



# LIVING TRUST & ESTATE PLANNING

## Estate Planning

*"Do not neglect to do good and  
to share what you have, for such  
sacrifices are pleasing to God."*

Hebrews 13:16

**Writing a will** is a loving and responsible act for the sake of your family. Here are a few helpful suggestions on how to prepare to write your will.

## **BEFORE SEEING AN ATTORNEY...**

- Make a list of everyone for whom you are responsible.
- List everyone that you would like to remember in your will.
- List all of your material assets.
- After subtracting your debts, match the names with the assets or consider giving a portion of your total estate to each individual. Take care of your family first. This is also the time to consider special friends and your church.
- Consider establishing a trust if your estate is large enough.
- Ask your chosen estate administrator (sometimes called executor/executrix) if he or she is willing to serve.
- Consult with the people you select as guardians of your children (where minors and other dependents are involved).
- Talk with your priest to explore the ministries of the church that could best be funded with a gift from your will.

## **BEQUESTS IN YOUR WILL CAN TAKE SEVERAL FORMS ...**

- An outright monetary bequest.
- A percentage of an estate.
- A specific asset, such as personal or real property.
- A testamentary trust created in a will.
- A contingent beneficiary, i.e., the church receives the assets if there are no surviving beneficiaries.
- Note: A bequest to the church is deductible from the value of your estate for tax purposes.

## **AFTER MAKING YOUR WILL...**

- Make sure someone knows where your will is located.
- Do not place funeral instructions in a safe-deposit box. Generally, services will be over by the time your administrator checks your bank box. Instead, leave a copy of your funeral plans and wishes with your priest and a member of your family.
- Review your will from time to time with your legal advisor. Laws, assets, and personal interests often change over time.



## SAMPLE FORMS OF BEQUEST

### Specific Amount:

I, \_\_\_\_\_, hereby give, devise, and bequeath to the Rector, Wardens, and Vestry of Your Episcopal Church, 123 Main Street, Anywhere, MyState, 00000, the sum of \$XX,XXX to be used at their discretion to assist in the ministries of the Church.

### Percentage Amount:

I, \_\_\_\_\_, hereby give, devise, and bequeath to the Rector, Wardens, and Vestry of Your Episcopal Church, 123 Main Street, Anywhere, MyState, 00000, XX% of the rest, residue, and remainder of my estate, to be used at their discretion to assist in the ministries of the Church.

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### Contingency Bequest:

In the event the beneficiaries of bequests and devises herein predecease me, or, in the case of institutions, cease to be organizations described in section 501(c)(3) of the Internal Revenue Code, I, \_\_\_\_\_, hereby give, devise, and bequeath to the Rector, Wardens, and Vestry of Your Episcopal Church, 123 Main Street, Anywhere, MyState, the rest, residue and remainder of my estate, to be used at their discretion to assist in the ministries of the Church.

For more information on various types of bequests visit  
The Church Foundation's Charitable Giving page:  
**[www.tcfdiopa.org/charitable-bequest](http://www.tcfdiopa.org/charitable-bequest)**.

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Notes:

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## Including a Christian Preamble

A Christian preamble to your will provides a significant opportunity to share your faith with family and friends. Through this personal statement of your faith, an important message will be delivered to those who love and know you best. This message of faith comes at a time of grief and loss and serves as a reminder to them to place their trust in Jesus Christ as you have. Remember, this may be the last document they read about you, their loved one.

As you, together with your attorney, prepare your will/estate plan, give prayerful consideration to adding a Christian preamble such as:

I \_\_\_\_\_, of the City \_\_\_\_\_  
of \_\_\_\_\_, County of \_\_\_\_\_, and  
State of \_\_\_\_\_, being of sound mind and memory and being under no  
restraint, do make, declare and publish this my last will and testament, hereby revoking all wills and  
codicils heretofore made by me. In thanksgiving to God for the gifts of life given in baptism, and for  
the many blessings God has showered upon me; and in thanksgiving to God for the gifts of faith  
and hope through Jesus Christ; and in thanksgiving to God for the gifts of nurture and love through  
the Church where we have shared faith and fellowship; I now commend my loved ones to grow in  
this same faith, being true to their own baptisms, knowing that God will continue to provide for  
them in their lifetimes; I encourage them to place their faith and trust in our Lord and Savior.

