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## Estate Planning Data Sheets

### Respondent No. 1

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Social Security No.: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Telephone numbers: \_\_\_\_\_

home: \_\_\_\_\_

other: \_\_\_\_\_

e-mail: \_\_\_\_\_

U.S. Citizen? \_\_\_\_\_

If not, where: \_\_\_\_\_

Marital status: \_\_\_\_\_

Maiden name: \_\_\_\_\_

Any previous marriage: \_\_\_\_\_

If so, provide pertinent information:

Place of employment: \_\_\_\_\_

Former employer if retired: \_\_\_\_\_

Year NJ residence established: \_\_\_\_\_

List names of children and dates of birth:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Respondent No. 2 (if applicable and different)

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Social Security No.: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Telephone numbers: \_\_\_\_\_

home: \_\_\_\_\_

other: \_\_\_\_\_

e-mail: \_\_\_\_\_

U.S. Citizen? \_\_\_\_\_

If not, where: \_\_\_\_\_

Marital status: \_\_\_\_\_

Maiden name: \_\_\_\_\_

Any previous marriage: \_\_\_\_\_

If so, provide pertinent information:

Place of employment: \_\_\_\_\_

Former employer if retired: \_\_\_\_\_

Year NJ residence established: \_\_\_\_\_

List names of children and dates of birth:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Identification of Assets**  
 (if you need more room, attach separate sheets)  
 (use "best estimate" numbers)

**A. Real Estate:**

Location	Type (e.g. house)	In name of	Approx. Value	Mortgage Amount

**B. Brokerage Accounts** (*if account includes stocks, bonds, mutual funds, etc. list them here and not under the separate headings below*).

Name of Firm	In name of	Type of securities (e.g., stocks or bonds)	Total Value

**C. Stocks (not part of listed brokerage accounts):**

Company	Type (e.g. common)	In name of	Number of shares	Valuation/share	Total Value

**D. Bonds (not part of listed brokerage accounts):**

Issuer	Identification of issue	In name of	Face value (e.g. % & maturity date)	Present Value

**E. Mutual Funds (not part of listed brokerage accounts):**

Name of Fund	Account No	In name of	Value

**F. Money Market accounts, certificates of deposit, and bank accounts:**

<u>Name of Fund or Bank Account or Certificate No</u>	<u>In name of</u>	<u>Value</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**G. Life Insurance:**

<u>Insurance Company:</u>	<u>Type (e.g. whole life or term)</u>	<u>Insured</u>	<u>Owner</u>	<u>Primary Beneficiary</u>	<u>Contingent Beneficiary</u>	<u>Death Benefits</u>	<u>Loans</u>
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

**H. Retirement Plan Benefits (include IRAs and Keogh Plans)**

<u>Name of employer or sponsor</u>	<u>Type of plan (e.g. IRA)</u>	<u>Primary Beneficiary</u>	<u>Contingent Beneficiary</u>	<u>Value of benefits</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**I. Loans:** List and describe any loans owed to you.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**J. Patent or Royalty Rights:** List and describe, including estimated value.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**K. Valuable Objects:** (e.g., art, antiques, collections, automobiles, jewelry, etc.) List and describe, including estimated value and ownership.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**L. Other Assets:** Identify other assets not otherwise covered, including description, value, and ownership (e.g. stock options, partnership interests, annuities, sole proprietorship business, deferred compensation, etc.)

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**M. Accounts with or for Children:** List custodial, joint, or "in trust" for "accounts or investments or 529 plans which you hold, including description of and value.

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**N. Anticipated Inheritances:** Describe source of possible inheritances and estimated amounts.

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**O. Liabilities:** Provide any information about debts owed by you (other than regular credit card or household expenses or mortgage loans or life insurance loans listed elsewhere on this form).

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**P. Gifts:** Provide information about any taxable gifts made by you and furnish copies of all gift tax returns filed by you.

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**Signatures:**

I certify that the above information is complete and accurate for your use in determining my estate planning needs.

**Respondent no. 1:** \_\_\_\_\_ **Date signed:** \_\_\_\_\_

**Respondent no. 2:** \_\_\_\_\_ **Date signed:** \_\_\_\_\_

## Estate Planning Valuation Sheet (Compilation)

Instructions: In order to estimate the current value of your estate for planning purposes, fill in the estimated values in the appropriate column. If you have no spouse, complete only the first and last column. Include on the "Life Insurance" line only insurance on your life owned by you and payable to your spouse. As to other life insurance, set forth the relevant facts on a separate schedule. This compilation is intended to produce a generalized estimate of your "taxable estate."

Respondent No. 1:

Respondent No. 2:

Estimated Value	I Owned by Respondent #1	II Owned by Respondent #2	III Jointly Owned with Spouse	IV Jointly Owned with Others
Schedule:				
A. Real Estate less mortgage				
B. Brokerage Accounts				
C. Stocks				
D. Bonds				
E. Mutual Funds				
F. Money Market accounts, cds and bank accounts				
G. Life Insurance less loans				
H. Retirement Plan Benefits (also include IRAs and Keogh Plans)				
I. Loans owed to you				
J. Patent or Royalty Rights				
K. Valuable Objects				
L. Other Assets				
Total Assets				
Less: Loans & Debts Owed				
(1) Total Net Assets				
(2) Plus: 50% of net assets jointly-owned with spouse				
(3) "Taxable Estate" (of spouse who dies first)				
(4) Other Adjustments				
(5) Adjusted "Taxable Estate"				