

SG LAW
ESTATE PLANNING PERSONAL INFORMATION FORM

Date of completion of form:

CONTACT INFORMATION

Full legal name

Birthdate

Age

Home Address

Employer

Occupation

Address

Best Contact Number

Email Address

U.S. Citizen? – If not, please state status of residency.

YES

NO

Are a dual citizen or citizen of any other country?

YES

NO

If Yes, please state name(s) of country(ies):

Are you disabled?

YES

NO

Are you generally in good health? If not, please provide explanation:

MARRIED/DATE OF MARRIAGE

Spouse's full legal name

Birthdate

Age

Home Address

Employer

Occupation

Address

Best Contact Number

Email Address

U.S. Citizen? – If not, please state status of residency.

YES

NO

Are a dual citizen or citizen of any other country?	YES	NO
If Yes, please state name(s) of country(ies):		
Are you disabled?	YES	NO

Are you generally in good health? If not, please provide explanation:

(Attach additional sheets as necessary)

Approximate yearly gross income (husband): \$ _____

Approximate yearly gross income (wife): \$ _____

If you are currently married, provide the date of marriage: _____

Have either of you ever lived in the following states: Louisiana, Arizona, California, Texas, Washington, Idaho, Nevada, New Mexico, and Wisconsin. If YES, please state which one of you, or if both of you, lived in one or more of these states. YES NO

Please also state the time periods when one of you or both of you lived in one or more of these states.

Are you currently working with a financial advisor?	YES	NO
If Yes, please provide the name and contact information for said advisor:		
Name		
Company		
Tel: _____ E-Mail _____		
If No, are you open to an introduction to one?	YES	NO

Are you currently working with an accountant?	YES	NO
If Yes, please provide the name and contact information for said Accountant:		
Name:		
Company:		
Tel: _____ E-Mail: _____		
If No, are you open to an introduction to one?	YES	NO

Do you have a prior estate plan in place? YES NO
If YES, please provide me with copies of said documents.

Have you ever filed gift tax returns? YES NO
If YES, please provide me with copies of said Returns.

Do either you and/or your spouse hold a power of appointment under the estate Documents of another person (parent, relative, etc.) If yes, please furnish copies of those documents. YES NO

Do you own any foreign accounts or foreign trusts? YES NO
If Yes, please complete Asset Information in Questions I through IV below.

Did you enter into a pre-nuptial agreement with your spouse? YES NO
If YES, please provide me with a copy of said document and any amendments related thereto.

Have you purchased long term care insurance? YES NO

If NO, do you plan on purchasing Long Term Care Insurance in the near future? YES NO

Would you like an introduction to someone who can explain long term care insurance to you? YES NO

Is your current marriage your first and only marriage? YES NO
If NO, please provide the following information:

a. Date(s) of previous marriage(s):

b. Date of dissolution of marriage(s):

c. Names and ages of children born within said previous marriage(s):

d. State(s) where said Marriage(s) (was) (were) registered:

e. Please provide the dates of entry of Judgment(s) of Dissolution of Marriage and Marital Settlement Agreement(s) that were entered terminating your previous marriage(s); Please provide copies of same to SG LAW along with this completed Questionnaire.

To the best of your knowledge, are you named as a beneficiary on someone else’s will, trust, life insurance policy, death benefit plan or any other estate planning document, including but not limited to as a beneficiary on any retirement or non-retirement accounts? YES NO

If your answer above is YES, please provide additional details below regarding same, including approximate value of assets you are expected to inherit:

PLEASE PROVIDE INFORMATION REGARDING YOUR CHILDREN/OTHER DEPENDENTS:

NAME	ADDRESS & CONTACT INFORMATION	AGE	ANY SPECIAL NEEDS?	CURRENT OCCUPATION

CURRENTLY DISABLED OR FUTURE DISABLED BENEFICIARIES

Please state if you have or could have any potential beneficiary, be it a child, grandchild, or even great-grandchild or a sibling (even a half-sibling), who has special needs (*i.e.*, developmental disability, physical disability, or mental illness) and who may, in the future, if not currently, require government benefits such as Supplemental Security Income (SSI) or Medicaid. Please check one of the options below.

YES, I do currently have or could potentially have a beneficiary who has special needs as defined above. This person or persons are related to me as follows:

NO, I currently do not have and am not aware of any potential beneficiary who has special needs as defined above. I understand that I will need to contact SG LAW immediately if any such situation arises in the future.

