
Beginning Your Estate Plan

Thank you for choosing Goosmann Trust Law Counsel to handle your estate planning needs. Perhaps the most important part of estate planning is taking the first step. Writing an outline of your assets and goals is often the best place to start. This Planning Worksheet packet is designed to help you create this outline of assets.

Accurate and complete information is important to help us properly design and implement your estate plan. All the information you provide us will be held in strict confidence.

Please complete the Planning Worksheets as completely as you can and return to us at least 2-3 business days prior to your Initial Consultation Meeting.

We also recommend that you complete and return our Goal Identification Form prior to your Initial Consultation Meeting. This allows us to understand what is most important to you and for us to design an estate plan that fulfills your goals.

In addition, please bring the following to your Initial Consultation Meeting with us:

- Copies of Real Estate documents, including Deeds.
- Bank and other account information including a list of CD's, Bonds and Stock Certificates.
- Copies of Insurance Policies, Annuities, Retirement Plans, etc.
- Copy of Divorce Decree.
- Any previous Will or Trust agreement you already had in place.

Keeping in Mind the “Four Ps” of Estate Planning Will Help You Complete These:

People: First, write down the names of the *people* for whom you want to plan (family, friends, charities, etc.).

Property: Second, list all of your *property* (cash, real estate, vehicles, life insurance, investments, stock, etc.) and an estimate of the value of each. If you work with a financial planner, you may already have a financial statement and can save yourself time by simply attaching a current draft to these worksheets.

Plan: Thirdly, *plan* for matching people and property. List which property you want to go to each person or entity named.

Planners: Finally, list the *planners* you need to put your plans in action. An attorney, financial planner, and certified public accountant (CPA) are generally recommended.

Important Family Questions

Please check "Yes" or "No" for your answer.	Yes	No
Are either of you receiving Social Security, disability, or other governmental benefits? <i>Describe:</i>		
Are either of you making payments pursuant to a divorce or property settlement order? <i>Please furnish a copy.</i>		
Have you and your spouse signed a pre- or post-marriage contract? <i>Please furnish a copy.</i>		
Have either of you been widowed? <i>If a federal estate tax return or a state death tax return was filed, please furnish a copy.</i>		
Have either of you ever filed federal or state gift tax returns? <i>Please furnish copies of these returns.</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>		
Do you have any anticipated inheritance, gift or lawsuit judgment? <i>If so, please explain below and bring copies</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?		

Whenever people die without a Will, the State follows established laws to decide what happens with their property. When a person dies leaving a Will, he or she can control the distribution of property. This worksheet will be used to prepare a “basic” Last Will & Testament which does not take into consideration any tax consequences of the passage of your property. During our initial meeting, we can discuss tax consequences and the potential for more sophisticated planning if necessary.

Please complete this questionnaire to assist in the preparation of your Will. The information provided will be used only in preparation of your Will and will not be released to anyone without your permission.

HUSBAND:

Full Name (including Middle)	
Do you go by any other name?	
Street/PO Box	
City and State	
Zip Code	
County	
Phone Number	
Email Address	
Date of Birth	
Social Security Number	
Marital Status? If married, state month/day/year of marriage	
Previously divorced? If so, when and who from?	

WIFE:

Full Name (including Middle)	
Do you go by any other name?	
Address (if different than above)	
Phone Number (if different than above)	
Email Address (if different than above)	
Date of Birth	
Social Security Number	
Previously divorced? If so, when and who from?	

CHILDREN AND/OR STEPCHILDREN:

Full Name (including Middle)	
Date of Birth	
Street/PO Box	
City, State and Zip Code	
Phone Number	
Married, If So To Whom	
Any Children and Their Ages	
Full Name (including Middle)	
Date of Birth	
Street/PO Box	
City, State and Zip Code	
Phone Number	
Married, If So To Whom	
Any Children and Their Ages	
Full Name (including Middle)	
Date of Birth	
Street/PO Box	
City, State and Zip Code	
Phone Number	
Married, If So To Whom	
Any Children and Their Ages	
Full Name (including Middle)	
Date of Birth	
Street/PO Box	
City, State and Zip Code	
Phone Number	
Married, If So To Whom	
Any Children and Their Ages	

Contact information of person(s) presently having custody of children under the age 18:

Name, address, phone number	
Name, address, phone number	
Name, address, phone number	

Guardian(s)

If you have minor children, consider who you'd like to be their guardian (person(s) responsible for day-to-day care) in the event you are not able:

Preferred (Name, address, phone number)	
1 st Alternate (Name, address, phone number)	
2 nd Alternate (Name, address, phone number)	

Please note any instructions or guidelines:

Trustee(s)

The Trustee is responsible for the management and distribution of your property when you have a Trust. The selection of a Trustee is your personal decision. You may select a person such as your spouse or someone else to act as an individual Trustee. You may also select a bank or other institution which has a Trust Department. It is common for most individuals to select their spouse as the first choice. In the consultation meeting, we will also discuss the possible selection of a corporate Trustee.

