married Divorced Single Special Needs: Medical Educational Financial

Beneficiary 7 Full Legal Name: _____ Gender Male Female
Relationship to Client: _____ Location (city, state) _____ Date of Birth: _____
 Married Divorced Single Special Needs: Medical Educational Financial

Beneficiary 8 Full Legal Name: _____ Gender Male Female
Relationship to Client: _____ Location (city, state) _____ Date of Birth: _____
 Married Divorced Single Special Needs: Medical Educational Financial

Do you have biological children or family members that are not listed here (disinherited)? Yes No

Are you concerned with any of your beneficiaries’ ability to get along with one another? Yes No

CHARITABLE BENEFICIARIES

Some of our clients desire to direct a portion of their estate toward charities or other non-profit organizations. Whether it is your church, college, club or favorite philanthropy, you may wish to do the same. Take a moment to consider whether you might include a charity in your bequests, and write their information below for further discussion with your attorney.

Name of the Charity or Non-Profit Organization

1. _____ 2. _____
3. _____ 4. _____
-

ADVISORS

Your advisors play a key role in your comprehensive estate plan. We can coordinate with them as much or as little as you prefer. Please fill in name and/or company name below.

Tax Advisor (CPA, EA) _____ Phone: _____

Life Insurance Agent _____ Phone: _____

Financial Advisor _____ Phone: _____

Stock Broker _____ Phone: _____

Banker _____ Phone: _____

Family/Personal Attorney _____ Phone: _____

YOUR PLANNING OBJECTIVES

Please identify the reasons you are considering planning or areas you would like to learn more about (select as many as you wish):

Preserve and Maximize Assets

- By minimizing taxes during your life (income taxes, capital gains taxes, estate taxes on inheritances you expect to receive)
- By minimizing or eliminating estate taxes upon your death (up to 55% of your assets and life insurance benefits)
- By reducing estate administration costs through probate avoidance
- Avoid or limit Medical claims on your assets should you require long-term care
- Ensure that a special needs beneficiary has assets that are protected from government seizure while retaining eligibility for needed services
- Ensure that your family has enough life insurance to provide a comfortable lifestyle no matter what

- By ensuring that your assets are passed to your descendants and not given away to outsiders, such as spouses, creditors or the government

Protect Yourself and Your Spouse

- From malpractice or other creditor claims
- From conservatorship proceedings (aka “living probate”) if you or your partner become incapacitated
- From probate delays and stress upon your death or the death of your partner
- From hospital policies requiring life sustaining procedures when you would rather not endure them
- From healthcare decisions made by people other than those you trust most

Protect Your Children or other Beneficiaries

- From predators who can discover inheritance amounts and target young or vulnerable beneficiaries
- From claims of divorced spouses to take half of your child’s or beneficiary’s inheritance
- From malpractice claims (for beneficiaries in the professions)
- From other creditors’ claims (such as car accident plaintiffs)
- From the stress and delays of the average 16-month process of probate
- From the financial immaturity resulting in a quick loss of an inheritance
- From sharing assets with heirs you would rather disinherit
- From litigation claims by disinherited heirs
- For parents only:* From relatives who would be poor, abusive, or even dangerous guardians, or from foster care
- For parents only:* From acquaintances and relatives who should not be allowed to be alone with your children
- For special needs beneficiary only:* From neglect in the government care system

Take Charge of Your Life ...

- Get your financial life organized
- Have clarity about your life purpose, goals and dreams
- Benefit a charitable organization or activity
- Support a common family goal through coordinated planning
- Have a plan to leave the world a better place
- Leave behind specific intellectual, spiritual, and human assets in addition to your financial assets
- For parents only:* By specifying the values, insights, stories, and experiences you want passed on to your children and how you want the money you leave behind used for your children.
- For special needs beneficiaries only:* By providing instructions, people, and assets to support your special needs beneficiaries above a poverty lifestyle
- For business owners only:* By providing for the orderly continuation and transfer of family business interests rather than a distress sale

CONCERNS

Please rate the following as to how important they are to you:

(H high concern, S some concerned, L low concern, N/A no concern or not applicable)

Description

Level of Concern

Client	Spouse
--------	--------

Tax Concerns

Estate Taxes. We've heard that estate taxes can be as high as 50% of the value of my assets. We'd like to know how to reduce or eliminate an estate tax liability I might have.

