



ESTATE PLANNING PROFILE

Date: _____

FAMILY INFORMATION

Your legal name	Nickname	Date of birth	Age
Spouse's legal name	Nickname	Date of birth	Age
Residence street address		City, State & ZIP	
Home phone #	Cell phone #	Email address	
County of residence	Cell phone #	Email address	

CHILDREN

Legal name	City & State	Birthdate	Stepchild?	# of children
Legal name	City & State	Birthdate	Stepchild?	# of children
Legal name	City & State	Birthdate	Stepchild?	# of children
Legal name	City & State	Birthdate	Stepchild?	# of children

OCCUPATION

Your occupation	Work phone number	Work email
Spouse's occupation	Work phone number	Work email

INTERNAL USE ONLY

LWT - simple, minor, disclaim, CST, QTIP, GPOA, SNT
 RLT - simple, minor, disclaim, CST, QTIP, GPOA, SNT
 POAs, ILIT, LLC, prenup, life QTIP, b/s agmt
 acct, busown, corpexec, farm, dr, finadv , 1 3 5 7 9

Estimate: _____
 Deadline: _____

OBJECTIVES

Select or generally state your estate planning objectives. (e.g. what happens upon the death the first spouse? upon the death of the second spouse?)

- ___ All to surviving spouse, then to children, outright, in equal shares.
- ___ All to surviving spouse, then to children, in trust, in equal shares.
- ___ All to trust for benefit of surviving spouse, then to children, in equal shares.
- ___ Specific bequests (e.g. \$1,000 to each living grandchild) _____
- ___ Charitable bequests (e.g. \$1,000 to your church) _____
- ___ Other: _____

CURRENT DOCUMENTS

Yes or No or Uncertain

- Do you have durable powers of attorney? _____
- Do you have a Last Will & Testament? _____
- Do you have a revocable living trust? _____
- If so, is your revocable living trust fully funded? _____
- Do you have an irrevocable life insurance trust? _____
- Are you the beneficiary of any trust? _____
- Are you the holder of any powers of appointment? _____
- Have you filed federal gift tax returns in the past? _____
- Are both spouses citizens of the U.S.A.? _____

SPECIAL ISSUES

Yes or No or Uncertain

- Do you have a pre-nuptial or post-nuptial agreement? _____
- Do any beneficiaries have special needs to plan for? _____
- Are any beneficiaries irresponsible with money (spendthrifts)? _____
- Do you own real estate outside of Iowa? _____
- Do you own real estate outside of the U.S.? _____
- Do you wish to benefit any charities? _____
- Do you have any concerns about asset protection? _____
- Do you have any "community property"?
(e.g. AZ, CA, ID, LA, NV, NM, TX, WA, and WI.) _____

FIDUCIARIES

Guardians

1st nominee City & State

Alternate nominee City & State

Trustee & Executor

1st nominee City & State

Alternate nominee City & State

YOUR ADVANCED DIRECTIVES

Financial decisions

1st nominee City & State

Alternate nominee City & State

Health care decisions

1st nominee City & State

Alternate nominee City & State

SPOUSE'S ADVANCED DIRECTIVES

Financial decisions

1st nominee City & State

Alternate nominee City & State

Health care decisions

1st nominee City & State

Alternate nominee City & State

ADVISORS (optional)

Financial advisor Advisory firm City & State

Accountant Accounting firm City & State

Insurance agent Insurance agency City & State

FINANCIAL ASSETS

Please provide a **copy of your most recent net worth statement**. If you don't have a current statement, please provide estimates for each of the following, if applicable.

ASSETS:

Bank accounts (checking, savings, money market)	\$ _____
Certificates of deposit	\$ _____
Brokerage accounts	\$ _____
Real estate	\$ _____
Retirement plans (401k, 403b, TSA, IRA, Roth IRA)	\$ _____
Annuities	\$ _____
Stock options	\$ _____
Deferred compensation arrangements	\$ _____
Promissory Notes payable to you	\$ _____
Life insurance policies	\$ _____
Farm equipment, stored crop, livestock	\$ _____
Other	\$ _____

LIABILITIES:

Real estate mortgages	\$ _____
Home equity line of credit (HELOC)	\$ _____
Automobile loans	\$ _____
Commercial lines of credit (LOC)	\$ _____
Subordinated debt	\$ _____
Personal pledges	\$ _____
Promissory Notes payable by you to another party	\$ _____
Other	\$ _____

NET WORTH \$ _____

BUSINESS INTERESTS

If you own or have an ownership interest in more than one business, please photocopy this page and provide the following information for each business interest.

What the legal name of your business? _____

Is the business a sole proprietor, general pship, limited pship, LLC, S corp, C corp?

Are there other shareholders? Yes No

Is there a buy/sell agreement in place Yes No Uncertain

Is the buy/sell agreement "funded"? Yes No Uncertain

Where is the corporate minute book kept? _____

Do you intend to sell the business in the near term? Yes No Uncertain

Do you intend to sell the business in the long term? Yes No Uncertain

What do you want to happen to this business upon your departure (death/disability/retirement)?

Is this business transferable? Yes No Uncertain

Who are the key employees for this business? _____

Who would you like to succeed as owner(s) of this business? _____

If the business were to be sold, have you identified any potential buyers? _____

Identify if any of the following exit strategies have been utilized:

Employee Stock Ownership Plan (ESOP) Yes No Uncertain

Private Annuity Yes No Uncertain

Self Canceling Installment Note (SCIN) Yes No Uncertain

Grantor Retained Annuity Trust (GRAT) Yes No Uncertain

Installment sales to defective grantor trusts Yes No Uncertain