

ESTATE PLANNING WORKSHEET

Married Couple

Information provided is held in complete confidence, and is used for the sole purpose of analyzing estate planning needs and designing estate planning documents. Preparation of this worksheet is not mandatory prior to the initial appointment, but doing so can simplify and speed up the drafting process.

Names: _____

File: _____

Documents Drafted: ___/___/___	_____	W
	_____	POA
Emailed to clients: ___/___/___	_____	LW
	_____	HCPOA
Financial Planner: _____	_____	RLT
	_____	DEED
Insurance Agent: _____	_____	_____
	_____	_____

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Estate Planning Worksheet

The information requested on this worksheet may seem like *none of our business*, but it is very important that an estate planner understands your present situation and your wishes for the future. This information enables us to plan the estate to accomplish future goals and to save on taxes and administrative expenses.

If all information on this worksheet is identical for you and your spouse complete only one worksheet. If information for each spouse differs, make a copy of this worksheet so each of you has a separate one.

			Date
Husband	First Name	MI	Last Name
	AKA	Date of Birth	Social Security Number
Wife	First Name	MI	Last Name
	AKA	Date of Birth	Social Security Number

Address _____

City _____ State _____ Zip _____ County _____

Home Phone Number _____ Cell Phone H / W _____ Email _____

Work Phone Number H/W _____ Cell Phone H / W _____ Email 2 _____

Marital Status: Married Separated Date of Marriage: _____

Children or Other Beneficiaries

Name	Address	Date of Birth	Relationship

What is your primary motivation for considering estate planning? (*Select one or more*)

- | | |
|--|--|
| <input type="checkbox"/> Probate avoidance | <input type="checkbox"/> Business or farm planning |
| <input type="checkbox"/> Guardianship for minor children | <input type="checkbox"/> Federal estate tax planning |
| <input type="checkbox"/> Other: _____ | |

How soon would you like to complete planning? Is there a specific deadline, such as an upcoming trip, surgery, etc.? _____

	Husband	Wife
Do you presently have a will?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you presently have a trust?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you interested in avoiding probate of your estate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were there any previous marriages? If yes, year marriage ended in: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are any of your children not from your current relationship?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do any of your children or other beneficiaries have disabilities?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you own a farm or business?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, do any of your children work in the business with you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, does the child working in the business have an ownership interest in the business?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a U.S. citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you entered into any agreements with your spouse (such as a prenuptial or community property agreement)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you or any family member or potential beneficiaries have any serious health problems?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please describe briefly: _____		

Do you own a long-term care (nursing home) insurance policy?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you hold everything jointly with your spouse, or is property separate?	<input type="checkbox"/> All joint (except IRA's, pensions, etc.)	<input type="checkbox"/> Some separate

Net Worth: If you added the value of all property owned by yourself and your spouse including real estate, personal property, bank accounts, stocks, bonds, IRAs, and anything else you own except death benefits on life insurance, what is the approximate total value of the estate of yourself and your spouse? _____

What is the value of death benefits on life insurance?	Insuring Husband _____	Insuring Wife _____
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What is the total amount of your outstanding liabilities? _____

Appointments

1. **Personal Representative.** Personal representative is also sometimes referred to as executor or administrator. (e.g., spouse as primary personal representative, with a child, relative, friend, or corporate trustee as alternate. In situations where there are children by a previous relationship, spouse as primary personal representative may not be appropriate.) Spouse will be listed first unless otherwise designated.

	Husband	Wife
Personal Representative:	<i>Spouse to serve first</i>	<i>Spouse to serve first</i>
Alternate:		
Second Alternate:		

2. **Guardian.** If you have minor child(ren), beneficiary(ies), or child(ren)/beneficiary(ies) with special needs, you may need to appoint a guardian. The guardian is responsible for the day-to-day care of the child(ren) when the second spouse dies. It is a good idea to name an alternate guardian to act if your first choice cannot serve.

Guardian:	
Alternate:	

3. **Testamentary Trust Trustee.** You may need a trustee to manage assets for beneficiaries until they reach an age when you believe they should be capable of managing assets on their own. A trustee can keep the beneficiary's money invested wisely and use it for their education, support, etc., until they reach the age specified for outright distribution of assets to them. The trustee can be a relative, friend, trust company, or other person or institution you trust to manage and distribute assets according to your wishes. The testamentary trustee can be the same person named as the guardian, or could be a different person or institution.

Trustee:	
Alternate:	

4. **Power of Attorney.** Who should be named to make financial decisions on your behalf if you were unable to make these decisions yourself? It is not necessary to appoint the same person who is your successor trustee or personal representative as your agent.

	Husband	Wife
Agent:	<i>Spouse to serve first</i>	<i>Spouse to serve first</i>
Alternate:		
Second Alternate:		

5. **Health Care Agent.** Who should be named to make medical decisions on your behalf including decisions regarding medical consents, life support issues, and nursing home admission if you were unable to make these decisions yourself? It is not necessary to appoint the same person who is your successor trustee or personal representative as your health care agent.

	Husband	Wife
Health Care Agent:	<i>Spouse to serve first</i>	<i>Spouse to serve first</i>
Alternate:		
Second Alternate:		

Plan of Distribution

1. **Specific Gifts.** Do you want to make charitable gifts, such as to a house of worship or other institution? Do you wish to make a special gift to a particular person, such as a piece of jewelry to a particular child? If not, I will include a specific gifts list to enable future changes.

2. Briefly describe the plan of distribution for assets remaining after any specific gifts described above are made. (Don't worry about tax planning or other considerations in answering this question. We'll consider those details later if needed.)

- All to spouse; then among children, and if a child didn't survive, the deceased child's share to the deceased child's children.
- All to spouse, then equally among surviving children.
- All to spouse, then _____
- As follows: _____

3. **Ultimate Distribution.** You might want to provide for the distribution of your property if neither you, your spouse, nor your children/other beneficiaries named above survive.

Please complete this section only if you have minor beneficiaries or beneficiaries with disabilities.

Age of Distribution. If you do establish a trust to allow a third party to manage assets for beneficiaries, then it is necessary for you to decide when the beneficiaries will be mature enough to manage assets on their own. You may want to give each beneficiary his or her share at the time the beneficiary reaches a particular age. You may consider splitting the distribution, such as 1/2 at age 25 and the balance at age 30, or 1/3 at 21, 1/3 at 25, and 1/3 at 35. You may use any age or combination of ages that you choose.

Miscellaneous Notes: Any additional comments or thoughts that you are concerned about including.