Capital Gains Taxes. We have an asset that we're thinking about selling and we'd like to know how we might reduce or eliminate any capital gains taxes that we might owe

Income Taxes. We have significant income from investment assets and we'd like to know if there is any way to reduce or eliminate the amount of income taxes we pay.

Interest Expense. We pay quite a bit of interest on business and/or personal loans or lines of credit and would like to know if we could reduce the amount of interest we pay.

Taxes on Retirement Plans. We have a large IRA and or 401K. We know these assets will be subject to both income tax and estate tax at death. We would like to know how to reduce the 70-90% tax burden on these accounts.

Family Concerns

Custodian of Minor Children. We're concerned that, if either of us were to die, our children will be placed in the custody of someone other than whom we select.

Beneficiaries' Creditors. We're concerned that our children or other beneficiaries will lose any family wealth we might leave to them to their creditors, lawsuits, or divorcing spouses.

Fiscal Immaturity. We're concerned that our children or other beneficiaries will lose any family wealth we might leave to them due to their mismanagement of the money.

Children-In-Law. We're concerned about what might happen if a son-in-law or daughter-in-law ever got control over any inheritance we might leave to our children.

Mismanagement. We're concerned that the person(s) in charge of managing our children's or grandchildren's inheritance might squander or mismanage the funds.

Grandchildren's Education. We're concerned that our children might not provide for our grandchildren's education which is very important to us.

Risk of Making Beneficiary Ineligible for Governmental Benefits. We have a beneficiary whom we'd like to benefit in our estate planning who is currently receiving governmental benefits. We are concerned about loss of eligibility if they inherit assets.

Spousal Control of My Assets if I Pass First. We would like to know that when one of us passes, our assets are available to the other, but that upon the survivor's death, the assets pass to our children or other beneficiaries. We would not, for example, want our assets to pass to a future spouse or to any other individual who might influence a spouse/partner.

Family Disputes. We are concerned about our beneficiaries commencing lawsuits against each other because they feel that they've received less than they should have received.

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Description

Level of Concern

	Client	Spouse
<p>Hard-to-Divide Assets. Our assets are comprised significantly because one or more assets are not easily divisible (such as an operating business) and we're concerned that disputes will arise relating to how the assets might be divided</p>		
<p>Values & Virtues. We're concerned that the inheritance we leave to our beneficiaries might prevent them from being productive citizens and would like to take the necessary steps to prevent that from happening.</p>		
<p>Planning for Parents. We're concerned that our parents will need financial assistance if we were to die prematurely.</p>		
<p><u>Disability Concerns</u></p>		
<p>Guardianship. We're concerned that if we were to become disabled, a guardian would be required so that someone would have the legal ability to make health care and financial decisions for me.</p>		
<p>HIPAA. Our current planning does not reflect the HIPAA privacy rules, and we're concerned that if something happened to either of us, health care personnel might not disclose information about us to our loved ones.</p>		
<p>Disability of Single, Adult Children. We're concerned that if a single, adult child of ours becomes disabled, that we would not have the legal ability to make decisions for that child or be informed about that child's health situation due to HIPAA privacy rules.</p>		
<p>Independence. We're concerned that a long-term disability or the challenges of aging will create an unnecessary burden on our family and/or friends.</p>		
<p><u>Creditor Concerns</u></p>		
<p>Frivolous Lawsuits. We're concerned about our assets being taken through frivolous lawsuits.</p>		
<p>Nursing Home. We're concerned about our assets being lost to the nursing home.</p>		
<p>Creditors of Jointly Owned Property. We have property owned as joint tenants with someone other than each other and we're concerned that a creditor of that other person could take the entire property.</p>		
<p><u>Post-Death Concerns</u></p>		
<p>Probate. We're concerned about the unnecessary delays and costs that each of our estates will incur if our assets pass via a probate proceeding.</p>		
<p>Liability of Executor. We're concerned that the person we've named as one of our executors might be sued by an heir because the Executor did not understand what duties were required of them and what liability they take on for serving as executor.</p>		
<p>Fire Sale. We're concerned about our assets having to be sold in a "fire sale" to pay estate taxes or to pay debts that we owe.</p>		
<p>Privacy. We're concerned that personal matters involving family or finance will become public knowledge.</p>		

Description

Level of Concern

Client	Spouse
--------	--------

Business Concerns

Validity of Corporate Shield. We own a corporation or limited liability company and we're concerned that our personal assets may still be exposed to liabilities of the company because we've not held company meetings annually, kept minutes, elected officers, etc.

