WILLS AND SUPPORTING ESTATE DOCUMENTS CHECKLIST (Refer to Glossary of Terms for a comprehensive discussion of each of the items below.)

GIFTS OF SPECIFIC PERSONAL PROPERTY:

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	LICINIC TAY CDEDITS.
	<u>USING TAX CREDITS:</u> (See Glossary for Current Estate Tax Credit)
	(See Glossary for Current Estate Tax Credit)
	I would like to set up a credit shelter trust taking full advantage of the State or Federal Unified Credit.
	I would like to set up a credit shelter trust placing in such trustdollars.
	I want all amounts to flow, unencumbered by any trust, to my spouse.
	I would like to will the maximum credit amount to my children directly, setting up no trust.
	I would like to will dollars of my Unified Credit directly to my children, with the
	remainder flowing to my spouse.
	EVERYTHING BEYOND THE CREDITED AMOUNTS:
	To my spouse or if he/she predeceases me outright to all to my Child or Children equally.
	To my spouse in a QTIP Trust designed to 1) protect my assets from the possibility of my surviving spouse
	remarrying or 2) ensuring that my child(ren) born of a previous marriage will inherit from my estate.
	I/My Spouse am/is/are non-US Citizens residing in the United States. We would like to use a Qualified
	Domestic Trust, as needed, to prevent taxation.
	Divided in the following percentages and to the following persons as follows (must equal 100%):
	Name: %:
	Name: %:
	Name: %:
	PROVIDING FOR MINOR CHILDREN:
	The entire amount at age 18.
	The entire amount at age 21.
	Interest at 21, half the principal at age 25, with the balance at age 30.
	Interest at 25, half the principal at age 30, with the balance at age 35.
	The entire amount upon award of a Bachelor's degree.
	Other:
	APPOINTMENT OF EXECUTORS:
	Punctual, Reliable, Local
I na	ominate:
	(name and address)
Alt	ernate:

APPOINTMENT OF TRUSTEES:

Intimate knowledge of your priorities and parenting style

Close to beneficiaries; Understands your relationship with the beneficiaries; Approachable

I nominate my surviving spouse and
(name and address)
Alternate:
Appointment of US Trustee (if applicable):
APPOINTMENT OF GUARDIAN OF CHILDREN:
Most Trusted Individual(s) to care for your children.
Stable household. Same moral and life convictions.
I nominate:
(name and address) Alternate:
Alternate:
Temporary US Guardian if non-US domiciled guardian is selected:
HEALTH CARE AGENT APPOINTMENT:
I nominate:
Alternate:
(name and address)
<u>LIVING WILL:</u>
☐ No Document Desired
☐ Document Desired
☐ Incurable and Terminal Disease
☐ Incurable Condition or Disease
☐ Irreversible Loss of Consciousness
☐ Organ Donation
Limitations:
DURABLE POWER OF ATTORNEY APPOINTMENT:
I nominate:
I nominate:
Alternate:
SPECIAL ISSUES:
(Use this area to list special family circumstances that you would like addressed in your documents. Such circumstances include preparations for children with special needs, estranged children, obligations to support others, etc.)