

Schedule of Assets for a Couple

Reviewed _____
(office use only)



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Names: _____ Date: _____

The information you provide will be kept confidential. These figures assist with estate planning and tax planning, and help identify which assets will pass according to your Will (probate assets) and which will pass according to contract (non-probate).

Note: When indicating in whose name an asset is held, choose "Joint" if the husband and wife are both on the account. Choose "Husb." if the asset is in the husband's name only and "Wife" if the asset is in the wife's name only. If an asset is held in a trust, please indicate whose trust it is.

1. CHECKING, SAVINGS, MONEY MARKET ACCOUNTS, CDS (list any IRA accounts on the reverse side)

Account Type	Bank Name	Approximate Value	Name(s) on Account	Beneficiaries (if any)
Checking		\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	<input type="checkbox"/> This account is set up to Pay on Death (POD) to: _____
Savings / MM		\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	<input type="checkbox"/> POD to: _____
CD		\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	<input type="checkbox"/> POD to: _____
		\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	<input type="checkbox"/> POD to: _____
		\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	<input type="checkbox"/> POD to: _____
	SUBTOTAL	\$		

2. REAL ESTATE

Street Name / Description	Approx. Value	Name(s) on Deed	Beneficiaries (if any)
	\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____ (If Joint: <input type="checkbox"/> Survivorship <input type="checkbox"/> Tenants in Common)	<input type="checkbox"/> This deed is set up to Transfer on Death (TOD) to: _____
	\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____ (If Joint: <input type="checkbox"/> Survivorship <input type="checkbox"/> Tenants in Common)	<input type="checkbox"/> TOD to: _____
	SUBTOTAL	\$	

3. AUTOMOBILES, BOATS, OTHER ASSETS (e.g. business, major collections, etc.)

Description	Approx. Value	Name(s) on Title	Beneficiaries (if any)
	\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	<input type="checkbox"/> This asset is set up to Transfer on Death to: _____
	\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	<input type="checkbox"/> TOD to: _____
	\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	<input type="checkbox"/> TOD to: _____
	SUBTOTAL	\$	

(OVER)

4. IRAS, 401(K)S, ANNUITIES, OTHER RETIREMENT ACCOUNTS

Account Type	Bank / Holding Entity	Approx. Value	Name(s) on Account	Beneficiaries
		\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	Primary: _____ Contingent: _____
		\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	Primary: _____ Contingent: _____
		\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	Primary: _____ Contingent: _____
		\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	Primary: _____ Contingent: _____
		\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	Primary: _____ Contingent: _____
	SUBTOTAL	\$		

5. STOCKS, BONDS, MUTUAL FUNDS (NON-RETIREMENT ACCOUNTS)

Description (list basis if known)	Approx. Value	Name(s) on Account	Beneficiaries (if any)
	\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	<input type="checkbox"/> This account is set up to Transfer on Death (TOD) to: _____
	\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	<input type="checkbox"/> TOD to: _____
	\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	<input type="checkbox"/> TOD to: _____
	\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	<input type="checkbox"/> TOD to: _____
	\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	<input type="checkbox"/> TOD to: _____
	\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	<input type="checkbox"/> TOD to: _____
	\$	<input type="checkbox"/> Joint <input type="checkbox"/> Husb. <input type="checkbox"/> Wife <input type="checkbox"/> Trust: _____	<input type="checkbox"/> TOD to: _____
	SUBTOTAL	\$	

GRAND TOTAL	\$	<i>Approximate total assets (Items 1-5)</i>
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6. LIFE INSURANCE

Company	Face Value	Type of Policy	Owner	Beneficiaries
	\$	<input type="checkbox"/> Term <input type="checkbox"/> Whole Life (CSV*: \$_____) *Cash Surrender Value	<input type="checkbox"/> Husb. <input type="checkbox"/> Wife	Primary Beneficiary: _____ Contingent: _____
	\$	<input type="checkbox"/> Term <input type="checkbox"/> Whole Life (CSV*: \$_____)	<input type="checkbox"/> Husb. <input type="checkbox"/> Wife	Prim.: _____ Cont.: _____
	\$	<input type="checkbox"/> Term <input type="checkbox"/> Whole Life (CSV*: \$_____)	<input type="checkbox"/> Husb. <input type="checkbox"/> Wife	Prim.: _____ Cont.: _____