

Estate Planning Checklist

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Client's Name _____

Client's Home Phone Number (____) _____

Client's Work Phone Number (____) _____

Client's Mobile Phone Number (____) _____

Best Number to Call ____ Home ____ Work ____ Mobile

E-Mail Address (Home) _____

E-Mail Address (Work) _____

Fax Number (____) _____

Certification

The following pages of this checklist and attachments comprise a complete list of all of the assets and liabilities, both separate and community, of which I have an ownership interest. It also contains a complete list of all of the assets and liabilities, both separate and community, of which my spouse has an ownership interest. I understand that you will rely on this information in making estate planning recommendations and/or in preparing estate planning documents. I also understand that if the information provided is not complete and accurate the recommendations and/or estate planning documents prepared in reliance on this information may be inappropriate or adversely affected.

Client Signature _____ Date _____

Client Signature _____ Date _____

Full formal name _____

Name normally used _____

Primary residence address _____

Have you lived in other states? _____ If yes, when and where? _____

Date and place of birth _____

Social Security Number _____ Are you a United States citizen? _____

Employer _____ Occupation _____

Anticipated retirement date _____

If you are married, complete the following for your spouse:

Spouse's full formal name _____

Name normally used _____

Date and place of marriage _____

Has your spouse lived in other states? _____ If yes, when and where? _____

Spouse's date and place of birth _____

Spouse's Social Security Number _____ Is your spouse a United States citizen? _____

Spouse's employer _____ Occupation _____

Spouse's anticipated retirement date _____

If you are currently not married, were you previously married? _____

If you were previously married, did your prior marriage end in _____ death _____ or divorce?

If your prior marriage ended in divorce, indicate the name of the divorced spouse and the date

of divorce. _____

If your prior marriage ended with the death of a spouse, indicate the name of the predeceased spouse and the date of death. _____

Was a succession completed? _____ If yes, attach a copy of the succession documents.

If your spouse was previously married, did the marriage end in _____ death _____ or divorce?

If your spouse's prior marriage ended in divorce, indicate the name of the divorced spouse and the date of divorce. _____

If your spouse's prior marriage ended in the death of a spouse, indicate the name of the predeceased spouse and the date of death. _____

Was a succession completed? _____ If yes, attach a copy of the succession documents.

Do you have a pre-nuptial or post-nuptial agreement? _____ Yes _____ No. If yes, attach a copy.

Children (If Applicable)

1) Child's Name _____ Date of Birth _____

Address _____

Social Security Number _____ Whose Child? ☐ Both ☐ Husband ☐ Wife

Phone Number _____ E-Mail _____

Marital Status _____ Spouse's Name _____

Names and Dates of Birth of Children _____

2) Child's Name _____ Date of Birth _____

Address _____

Social Security Number _____ Whose Child? ☐ Both ☐ Husband ☐ Wife

Phone Number _____ E-Mail _____

Marital Status _____ Spouse's Name _____

Names and Dates of Birth of Children _____

3) Child's Name _____ Date of Birth _____

Address _____

Social Security Number _____ Whose Child? ☐ Both ☐ Husband ☐ Wife

Phone Number _____ E-Mail _____

Marital Status _____ Spouse's Name _____

Names and Dates of Birth of Children _____

4) Child's Name _____ Date of Birth _____

Address _____

Social Security Number _____ Whose Child? ☐ Both ☐ Husband ☐ Wife

Phone Number _____ E-Mail _____

Marital Status _____ Spouse's Name _____

Names and Dates of Birth of Children _____

5) Child's Name _____ Date of Birth _____

Address _____

Social Security Number _____ Whose Child? ☐ Both ☐ Husband ☐ Wife

Phone Number _____ E-Mail _____

Marital Status _____ Spouse's Name _____

Names and Dates of Birth of Children _____

6) Child's Name _____ Date of Birth _____

Address _____

Social Security Number _____ Whose Child? ☐ Both ☐ Husband ☐ Wife

Phone Number _____ E-Mail _____

Marital Status _____ Spouse's Name _____

Names and Dates of Birth of Children _____

Are any of your children adopted? _____

Are any of your children handicapped or in poor health? _____

Do you have any illegitimate children? _____

Are any illegitimate children formally or informally acknowledged? _____

Have any children predeceased? _____ If yes, list their name, date of death, date of birth, surviving spouse's name and the pre-deceased's children's names and dates of birth. _____

Any special concerns regarding children (financial difficulties, drugs, alcohol, etc.)?

