

A photograph of a family of three walking away from the camera on a sandy beach. The mother is on the left, wearing a white t-shirt and light-colored pants. The father is on the right, wearing a white polo shirt and khaki shorts. A small child in a white dress is walking between them, holding their hands. The ocean is in the background under a cloudy sky.

*Planning
for the
Future*

*A Guide to
Wills and Trusts*

A Guide to Planning Your Will and Trust

On average, a person works more than forty years to accumulate assets and spends ten years conserving what has been earned, but does not spend even two hours to plan for distribution of those assets. The chaos that often occurs following the death of a loved one can be burdensome. This burden can be eased, however, through proper planning. A key element of proper planning is the implementation of an estate plan. The basic document in any such plan is a will and many plans also include a trust. *A Guide to Planning Your Will and Trust* is designed to encourage you to think about how you want your assets to be distributed at death and assist you in gathering the information your attorney will need to prepare a will and trust that accomplishes your goals.

Table of Contents

EFCA Foundation	3
Family Information	4
Personal Information	6
Financial Information	
<i>Assets</i>	7
<i>Liabilities</i>	13
Will Information	14
Trust Information	17
Biblical Basis	21
Sample Bequest Language	22
Statement of Intention for EFCA Legacy Partners	23
Questions for Your Advisors	24



The EFCA Foundation Providing Planned Giving Resources to Individuals and EFCA Ministries

The EFCA Foundation, a ministry of the Evangelical Free Church of America (EFCA), is national in scope and carries out our purpose nationally, regionally, and locally through EFCA member ministries. Each ministry in its own way helps accomplish our broader mission, which is to glorify God by multiplying healthy churches among all people. The EFCA Foundation helps resource this vision and mission.

We encourage individuals and families to name local churches, regional district ministries, national, and international EFCA ministries as the ultimate charitable beneficiary through gift and estate planning documents. We are committed to Biblical principles of stewardship and serve donors on a no-obligation, confidential basis.

The EFCA Foundation offers a variety of gift plans – such as gift annuities, charitable trusts, donor designated funds, and donor advised funds – to individuals and the EFCA ministries they choose to support. While we actively encourage the preparation of wills and living trusts, we leave it to donors in consultation with their attorney's to finalize these essential documents. Our mission is to provide trusted charitable gift and estate planning services to help meet personal planning goals while furthering the Lord's work.

Family Information

Full Name _____

Other names by which you are known _____

Address _____

Phone (Home) _____ (Work) _____

Date of Birth _____

Birthplace _____

Citizenship _____

Social Security Number _____

Marital Status: Single Married Widowed Divorced Separated

Information on previous marriages: _____

Full Name of Spouse _____

Address _____

Phone (Home) _____ (Work) _____

Date of Birth _____ Birthplace _____

Citizenship _____

Social Security Number _____

Marital Status: Single Married Widowed Divorced Separated

Information on previous marriages: _____

Children and/or Other Dependents

Child/Dependent #1

Name

Relationship

Date of Birth

Street Address

City

State

Zip

Child/Dependent #2

Name

Relationship

Date of Birth

Street Address

City

State

Zip

Child/Dependent #3

Name

Relationship

Date of Birth

Street Address

City

State

Zip

Child/Dependent #4

Name

Relationship

Date of Birth

Street Address

City

State

Zip

Child/Dependent #5

Name

Relationship

Date of Birth

Street Address

City

State

Zip

Child/Dependent #6

Name

Relationship

Date of Birth

Street Address

City

State

Zip

Does any child/dependent listed have special needs? Yes No

Personal Information

Do you have a will? Yes No

If yes, what is the date of that will? _____

Where is your will located/stored? _____

If available, provide your attorney with a copy of your will.

Do you have a trust? Yes No

If yes, what is the date of that trust? _____

Where is your trust agreement located/stored? _____

If available, provide your attorney with a copy of your trust.

Do you have a safe deposit box? Yes No

If yes, where is the safe deposit box located? _____

Have you given durable power of attorney to anyone? Yes No

If yes, who is named as your power of attorney? _____

Where is your power of attorney located/stored? _____

If available, provide your attorney with a copy of your power of attorney.

Do you have a durable power of attorney for health care or advanced health care directive? Yes No

If yes, who is named as your agent for health care decisions?