- I. **NON RETIREMENT FINANCIAL ACCOUNTS** (Checking, Savings, CD, Stocks, Bonds, Brokerage accounts etc.): Note: Include ALL assets including assets that you own outside of the United States.

FINANCIAL INSTITUTION HOLDING ACCOUNT	CHECKING, SAVINGS, MONEY MARKET, CD, BROKERAGE ETC.	OWNER OF ACCOUNT (H,W or JOINT)	APPROXIMATE CURRENT VALUE	IDENTIFY THE NAMES OF ALL PRIMARY & CONTINGENT BENEFICIARIES NAMED ON SAID ACCOUNT

TOTAL:

II. **RETIREMENT PLANS** (401(k), 403(b) Accounts, IRA etc.) Note: Include ALL assets including assets that you own outside of the United States.

FINANCIAL INSTITUTION HOLDING ACCOUNT	TYPE OF ACCOUNT (401(K), IRA, ROTH IRA, 403(B) ETC.	OWNER OF ACCOUNT (H,W or JOINT)	APPROXIMATE CURRENT VALUE	IDENTIFY THE NAMES OF ALL PRIMARY & CONTINGENT BENEFICIARIES NAMED ON SAID ACCOUNT

TOTAL:

Generally, a healthy spouse or adult (with no known creditor issues) is recommended to be named the beneficiary of a retirement asset. A revocable living trust may be named as a beneficiary of a retirement asset.

Unlike traditional assets, retirement assets are considered “qualified” money that are subject to special rules under the SECURE Act. If a non-spouse beneficiary of yours (for example: your children) inherit your retirement money, they are generally required to liquidate the funds within ten (10) years from your death. If so, *Check one*

1. Are you agreeable with giving your children full access to your retirement funds within 10 years of your death? OR
2. Would you want the Trust to have control of the funds beyond 10 years from your death, such that the Trustee controls how and when the funds are paid to your non-spouse beneficiaries?
3. Not sure, would like to discuss further with SG LAW

III. **REAL PROPERTY** Note: Include ALL assets including assets that you own outside of the United States. *Additional lines added to page 22, if needed*

TYPE OF PROPERTY (Residential, Commercial, Farm land etc.)	ADDRESS OF PROPERTY	OWNER OF ACCOUNT (H,W or JOINT)	APPROXIMATE CURRENT VALUE	TOTAL AMOUNT OF OUTSTANDING MORTGAGE DEBT OR OTHER DEBTS SECURED BY THE REAL ESTATE

TOTAL CURRENT VALUE:

TOTAL OUTSTANDING:

IV. PERSONAL PROPERTY (Cars, vehicles, boats, jewelry, collections, valuables):

Note: Include ALL assets including assets that you own outside of the United States.

Additional lines added to page 23, if needed

TYPE OF PROPERTY Example: Car, RV, Diamond Ring etc.	OWNER OF PROPERTY (H,W or JOINT)	APPROXIMATE CURRENT VALUE	TOTAL AMOUNT OF OUTSTANDING LIENS OR OTHER DEBTS SECURED BY THE PROPERTY

TOTAL CURRENT VALUE:

TOTAL OUTSTANDING:

Do you own any assets outside of the united states:

YES

NO

If YES, please complete Questions I through IV above for the assets that you own overseas and the location of the assets.

LIFE INSURANCE

Owner of policy	Insured	Name of company	Type of insurance: (term, whole, group, ad&d etc.)	Identify primary beneficiary and all contingent beneficiaries	Cash value, if any	Death benefit amount

(Attach additional pages for additional policies)

TOTAL CASH VALUE:
TOTAL DEATH BENEFIT AMT:

PARTNERSHIP, LLC, CORP. – Please complete the following if you and/or your spouse hold an ownership interest in a business entity.

Company _____ % owner/shares

LLC, CORP., Partnership _____ Approx. Value:

** Check with your accountant/CPA regarding the business valuation

Any other assets not specifically listed above:

Type of Asset _____ Owner (H,W or Joint)

Approx. Value _____ Approx. Liens

LIABILITIES

SHORT-TERM LIABILITIES (notes and loans to be paid back in less than one year)

HUSBAND WIFE JOINT

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

LONG-TERM (Debts not to be repaid within one year, **do not** include mortgages previously disclosed on pg.9)

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

CONTINGENT LIABILITIES

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

TOTAL LIABILITIES:

GRAND TOTAL ASSETS:

GRAND TOTAL LIABILITIES:

NET ESTATE VALUE:

1. Are you currently named as a defendant or expecting to be named as a defendant in any lawsuit by an individual or entity for any reason? If so, please provide as much detail as possible regarding any such current, future or potential lawsuits.