Do you wish to favor one or more children and, if so, in what manner? _____

Do you wish to disinherit one or more children? _____

In the event both you and your spouse die leaving minor children, who do you wish to name as the tutor/guardian of your minor children? _____

Tutor/Guardian's name, address and phone number _____

Successor Tutor/Guardian's name, address and phone number _____

Prior Gifts

Have you made any gifts in amounts over the annual exclusion (\$15,000 [2020] per year)? _____

If so, list the donee, amount and date of the gifts _____

Were gift tax returns filed? _____ Yes _____ No. If yes, attach a copy of gift tax returns.

Usufruct Provisions

Do you wish to leave the usufruct of your community property to your surviving spouse?_____ Will the usufruct terminate upon ____ remarriage or ____ death?

Do you wish to provide your surviving spouse with the power to dispose of non-consumable community property assets (e.g. allow your spouse to sell real estate or investments without the consent of the children) ____ Yes ____No.

Do you wish to leave the usufruct of your separate property to your surviving spouse?_____ Will the usufruct terminate upon ____ remarriage or ____ death?

Do you wish to provide your surviving spouse with the power to dispose of non-consumable separate property assets (e.g. allow your spouse to sell separate property real-estate or investments without the consent of the children) ____ Yes ____No.

Special Bequests

(Leaving a special asset or sum of money to someone)

List any special bequests _____

List any charitable bequests _____

Executors

Who do wish to name as Executor of your estate? (provide name, address and relationship to you) _____

Who do you wish to name as Successor Executor? (provide name, address and relationship to you) _____

Shall your Executor be required to post bond? _____

Is your estate to be administered as an independent administration? _____

Safe Deposit Boxes

Bank _____ Number _____

Who has access? _____

Trusts

Do you wish to leave any portion of your assets in trust for your children or your spouse?

Any specific trust provisions? _____

Who do you wish to name as trustee? _____

Who do you wish to name as successor trustee? _____

Powers of Attorney

Do you have a general power of attorney? _____ Date _____ If yes, attach a copy.

If not, do you wish to execute one? _____ Who will act on your behalf as attorney-in-fact? _____

Who will act on your behalf as successor attorney-in-fact? _____

Do you have a medical power of attorney? _____ Date _____ If yes, attach a copy.

If not, do you wish to execute one? _____ Who will act on your behalf as attorney-in-fact? _____

Who will act on your behalf as successor attorney-in-fact? _____

Living Wills

Do you have a living will? _____

To whom have you given copies? _____

If not, do you wish to execute one? _____

Other Advisors

(Please provide name, address and phone number)

Other Attorney _____

Investment Advisor _____

Accountant _____

General Insurance Agent _____

Life Insurance Agent _____

Trust Officer _____

Do you currently have a will? _____ Yes _____ No. If yes, attach a copy.

Provide a copy of the prior two year's income tax returns.

Assets and Liabilities Worksheet

Cash

(savings accounts, checking accounts, CDs, money market accounts)

Attach a copy of the most recent statement

<u>Type of Account</u>	<u>Name of Institution</u>	<u>Separate or Community Property</u>	<u>Name on Account</u>	<u>Value</u>
1) _____	_____	_____	_____	_____
2) _____	_____	_____	_____	_____
3) _____	_____	_____	_____	_____
4) _____	_____	_____	_____	_____
5) _____	_____	_____	_____	_____
6) _____	_____	_____	_____	_____
7) _____	_____	_____	_____	_____

Investments

(stocks, bonds, mutual funds, ETFs, etc.)

Attach a copy of the most recent statement

<u>Type of Account</u>	<u>Name of Institution</u>	<u>Separate or Community Property</u>	<u>Name on Account</u>	<u>Value</u>
1) _____	_____	_____	_____	_____
2) _____	_____	_____	_____	_____
3) _____	_____	_____	_____	_____
4) _____	_____	_____	_____	_____
5) _____	_____	_____	_____	_____
6) _____	_____	_____	_____	_____
7) _____	_____	_____	_____	_____
8) _____	_____	_____	_____	_____

Annuities

Attach a copy of the most recent statement

<u>Company</u>	<u>Owner</u>	<u>Annuitant</u>	<u>Beneficiary</u>	<u>Current Value</u>	<u>Amount Invested</u>
1) _____	_____	_____	_____	_____	_____
2) _____	_____	_____	_____	_____	_____
3) _____	_____	_____	_____	_____	_____
4) _____	_____	_____	_____	_____	_____
5) _____	_____	_____	_____	_____	_____
6) _____	_____	_____	_____	_____	_____

