

# DECEDENT'S ESTATE ORGANIZER

The information in this organizer is critical for the settling the decedent's estate in accordance with decedent's wishes and applicable law. If possible, please bring to our office for your appointment:

- o This Completed Organizer
- Any Bank or Other Account Statements
- Lists of Stocks, Bonds
- Location of Safe Deposit Box
- o Last Tax Return
- o Certified Death Certificates If Issued
- Last Will and Testament
- Any Trust or other Agreements
- o Copies of Insurance Policies, Annuities, Retirement Plans
- o Copies of Real Estate Documents including Deeds
- Copies of Divorce Decrees

All information provided will be held in strict confidence.

### DECEDENT'S INFORMATION

Decedent's Legal Nar	me					
	(Name most often used to	title prop	erty and accounts)			
Also Known As	(Other names used to ti		ty and accounts)			
Prefer to be called	Birth date			SS#		
	Plac					
	County of Residence					
Business Address		_ City _		Sta	ite	Zip
E-mail Address			It is okay to co	mmunicate with i	me via	my E-mail address
□ Married: Date of	Marriage	Previo	ously 🛛 Divorce	d 🛛 Widowed	🛛 Nev	ver Married
Citizen of 🛛 USA	Other:		Date of Div	orce:		
Spouse's Legal Name						
	(Name most often used to	title prop	erty and accounts)			
Also Known As	(Other names used to ti	tle proper	tv and accounts)			
Prefer to be called	Birth date _			SS#		
	County of Residence					
Employer			Position			
Business Address		_ City _		Sta	ite	Zip
E-mail Address		_ [	It is okay to co	mmunicate with	me via	my E-mail address
Citizen of 🛛 USA	• Other:					
Have you located a L	ast Will and Testament?Yes [ ] No [ ] Date	of Will_				
Location of the Origin	nal Will					
Have you located a T	rust?Yes [ ] No [ ] Date of Trust:					
Location of the Origin	nal Trust					

### DECEDENT'S ADVISORS

Name	Telephone
Personal Attorney	 
Accountant	 
Financial Advisor	 
Life Insurance Agent	 

### DECEDENT'S CHILDREN AND/OR BENEFICIARIES

Use full legal name. In last column, use "JT" if both spouses are the parents, "H" if husband is the parent, "W" if wife is the parent.

Name			Birth date	Parent or Relationship
				<del></del>
Telephone:	(work)	(home)	(cell) SSN:	
Married:			Number of Children:	
Name			Birth date	Parent or Relationship
Address:				
Telephone:	(work)	(home)	(cell) SSN:	
Married:			Number of Children:	
Name			Birth date	Parent or Relationship
Address:				
Telephone:	(work)	(home)	(cell) SSN:	
Married:			Number of Children:	
Name			Birth date	Parent or Relationship
Address:				
Telephone:	(work)	(home)	(cell) SSN:	
Married:			Number of Children:	
Name			Birth date	Parent or Relationship
Address:				
Telephone:	(work)	(home)	(cell) SSN:	
Married:			Number of Children:	

### IMPORTANT QUESTIONS

(Please check "Yes" "No" or "Uncertain" for your answer)	Yes	No	?
Was decedent (or spouse) receiving social security, disability, or other governmental benefits? Describe			
Was decedent (or spouse) making payments pursuant to a divorce or property settlement order? <i>Please furnish a copy</i>			
If decedent was married did the decedent and spouse signed a pre- or post-marriage contract? <i>Please furnish a copy</i>			
Has decedent been widowed? If a federal estate tax return or a state death tax return was filed, please furnish a copy			
Did decedent ever file federal or state gift tax returns? Please furnish copies of these returns			
Did decedent complete trust, or estate planning? Please furnish copies of these documents			
If married, did decedent ever live in any of the following states while married to each other? Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Texas, Washington, or Wisconsin			
Is decedent named a beneficiary of anyone else's trust? If so, please explain below.			
Does decedent's spouse or any of decedent's children have special educational, medical, or physical needs?			
Do any of decedent's children receive governmental support or benefits?			
Did decedent provide primary or other major financial support to adult children or others?			
Was decedent subject to guardianship or conservatorship prior death?			
Was decedent in control of his or her financial and personal affairs prior to death?			
If the decedent was not in control of his or her financial or personal affairs prior to death, who was in control?			
Was decedent the party to any litigation at the time of death?			
Were decedent's relationships with his or her family good and harmonious prior to death?			
Are you aware of any person who might assert that the decedent was, prior to his or her death, subjected to undue influence in the exercise of financial or personal matters?			

ADDITIONAL RELEVANT INFORMATION	ADDITIONAL	RELEVANT	INFORMATION
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### PROPERTY INFORMATION

#### THE DECEDENT'S PROPERTY INFORMATION CHECKLIST

TypeImmediately after the heading for each kind of property is a brief<br/>explanation of what property you should list under that heading.

**"Owner" of Property** How decedent owned this property is **extremely important** for purposes of properly settling the decedent's estate. For each property please indicate how the property is titled. When doing so, please use the following abbreviations:

Owner of Property	Abbreviation
If in Decedent's name alone, with no other person	D
If in Spouse's Wife's name alone, with no other person	S
Joint with spouse	JS
Joint with someone other than spouse	10
Decedent's Trust	TR
If you are not sure how the property is owned	?