2. Please state if you have higher than usual debt on your credit cards, medical bills, business debts etc., or if you generally pay off your debts fully on a monthly basis.

3. Are you and/or spouse currently behind on any tax obligations, Federal, State or local?
If yes, please furnish details and attach the latest 2 personal tax returns filed. YES NO

4. Have you and/or your spouse ever filed for protection under the bankruptcy laws?
If yes, please furnish details. YES NO

5. Have any events occurred to you and/or your spouse which, to your knowledge, might cause someone to file a lawsuit against you? If yes, please furnish details. YES NO

BENEFICIARY INFORMATION

Primary Beneficiary(ies): Unless you specify otherwise, the Initial beneficiary will be your spouse.

To the extent you want a portion or all of your assets to go to your spouse upon your death, how do you want to leave said assets to your Spouse? (CHECK ONE OPTION BELOW)

OPTION 1: Full control to surviving spouse on how to spend his/her share.

This means that the Surviving Spouse can act as the sole trustee and may have full control over the assets left to him/her; potentially spend everything down during his/her lifetime and designate his/her own beneficiaries to take whatever is left of the assets upon his/her death (Not ideal for blended families that involve children from different marriages/relationships);

OPTION 2: Place controls on how surviving spouse can spend his/her share

If this option is desired, consider naming an independent trustee to monitor how your spouse spends his/her share, upon your death. Surviving Spouse may have access to his/her share of the inheritance from the First Spouse to Die, anything left in said Trust upon Surviving Spouse's death will go to the beneficiaries designated by the First Spouse to Die. Among other considerations, if Surviving Spouse gets remarried, he/she cannot change the Secondary beneficiaries designated by the First Spouse to Die.

OPTION 3: We are not sure and would like to discuss this matter in further detail with SG LAW.

Successor Beneficiary(ies): These will be the individuals that will receive the Trust/Probate assets in the event your Spouse pre-deceases you (or, in the case of a joint trust, upon the death of the second spouse).

Please specify how you would like the share of a Successor Beneficiary to pass if that beneficiary is predeceased. If your children are the Successor Beneficiaries, it will be assumed you'd like their share to pass to their descendants ("descendants" = includes biological descendants, adopted children, children born out of wedlock that have established a parent/child relationship under Illinois law; does not include step children or foster children not legally adopted), equally, if any, unless you specify otherwise. Additionally, unless you specify otherwise, if a predeceased child has no descendants, it will be assumed that you'd like their share to pass to your surviving children, equally.

Secondary Successor Beneficiary(ies) Here you would list the individuals or entities that would receive the Will/Trust assets should none of the Successor Beneficiaries survive you: (Additionally, please specify how you would like the share of a Secondary Successor Beneficiary to pass if that beneficiary is predeceased. (Example: to the remaining secondary successor beneficiaries or to the deceased successor beneficiary's descendants)

Tertiary beneficiary(ies) Here you would list the individuals that would receive the Will/Trust assets should the none of the above listed beneficiaries survive you (Ex: charities, universities etc.):

TRUSTEE'S DUTY TO ACCOUNT TO BENEFICIARIES

Note: The law imposes certain duties on your Trustee (after your death or disability) to periodically account to your beneficiaries regarding the status of your Trust Assets. Some of these duties imposed on the Trustee are mandatory and some are optional that may be waived by you as the Owner of the Trust. Please consider the following scenarios and answer the questions below.

1. Please specify if you would like your Spouse who may be acting as your Trustee after your death to provide your Contingent Beneficiaries (i.e. your children) with an annual accounting of how your Trust assets are being spent for your Spouse's benefit following your death. *(May be recommended if one or more of your children are from a prior marriage)*

YES

NO

NEED TO DISCUSS WITH ATTORNEY

2. Now, imagine a situation where you die and your Spouse becomes disabled and is therefore unable to act as Trustee of your Trust. Assume that the successor trustee you have nominated now acts as the Trustee of your Trust and spends/manages assets in your Trust for the benefit of your living but disabled spouse. In that situation, would you like the third party Trustee to be required to provide an annual accounting of the Trust assets to the contingent beneficiaries (i.e. your children)? *(May be recommended if one or more of your children are from a prior marriage or to provide oversight on how your Trust assets are being managed for the benefit of your spouse)*

YES

NO

NEED TO DISCUSS WITH ATTORNEY

MINOR BENEFICIARIES

Minor Beneficiaries/Beneficiaries under a certain age: If and when your minor beneficiaries are entitled to receive Trust assets, it is important to specify at what age you would like them to receive their share. If they become entitled to Trust assets and are below this age, their share will be placed into a new, separate trust for their benefit. Also, we ask that you specify the ages at which you wish them to receive their share.