Employee Lawsuits. We're concerned that employees might sue because of an out-of-date or nonexistent employee agreements.

Business Succession Plan #1. We're concerned that our company might falter if either were to die unexpectedly because we don't currently have a business succession plan.

Business Succession Plan #2. We're concerned that we may pay too much tax when we ultimately sell or transfer ownership of the company.

Out-of-Date Buy-Sell Agreement. We have a buy-sell agreement with the other owners of the company in which we're involved but we have no idea if it's up-to-date or if the company will have to funds to buy out our interest if either of us were to die.

Financial Concerns

Standard of Living. We're concerned that either of us might not be able to maintain our current standard of living during retirement.

Exhaustion of Assets During Disability. We're concerned our assets might be completely consumed to pay for our care in the event of a disability.

Communication. We are concerned that our financial advisor doesn't keep us informed on a regular basis.

Giving Concerns

Loss of Privacy. We're concerned that giving to an organization either now or in the future may compromise our privacy.

Support. We're concerned that those individuals or organizations that currently rely on our financial support will also require this in the future and/or after our deaths.

Strategic Giving. We're concerned that we may not be aware of all of the possible ways we can financially support our favorite charities without placing our family at an economic disadvantage.

Final Distributions. We're concerned that too much money at either of our deaths will go to the government rather than family or charity.

Spiritual/Personal Values and Concerns

Legacy. We're concerned about the legacy we leave behind for our family both financially and spiritually. Our goal is make each of our leaving as positive and helpful to our family as we can.

Faith and Medical. We're interested in learning more about faith-specific medical directives.

Memorials. We would like to leave thoughts and guidelines for how our family and friends can observe each of our passing.

Other Concerns (Please list below):

[Empty rectangular box for listing other concerns]

IMPORTANT FAMILY QUESTIONS

(Please write "Yes" or "No" for your answer)	Client	Spouse
Are you (or your spouse) receiving Social Security, disability, or other governmental benefits? <i>Describe _____</i>		
Are you (or your spouse) making payments pursuant to a divorce or property settlement order? <i>Please furnish a copy</i>		
If married, have you and your spouse signed a pre- or post-marriage contract? <i>Please furnish a copy</i>		
Have you (or your spouse) been widowed? <i>If a federal estate tax return or a state death tax return was filed, please furnish a copy</i>		
Have you (or your spouse) ever filed federal or state gift tax returns? <i>Please furnish copies of these returns</i>		
Have you (or your spouse) completed previous will, trust, or estate planning? <i>Please furnish copies of these documents</i>		
Do you support any charitable organizations now that you wish to make provisions for at the time of your death? <i>If so, please explain below.</i>		
Are there any other charitable organizations you wish to make provisions for at the time of your death? <i>If so, please explain below.</i>		
If married, have you lived in any of the following states while married to each other? <i>Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, or Wisconsin</i>		
Are you (or your spouse) currently the beneficiary of anyone else's trust? <i>If so, please explain below.</i>		
Do you or any of your children or other beneficiaries have special educational, medical, or physical needs? <i>If yes, please describe below</i>		
Do any of your children receive governmental support or benefits?		
Do you provide primary or other major financial support to adult children or others?		
Do you own a business?		
Do you own a long-term care (nursing home) insurance policy?		
Do you own any property that is not community property?		

ADDITIONAL INFORMATION:

[Empty rectangular box for additional information]

FAMILY VALUES

Rate the following values in order of their importance to you from “Most Important” to “Least Important.”
Feel free to leave blank any item you do not wish to rank.