#### **DECEDENT'S REAL PROPERTY**

**TYPE:** Any interest in real estate including decedent's family residence, vacation home, time-share, vacant land, etc.

General Description and/or Address (Including State)	Owner	Market Value	Loan Balance
	Total		

#### FURNITURE AND PERSONAL EFFECTS

**TYPE:** Are you aware that the decedent owned any unique or valuable collections? List separately only major personal effects such as, jewelry, collections, antiques, furs, and all other valuable non-business personal property (*indicate type below and give a lump sum value for miscellaneous, less valuable items.*).

Type or Description	Owner	Market Value
Miscellaneous Furniture and Household Effects (Total)		
	Total	

#### **AUTOMOBILES, BOATS AND RVS**

**TYPE:** For each motor vehicle, boat, RV, etc. please list the following: description, how titled, market value and encumbrance:

#### **BANK & SAVINGS ACCOUNTS**

**TYPE:** Checking Account "CA", Savings Account "SA", Certificates of Deposit "CD", Money Market "MM" (*indicate type below*). <u>Do</u> not include IRAs or 401(k) s here

Name of Institution and account number	Туре	Owner	Amount
Total			

Note: If Account is in decedent's name (or decedent's spouse's name) for the benefit of another, please specify and give other's name.

#### **DECEDENT'S STOCKS & BONDS**

**TYPE:** List any and all stocks and bonds decedent's own. <u>If held in a brokerage account, lump them together under each account</u>. *(Indicate type below)* 

Stocks, Bonds or Investment Accounts	Туре	Acct. Number	Owner	Amount
			Total	

#### **DECEDENT'S LIFE INSURANCE POLICIES & ANNUITIES**

**TYPE:** Term, whole life, split dollar, group life, annuity. **ADDITIONAL INFORMATION:** Insurance company, type, face amount (death benefit), whose life is insured, who owns the policy, the current beneficiaries, who pays the premium, and who is the life insurance agent.

Total

#### **DECEDENT'S RETIREMENT PLANS**

**TYPE:** Pension (P), Profit Sharing (PS), H.R. 10, IRA, SEP, 401(K). **ADDITIONAL INFORMATION:** Describe the type of plan, the plan name, the current value of the plan, and any other pertinent information.

Total

#### **DECEDENT'S BUSINESS INTERESTS**

**TYPE:** General and Limited Partnerships, Sole Proprietorships, privately owned corporations, professional corporations, oil interests, farm and ranch interests. **ADDITIONAL INFORMATION:** Give a description of the interests, who has the interest, decedent's ownership in the interests, and the estimated value of the interests.

## MONEY OWED TO DECEDENT

TYPE: Mortgages or promissory notes payable to decedent, or other moneys owed to decedent.

Name of Debtor	Date of Note	Maturity Date	Owed to	Current Balance
			Total	

#### DECEDENT'S ANTICIPATED INHERITANCE, GIFT, OR LAWSUIT JUDGMENT

**TYPE:** Gifts or inheritances that decedent expected to receive at some time in the future; or moneys that decedent was anticipated receiving through a judgment in a lawsuit. **Describe in appropriate detail**.

Description \_\_\_\_\_

Total estimated value \_\_\_\_\_

Owner

Value

\_

\_\_\_\_\_

Total

Total

#### **DECEDENT'S OTHER ASSETS**

**TYPE:** Other property is any property that decedent had that does not fit into any listed category.

Туре

### **SUMMARY OF VALUES**

Please tally the values from the asset sections above and list them here.

ASSET Real Property	DECEDENT	SPOUSE	Total Value
Furniture and Personal Effects			
Automobiles, Boats and RV's			
Bank and Savings Accounts			
Stocks and Bonds			
Life Insurance and Annuities			
Retirement Plans			
Business Interests			
Money owed to decedent			
Anticipated Inheritance, Etc.			
Other Assets			

Total Assets:

\*For jointly owned property, enter 1/2 in DECEDENT'S column and 1/2 in SPOUSE'S column, unless actual ownership is otherwise.

Fiduciaries are individuals or institutions who act on the decedent's behalf or on behalf of decedent's loved ones.

GUARDIAN FOR MINOR CHILDREN: If decedent has any children under the age of 18 or disabled, determine who is named as guardian of the person and conservator of the property of each minor child.

Name and Address	Relationship	Telephone No.

#### PERSONAL REPRESENTATIVE:

Name and Address	Relationship	Telephone No.

#### SUCCESSOR TRUSTEES:

Name and Address	Relationship	Telephone No.

#### DECEDENT'S WISHES Are you aware of any specific wishes the decedent would like to make known concerning organ AT DEATH: donation, disposition of decedent's remains, or any other matters? \_\_\_\_\_ If so, what are those wishes?

**DECEDENT'S** PERSONAL **INSTRUCTIONS:** 

Are you aware of any other personal instructions the decedent made? If so, what are those instructions?

OTHER ITEMS TO INCLUDE OR DISCUSS: