



EstateCraft

Planning Your Tomorrow, Today



Let's Begin Planning Your Estate

Planning your estate can be hard, but it doesn't have to be. We're here to help. At EstateCraft, we believe that you deserve to feel empowered to take ownership of the decisions surrounding your future and that of your loved ones.

We know it's not easy—there's a lot of terminology out there that can be confusing and intimidating. But we also know the benefits of having a complete estate plan outweigh any hassle in getting there. That's why we've created EstateCraft: a comprehensive resource for helping you understand what estate planning is, what options you have, and how to get started with creating your own plan.

Whether you're just getting started or are on the verge of making some big decisions about your future, EstateCraft is here to help.

Having an estate plan is one of the most important things you can do to protect your loved ones and ensure their financial stability. It's also one of the easiest things to ignore.

We created the EstateCraft questionnaire to help you organize your estate plan. We'll ask you all about your finances, as well as your partner's and your children's so that we can help you create a comprehensive estate plan.

We know you have a lot of things on your plate right now. We're here to help you organize your estate plan. EstateCraft's questionnaire is designed to help you get started on your estate plan and will save you time and money.

This questionnaire is the first step in creating your estate plan. You can start by answering the questions below, and then "Save." Your answers will be saved as a document on your computer, ready for you to print or review later. We don't store your questionnaire on servers or computers.

Let's get started now!

Estate Planning Questionnaire

EstateCraft questionnaire guides you through a comprehensive view of your family, your assets and any special circumstances that should be considered when making your estate plan. If any of the sections are not applicable just skip them. When you are done you will be in a much better position to create your estate plan as you will have thought about or answered all the questions or decisions that need to be made. Then it's just a matter of reaching out to a lawyer or using an online solution to execute your plan.

EstateCraft questionnaire is created for you to type your answers on the form, save and print after completing the questionnaire. Your answers to the questionnaire are not saved to EstateCraft.live. Before you begin answering the questions thoroughly read the questionnaire. As needed print out the additional section pages as needed.

Let's begin with your information and the information about your loved ones.

Your Information

First Name

Middle Name

Last Name

Preferred Name

Date of Birth (Month/Day/Year)

Place of Birth

Social Security Number

Occupation

Phone Number

Email Address

Street Address

City

State

Zip Code

County

Are you a veteran?

Yes

No

Are you a US citizen?

Yes

No

If not, please list the country of citizenship:

Spouse's Information (if applicable)

First Name

Middle Name

Last Name

Preferred Name

Date of Birth (Month/Day/Year)

Place of Birth

Social Security Number

Occupation

Phone Number

Email Address

Street Address

City

State

Zip Code

County

Are you a veteran?

Yes

No

Are you a US citizen?

Yes

No

If not, please list the country of citizenship:

TIP: In the next section, you will be asked about your children and dependents if applicable. EstateCraft questionnaire provides this section for four children or dependents. If you need more sections for children or dependents first print this sheet out and then fill in separately.

Children and Dependents (if applicable)

Full Name

Date of Birth (Month/Day/Year)

Current Address

Phone Number

Parents (if adopted please specify)

Spouse (if applicable)

Does this child have any disabilities? Use this space to describe your child's needs. You may consider setting up a trust.

Children and Dependents (if applicable)

Full Name

Date of Birth (Month/Day/Year)

Current Address

Phone Number

Parents (if adopted please specify)

Spouse (if applicable)

Does this child have any disabilities? Use this space to describe your child's needs. You may consider setting up a trust.

Children and Dependents (if applicable)

Full Name

Date of Birth (Month/Day/Year)

Current Address

Phone Number

Parents (if adopted please specify)

Spouse (if applicable)

Does this child have any disabilities? Use this space to describe your child's needs. You may consider setting up a trust.

Children and Dependents (if applicable)

Full Name

Date of Birth (Month/Day/Year)

Current Address

Phone Number

Parents (if adopted please specify)

Spouse (if applicable)

Does this child have any disabilities? Use this space to describe your child's needs. You may consider setting up a trust.

Children and Dependents (if applicable)

Full Name

Date of Birth (Month/Day/Year)

Current Address

Phone Number

Parents (if adopted please specify)

Spouse (if applicable)

Does this child have any disabilities? Use this space to describe your child's needs. You may consider setting up a trust.

Children and Dependents (if applicable)

Full Name

Date of Birth (Month/Day/Year)

Current Address

Phone Number

Parents (if adopted please specify)

Spouse (if applicable)

Does this child have any disabilities? Use this space to describe your child's needs. You may consider setting up a trust.

TIP: In the following section, you will be asked about your grandchildren if applicable. Estate-Craft questionnaire provides this section for five grandchildren. If you need more sections for grandchildren first print this sheet out and then fill in separately.

Grandchildren (if applicable)

Grandchild's Full Name

Date of Birth (Month/Day/Year)

Current Address

Grandchild's Parents

Grandchildren (if applicable)

Grandchild's Full Name

Date of Birth (Month/Day/Year)

Current Address

Grandchild's Parents

Grandchildren (if applicable)

Grandchild's Full Name

Date of Birth (Month/Day/Year)

Current Address

Grandchild's Parents

Grandchildren (if applicable)

Grandchild's Full Name

Date of Birth (Month/Day/Year)

Current Address

Grandchild's Parents

Current Estate Plan

If you have any of the below documents, it will be helpful if you provide your lawyer or estate planner with copies.

Do you have a Will?	Yes	No
Do you have a Power of Attorney?	Yes	No
Do you have a Living Will?	Yes	No
Do you have a Trust?	Yes	No
Are you the Grantor, Trustee, or Beneficiary of any Trust?	Yes	No

TIP: You should store physical and electronic copies of these documents in a safe place (safe deposit box, small or large fireproof safe, etc.) and let your relatives (or at least your executor) know where they are.

Professional Advisors (if applicable)

Name of Accountant, Firm	Email Address	Phone Number
Name of Financial Advisor, Firm	Email Address	Phone Number
Name of Life Insurance Agent, Firm	Email Address	Phone Number
Name of Accountant, Firm	Email Address	Phone Number
Name of Financial Advisor, Firm	Email Address	Phone Number
Name of Life Insurance Agent, Firm	Email Address	Phone Number

TIP: In the following section, you will be asked about your previous marriages. If you need more sections for previous marriages first print this sheet out and then fill in separately.

Previous Marriages

Do you or your spouse/partner have any previously terminated marriages? Yes No

Who was married? When were you married? (Month/Day/Year)

If yes, how did the first marriage end? Death Divorce Annulment

Do you have any obligations under a divorce decree from this marriage?

If yes, provide your lawyer with a copy of the decree. Yes No

Please check any of the follow community property states in which you have lived or acquired property during your marriage. Property is treated differently in these states versus common law states.

None	Arizona	California	Idaho	Louisiana
Nevada	New Mexico	Texas	Washington	Wisconsin

Miscellaneous

Have you or your spouse/partner ever received a substantial inheritance? Yes No

If yes, who, when and how much?

Do either of you anticipate receiving a substantial inheritance? Yes No

If yes, who and approximate amount?

Do either of you have a safety deposit box? Yes No

If yes, who and where? Please provide the name place and address.

Do either of you own property in a foreign country or a state in which you are not a resident?

Yes No

If yes, you may have additional estate related filing requirements.

Please provide ownership details and addresses for each property.

Ownership Address

Ownership Address

Ownership Address

Do either of you have any relatives (other than your children) dependent upon you for support?

Yes No

If yes, who and what relative?

Are you concerned that one or more of your adult children/grandchildren will not behave responsibly with money that you give them? If so, you may want to consider a trust.

Yes No

If yes, who and what child / grandchild?