(The particulars of the will would follow, leaving gifts to family and friends, but also an articulation of the gifts you might leave to the various ministries of the Church).



**Legal Name:**

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Email

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
(Street Address, PO Box, and/or Apartment #)

\_\_\_\_\_  
(City/State/Zip)

\_\_\_\_\_  
Country

\_\_\_\_\_  
Date of Military Service (If Applicable)

\_\_\_\_\_  
Discharge Location and Serial Number

**Do you have a Will?** ☐ Yes ☐ No *(If no, skip to "Family Information")*

**Since making your last will, have you:**

Moved to another state? ☐ Yes ☐ No

Sold or bought property? ☐ Yes ☐ No

Celebrated the birth of a child or grandchild? ☐ Yes ☐ No

Changed your mind about your executor? ☐ Yes ☐ No

Changed your mind about the guardian for your child? ☐ Yes ☐ No

Done family financial and charitable gift planning? ☐ Yes ☐ No

**Marital Status:**

☐ Single

☐ Married

☐ Partner  
Civil Union

☐ Divorced

☐ Remarried

☐ Separated

☐ Widowed

If the answer is yes to any of the above, your will may need to be updated. Complete the questions on the following pages.

Notes:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



## Family Information

Spouse's Legal Name:

Spouse's Name (Print)

Spouse's Date of Birth

Spouse's Email

Spouse's Social Security Number

Spouse's Street Address, PO Box, and/or Apartment #

City, State, Zip Code

County

## Children (Including those legally adopted)

(Full Name)

(Full Address)

(Date of Birth)

Notes:



## Family Information

### Other Dependants

(Full Name)

(Full Address)

(Date of Birth)

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### Other Loved Ones

(Full Name)

(Full Address)

(Date of Birth)

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Notes:

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## Person(s) to be the Guardian(s) of my Child(ren)

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Full Name

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Phone Number

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Street Address, PO Box, and/or Apartment #, City, State, Zip Code

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Full Name

---

Phone Number

---

Street Address, PO Box, and/or Apartment #, City, State, Zip Code

## Executor(s) (Person(s) to be the personal representative of my estate):

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Full Name

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Phone Number

---

Street Address, PO Box, and/or Apartment #, City, State, Zip Code

---

Full Name

---

Phone Number

---

Street Address, PO Box, and/or Apartment #, City, State, Zip Code

---

Full Name

---

Phone Number

---

Street Address, PO Box, and/or Apartment #, City, State, Zip Code

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Notes:

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**Beneficiary Information:** (Persons, Parish/Missions or charitable associations you wish to thank for being part of your life.)

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Full Name

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Full Name

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Full Name

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**Residual Beneficiary** (The final or residual beneficiary receives what is left over after all other bequests have been paid according to your will. Please consider naming your Parish/Mission or The Episcopal Diocese of Pennsylvania as a residual beneficiary.)

## Location of Records

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Will

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Living Will

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Birth Certificate

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Social Security Card

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Tax Records

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Safe Deposit Box & Key

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Insurance Policies

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Funeral Directions

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Durable Power of Attorney

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Durable Power of Attorney  
(Healthcare)

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Notes:

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## Present Annual Income:

Salary \$ \_\_\_\_\_ Investment Income \$ \_\_\_\_\_  
Other \$ \_\_\_\_\_ Total \$ \_\_\_\_\_

## Property (Real Estate):

|   | Description & Location | Original Cost | Present Market Value | Mortgage Amount |
|---|------------------------|---------------|----------------------|-----------------|
| 1 | _____                  |               |                      |                 |
| 2 | _____                  |               |                      |                 |
| 3 | _____                  |               |                      |                 |
| 4 | _____                  |               |                      |                 |

## Leases:

|   | Description & Location | Original Cost | Present Market Value | Mortgage Amount |
|---|------------------------|---------------|----------------------|-----------------|
| 1 | _____                  |               |                      |                 |
| 2 | _____                  |               |                      |                 |
| 3 | _____                  |               |                      |                 |