Where is your health care document located/stored? _____

If available, provide your attorney with a copy of your health care document.

Financial Information: Assets

Real Estate

PARCEL #1 Description

Location

Nature of Title/Such as Joint-Ownership or Tenants-In Common

Date of Purchase	Cost	Present Value
------------------	------	---------------

PARCEL #2 Description

Location

Nature of Title/Such as Joint-Ownership or Tenants-In Common

Date of Purchase	Cost	Present Value
------------------	------	---------------

PARCEL #3 Description

Location

Nature of Title/Such as Joint-Ownership or Tenants-In Common

Date of Purchase	Cost	Present Value
------------------	------	---------------

PARCEL #4 Description

Location

Nature of Title/Such as Joint-Ownership or Tenants-In Common

Date of Purchase	Cost	Present Value
------------------	------	---------------

Total Real Estate Value \$ _____

Stocks, Bonds, Mutual Funds

Company/Symbol/Account #

Number of Shares Date of Purchase

Cost Present Value

Company/Symbol/Account #

Number of Shares Date of Purchase

Cost Present Value

Company/Symbol/Account #

Number of Shares Date of Purchase

Cost Present Value

Company/Symbol/Account #

Number of Shares Date of Purchase

Cost Present Value

Company/Symbol/Account #

Number of Shares Date of Purchase

Cost Present Value

Total Value of Stocks, Bonds, Mutual Funds \$ _____

Business Ownership (*Proprietorship, Partnership, Corporation*)

Name of Business	Share of Ownership	Date of Creation	Purchase Value	Present Value
------------------	--------------------	------------------	----------------	---------------

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Total Value of Business Ownership Interests \$ _____

Other Investments

Description/Cost

Present Value

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total Value of Other Investments \$ _____

Personal Property (Jewelry, Art, Furniture, Vehicles, etc.)

ITEM #1 Description _____ Location _____

Date of Purchase _____ Cost _____ Present Value _____

ITEM #2 Description _____ Location _____

Date of Purchase _____ Cost _____ Present Value _____

ITEM #3 Description _____ Location _____

Date of Purchase _____ Cost _____ Present Value _____

ITEM #4 Description _____ Location _____

Date of Purchase _____ Cost _____ Present Value _____

Total Personal Property Value \$ _____

Other Assets/Notes Receivable

Description/Cost _____ Present Value _____

Total Value of Other Assets/Notes Receivable \$ _____

Bank or Savings Accounts

Type (Checking or Savings)	Name of Institution	Approximate Balance
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
Total Bank or Savings Accounts \$		_____

Insurance Policies

POLICY #1

Company	Type of Policy	Premium Payments (Amount & Frequency)	
_____	_____	_____	
Owner	Beneficiary	Face Value	Cash Value
_____	_____	_____	_____

POLICY #2

Company	Type of Policy	Premium Payments (Amount & Frequency)	
_____	_____	_____	
Owner	Beneficiary	Face Value	Cash Value
_____	_____	_____	_____

POLICY #3

Company	Type of Policy	Premium Payments (Amount & Frequency)	
_____	_____	_____	
Owner	Beneficiary	Face Value	Cash Value
_____	_____	_____	_____

Total Face Value of Insurance Policies \$ _____ Annual Income

Annual Income

Salary _____

Spouse's Salary _____

Investment Income _____

Other Income (list type and amount) _____

Total Annual Income \$ _____

Retirement Accounts

List Retirement Accounts, Pension Plans and Profit Sharing Benefits by type and amount:

Inheritance

Do you expect to receive an inheritance? Yes No

If yes, explain. _____



Will Information



Beneficiaries

List the people, ministries, and charities that you want to benefit when you die.

Beneficiary #1 Name Address

Description of Gift (specific asset or amount)

Beneficiary #2 Name Address

Description of Gift (specific asset or amount)

Beneficiary #3 Name Address

Description of Gift (specific asset or amount)

Beneficiary #4 Name Address

Description of Gift (specific asset or amount)

Beneficiary #5 Name Address

Description of Gift (specific asset or amount)

Beneficiary #6 Name Address

Description of Gift (specific asset or amount)

Special instructions to be noted regarding the disposition of unique items:

Executor

Name someone that you want to be in charge of carrying out the provisions of your will. This should be someone responsible and trustworthy. Be sure to select an alternate in case your primary choice is unable to serve.