Do you anticipate that your estate will have a net worth of \$12.06 million (individually) or \$24.12 million (you and your spouse in total)? If so, you may want to consider some additional estate tax planning.

Have either of you made gifts of \$10,000 or more to any person (other than each other) in any one year? If you have filed a gift tax return, please provide a copy of the most recent return.

TIP: In the following section, you will be asked to identify your cash accounts. If you need more sections for first print this sheet out and then fill in separately.

Cash Accounts

Forms of Ownership: "Individual Account", "Joint Account with Right of Survivorship", "Joint Account - Tenants in Common", "Community Property".

Types of Accounts: "Checking", "Savings", "Certificate of Deposit", "Money Market".

1. Name of Bank or Institution	Approximate Value
Owner(s) of Account and Form of Ownership	Type of Account
Payable on Death	Beneficiary/Beneficiaries
2. Name of Bank or Institution	Approximate Value
Owner(s) of Account and Form of Ownership	Type of Account
Payable on Death	Beneficiary/Beneficiaries
3. Name of Bank or Institution	Approximate Value
Owner(s) of Account and Form of Ownership	Type of Account
Payable on Death	Beneficiary/Beneficiaries
4. Name of Bank or Institution	Approximate Value
Owner(s) of Account and Form of Ownership	Type of Account
Payable on Death	Beneficiary/Beneficiaries

TIP: In the following sections, you may need more form sections. First decide if you need more sections. Next print the sheets out that you will need, and then fill in the additional information separately.

Investment Accounts and Digital Currency / Assets

DO NOT list pension plans or individually held stocks or bonds. Forms of Ownership: "Individual Account", "Joint Account with Right of Survivorship", "Joint Account - Tenants in Common", etc.

Types of Accounts: "Investment", "Margin", "IRA", "401k", "Cash Management", "Money Market".

1. Name of Company or Brokerage Firm	Approximate Value
Owner(s) of Account and Form of Ownership	Type of Account
Payable on Death	Beneficiary/Beneficiaries

2. Name of Company or Brokerage Firm	Approximate Value
Owner(s) of Account and Form of Ownership	Type of Account
Payable on Death	Beneficiary/Beneficiaries

3. Name of Company or Brokerage Firm	Approximate Value
Owner(s) of Account and Form of Ownership	Type of Account
Payable on Death	Beneficiary/Beneficiaries

4. Name of Company or Brokerage Firm	Approximate Value
Owner(s) of Account and Form of Ownership	Type of Account
Payable on Death	Beneficiary/Beneficiaries

Stocks & Bonds Directly Owned

List publicly owned corporations which is stock traded on an exchange or over the counter and for which you have a physical stock certificate. DO NOT INCLUDE stock owned in family or non-publicly traded companies.

Stocks held in an investment account should be listed under "Investment Accounts".

1. Company Owner

Number of Shares Current Price Per Share

2. Company Owner

Number of Shares Current Price Per Share

3. Company Owner

Number of Shares Current Price Per Share

4. Company Owner

Number of Shares Current Price Per Share

Mortgages, Notes, and other Receivables

List mortgages or promissory notes payable to you; other moneys owed to you.

1. Name of Debtor Date of Note (Month/Day/Year)

Date Note (Month/Day/Year) Due Current Balance Who owns the asset?

2. Name of Debtor Date of Note (Month/Day/Year)

Date Note (Month/Day/Year) Due Current Balance Who owns the asset?

3. Name of Debtor Date of Note (Month/Day/Year)

Date Note (Month/Day/Year) Due Current Balance Who owns the asset?

Business and Professional Interests

Corporate, Partnerships, Limited Liability Companies or Sole Proprietorships in which you have an ownership stake.

1. Company or Entity Type of Entity Owner and Percentage of Ownership

Other Owners Does a buy/sell agreement exist? Estimated Value of Ownership Stake
 Yes No

2. Company or Entity Type of Entity Owner and Percentage of Ownership

Other Owners Does a buy/sell agreement exist? Estimated Value of Ownership Stake
 Yes No

Personal Property

ASSET: Major personal assets such as motor vehicles, boats, jewelry, club memberships, collections, antiques, furs, household furnishings, and all other valuable nonbusiness personal property. DO NOT include real estate.

1. Asset	Owner(s)	Value
2. Asset	Owner(s)	Value
3. Asset	Owner(s)	Value
4. Asset	Owner(s)	Value
5. Asset	Owner(s)	Value

Real Estate

Please list land, buildings, or homes owned by you. If you own land or buildings in partnership with someone else, you should indicate this and provide a copy of the partnership agreement to your lawyer.

1. Owner(s)	Address	
Approximate Value	Outstanding Mortgage Value	Ownership Type
2. Owner(s)	Address	
Approximate Value	Outstanding Mortgage Value	Ownership Type

Liabilities

Please list any credit cards, mortgages or other substantial debts owned by you that have not been previously listed.

- | | |
|-----------------------------------|-------------------|
| 1. Debtor and Description of Debt | Approximate Value |
| 2. Debtor and Description of Debt | Approximate Value |
| 3. Debtor and Description of Debt | Approximate Value |
| 4. Debtor and Description of Debt | Approximate Value |

Pension or Retirement Plans

DO NOT list IRAs, 401Ks or individually held stocks or bonds here (see Investments section).

- | | |
|--------------------------------------|-------------------|
| 1. Name of Company or Financial Firm | Approximate Value |
| 2. Name of Company or Financial Firm | Approximate Value |
| 3. Name of Company or Financial Firm | Approximate Value |
| 4. Name of Company or Financial Firm | Approximate Value |

Life Insurance

Please list any life insurance policies that insure your life or policies that you own that insure the lives of others. Policy Types: "Term", "Whole Life", "Group Life", "Split Dollar", etc.

Face Value of a life insurance policy is normally the policy's death benefit.

Policy Owner is ordinarily the person who has the power to change the beneficiary.

1. Company	Policy Number	Policy Type
Effective Date	Face Value	Cash Value
Person Insured Policy Owner	Beneficiary	Loan Against Policy (if applicable)
2. Company	Policy Number	Policy Type
Effective Date	Face Value	Cash Value
Person Insured Policy Owner	Beneficiary	Loan Against Policy (if applicable)
3. Company	Policy Number	Policy Type
Effective Date	Face Value	Cash Value
Person Insured Policy Owner	Beneficiary	Loan Against Policy (if applicable)

Fiduciaries

The selection of your fiduciaries is one of the most important steps in the estate planning process.

This section of the questionnaire is intended to introduce you to the various fiduciary roles and

responsibilities and encourage you to begin considering who is best suited to serve on your behalf. Your lawyer will discuss the selection of your fiduciaries in detail with you.

Executor / Personal Representative

An executor or personal representative is the person or company appointed by the court to administer your probate estate after you pass away. Responsibility of the Personal Representative generally include the collecting of all assets, paying debts of the estate, filing applicable tax returns, and distributing the remainder of the estate according to the terms of your Will. Who would you designate as your Personal Representative in the event of your death? Please list at least one backup in the event a designee is unable or unwilling to act.

Your Choice

- | | |
|------------------------------|--------------|
| 1. Name of Person or Company | Relationship |
| 2. Name of Person or Company | Relationship |
| 3. Name of Person or Company | Relationship |

Spouse's Choice

- | | |
|------------------------------|--------------|
| 1. Name of Person or Company | Relationship |
| 2. Name of Person or Company | Relationship |
| 3. Name of Person or Company | Relationship |

Trustee

A trustee is a person or company designated to manage the affairs of your trust. Duties of the Trustee include the duty to carry out the express terms of the trust instrument, the duty to defend the trust, the duty to prudently invest trust assets, the duty of impartiality among the beneficiaries, and the duty to account for trust transactions. Who would you like to designate as the Trustee of your trust? Please list at least one backup in the event a designee is unable or unwilling to act.

