

Confidential Estate Planning Worksheet

Please return the completed worksheet to our office via email at admin@irinashea.com or via fax at (201) 327-6651.

We must receive your completed worksheet before we are able to schedule a consultation.

FAMILY INFORMATION

Your Legal Name _____ Your Age _____ Home Address _____

City _____ State _____ Zip _____ Cell Phone Number we may use _____

E-mail Address _____

Relationship Status (check one) ☐ Single ☐ Married ☐ Life Partner ☐ Divorced ☐ Widowed

Date of Marriage (if married) _____ Are you moving out of state in the next 6-12 months? ☐ Yes ☐ No

Your Spouse/Partner's Legal Name _____ Your Spouse/Partner's Age _____

Your Spouse/Partner's Home Address _____ City _____ State _____ Zip _____

Your Spouse/Partner's Cell Phone Number _____ Your Spouse/Partner's E-mail Address _____

CHILDREN

(IF NO CHILDREN—FRIENDS, SIBLINGS, NIECES/NEPHEWS WHO ARE POSSIBLE BENEFICIARIES)

(Use full legal name. Use "JT" if both spouses are the parents, "H" if husband is the parent, "W" if wife is the parent.)

| Name, Address and Cell Phone | Birth date | Parent or Relationship |
|-------------------------------------|-------------------|-------------------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
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| _____ | _____ | _____ |
| _____ | _____ | _____ |

HOW DID YOU HEAR ABOUT US?

☐ Internet Search ☐ Financial Advisor ☐ Attorney ☐ Friend ☐ Client ☐ Speaking Engagement ☐ Other

WHAT IS YOUR MAIN CONCERN TODAY?

ASSETS

We need your asset information in order to properly advise you on the level of estate planning that you will need and how to minimize and plan for any estate/inheritance tax that will be due.

HOMES AND OTHER REAL ESTATE

| List your home(s): Town | Joint or sole Owner | Market Value | Loan Balance |
|--------------------------------|----------------------------|---------------------|---------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| Total | | _____ | _____ |

BANK ACCOUNTS

List Bank Accounts: Name of bank, Type, Owner and Amount. Do not include IRAs or 401(k)s here.

| Name of Bank | Type | Owner | Amount |
|--------------|-------|-------|--------------------|
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| | | | Total <hr/> |

BROKERAGE ACCOUNTS OR INDIVIDUAL STOCKS AND BONDS

List Stocks, Bonds or Investment Accounts, Type, Owner and Amount (List any and all stocks and bonds you own If held in a brokerage account, lump them together under each account.)

| Stocks, Bonds or Investment Accounts | Type | Owner | Amount |
|--------------------------------------|-------|-------|--------------------|
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| | | | Total <hr/> |

LIFE INSURANCE POLICIES AND ANNUITIES

Insurance company, type, face amount (death benefit), whose life is insured, who owns the policy and the current beneficiaries.

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RETIREMENT PLANS

List: IRA, 403(b), SEP, Profit Sharing. Additional information: Describe the type of plan, the plan name, the current value of the plan, and any other pertinent information.

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BUSINESS INTERESTS

List: General and Limited Partnerships, Sole Proprietorships, privately-owned corporations, and professional corporations. Additional information: Give a description of the interests, who has the interest, your ownership in the interests, and the estimated value of the interests.

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| Total <hr/> | |

PERSONS TO ACT FOR YOU IF NEEDED

Executors: This person will administer your estate by probating your Will, locating, gathering and liquidating your assets, filing and paying estate, inheritance and final income taxes, and distributing the balance of proceeds in accordance with your Will. Estate administration is normally a 12-month process. You should always name at least one primary and one alternate Executor.

| | |
|---|---|
| <p><u>I would like the following people to act as my Executor in the order named: (list 2-3 people)</u></p> <p>_____ ; then _____ ; then _____</p> | <p><u>My my spouse/partner would like the following people to act as his/her Executor the order named (list 2-3 people)</u></p> <p>_____ ; then _____ ; then _____</p> |
|---|---|

Power of Attorney: If you were unable to make financial decisions for yourself (e.g., if you were in a coma), this person would be empowered to make your mortgage payments, file and pay your taxes, and conduct various financial transactions for you. You should name at least one primary and alternate.

| | |
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| <p><u>I would like the following people to act as my Power of Attorney in the order named: (list 2-3 people)</u></p> <p>_____ ; then _____ ; then _____</p> | <p><u>My my spouse/partner would like the following people to act as his/her Power of Attorney the order named (list 2-3 people)</u></p> <p>_____ ; then _____ ; then _____</p> |
|--|--|

Health Care Proxy and Living Will: If you were unable to make medical decisions for yourself (e.g., you were in a coma), this person would make medical decisions on your behalf and would have full access to your medical records (via a HIPAA medical privacy waiver) in order to make informed decisions. The directive also allows you to direct that your organs should be made available for transplant purposes or research purposes if desired. The directive also contains a Living Will that allows you to direct that your death not be unnecessarily prolonged by artificial means or measures. You should name at least one primary and alternate.

| | |
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| <p><u>I would like the following people to act as my Health Care Agent in the order named: (list 2-3 people)</u></p> <p>_____ ; then _____ ; then _____</p> | <p><u>My my spouse/partner would like the following people to act as his/her Health Care Agent the order named (list 2-3 people)</u></p> <p>_____ ; then _____ ; then _____</p> |
|--|--|

Guardians for Minor Children:

I would like the following people to act as my Guardian for my children in the order named: (list 2-3 people)

_____ ; then _____ ; then _____

Trustees for Children: If you are leaving money to children in trust, this person would safeguard the funds by investing them with a financial advisor, by filing and paying income taxes from the trust using an accountant, and, most importantly, by distributing the funds in accordance with your stated wishes. This person should be trustworthy, compassionate, wise and aligned with your personal values. This person must be a U.S. Resident to avoid foreign tax issues. You should name at least one primary and one alternate.

Most financial advisors cannot personally act as Trustee due to broker/dealer/conflict rules.

I would like the following people to act as my Trustee for my children in the order named: (list 2-3 people)

_____ ; then _____ ; then _____

Other items you wish to discuss: For example, do your parents have their affairs in order? If not, we should discuss solutions. If you have a special needs child or relative, we should also discuss. Any other matters you wish to get advice on should be listed here. If we cannot help you, we will do our best to find a colleague who can help you.

We thank you for your participation in this process. Estate planning is extremely important and we appreciate your confidence in us to take care of you and your family. We look forward to meeting with you soon!

Now that you have completed the worksheet, we will contact you as soon as we review it. Thank you!

Irina S. Shea, Attorney at Law & Staff