Executor

Alternate

Name

Name

Street Address

Street Address

City

State

Zip

City

State

Zip



Guardian

If both you and your spouse die while you have minor children, who would you want to appoint as guardian of those children? You may select separate people to be in charge of the children's physical and financial well-being. Make certain that the lifestyle of the people you choose is compatible with your Christian lifestyle. Be sure to select an alternate in case your primary choice is unable to serve.

Guardian

Alternate

Name

Name

Street Address

Street Address

City

State

Zip

City

State

Zip

Briefly describe what you would like your guardians to know is important to you.

Briefly describe how you would like your guardians to handle the financial needs for minor children.

Trust Information

Trustee

Name someone that you want to be in charge of carrying out the provisions of your trust. This should be someone responsible and trustworthy. Be sure to select an alternate in case your primary choice is unable to serve. You may name the same (or different) people as Executor and Trustee.

Trustee

Alternate

Name

Name

Street Address

Street Address

City

State

Zip

City

State

Zip

Briefly describe what you would like a trust to accomplish for you.

Trust Beneficiary Information

List the People, Group and/or Charitable Organizations that You Want to Benefit From Your Trust When you Die (If Different from the Beneficiaries Listed)

Beneficiary #1 Name Address

Description of Gift (specific asset or amount)

Beneficiary #2 Name Address

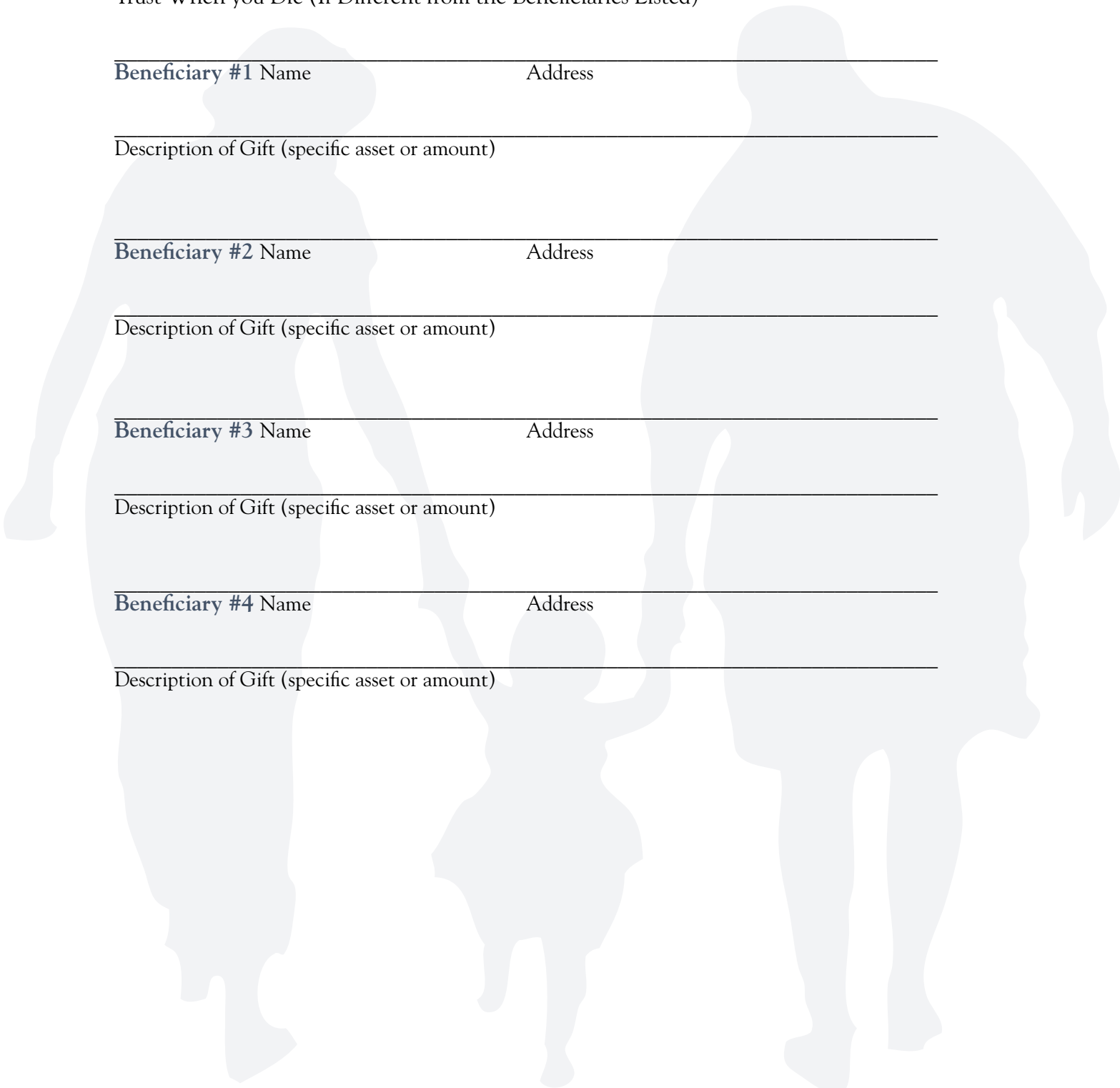
Description of Gift (specific asset or amount)