Your Choice

- | | |
|------------------------------|--------------|
| 1. Name of Person or Company | Relationship |
| 2. Name of Person or Company | Relationship |
| 3. Name of Person or Company | Relationship |

Spouse's Choice

- | | |
|------------------------------|--------------|
| 1. Name of Person or Company | Relationship |
| 2. Name of Person or Company | Relationship |
| 3. Name of Person or Company | Relationship |

Guardian for Minor Children

Who would you designate as guardian of your children in the event both you and your spouse die or become incapacitated while your children are minors? Please list at least one backup in the event a designee is unable or unwilling to act.

- | | |
|------------------------------|--------------|
| 1. Name of Person or Company | Relationship |
| 2. Name of Person or Company | Relationship |
| 3. Name of Person or Company | Relationship |

Your Health Status (mental/physical)

Spouse's Health Status (mental/physical)

Durable Power of Attorney

Who would you like to designate to make financial and business decisions for you? Please list at least one backup in the event a designee is unable or unwilling to act. Here is the definition of [Durable Power of Attorney](#).

Your Choice

- | | |
|------------------------------|--------------|
| 1. Name of Person or Company | Relationship |
| 2. Name of Person or Company | Relationship |
| 3. Name of Person or Company | Relationship |

Spouse's Choice

- | | |
|------------------------------|--------------|
| 1. Name of Person or Company | Relationship |
| 2. Name of Person or Company | Relationship |
| 3. Name of Person or Company | Relationship |

Health Care Surrogate

Who would you designate to make medical decisions for you (e.g., consent to treatment) if you become incapacitated? Please list at least one backup in the event a designee is unable or unwilling to act.

[Learn more about Advance Healthcare Directive.](#)

Your Choice

- | | |
|------------------------------|--------------|
| 1. Name of Person or Company | Relationship |
| 2. Name of Person or Company | Relationship |
| 3. Name of Person or Company | Relationship |

Spouse's Choice

- | | |
|------------------------------|--------------|
| 1. Name of Person or Company | Relationship |
| 2. Name of Person or Company | Relationship |
| 3. Name of Person or Company | Relationship |

Your Digital Assets: email, social media accounts, websites, blogs

Note: check the terms of service for each to learn what happens to your account after your passing. Consider saving important emails, favorite photos, etc. in an archive.

Email	Username	Password	
Facebook page	Username	Password	
Linkedin page	Username	Password	
Twitter profile url	Username	Password	
Instagram	Username	Password	
Pinterest	Username	Password	
Google YouTube	Username	Password	
Google Photos	Username	Password	
Google Drive	Username	Password	
Your website or blog Website or blog name	Username	Password	
Webmaster	Administrator	Contact information	Domain Hosting Service

Notes

***Your information is now organized.
You are ready to speak to a lawyer about your estate planning needs.***

Additional Information

Use this space to list any questions you have or additional information you want your lawyer to know about your estate planning needs.

Missing Information

Use this space to add any information.

About Estate Craft

EstateCraft is a technology company that provides tools and education to help individuals with estate planning and execution.

We are a team driven by the human condition, and there's one thing we're all afraid of: dying without having an estate plan in place. That's why we started this company—we want to prevent an event where your estate plan is not started, incomplete, or needs updating, especially at a time when you need a plan in place.

We also aim to build tools that help those who survive — Executors and family members — discharge those daunting tasks easily and effectively.

The team is composed of technology and financial leaders passionate about creating and providing the education, tools, and support for estate planning.

Helpful information to explore:

[Wills](#)

[Durable Financial Power of Attorney](#)

[Living Wills and Durable Healthcare Power of Attorney \(together: Advance Healthcare Directive\)](#)

[Revocable Living Trusts](#)