	Most Important	Important	Neutral	Less Important	Least Important
• Cultural values such as art, music, & travel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Economic values such as financial responsibility, frugality, and savings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Educational values such as study, self-improvement, academic achievements, and lifelong learning.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Emotional values such as compassion, kindness, and generosity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Material values such as possessions, social standing, rank, and title.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Personal values such as modesty, loyalty, and independence.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Philanthropic values such as volunteer work & donations (time and money).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Physical values such as health, relaxation, exercise, and appearance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Public values such as citizenship, community involvement, and public service.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Recreational values such as sports, leisure time, hobbies, and vacations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Relationship values such as family, friends, and colleagues.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Spiritual values such as faith, belief in God, and inner peace.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Work values such as effort, competence, professional recognition, and success.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PROPERTY INFORMATION

Instructions for completing the Property Information checklist:

General Headings

This **Property Information** checklist helps you list all the property you own and what it is worth. If you do not own property under a particular heading, just leave that section blank. Under certain headings, you may own more property than can be listed on this checklist. If so, attach extra sheets of paper to list your additional property.

Type

Immediately after the heading for each kind of property is a brief explanation of what property you should list under that heading.

“Owner” of Property

How you own your property is **extremely important** for purposes of properly designing and implementing your estate plan. For each property, please indicate how the property is titled. When doing so, please use the following abbreviations:

Owner of Property	Use
If married, Client’s name alone, with no other person	1
If married, Spouse’s name alone, with no other person	2
If married, Joint Tenancy with spouse	JTS
Joint Tenancy with someone other than a spouse, i.e. a child, parent, etc.	JTO
If you cannot determine how the property is owned	?

Real Property

TYPE: Any interest in real estate including your family residence, vacation home, timeshare, vacant land, etc.

General Description and/or Address	Owner	Market Value	Loan Balance
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
	<i>Total</i>	_____	_____

Furniture and Personal Effects

TYPE: List separately only major personal effects such as jewelry, collections, antiques, furs, and all other valuable non-business personal property (*indicate type below and give a lump sum value for miscellaneous, less valuable items.*).

Type or Description	Owner	Loan Balance
Miscellaneous Furniture and Household Effects (Total)	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
	<i>Total</i>	_____

Automobiles, Boats, and RVs

TYPE: For each motor vehicle, boat, RV, etc. please list the following: description, how titled, market value and encumbrance:

Retirement Plans

TYPE: Pension (P), Profit Sharing (PS), H.R. 10, IRA, SEP, 401(K). **ADDITIONAL INFORMATION:**

Describe the type of plan, the plan name, the current value of the plan, and any other pertinent information.

Total _____

Business Interests

TYPE: General and Limited Partnerships, Sole Proprietorships, privately-owned corporations, professional corporations, oil interests, farm, and ranch interests. **ADDITIONAL INFORMATION:** Give a description of the interests, who has the interest, your ownership in the interests, and the estimated value of the interests.

Total _____

Money Owed To You

TYPE: Mortgages or promissory notes payable **to you**, or other moneys owed to you.

Name of Debtor	Date of Note	Maturity Date	Owed to	Current Balance
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Total _____

Anticipated Inheritance, Gift, or Lawsuit Judgment

TYPE: Gifts or inheritances that you expect to receive at some time in the future; or moneys that you anticipate receiving through a judgment in a lawsuit. **Describe in appropriate detail.**

Description _____

Total estimated value _____

Other Assets

TYPE: Other property is any property that you have that does not fit into any listed category.

Type	Owner	Value
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
<i>Total</i> _____		

Summary of Values

Assets	Amount*		Total Value
	Client	Spouse	
Real Property	_____	_____	_____
Furniture and Personal Effects	_____	_____	_____
Automobiles, Boats and RVs	_____	_____	_____
Bank and Savings Accounts	_____	_____	_____
Stocks and Bonds	_____	_____	_____
Life Insurance and Annuities	_____	_____	_____
Retirement Plans	_____	_____	_____
Business Interests	_____	_____	_____
Money Owed to You	_____	_____	_____
Anticipated Inheritance, Etc.	_____	_____	_____
Other Assets	_____	_____	_____
Total Assets:	_____	_____	_____

* *Joint Property values enter 1/2 in Client's column and 1/2 in Spouse's column.*

APPOINTMENTS – PEOPLE WHO ACT ON YOUR BEHALF

If you were unable to make decisions for yourself, who would you want to make those decisions for you? Though the people who fill these 'appointments' are called different names in their different roles, they are people that you trust will act or speak on your behalf to protect you, your choices, your family and your estate

Long-term Guardian for Minor children:

If you have any children under the age of 18, list in order of preference who would raise them and love them in the manner as close as possible to the way you would for the long-term.