Beneficiary #3 Name Address

Description of Gift (specific asset or amount)

Beneficiary #4 Name Address

Description of Gift (specific asset or amount)



Terms of Trust

General Instructions: _____

Income distribution as follows:

Name _____

Name _____

Name _____

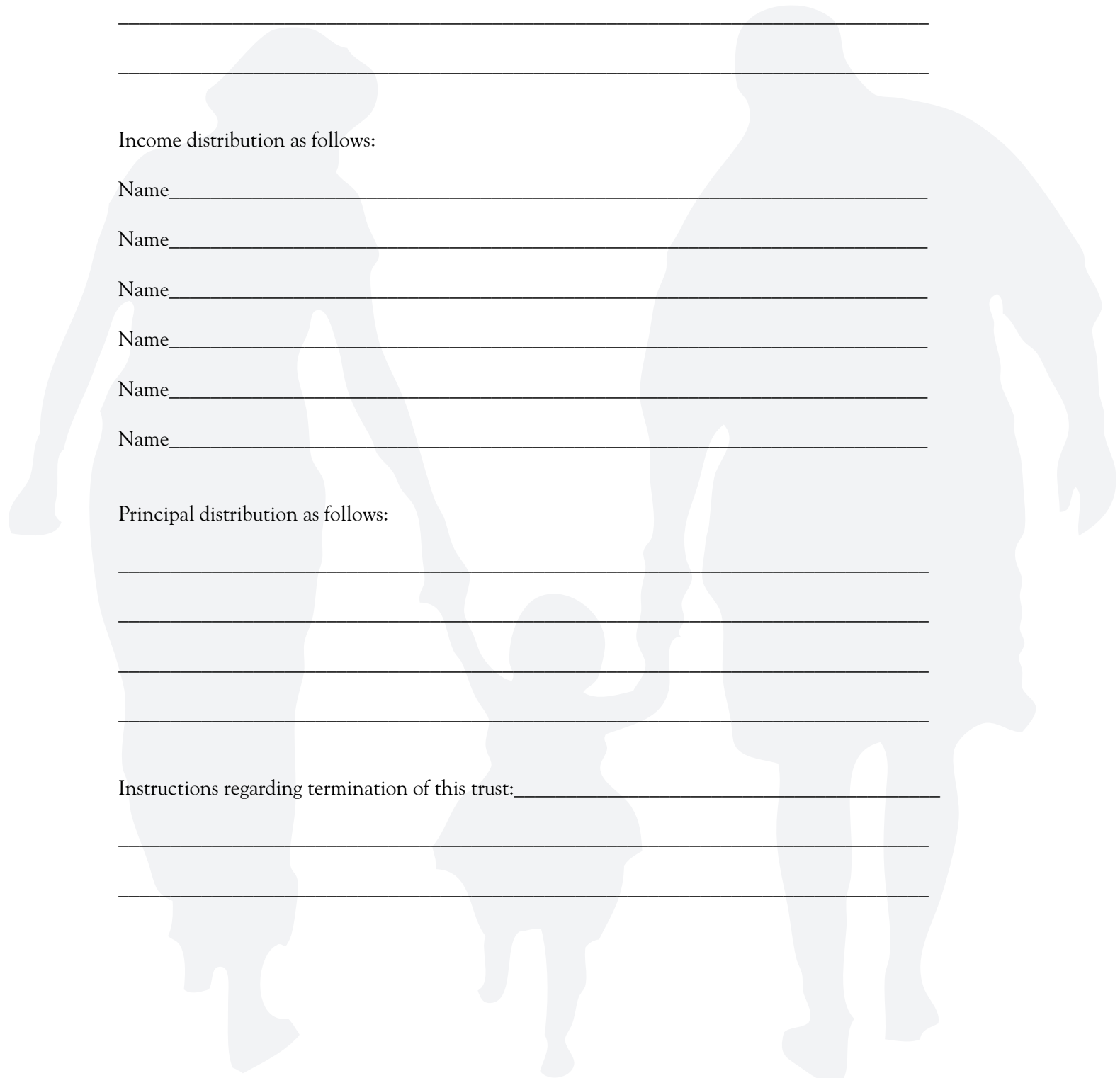
Name _____

Name _____

Name _____

Principal distribution as follows:

Instructions regarding termination of this trust: _____



Trust Principal

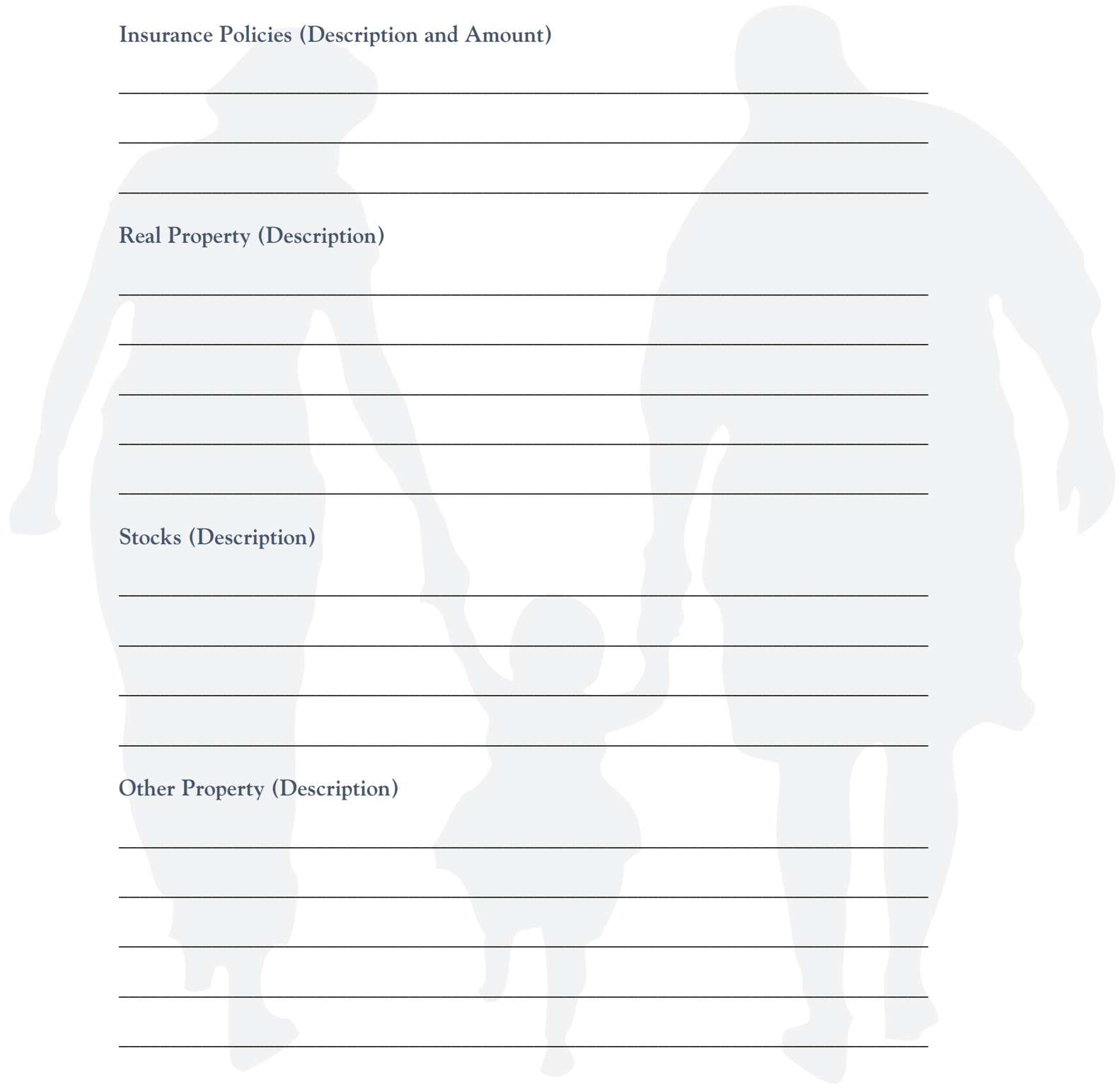
Which of the assets you listed do you want to include in your trust? If you aren't sure, this is an issue to discuss with your attorney.

