

Confidential **Estate Planning** Organizer

This estate planning organizer is provided as a resource to you, our alumni and friends of the University of Alberta, and we hope it will be helpful to you.

Office of Planned Giving
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giving.ualberta.ca/HowToGive/PlannedGiving.aspx



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Name _____

Address _____

City _____

Prov./State _____ PC/Zip _____

Telephone number _____

Email address _____

SOCIAL MEDIA ACCOUNTS

User name _____ Account _____

User name _____ Account _____

You can also prepare a list of online accounts and passwords and store them in your safety deposit box or another secure location.

Occupation _____

Employer _____

PERSONAL AND FAMILY INFORMATION

Your date of birth _____ Social Insurance Number _____

Other names used (maiden name, etc): _____

Marital status: Single Married Domestic Partners/Civil Union Widowed Divorced Legally Separated

Spouse's name _____

Spouse's date of birth _____ Social Insurance Number _____

If you have a prenuptial agreement or a separation agreement, please bring a copy of the agreement to your attorney's office

Were you previously married? Yes No

Was your spouse previously married? Yes No

Are you a Canadian citizen? Yes No

If not a Canadian citizen, other citizenship _____

Is your spouse a Canadian citizen? Yes No

If not a Canadian citizen, other citizenship _____

Do you have a passport? Yes No

Passport number: _____

Citizenship: _____

CHILDREN AND DEPENDENTS (Please specify if a child is adopted, from a prior marriage, or deceased.)

(1) Child's name _____ Date of birth _____

Child's spouse _____

Dependent _____

(2) Child's name _____ Date of birth _____

Spouse _____

Dependent _____

(3) Child's name _____ Date of birth _____

Spouse _____

Dependent _____

(4) Child's name _____ Date of birth _____

Spouse _____

Dependent _____

NEXT-OF-KIN/OTHER

Name _____

Relationship to you _____

Add more lines or attach more sheets if necessary.

Financial Information (attach more sheets as necessary)

Bank accounts (chequing, savings, money markets, etc.)

Bank	Account Type	Value	How Owned (individually, spouse, joint tenancy, tenancy in common, etc.)

Financial Information (continued)

Real estate

Address (please list principal residence in first box)	Date of Purchase	Value	Mortgage	How Owned (individually, spouse, joint tenancy, tenancy in common, etc.)

Please bring copies of deeds to your attorney's office.

Guaranteed Investment Certificates and Term Deposits

Financial Institution	Location	Principal Value	Maturity Date	How Owned

Financial Information (continued)

Privately held stock and business interests

Investment	Form of Organization	Value	Owner (you, spouse, trust, etc.)	Percent of Ownership

Please bring copies of partnership agreements, stockholder agreements, appraisals, etc., to your attorney's office.

Registered funds (RRSP, RRIF, RESP, TFSA, etc.)

Financial Institution and Location	Type (eg. RRSP, RRIF, RESP, TFSA)	Current Value	Owner	Beneficiaries (Primary and Contingent)

Financial Information (continued)

Life insurance policies

Company	Owner	Insured	Face Value	Cash Value	Loans Against	Beneficiaries (Primary and Contingent)

Registered pension plan:

Do you belong to a company pension plan? Yes No

Name of beneficiary _____

Does your spouse? Yes No

Name of beneficiary _____

Safety deposit box

Box Location	Box Number	Key Location

Location of important documents, passwords, card numbers, etc: _____

Financial Information (continued)

Other assets

Description	Owner	Value	Notes

Future or contingent income and assets

I (or my spouse) am a beneficiary of a bequest(s).

Name of testator _____ Approximate value _____

Name of testator _____ Approximate value _____

Name of testator _____ Approximate value _____

I (or my spouse) am a beneficiary of a trust fund(s).

Name of trust _____ Approximate value _____

Name of trust _____ Approximate value _____

Name of trust _____ Approximate value _____

I (or my spouse) am a beneficiary of another income or assets.

Description and value _____

Please bring copies of wills or trust documents to your attorney's office.