	Name	Phone Number(s)
Initial Choice:		
Backup #1:	_____	_____
Backup #2:	_____	_____
Backup #3:	_____	_____

Short-term Guardian for Minor children:

If you have any children under the age of 18, list in order of preference who would be able to be immediately available to them (within 20 minutes) if you could not be located.

	Name	Phone Number(s)
Initial Choice:		
Backup #1:	_____	_____
Backup #2:	_____	_____
Backup #3:	_____	_____

Guardian for Pet(s):

If you have any pets, list in order of preference who would be able to be immediately available to them (within 20 minutes) if you could not be located.

	Name	Phone Number(s)
Initial Choice:		
Backup #1:	_____	_____
Backup #2:	_____	_____
Backup #3:	_____	_____

Initial Trustee(s):

Usually the Maker will be the Trustee of his or her own trust. Often, both spouses, jointly. Allows you to continue to jointly control your assets as before.

	Client	Spouse
Initial Choice:	_____	_____
Additional Person(s)	_____	_____
Additional Person(s)	_____	_____

Disability Trustee:

If you were unable to make decisions for yourself, who would you want to make decisions for you with regard to your property and assets?

	Client	Spouse
Initial Choice:	_____	_____
Backup #1:	_____	_____
Backup #2:	_____	_____
Backup #3:	_____	_____

Death Trustee:

After your death, who do you want carrying out your instructions, for distribution to and, if desired, management of property for your beneficiaries? *same as disability trustee*

	Client	Spouse
Initial Choice:	_____	_____
Backup #1:	_____	_____
Backup #2:	_____	_____
Backup #3:	_____	_____

Power of Attorney:

If you were unable to make financial decisions for yourself, who would you want to make those decisions for you?

same as disability trustee

	Client	Spouse
Initial Choice:		
Backup #1:	_____	_____
Backup #2:	_____	_____
Backup #3:	_____	_____

Do you want to authorize your Financial Agent to make gifts on your behalf during any period of time you are incapacitated?

Client: Yes No

Spouse: Yes No

Giftng Power Details: (i.e. can your financial agent pay for your children’s education & living expenses if you are disabled?)

Client	Spouse

Living Will:

Do you want to provide that the moment of your death not be unnecessarily prolonged by artificial means or measures?

Client: Yes No

Spouse: Yes No

Do you want to provide that your organs and tissues should be made available for transplant purposes?

Client

Spouse

- For transplantation only
- For research only
- For transplantation or research
- For any purpose
- May not make anatomical gifts
- No statement about anatomical gifts

- For transplantation only
- For research only
- For transplantation or research
- For any purpose
- May not make anatomical gifts
- No statement about anatomical gifts

SPECIFIC GIFTS: List any specific gifts of real estate or cash gifts you wish to make to either individuals or charities. Indicate whether these gifts are to be made even if the other spouse is alive.

FOR CLIENT:

Individual or Charity	Amount or Property	Even if other spouse is alive?

FOR SPOUSE:

Individual or Charity	Amount or Property	Even if other spouse is alive?

PROVIDING FOR THE SURVIVING SPOUSE UPON DEATH OF FIRST SPOUSE TO DIE

TO SURVIVING SPOUSE WITHOUT TAX PLANNING: We recognize this does not provide any tax planning which may result in our beneficiaries paying significant optional estate taxes.

- All to surviving spouse.
- _____% to surviving spouse.
- Minimum allowed by law to surviving spouse.

DIVIDE INTO MARITAL AND FAMILY TRUSTS: Designed to maximize estate tax savings. To accomplish this, an amount up to the applicable exclusion amount (currently \$5,000,000) will be transferred to the Family Trust and the balance, if any, to the Marital Trust. This is sometimes referred to as “A/B Trust Planning”. The Marital Trust is sometimes referred to as the “A Trust” or “QTIP Trust”. The Family Trust is sometimes referred to as the “B Trust”, “By-Pass Trust” or “Credit Shelter Trust”. Also provides protection for surviving spouse from creditors and predators. You decide how much control you want the surviving spouse to have. In the event of remarriage protects property for your heirs from a new spouse in case of death or divorce.

MARITAL DEDUCTION FORMULA (OFFICE USE ONLY):

- Disclaimer Provision
- Marital Pecuniary
- Credit Shelter Pecuniary
- Clayton Election
- Marital Fractional

DESIGN OF MARITAL SHARE:

- OUTRIGHT:** We want to leave property outright to the surviving spouse. We recognize that this offers no protection from creditors or predators. Allows surviving spouse to leave property to whomever surviving spouse wants. Also allows a new spouse to possibly make claim on property in case of death or divorce
- GENERAL APPOINTMENT TRUST:** All income and principal are available to the surviving spouse upon demand. The surviving spouse is free to do as he or she pleases. This would include the ability to remove all property in the Marital Share from the trust.
- ALL INCOME – PRINCIPAL FOR NEEDS:** All income is distributed to surviving spouse; principal is available for his or her needs (health, education, and maintenance).
- ONLY INCOME:** Only income is distributed to surviving spouse. Principal is not available to the surviving spouse.

DESIGN OF FAMILY SHARE:

- ALL INCOME – PRINCIPAL FOR NEEDS:** All income is distributed to surviving spouse; principal is available for needs (health, education, and maintenance).
Are descendants permissible beneficiaries of principal? Yes No
- INCOME AND PRINCIPAL FOR NEEDS:** All income and principal is available for needs. Income may be accumulated and not distributed.
Are descendants permissible beneficiaries of income and/or principal? Yes No
- ONLY INCOME:** Only income is distributed to surviving spouse. Principal is not available to the surviving spouse.

WHO IS RESPONSIBLE FOR DETERMINING LIFETIME DISTRIBUTIONS: Is surviving spouse the sole trustee with a right to appoint cotrustees (surviving spouse then determines the management and distributions for his or her needs)? Do you wish to name someone to be the cotrustee with the surviving spouse?

LIMITED POWER OF APPOINTMENT: Do you want the surviving spouse to be able to modify the way property is distributed upon the surviving spouse's death? Yes No

If so, to whom may the surviving spouse distribute your property:

- Your descendants
- Your descendants and their spouses
- Your descendants and charities
- Your descendants, their spouses, and charities
- Anyone, no limitations

DIVISION OF PROPERTY UPON DEATH OF SECOND SPOUSE TO DIE

DIVIDE EQUALLY BETWEEN OUR CHILDREN AND THE DESCENDANTS OF ANY DECEASED CHILDREN:

DIVIDE AMONG NAMED INDIVIDUALS and/or CHARITIES:

HOW AND WHEN TO DISTRIBUTE MY PROPERTY:

DISTRIBUTE OUTRIGHT TO OUR BENEFICIARIES: Provides no protection from creditors, predators, or from themselves.

STRUCTURED TRUST: You determine how long the property is to remain in trust. During the period of time the property is held in trust it is available to the beneficiary for needs (health, education and maintenance). You may give written instructions to the trustee outlining guidelines to follow in determining the beneficiary's needs. You may provide for a staggered distribution of principal. For example: 1/3 at age 30 and balance at age 40. You decide who will manage the property and to carry out your distribution instructions. Does the beneficiary have a right to be a cotrustee and/or choose his or her own cotrustee? You decide how the trust is designed. List your desires:

REMOTE CONTINGENT BENEFICIARY: Who do you want to receive your property in the remote event that no one listed above is alive to receive your property? Determining the remote contingent beneficiary is not so important that it should cause you to delay completion of your entire estate plan. It can always be changed at a later date.

In the remote event no one listed above is alive to receive my property I want my property distributed as follows:

- To each spouse's heirs-at-law.
- One-half to Client's heirs-at-law and one-half to Spouse's heirs at law.
- To the following named individuals and/or charities:

OTHER ITEMS TO INCLUDE OR DISCUSS: Obviously, your estate plan should address all your hopes, fears, and wishes. Please list any other items you want included or want to discuss: