

ESTATE PLANNING WORKSHEET

MARRIED PERSONS



1611 S. Catalina Avenue, Suite 330 | Redondo Beach, CA 90277
Tel: (310) 540-6877 | Fax: (310) 540-7794 | www.HoferandHarris.com

USING THIS ORGANIZER WILL ASSIST US IN DESIGNING AN ESTATE PLAN THAT MEETS YOUR GOALS. ALL INFORMATION PROVIDED IS STRICTLY CONFIDENTIAL. IF YOU ARE UNABLE TO UNDERSTAND VARIOUS SECTIONS OF THIS ORGANIZER, YOU MAY LEAVE THOSE SECTIONS BLANK.

PLEASE RETURN THE COMPLETED WORKSHEET TO OUR OFFICE PRIOR TO YOUR APPOINTMENT VIA EMAIL, MAIL OR FAX.

PERSONAL INFORMATION

For organizational purposes, one spouse may be referred to herein as "Spouse-A"
and the other spouse may be referred to as "Spouse-B."

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

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

Sign as _____

Prefer to be called _____ Birth date _____ SS# _____ US Citizen? _____

Home Address _____ City _____ State _____ Zip _____

Home Telephone _____ County of Residence _____ Business Telephone _____

Employer _____ Position _____

Business Address _____ City _____ State _____ Zip _____

E-mail Address _____ It is okay to communicate with me via my E-mail address.

Date and Place [city/township] of Marriage _____

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

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

Sign as _____

Prefer to be called _____ Birth date _____ SS# _____ US Citizen? _____

Home Address _____ City _____ State _____ Zip _____

Home Telephone _____ County of Residence _____ Business Telephone _____

Employer _____ Position _____

Business Address _____ City _____ State _____ Zip _____

E-mail Address _____ It is okay to communicate with me via my E-mail address.

Current or Intended Location of Storing Estate Planning Documents (i.e., bank safe deposit box or home safe/cabinet)

Preferred Name of Living Trust (if applicable) _____

CHILDREN AND/OR OTHER FAMILY MEMBERS

(Use full legal name, enter in birthdate, and indicate parentage (both of us, husband only, wife only, Spouse-B only, etc.) or relationship)

| Name | Birth date | Parent or Relationship |
|-------|------------|------------------------|
| _____ | _____ | _____ |

Comments: _____

Comments: _____

Comments: _____

IMPORTANT FAMILY QUESTIONS

| (Please check "Yes" or "No" for your answer) | Yes | No |
|---|-----|----|
| 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> | | |
| Are you (or your spouse) currently the beneficiary of anyone else's trust? <i>If so, please explain below.</i> | | |
| Do any of your children have special educational, medical, or physical needs? | | |
| Do any of your children receive governmental support or benefits? | | |
| Do you provide primary or other major financial support to adult children or others? | | |

ADDITIONAL RELEVANT INFORMATION

ESTATE INFORMATION

INSTRUCTIONS FOR COMPLETING THE *ESTATE INFORMATION* CHECKLIST

General Headings

This *Estate Information* checklist is designed to help 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, use **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 |
|---|-----------|
| Husband’s name alone, with no other person | H |
| Wife’s name alone, with no other person | W |
| Joint Tenancy with spouse | JTS |
| Joint Tenancy with someone other than a spouse, i.e. a child, parent, etc. | JTO |
| If in a same-sex relationship, you may also use the Spouse-A or Spouse-B identifier | i.e., S-A |

REAL PROPERTY

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

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

TANGIBLE PERSONAL EFFECTS

TYPE: List separately all major personal effects such as jewelry, collections, antiques and all other valuable personal property only (indicate the type of property below and give a total sum value or use miscellaneous for less valuable items.)

| | Owner | Market Value |
|---|-------|--------------|
| Miscellaneous Tangible Personal 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 loan amount.

| |
|-------|
| _____ |
| _____ |
| _____ |
| _____ |

BANK & CREDIT UNION ACCOUNTS

TYPE: Checking Account "CA", Savings Account "SA", Certificates of Deposit "CD", Money Market "MM" (indicate type below). Do not include retirement plans (i.e., IRA, 401(k)) or other pre-tax accounts here.

| Name of institution and account number (last four digits only) | Type | Owner | Amount |
|--|-------|-------|--------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| <i>Total</i> | | | _____ |

Note: If an account is in your name (or your spouse's name) for the benefit of a minor, please specify and give minor's name.

STOCKS, BONDS, INVESTMENT ACCOUNTS

TYPE: List any and all stocks and bonds you own. If held in a brokerage account, only name the account. Do not include retirement plans (i.e., IRA, 401(k)) or other pre-tax accounts here.

| Stocks, Bonds or Investment Accounts | Type | Acct. Number (last 4 only) | Owner | Amount |
|--------------------------------------|-------|----------------------------|--------------|--------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| | | | <i>Total</i> | _____ |

LIFE INSURANCE POLICES AND ANNUITIES

TYPE: Term, whole life, split dollar, group life, annuity. **ADDITIONAL INFORMATION:** Insurance company, type, face amount (death benefit), whose life is insured, who owns the policy, the current beneficiaries, who pays the premium, and who is the life insurance agent. Include only the last four digits of the policy/annuity number. Example: John Smith, New York Life, Whole Life Policy: x-4509, Primary beneficiary: Jane Smith, Contingent beneficiary: Jill Smith, Cash Value: \$50,000.00; Death Value: \$200,000.00

| | | | | |
|-------|-------|-------|--------------|-------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| | | | <i>Total</i> | _____ |

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, designated beneficiary, and any other pertinent information. Include the last four digits of the account/plan number. Example: Jane Smith, Fidelity Investments, IRA: x-4589, Primary beneficiary: John Smith; Contingent beneficiary: 50% Jack Smith and 50% Jill Smith, Value: \$100,000.00

| | | | | |
|-------|-------|-------|--------------|-------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| | | | <i>Total</i> | _____ |

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 |
|----------------|--------------|---------------|--------------|-----------------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| | | | <i>Total</i> | _____ |

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> |