## Stock:

|   | Description & Location | Original Cost | Present Market Value | Mortgage Amount |
|---|------------------------|---------------|----------------------|-----------------|
| 1 | _____                  |               |                      |                 |
| 2 | _____                  |               |                      |                 |
| 3 | _____                  |               |                      |                 |
| 4 | _____                  |               |                      |                 |
| 5 | _____                  |               |                      |                 |
| 6 | _____                  |               |                      |                 |



## Bank & Retirement Accounts (IRA, etc.) / Other Income Producing Accounts:

|   | Name of Institution | Type  | Account Number |
|---|---------------------|-------|----------------|
| 1 | _____               | _____ | _____          |
| 2 | _____               | _____ | _____          |
| 3 | _____               | _____ | _____          |
| 4 | _____               | _____ | _____          |

## Insurance Policies:

|   | Company | Policy Name | Face Value | Cash Value |
|---|---------|-------------|------------|------------|
| 1 | _____   | _____       | _____      | _____      |
| 2 | _____   | _____       | _____      | _____      |
| 3 | _____   | _____       | _____      | _____      |

## Other Assets:

|   | Description | Location | Present Market Value | Cost  |
|---|-------------|----------|----------------------|-------|
| 1 | _____       | _____    | _____                | _____ |
| 2 | _____       | _____    | _____                | _____ |
| 3 | _____       | _____    | _____                | _____ |
| 4 | _____       | _____    | _____                | _____ |
| 5 | _____       | _____    | _____                | _____ |
| 6 | _____       | _____    | _____                | _____ |

Notes:

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## Monthly Expenses:

House Repairs: \$ \_\_\_\_\_ Auto Expense: \$ \_\_\_\_\_ Clothing: \$ \_\_\_\_\_  
 Personal Care: \$ \_\_\_\_\_ Mortgage/Rent \$ \_\_\_\_\_ Insurance \$ \_\_\_\_\_  
 Utilities: \$ \_\_\_\_\_ Taxes: \$ \_\_\_\_\_ Medical/Dental: \$ \_\_\_\_\_  
 Recreation: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_ Total: \$ \_\_\_\_\_

## Projected Retirement Income

## Continues to Spouse

|                                  |                              |                             |                               |
|----------------------------------|------------------------------|-----------------------------|-------------------------------|
| Social Security: \$ _____        | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Half |
| Pension Plans: \$ _____          | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Half |
| Retirement Accounts: \$ _____    | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Half |
| Charitable Trusts: \$ _____      | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Half |
| Stock Dividends: \$ _____        | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Half |
| Gift Annuities: \$ _____         | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Half |
| Pooled Income Fund: \$ _____     | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Half |
| Mortgages: \$ _____              | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Half |
| Royalties: \$ _____              | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Half |
| Other (Describe Below): \$ _____ | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Half |

\_\_\_\_\_  
 \_\_\_\_\_

## Notes:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



## Advisors

### Accountant

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Full Name

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Phone Number/Email

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Street Address, PO Box, and/or Apartment #, City, State, Zip Code

### Attorney:

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Full Name

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Phone Number/Email

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Street Address, PO Box, and/or Apartment #, City, State, Zip Code

### Banker(s):

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Full Name

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Phone Number/Email

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Street Address, PO Box, and/or Apartment #, City, State, Zip Code

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Notes:

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**Broker:**

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
Phone Number/Email

\_\_\_\_\_  
Street Address, PO Box, and/or Apartment #, City, State, Zip Code

**Insurance Agent:**

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
Phone Number/Email

\_\_\_\_\_  
Street Address, PO Box, and/or Apartment #, City, State, Zip Code

**Priest**

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
Phone Number/Email

\_\_\_\_\_  
Street Address, PO Box, and/or Apartment #, City, State, Zip Code

**Trust Officer:**

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
Phone Number/Email

\_\_\_\_\_  
Street Address, PO Box, and/or Apartment #, City, State, Zip Code

Notes:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# Estate Planning



**The Church Foundation**  
STRONG FOUNDATION. FAITHFUL INVESTING.

**Other Advisors:**

Full Name

Phone Number/Email

Street Address, PO Box, and/or Apartment #, City, State, Zip Code

Full Name

Phone Number/Email

Street Address, PO Box, and/or Apartment #, City, State, Zip Code

**Additional Notes/Comments:**

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**Signature**

Date



**Additional Notes/Comments:**

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