Some Examples:

1. **One time distribution of Income and Principal:** You can choose for them to receive everything (income and principal of the Trust) at one time period -- for example, at age 21.
2. **Spray Trust (promotes fairness among children):** For example, if you have multiple children, direct the Trustee to hold the Trust as a single Trust until the youngest child turns 22. This will require the Trustee to spend income and principal per his or her discretion for the health, maintenance and education of the children as a parent typically would. Upon the youngest child turning 22, you may decide the Trustee to engage in option (a) OR options (b) & (c) or some variation of these:
 - a. **Full Distribution of Income and Principal:** you may choose for all of the children to receive their respective share of both income and principal of the Trust at one time.
 - b. **Distribution of Income:** You may choose to have the Trustee pay installments of income quarterly to your child either automatically or upon the child's request to the Trustee along with payment of principal per the Trustee's discretion
 - c. **Distribution of Principal:** You may pick an age where distributions of Principal may begin and you can also split the distributions up -- for example, not more than 50% in value before the child shall have reached the age of 30.

PLEASE CHECK AN OPTION ABOVE THAT WORKS FOR YOU. IF YOU WOULD LIKE AN ALTERNATIVE APPROACH, PLEASE CALL ME TO DISCUSS OR OUTLINE YOUR INTENTIONS BELOW:

SPECIFIC BEQUESTS

To the extent, you would like to make Specific Bequests of assets to certain individuals or entities, please list them below providing the full name and address of the individual and entity: (Example: \$10,000 to John Doe, if he survives me. If not, to his descendants per stirpes etc.)

SPECIFIC EXCLUSIONS

Specific Exclusions (name and address of person(s) excluded). If you would like to exclude the descendants and spouses of that individual, please specifically state so:

IDENTIFYING FIDUCIARIES FOR YOUR ESTATE PLAN

PLEASE PROVIDE THE NAME OF ONE OR TWO SUCCESSOR FIDUCIARIES TO FOLLOW A SPOUSE (AS APPLICABLE) IN THE FOLLOWING ROLES:

EXECUTOR: The Executor of your Will acts as the legal representative of your estate and carries responsibilities for probate administration, should a probate estate be necessary, and filing estate tax returns. Typically, the Executor will transfer all assets owned either directly to direct will beneficiaries and/or, in plans with revocable trusts, to the Trustee of the trust for future administration according to the trust. You may act as initial Executor of your spouse’s estate. However, we ask that you chose a successor or two and a close and trusted personal friend is the appropriate person here. If you do not have such a close personal friend to act in this regard, we can discuss appointment of an institutional or corporate Executor. **(The nominated Executor must be at least over the age of 18, a resident of the U.S., of sound mind and memory and not be a convicted felon)**

Name	Address	Phone Number

GUARDIANS: It is advisable to name guardians for minor children. There may be a desire to name separate individuals as guardians of the person (physical) and separate institutions or individuals for the guardian of the estate (financial). Usually, the Trustees appointed under your Trust may also serve as the Guardian of the Estate of the Minor Child. *(Must be a at least over the age of 18, be a resident of the United States, is of sound mind and memory and has not been convicted of a felony)*

Name	Address	Phone Number

TRUSTEE: The Trustees of the Trust will act as the representative of it and executing all documents regarding the assets owned by the Trust. You may act as Trustees of this Trust or appoint a close and trusted personal friend as trustee. It is advised, however, that the Successor Trustee appointed have some concept of what a Trustee will be called upon to do. If you do not have such a close personal friend to act in this regard, we can discuss appointment of an institutional or corporate Trustee. *(RECOMMEND THAT SUCCESSOR INDIVIDUALS NOMINATED BY YOU BE RESIDENTS OF THE U.S. NAMING NON-RESIDENT TRUSTEES WILL CAUSE SERIOUS AND ADVERSE TAX CONSEQUENCES FOR YOUR TRUST)*

Name	Address	Phone Number

TRUST PROTECTOR (NOT ALWAYS NECESSARY, BUT ADVISED TO CONSIDER):

Sometimes it is advisable to appoint a Trust Protector to guide independent Trustees in the discharge of their duties. The Trust Protector may make recommendations on a wide variety of matters, such as investments, the selection of investment advisors, and any amounts to be distributed to you and other beneficiaries of the Trust.

