

ESTATE PLANNING WORKSHEET

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**Wills, Revocable Living Trusts, Powers of Attorney,
Advance Directives, & Estate Planning.**

USING THIS WORKSHEET WILL ASSIST US IN DESIGNING AN ESTATE PLAN THAT MEETS YOUR GOALS. ALL INFORMATION PROVIDED IS STRICTLY CONFIDENTIAL.

IT WOULD BE HELPFUL IF YOU ARE ABLE TO COMPLETE THIS WORKSHEET PRIOR TO YOUR NEXT APPOINTMENT. HOWEVER, SINCE THIS WORKSHEET IS JUST A STARTING POINT, DO NOT BE CONCERNED IF YOU ARE UNABLE TO DO SO. THERE WILL BE PLENTY OF TIME TO OBTAIN ALL OF THE NECESSARY INFORMATION AS WE MOVE FORWARD.

ADVISORS

	Name	Telephone
Personal Attorney	_____	_____
Accountant	_____	_____
Financial Advisor	_____	_____
Life Insurance Agent	_____	_____

PROPERTY INFORMATION REAL PROPERTY

TYPE: Any interest in real estate, including your family residence, vacation home, time share, vacant land, etc. Please bring copies of all Deeds to your appointment.

Property Address and/or Description + YEAR PURCHASED	Owner	Market Value	Loan Balance (Opt.)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
<i>Totals</i>		_____	_____

BANK & SAVINGS ACCOUNTS

TYPE: Checking Account "CA," Savings Account "SA," Certificates of Deposit "CD," Money Market "MM." *Do not include Retirement Accounts here.*

Name of Institution and Account Number (Last 4 Digits Only)	Type	Owner	Amount (Opt.)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
		<i>Total</i>	_____

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

RETIREMENT PLANS

TYPE: Pension (P), Profit Sharing (PS), IRA, SEP, Roth, 401(k), 403(b), etc. Describe each plan by fund manager (co.), type, owner, primary and contingent beneficiaries (and corresponding %'s), plan balance (opt.), and any other pertinent information.

<i>Total of Balances</i>		_____

STOCKS AND BONDS

TYPE: List any and all Stocks (S) and Bonds (B) you own. Alternatively, you may attach a current statement. If held in a Brokerage Account (BA), simply list the brokerage account.

Stocks, Bonds or Investment Accounts (Instit. Name)	Type	Acct. # (Last 4)	Owner	Value (Opt.)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
<i>Total</i>				_____

LIFE INSURANCE POLICIES AND ANNUITIES

TYPE: Term (T), Whole Life (WL), Group Life (GL), Annuity (A), etc. Describe each insurance policy or annuity by issuer (co.), type, owner, insured, primary and contingent beneficiaries (and corresp. %'s), death benefit amount or present cash value (opt.), and any other pertinent information **NOTE:** Alternatively, you may provide a copy of the policy description page.

<i>Cash Value Total</i>		_____

BUSINESS INTERESTS

TYPE: General and limited partnerships, sole proprietorships, privately owned corporations, professional corporations, oil interests, farm and ranch interests, etc. Give a description of the interests, who has the interests, your ownership percentage in the interests, and the estimated value of the interests (opt.).

<i>Total</i>		_____

OTHER ASSETS

TYPE: Other property is any property you have that does not fit into any category listed above.	Owner	Value (Opt.)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
Safe Deposit Box? <input type="checkbox"/> Y <input type="checkbox"/> N Where/box #: _____	<i>Total</i>	

PERSONS TO ACT FOR YOU

GUARDIAN FOR MINOR CHILDREN: If you have any children under the age of 18, list in order of preference whom you wish to be their guardian in the event they were to become orphaned as minors.

Name and Address	Relationship to Client/s
1 _____	_____
2 _____	_____
3 _____	_____

SUCCESSOR TRUSTEE: After your death – or if married/partnered, after both of you have passed – list in order of preference whom you would want to carry out your instructions for distribution and, if desired, management of the trust property for your beneficiaries.

Name and Address (Asterisk(*) Names if intended to be Successor <u>Co</u> -Trustees)	Relationship to Client/s
1 _____	_____
2 _____	_____
3 _____	_____

EXECUTOR OF WILL: After your death, list in order of preference whom you would want to carry out the desires expressed in your will. It is commonplace but not required to list one's spouse/partner as #1.

CLIENT 1 EXECUTOR CHOICES

Name and Address (Asterisk(*) Names if intended to be <u>Co</u> -Executors)	Relationship to Client 1
1 _____	_____
2 _____	_____
3 _____	_____

CLIENT 2 EXECUTOR CHOICES

Name and Address (Asterisk(*) Names if intended to be <u>Co</u> -Executors)	Relationship to Client 2
1 _____	_____
2 _____	_____
3 _____	_____

POWER OF ATTORNEY: If you were incapacitated and unable to make FINANCIAL decisions for yourself, list in order of preference whom you would want to make those decisions for you as your agent. It is commonplace but not required to list one's spouse/partner as #1.

CLIENT 1 AGENT CHOICES

Name, Address & Telephone (Asterisk(*) Names if intended to be <u>Co</u> -Agents)	Relationship to Client 1
1 _____	_____
2 _____	_____
3 _____	_____

CLIENT 2 AGENT CHOICES

Name, Address & Telephone (Asterisk(*) Names if intended to be <u>Co</u> -Agents)	Relationship to Client 2
1 _____	_____
2 _____	_____
3 _____	_____

HEALTH CARE DIRECTIVE: If you were incapacitated and unable to make MEDICAL decisions for yourself, list in order of preference whom you would want to make decisions for you as your agent with regard to your medical treatment. It is commonplace but not required to list one's spouse/partner as #1.

CLIENT 1 AGENT CHOICES

Name, Address & Telephone	(Asterisk(*) Names if intended to be Co-Agents)	Relationship to Client 1
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____

CLIENT 2 AGENT CHOICES

Name, Address & Telephone	(Asterisk(*) Names if intended to be Co-Agents)	Relationship to Client 2
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____

DISTRIBUTION OF YOUR TRUST ESTATE

DIVISION OF PROPERTY UPON YOUR DEATH OR UPON DEATH OF SECOND SPOUSE/PARTNER TO DIE

- DIVIDE EQUALLY AMONG OUR CHILDREN AND THE DESCENDANTS OF ANY DECEASED CHILDREN:**
- DIVIDE AMONG NAMED INDIVIDUALS and/or CHARITIES in the FOLLOWING PERCENTAGES:**

HOW AND WHEN TO DISTRIBUTE YOUR PROPERTY:

- DISTRIBUTE OUTRIGHT TO THE BENEFICIARIES.**
- 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 beneficiaries for needs (health, education and maintenance). You may give written instructions to the trustee outlining guidelines to be followed in determining the beneficiaries' needs. You may provide for a staggered distribution of principal: e.g., 1/3 at age 30 and balance at age 40. You decide who will manage the property and carry out your distribution instructions. You decide how the trust is designed. List your desires:

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: