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ESTATE PLANNING WORKBOOK

This packet is provided as part of the Estate Planning Workbook offered by Mortel Law, PLLC. The receiving of this document does not constitute an attorney client relationship. This document does not provide legal advice and is for informational purposes only. If you have questions regarding the estate planning process, please feel free to contact Attorney Jennifer Mortel at jmortel@mortellaw.com or (651) 288-2843.

Having a proper estate plan helps you to manage and preserve your assets during your lifetime and efficiently transfer assets to your intended beneficiaries at your death. The first step is learning what is important in developing an estate plan. This planning workbook will not only help you understand what you need to know about estate planning, it can also help you get organized and prepare for meetings with your estate planning attorney.

A <u>Will</u> is the most common estate planning device. A Will is a written document by which a person is able to direct the distribution of his or her assets upon death. During life, the Will is not operative and may be changed or revoked at any time. Upon death, the Will becomes effective and will direct which assets go to which beneficiaries. However, the manner in which property is held during life will determine whether property will pass under the terms of the Will or by alternative means. If property is owned as joint tenants with rights of survivorship, it will pass automatically to the surviving joint owner upon the death of the other joint owner. If property has a beneficiary designation, such as life insurance, the property will pass automatically to the named beneficiary. The most important benefit of creating a Will is the ability to direct the distribution of your estate in the desired manner. If a person does not have a will, their assets will be distributed to the heirs in a manner and amount determined by the Minnesota intestacy statute instead of according to the wishes of the decedent.

A <u>Trust</u> is created when the owner of property (sometimes called the grantor, donor, or settlor) transfers it to another person (the trustee) to manage for the benefit of the beneficiaries. Establishing a trust requires a document that specifies your wishes, lists beneficiaries, names a trustee or trustees to manage the assets, and describes what the trustee or trustees may do. Once the document is completed, assets must be transferred to the trust. The trustee holds the title to the property and manages the property for the benefit of the beneficiaries. The beneficiaries may be a specific person, a group of people, or an organization.

There are two basic types of trusts. A **testamentary trust** is created by your will, which transfers property to the trust after your death. The assets used to fund these types of trusts usually must go through the probate process. An example of a testamentary trust would be one you create in your will to leave money for the benefit of a minor child. Your will would establish the trust to which the money is transferred, the trust would be administered by a trustee until the child reaches a stated age, at which point the remaining money held in the trust would be transferred outright to the child.

A **living trust** is created during your lifetime when all or part of your property is transferred into the trust. A living trust is a trust made while you are still alive. Living trusts can be revocable or irrevocable. One of the most popular types of trusts is the revocable living trust, which allows you to make changes to the trust during your lifetime. A revocable living trust usually directs the trustee to pay all of the trust's income to you for life and to pay the trust assets to named persons after your death. Revocable living trusts may avoid the often lengthy probate process but, by themselves, don't shelter assets from federal or state taxes. An irrevocable living trust may be considered if you are seeking to reduce estate taxes.

STEP 1: GATHER IMPORTANT DOCUMENTS

In order to fully understand and develop a proper plan for your estate, you need to gather information regarding your family and assets. Please use this as a checklist for gathering copies of the following information:

1. Current Will
2. Current Power of Attorney and Health Care Directive
3. Life Insurance Policies and Beneficiary Designations
4. Retirement and Investment Account Statements and Beneficiary Designations
5. Trust Documents – whether created by you or under which you are a beneficiary
6. Deeds to Real Estate
7. Bank Account Documentation
8. Buy-Sell Agreements for any business in which you have an ownership interest
9. Divorce Decrees and Property Settlements, or Pre-Marital Agreement
10. Gift Tax Returns

STEP 2: ESTATE PLANNING INFORMATION QUESTIONNAIRE

I. Family Information: (Please include middle initials)

Name:	Name of Spouse:
Social Security No.:	Social Security No.:
Home Address:	Home Address:
City, State, Zip:	
County:	
Email:	
Telephone No.: (home)	
(cell)	(cell)
(work)	(work)
Occupation:	Occupation:
Business Address:	Business Address:
City, State, Zip:	City, State, Zip:
Date & Place of Birth:	Date & Place of Birth:
Citizenship:	Citizenship:
natural or adopted child of both yo Name of Child:	· ·
Home Address:	
City, State, Zip:	
Phone No.(s):	
Date of Birth:	
Marital Status:	
Name of Child:	Name of Child:
Home Address:	Home Address:
City, State, Zip:	City, State, Zip:
Phone No.(s):	Phone No.(s):
Date of Birth:	Date of Birth:
Marital Status:	Marital Status:

Grandchildren.

<u>Name</u>		<u>Pare</u>	<u>nts</u>		Date of Birth
		_			
		_			
		_			
					
Parents.					
Husband's (or s	ingle man's)	parents. Indi	cate date of dea	oth if deceased	l.
Name:			Name	e:	
Age:			Age:		
Wife's (or singl	e woman's)	parents. Indic	ate date of deat	th if deceased.	
Name: _			Name	e:	
Address:			Addr	ess:	
City, Star	te, Zip:		City,	State, Zip:	
Phone No	o.(s):		Phon	e No.(s):	
Age:			Age:		
Marriage Info	mation:				
Date of	Marriage:		Place	e of Marriage:	
Have yo	u and your s	pouse signed a	a premarital agı	reement?	YesNo
Have yo	u or your spo	ouse been dive	orced?		Yes No
Do you	or your spou	se have any ch	nildren by prior	marriage(s)?	Yes No
			ch has a commu te in which you		law?YesNo
	Wisconsin Washington	Arizona Louisiana	California Nevada	Texas Idaho	New Mexico

Cash, Savings and Ch Financial Institution				Estimated Value
				\$ \$
Stocks, Bonds and Mu	ıtual Funds (not i	ncluding IRAs a	nd retirement plar	ıs)
Company/Name	How	Titled? (husbar	nd, wife or both)	Estimated Value
				\$
				\$
				•
				Ψ
Qualified Retirement	Plans (pension, pr	ofit-sharing, IRA	A, 401K, 403B, S	EP and other)
Qualified Retirement Company			A, 401K, 403B, Si Beneficiary	
	Type of Pla	n Participant	Beneficiary	
	Type of Pla	n Participant	Beneficiary	Estimated Value
	Type of Pla	n Participant	Beneficiary	Estimated Value \$
	Type of Pla	n Participant	Beneficiary	Estimated Value \$\$ \$
	Type of Pla	n Participant	Beneficiary	Estimated Value \$\$ \$\$ \$\$
	Type of Pla	n Participant	Beneficiary	Estimated Value \$\$ \$\$ \$\$ \$\$
	Type of Pla	n Participant	Beneficiary	Estimated Value \$\$ \$\$ \$\$ \$\$ \$\$
Company	Type of Pla	n Participant	Beneficiary	Estimated Value \$\$ \$\$ \$\$ \$\$ \$\$
Real Estate – Deeds	Type of Pla	n Participant	Beneficiary	Estimated Value \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$

II.

Financial Information

Date: _____

icy 1 Pol	icy 2	Policy 3	Policy 4
, term)			
Owner		Estimated •	Value
Business	s 1	Business 2	
LLC, Corp)			
terest			
ments:			
	Owner Business LLC, Corp)	Owner Business 1 LLC, Corp)	Owner Estimated Business 1 Business 2 ELLC, Corp)

Gift History (Self	i) .			
Have you ever ma	nde gifts of cash or property in ex	xcess of \$10,000?	Yes	No
If yes, were federa	Yes	No		
Have you ever inh	Yes	No		
Do you expect to	Yes	No		
Have you ever ma	Yes	No		
Are you a benefic	iary of an existing trust created b	by someone else?	Yes	No
Gift History (Spo	ouse).			
Have you ever ma	nde gifts of cash or property in ex	xcess of \$10,000?	Yes	No
If yes, were federa	al or state gift tax returns filed?		Yes	No
Have you ever inh	nerited any cash or other property	y?	Yes	No
Do you expect to	receive any substantial gifts or ir	nheritances in the future?	Yes	No
Have you ever ma	nde gifts by creating a trust?		Yes	No
Are you a benefic	iary of an existing trust created b	by someone else?	Yes	No
Document Storag	ge.			
Where do you cur	rently store important docume	ents?		
Do you have a Saf	fe Deposit Box?	Location:		
Who has access to	your safe deposit box?			
Professional Adv	isors:			
i i orespromur riu v	Accountant _	Financial Advis	<u>or</u>	
Name				
Address				
City, State, Zip				
Phone				
Fax				
	Insurance (Life)	Insurance (Proj	o./Casualty)	
Name				
Address				
City, State, Zip				
Phone				
Fax				

STEP 3: REPRESENTATION & INSTRUCTIONS

Guardians. Who should be guardian of your minor children? A guardian has physical and legal control over your children until they reach the age of 18. The selection of a guardian should include careful consideration of things such as the guardian's health, age, marital status, religious and/or societal beliefs, existing relationship with the children, and financial security.

	Guardian:	Alternate:
	Relationship to you:	Relationship to you:
your will a of yo you choos	estate? A Personal Representative is the and overseeing the payment of your debt our assets according to your will. Since y should pick someone you trust. Other sing a personal representative include:	ersonal Representative (also known as Executor) of e person who will be responsible for probating your as, the collection of your assets, and the distribution your personal representative will handle your assets, a characteristics you may want to consider when knowledge in financial matters, attention to detail, iciaries, and willingness to work within the probate sonal representative to act jointly.
Self:	Personal Rep.:	Alternate:
	Relationship to you:	Relationship to you:
		Relationship to you.
Spous	se: Personal Rep.:	Alternate:
	Relationship to you:	Relationship to you:
create for the rust speci- person few Beca	on, bank or trust company responsible for ed, the owner of property transfers it to a ne benefit of someone else. The trustee for the benefit of your children or other fy for distribution. The characteristics onal representative. However, where a per years, a trustee may serve for many mo- use of the potential long duration of a tr	e plan, who should be the trustee? A trustee is the r managing the assets in your trust. When a trust is another person (the trustee) to manage the property holds the title to the property and administers the er beneficiaries until they reach whatever age you of a good trustee are similar to those listed for a ersonal representative's role will typically last only are years depending on the ages of the beneficiaries. The ust, a professional fiduciary such as a bank or trust fiduciary will likely charge a fee for their services.
Self:	_	
	Trustee:	Alternate:
	Relationship to you:	Relationship to you:
Spous		41
	Trustee:	Alternate:
	Relationship to you:	Relationship to you:

	basic plan for the distribution of your estate. Please are of property to be given to each individual or institut	
Oo any of the b	beneficiaries of your estate have specials needs? If so,	please describe:
	ADDITIONAL QUESTIONS OR CONCE	RNS

STEP 4: PLANNING FOR LIFETIME INCAPACITY

Attorney-in-Fact:

Self:

Planning for lifetime incapacity is also an important part of an estate plan. Your incapacity could result from being injured in an accident or a sudden illness.

Financial Representation. Who will represent you in financial matters if you become incapacitated or otherwise unable to handle your finances? A power of attorney allows you to appoint someone you trust to act for you in handling your financial affairs in the event you are unable to do so.

Alternate:

	Relationship to you:	Relationship to you:
	Home Address:	Home Address:
	City, State, Zip:	City, State, Zip:
	Phone No.(s):	Phone No.(s):
Spous	se:	
	Attorney-in-Fact:	Alternate:
	Relationship to you:	Relationship to you:
	Home Address:	Home Address:
	City, State, Zip:	City, State, Zip:
	Phone No.(s):	Phone No.(s):
comr make certai	•	irective can be used to appoint a person you trust to can also include your wishes regarding the use of
comr make	nunicate your wishes? A Health Care De health care decisions for you. You can treatments or procedures in your directions.	irective can be used to appoint a person you trust to can also include your wishes regarding the use of
comr make certai	nunicate your wishes? A Health Care De health care decisions for you. You can treatments or procedures in your direct Health Care Agent:	rective can be used to appoint a person you trust to can also include your wishes regarding the use of tive. Alternate:
comr make certai	nunicate your wishes? A Health Care De health care decisions for you. You can treatments or procedures in your directions.	irective can be used to appoint a person you trust to can also include your wishes regarding the use of tive.
comr make certai	nunicate your wishes? A Health Care De health care decisions for you. You can treatments or procedures in your direct Health Care Agent: Relationship to you:	rective can be used to appoint a person you trust to can also include your wishes regarding the use of tive. Alternate:
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comr make certa Self:	municate your wishes? A Health Care De health care decisions for you. You can treatments or procedures in your direct Health Care Agent: Relationship to you: Home Address: City, State, Zip: Phone No.(s): See: Health Care Agent: Relationship to you:	Alternate: City, State, Zip: Phone No.(s): Alternate: Relationship to you: Relationship to you:

Health Care Preferences. Do you agree or disagree with the following statement?

If I am in a terminal condition and cannot express my wishes, I wish to be allowed to die naturally and not be kept alive by artificial means or heroic measures. I do not want any medical treatment that will not substantially improve my condition or help me recover, but will only postpone the moment of my death. However, I want whatever care is appropriate to keep me as comfortable and as free of pain as is reasonably possible, including the administration of pain relieving drugs and surgical or medical procedures calculated to relieve my pain, even though some drugs or procedures may hasten my death.

	Agree, I do not want prolonged life support.
	Disagree, I prefer to be kept alive by artificial means.
se:	
	Agree, I do not want prolonged life support.
	Disagree, I prefer to be kept alive by artificial means.
Spe	cial Health Care Instructions (Self):
Spe	cial Health Care Instructions (Spouse):
-	
Org	gan Donorship: What are your preferences for organ donorship?
Org Self	· · · · · · · · · · · · · · · · · · ·
	: I wish to donate my organs, tissue and other body parts when I die.
	· · · · · · · · · · · · · · · · · · ·
Self	: I wish to donate my organs, tissue and other body parts when I die.
Self	I wish to donate my organs, tissue and other body parts when I die. I do not wish to donate.

ADDITIONAL INFORMATION

Do you prefer to be buried or crema	nted? Self:		
	Spouse:		
Where do you want to be buried or	interred? Self:		
	Spouse:		
Where do you want your memorial	service? Self:		
	Spouse:		
Please re-read the entire questionna your ability.	aire to be certain	you have answered everything to the	he best of
DATE :	SIGNATURE:		(Self)
DATE:	SIGNATURE:		(Spouse)

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