Financial Information (continued)

Liabilities

Creditor	Type (credit card, car loan, etc.)	Liability Holder	Amount Owed	Payment Due

Professional Advisors

LAWYER

Firm name _____

Firm address _____

Contact _____

Phone number _____

E-mail _____

ACCOUNTANT

Firm name _____

Firm address _____

Contact _____

Phone number _____

E-mail _____

BANKING INFORMATION

Name of bank _____

Branch location _____

Phone number _____

E-mail _____

Name of bank _____

Branch location _____

Phone number _____

E-mail _____

INVESTMENT ADVISOR

Name _____

Firm name _____

Firm address _____

Phone number _____

E-mail _____

Professional Advisors (continued)

LIFE INSURANCE AGENT

Name _____

Firm name _____

Firm address _____

Phone number _____

E-mail _____

OTHER INSURANCE

Name _____

Firm name _____

Firm address _____

Phone number _____

E-mail _____

Estate Planning Objectives

Please bring copies of current estate planning documents (wills, trusts, powers of attorney, living wills, health-care proxies powers of attorney for health care, etc.) with you to your attorney's office.

Some questions to consider

What should happen to your estate when you pass away?

- Do you wish to provide for your spouse, children, grandchildren, and friends?
- Do you wish to provide for charitable organizations?
- How do you wish to provide for people: outright or through trusts?
- Are there particular items of personal property you wish to give to specific individuals?
- If no beneficiaries survive you, how do you want your estate distributed?
- Do you wish to disinherit anyone?

Whom do you wish to oversee the distribution of your estate when you pass away? This may include collecting assets, paying debt, filing tax returns and completing necessary paperwork, hiring an attorney, and making sure your estate is distributed in accordance with your wishes.

Whom do you wish to name as executor or personal representative of your will?

Executor _____

Alternate executor _____

If you have a trust, whom do you wish to name as trustee?

Trustee _____

Alternate trustee _____

If you have minor children, whom do you wish to name as their guardian?

Guardian _____

Alternate guardian _____

What are your preferred funeral and burial/cremation instructions?

Estate Planning Objectives (continued)

Do you have any personal directives or living wills?

Primary agent _____

Alternate agent _____

What are your wishes regarding the receipt of life-sustaining treatment in the event of an incurable condition?

Do you currently have an enduring power of attorney?

Primary attorney _____

Alternate attorney _____

Supporting the University of Alberta with a Charitable Bequest

Suggested Endowment Bequest Language:

"I give and bequeath the sum of \$_____ (or _____% of the residue of my estate) to the University of Alberta, care of the Office of Advancement, to establish an endowment fund, the income of which is to be used by the University of Alberta or by the Faculty/School of _____ to support (insert designation: for example, library, fellowship, scholarship, bursary or other award) in my name (or in memory of _____).

If the University of Alberta is unable to apply all or part of these funds for the specific purpose(s) stated herein, the Board of Governors of the University of Alberta is authorized to apply this bequest to other purposes; such purposes, however, to conform as closely as possible to the spirit and intent of this bequest."

Suggested General Purposes Bequest Language:

"I give and bequeath the sum of \$_____ (or _____% of the residue of my estate) to the University of Alberta, care of the Office of Advancement, for the general purposes of the University and its greatest needs OR to be used in the Faculty/School of _____ for its general purposes and greatest needs OR to be used in the Faculty/School of _____ designated to _____ (identify program or project).

If the University of Alberta is unable to apply all or part of these funds for the specific purpose(s) stated herein, the Board of Governors of the University of Alberta is authorized to apply this bequest to other purposes; such purposes, however, to conform as closely as possible to the spirit and intent of this bequest."

Should you wish to support the University of Alberta in your will, please note that our legal name is "The University of Alberta". Your lawyer may want to know the university's charitable registration number is 10810 2831 RR0001.

The University of Alberta Office of Planned Giving is prohibited from giving legal or financial advice, and nothing provided in this organizer should be interpreted as such. The University of Alberta Office of Planned Giving encourages you to consult with your own advisor before creating an estate plan or deciding whether to create a future gift for the University of Alberta.

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