Life Insurance

Attach a copy of the policy face sheet

<u>Insurance Company</u>	<u>Insured</u>	<u>Owner</u>	<u>Beneficiary</u>	<u>Face Amount</u>	<u>Cash Value</u>
1) _____	_____	_____	_____	_____	_____
2) _____	_____	_____	_____	_____	_____
3) _____	_____	_____	_____	_____	_____
4) _____	_____	_____	_____	_____	_____
5) _____	_____	_____	_____	_____	_____
6) _____	_____	_____	_____	_____	_____
7) _____	_____	_____	_____	_____	_____
8) _____	_____	_____	_____	_____	_____

Retirement Assets

(IRAs, 401(k)s, 403(b)s, pensions, etc.)

Attach a copy of the most recent statement

<u>Type of Plan</u>	<u>Owner</u>	<u>Beneficiary</u>	<u>Value</u>	<u>% Vested</u>
1) _____	_____	_____	_____	_____
2) _____	_____	_____	_____	_____
3) _____	_____	_____	_____	_____
4) _____	_____	_____	_____	_____
5) _____	_____	_____	_____	_____
6) _____	_____	_____	_____	_____
7) _____	_____	_____	_____	_____

Real Estate

Attach a copy of the deed (act of sale, donation or succession documents)

<u>Location</u>	<u>Date Acquired</u>	<u>Fair Market Value</u>	<u>Community or Separate Property</u>	<u>Cost Basis</u>
1) _____	_____	_____	_____	_____
2) _____	_____	_____	_____	_____
3) _____	_____	_____	_____	_____
4) _____	_____	_____	_____	_____
5) _____	_____	_____	_____	_____
6) _____	_____	_____	_____	_____
7) _____	_____	_____	_____	_____
8) _____	_____	_____	_____	_____

Closely Held Business Interests

Attach copies of formation documents, by-laws or operating agreement, and most recent tax documents

1) Name of Business _____

Type of Business _____ Total Value _____

Structure (LLC, Corporation, Partnership or Sole Proprietorship) _____

Your Percentage of Ownership _____ Spouse's Percentage of Ownership _____

Other owners and percentages of ownership _____

2) Name of Business _____

Type of Business _____ Total Value _____

Structure (LLC, Corporation, Partnership or Sole Proprietorship) _____

Your Percentage of Ownership _____ Spouse's Percentage of Ownership _____

Other owners and percentages of ownership _____

3) Name of Business _____

Type of Business _____ Total Value _____

Structure (LLC, Corporation, Partnership or Sole Proprietorship) _____

Your Percentage of Ownership _____ Spouse's Percentage of Ownership _____

Other owners and percentages of ownership _____

Does a buy-sell agreement exist on any business? _____ If so, what type? _____

How is the buy-sell agreement funded? _____

Personal Assets

(automobiles, boats, jewelry, antiques, firearms, collections, etc.)

<u>Description</u>	<u>Community or Separate Property</u>	<u>Cost Basis</u>	<u>Current Value</u>
1) _____	_____	_____	_____
2) _____	_____	_____	_____
3) _____	_____	_____	_____
4) _____	_____	_____	_____
5) _____	_____	_____	_____
6) _____	_____	_____	_____
7) _____	_____	_____	_____
8) _____	_____	_____	_____

Other Assets

(debts due to you, royalties, inheritances, interests in trusts, etc.)

1) _____
2) _____
3) _____
4) _____

Liabilities

<u>Description of Property</u>	<u>Name of Creditor</u>	<u>Balance Due</u>
1) _____	_____	_____
2) _____	_____	_____
3) _____	_____	_____
4) _____	_____	_____

Additional Instructions

Upon your death, to whom do you wish to distribute your community property? _____

Upon your death, to whom do you wish to distribute your separate property? _____

Do you wish to place any restrictions on your spouse or your children's use of inherited property (e.g. limit access to the assets through the use of a trust or distributions of only income unless a special need arises)? _____

If you and your spouse die prematurely, are your children to receive property at the age 18 or should property be placed in trust until they reach a more mature age?

Will your surviving spouse and/or children need assistance with asset or investment management?

Are there concerns about long-term care expenses and/or Medicaid spend-down? _____

If none of your children are living at the time of your spouse's death, to whom do you wish to distribute your assets? _____

Primary estate planning goal _____

Other financial, retirement or estate planning issues _____