Preferred	Husband	Wife
Complete Legal Name		
Address		
Phone Number		
Relationship to You		
1st Alternate		
Complete Legal Name		
Address		
Phone Number		
Relationship to You		
2nd Alternate		
Complete Legal Name		
Address		
Phone Number		
Relationship to You		

Please note any instructions or guidelines:

Executor(s)

The Executor is responsible for the management and distribution of your property as your Will directs. The spouse is often chosen as the preferred Executor. If you do not want your spouse named as Executor, a relative, a bank, or a close friend is often nominated.

Preferred	Husband	Wife
Complete Legal Name		
Address		
Phone Number		
Relationship to You		
1st Alternate		
Complete Legal Name		
Address		
Phone Number		
Relationship to You		
2nd Alternate		
Complete Legal Name		
Address		
Phone Number		
Relationship to You		

Please note any instructions or guidelines:

Special Circumstances

List any circumstances that may pertain to your family or any issues which you feel deserve special attention:

Generally, how would you want your property distributed at your death?

1. To your spouse, if alive?

2. If your spouse is not still living, to your children?

3. If not to your spouse or children, to whom?

4. Do you wish to make any gifts to charity?

Personal Property

We will discuss any specific personal property items you wish to pass to certain people, entities, etc in your consultation meeting. For example, jewelry, family heirlooms, and other items of significant or sentimental value and designate whom you would like to receive each property listed. You do not need to list all items at this time; this is only to get you thinking about the most important items to you in advance.

Financial Power of Attorney Who do you want making financial decisions for you in the event you are unable – i.e. if you’re in a coma? It is usually, but not always, the case that a spouse is the first person chosen for this role. In selecting someone to serve, you should pick someone you trust and that is financially responsible.

Preferred	Husband	Wife
Complete Legal Name		
Address		
Phone Number		
Relationship to You		
1 st Alternate		
Complete Legal Name		
Address		
Phone Number		
Relationship to You		
2 nd Alternate		
Complete Legal Name		
Address		
Phone Number		
Relationship to You		

Please note any instructions or guidelines:

Medical Power of Attorney Who do you want making medical decisions for you in the event you are unable – i.e. whether you should receive life-preserving treatment when a doctor has diagnosed you terminally and irreversibly incapacitated? Most individuals choose their spouse first. The person you choose, however, should be one you trust to follow through with your wishes, even if different from his or her own.

Preferred	Husband	Wife
Complete Legal Name		
Address		
Phone Number		
Relationship to You		
1st Alternate		
Complete Legal Name		
Address		
Phone Number		
Relationship to You		
2nd Alternate		
Complete Legal Name		
Address		
Phone Number		
Relationship to You		

	Husband	Wife
Are you an Organ Donor?		
Do you want your death prolonged by artificial means or measures?		
Would you like to include instructions for the disposition of your remains?		
Would you like to include special instructions for end-of-life treatment?		

Please note any instructions or guidelines:

SCHEDULE A – CASH AND NOTES

Cash Accounts					
Institution	Account No.	Type (Checking, Savings, C.D. Money Market)	Amount		
			Husband	Wife	Joint
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
Subtotal Cash Accounts			\$	\$	\$

Loans or Notes Receivable (money owed to you)					
Obligor	Rate	Date Due	Value		
			Husband	Wife	Joint
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
Subtotal Loans and Notes			\$	\$	\$

Total (carry over to Financial Summary on page 20)	\$	\$	\$
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Comments:

SCHEDULE B – REAL ESTATE

For valuation purposes, use your best estimate of current total value, without regard to any mortgages that may be outstanding. Mortgage information should be described on Schedule I.

Address or Description	County & State	Ownership*	Value		
			Husband	Wife	Joint
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
			\$	\$	\$
Total			\$	\$	\$
(carry over to Financial Summary on page 20)					

*If property held jointly, please indicate whether it is owned as Joint Tenants With Right of Survivorship (JTWROS) or Tenants in Common (TIC), if known.

SCHEDULE C – SECURITIES HELD BY YOU

	Payable on Death to:	Value		
		Husband	Wife	Joint
Publicly Traded Stocks				
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
Mutual Funds				
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
Corporate Bonds				
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
US Government Bonds, Notes & Bills				
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
Municipal Bonds				
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
Other				
		\$	\$	\$
		\$	\$	\$
Total		\$	\$	\$
(carry over to Financial Summary on page 20)				

SCHEDULE D – CLOSELY-HELD BUSINESS INTERESTS

Include all limited liability companies, corporations, and partnerships

Asset Type	Value		
	Husband	Wife	Joint
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
Total (carry over to Financial Summary on page 20)	\$	\$	\$

Please supply copies of partnership agreements, buy-sell agreements, related insurance arrangements, or any other documents relevant to the business listed above.