Name	Address	Phone Number

HEALTH CARE AGENT: Name, Address, and Phone Number of Agent Successor Agent for Power of Attorney for Health Care: (Unless you specify otherwise, your Spouse will be named as the Initial Agent)

Name	Address	Phone Number

PROPERTY POWER OF ATTORNEY AGENT: will handle property related matters in the event you become disabled or incompetent during your lifetime): *Unless you specify otherwise, the individual you name as your Trustee will be named as Agent under your Property Power of Attorney.*

Unless you specify otherwise, the following will be granted as additional powers to your Agent under your Property Power of Attorney:

1. Authority over your digital assets;
2. Authority to amend an existing trust or create a new trust on your behalf;
3. Authority to transfer any assets into an existing trust in your name;
4. Authority to create and fund any irrevocable trusts on your behalf primarily to engage in any future asset protection or Medicaid planning;
5. Authority to transfer any assets from you to your spouse and engage in whatever actions necessary to qualify you for Medicaid in the future;
6. Authority to gift money to your spouse or your descendants or your descendants' spouses
7. Authority over 529 accounts that you are the owner of or responsible person for.
8. Authority over any of your Retirement Accounts.

PLEASE CHECK ONE OPTION RE GIFTING:

I wish to authorize my Agent and Trustee to engage in unlimited gifting of my assets to my spouse, my descendants and the spouses of my descendants in the event I become incapacitated or disabled and am unable to make such decisions for myself (Recommended in the event you want to preserve your ability to qualify for Medicaid, veterans' benefits or other state and federal assistance in the future)

I do not want to authorize my Agent or Trustee to engage in unlimited gifting. I do, however, authorize my Trustee or Agent to engage in gifting amounts equal to the Annual Exclusion amount (currently \$15,000 per individual) to my Spouse, my descendants and the spouses of my descendants in the event I become incapacitated or disabled and am unable to make such decisions for myself.

PLEASE CHECK ONE:

I have reviewed the aforementioned powers to be added to my Property Power of Attorney and consent to them. I agree to review them as stated in my draft Property Power of Attorney prior to execution and will address any concerns I may have with these powers with SG LAW prior to execution.

I have reviewed the aforementioned powers to be added to my Property Power of Attorney and want the following Powers removed:

Please tell me a little bit about what why you want to create an estate plan. Who are the individuals (or entities) you want to have benefit from your estate plan? What are your priorities, aspirations or hopes for your beneficiaries that you would like to have your Trustee or Executor focus on when administering your estate?

Upon completion of this document, please e-mail to Sharanya Gururajan at sg@sgurulaw.com in order to set up a follow up call to discuss details regarding an estate plan specific to your needs. Your completion and submission of this Questionnaire does not in any way imply or constitute an attorney client relationship between You and SG Law. You will need to enter into a separate written Engagement Agreement with SG LAW in order to formally enter into an attorney client relationship.

Sharanya Gururajan, J.D.
Attorney at Law/Principal
SG LAW

2 Convenient Office Locations:

732 Florsheim Drive, #13
Libertyville, IL 60048
(P) 224-595-9832

1901 N. Roselle Rd. Ste #800
Schaumburg, IL 60195

ADDITONAL REAL PROPERTY (IF NEEDED) Note: Include ALL assets including assets that you own outside of the United States.

TYPE OF PROPERTY (Residential, Commercial, Farm land etc.)	ADDRESS OF PROPERTY	OWNER OF ACCOUNT (H,W or JOINT)	APPROXIMATE CURRENT VALUE	TOTAL AMOUNT OF OUTSTANDING MORTGAGE DEBT OR OTHER DEBTS SECURED BY THE REAL ESTATE

TOTAL CURRENT VALUE:
Total of this page, will be added to total on page 9

TOTAL OUTSTANDING:
Total of this page, will be added to total on page 9

PERSONAL PROPERTY (If Needed) (Cars, vehicles, boats, jewelry, collections, valuables):
Note: Include ALL assets including assets that you own outside of the United States.

TYPE OF PROPERTY Example: Car, RV, Diamond Ring etc.	OWNER OF PROPERTY (H,W or JOINT)	APPROXIMATE CURRENT VALUE	TOTAL AMOUNT OF OUTSTANDING LIENS OR OTHER DEBTS SECURED BY THE PROPERTY

TOTAL CURRENT VALUE:
 Total of this page, will be added to total on page 10

TOTAL OUTSTANDING:
 Total of this page, will be added to total on page 10