Comments:

SCHEDULE E – LIFE INSURANCE

Insuring Life of Husband						
Company	Policy No.	Type*	Death Benefit	Cash Value	Owner	Primary & Contingent Beneficiaries
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
Total (carry over to Financial Summary on page 20)			\$			

Insuring Life of Wife						
Company	Policy No.	Type*	Death Benefit	Cash Value	Owner	Primary & Contingent Beneficiaries
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
			\$	\$		
Total (carry over to Financial Summary on page 20)			\$			

Insuring Life of Husband and Wife (Second-to-Die)						
Company	Policy No.	Type*	Death Benefit	Cash Value	Owner	Primary & Contingent Beneficiaries
			\$	\$		
			\$	\$		
Total (carry over to Financial Summary on page 20)			\$			

*When describing type of policy, please indicate whether term, variable life, universal life, or whole life.

SCHEDULE F - ANNUITIES

Husband is Annuitant					
Company	Contract No.	Current Value	Cost Basis	Owner	Primary & Contingent Beneficiaries
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		
Total (carry over to Financial Summary on pg 20)		\$			

Wife is Annuitant					
Company	Contract No.	Current Value	Cost Basis	Owner	Primary & Contingent Beneficiaries
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		
		\$	\$		
Total (carry over to Financial Summary on pg 20)		\$			

SCHEDULE G – QUALIFIED RETIREMENT PLANS & IRAs

Retirement Asset		Husband		Wife	
Name of Custodian or Plan Sponsor	Account No.	Value	Primary & Contingent Beneficiaries	Value	Primary & Contingent Beneficiaries
Traditional IRAs/SEPs					
		\$		\$	
		\$		\$	
		\$		\$	
		\$		\$	
Roth IRAs					
		\$		\$	
		\$		\$	
		\$		\$	
		\$		\$	
Pension Plans					
		\$		\$	
		\$		\$	
401(K) Plans					
		\$		\$	
		\$		\$	
Profit Sharing Plans					
		\$		\$	
		\$		\$	
Other					
		\$		\$	
Total (carry over to Financial Summary on page 20)		\$		\$	

SCHEDULE H- TANGIBLE PERSONAL PROPERTY

Item	Value		
	Husband	Wife	Joint
Furniture and Furnishings	\$	\$	\$
Automobile:	\$	\$	\$
Automobile:	\$	\$	\$
Automobile:	\$	\$	\$
Artwork/Art Collections	\$	\$	\$
Jewelry	\$	\$	\$
Guns	\$	\$	\$
Other:	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
Total (carry over to Financial Summary on page 20)	\$	\$	\$

Describe collections, antiques, guns, heirlooms, etc. that require special estate plan considerations, and give any other pertinent comments:

SCHEDULE I - LIABILITIES

Liabilities	Husband	Wife	Joint
Mortgages (describe/identify property)			
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
Total (carry over to Financial Summary on page 20)	\$	\$	\$
Loans/Notes (identify creditor)			
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
Total (carry over to Financial Summary on page 20)	\$	\$	\$
Other Liabilities (describe)			
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
Total (carry over to Financial Summary on page 20)	\$	\$	\$

FINANCIAL SUMMARY

Please transfer totals from previous schedules

Assets	Husband	Wife	Joint
Cash & Notes (Schedule A)	\$	\$	\$
Real Estate (Schedule B)	\$	\$	\$
Securities (Schedule C)	\$	\$	\$
Close-held Business Interests (Schedule D)	\$	\$	\$
Life Insurance (Death Benefit) (Schedule E)	\$	\$	\$
Annuities (Schedule F)	\$	\$	\$
Qualified Retirement Plans & IRAs (Schedule G)	\$	\$	\$
Tangible Personal Property (Schedule H)	\$	\$	\$
Total	\$	\$	\$
Liabilities	Husband	Wife	Joint
Mortgages (Schedule I)	\$	\$	\$
Loans/Notes (Schedule I)	\$	\$	\$
Other Liabilities (Schedule I)	\$	\$	\$
Total	\$	\$	\$
Net Worth (assets minus liabilities)	\$	\$	\$
Combined Total	\$		

Your Planning Professionals

Do you currently have or prefer a certain:

Bank	
Tax Preparer/CPA/Accountant	
Insurance Agent/Company	
Wealth Management Advisor/Financial Planner	
Physician	
Hospital	
Funeral Home	
Cemetery Location (specify if you have a burial lot)	

**Your estate plan should address all your hopes, fears and wishes.
Please list any other items you want to include or discuss:**

Thank you for choosing Goosmann Trust Law Counsel.
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