Insurance Policies (Description and Amount)

Real Property (Description)

Stocks (Description)

Other Property (Description)



Biblical Basis to support the Lord's Work

Every Christian is encouraged to prayerfully consider naming ministry within their wills or other estate plans. There are numerous Biblical reasons for good stewards to do this.

1. **To prove or demonstrate my love for God.** "I am not commanding you, but I want to test the sincerity of your love by comparing it with the earnestness of others." (NIV: 2 Corinthians 8:8)
2. **To help with the carrying out of the Great Commission.** (Matthew 28:19-20)
3. **To put faith into practice.** "We live by faith, not by sight." (2 Corinthians 5:7)
4. **To abound in the grace of giving.** "But just as you excel in everything ... see that you also excel in this grace of giving."
5. **To encourage others in the grace of giving.** "For I know your eagerness to help ... and your enthusiasm has stirred most of them to action." (2 Corinthians 9:2)
6. **To experience the love of God in all its fullness.** "...for God loves a cheerful giver.: (2 Corinthians 9:6)
7. **To bring glory to God.** "...men will praise God for the obedience that accompanies your confession of the gospel of Christ, and for your generosity in sharing with them and with everyone else." (2 Corinthians 9:13)
8. **To please God.** "...They are a fragrant offering, an acceptable sacrifice, pleasing to God." (Philippians 4:18)

At the EFCA Foundation, we value and praise the Lord for individuals and families who support the current ministry initiatives and the future vision of the Evangelical Free Church of America. Funds are used to support the EFCA's mission to *glorify God by multiplying healthy churches among all people.*

At the EFCA Foundation, we recognize that it is the work of the Holy Spirit that prompts Christians to give (John 15:4-5). We place the giver's relationship to God above our ministry's agenda. (2 Corinthians 4:16-18). Our communications will be clear and honest; never coercive or manipulative.

We value cooperation and partnership throughout the EFCA movement. We encourage you to support your local church, district, camps, colleges, seminaries, and the various ministries of the EFCA national office. The EFCA's impact is realized in communities, states, our nation, and around the world. We believe that the joy-filled generosity of believers will fully fund God's work here on earth. (Matthew 6:10)

The EFCA Foundation and its employees do not provide tax or legal advice.
Prospective Donors should consult with their legal and financial advisors.
All information is considered as non-binding and confidential.

Example Bequest Language

Please feel free to change the numbers or percentages as you desire. These are offered as suggestions and are not meant to take the place of qualified legal counsel. See your attorney.

For The Evangelical Free Church of America — Sample

I give, devise and bequeath to the Evangelical Free Church of America, a Minnesota non-profit corporation (ID Number: 41-0721672), with offices located at 901 East 78th Street, Minneapolis, MN 55420, an amount equal to ____ percent of my estate,

or

the sum of \$____,

or

the following real property (give exact legal description of the property),

or

all the rest, residue and remainder of my estate, to be used at the discretion of its governing board.

Contingent Bequests — Sample

If my brother John Doe survives me, I devise and bequeath 20% of the remainder and residue of property owned at my death, whether real or personal, and wherever located to John Doe.

If John Doe does not survive me, then I devise and bequeath 20% of my residuary estate, whether real or personal property and wherever located to the Evangelical Free Church of America, a Minnesota non-profit corporation (ID Number: 41-0721672), with offices located at 901 East 78th Street, Minneapolis, MN 55420, to be used at the discretion of its governing board.

***Become an EFCA Legacy Partner!
Make a plan . . . let us know.***



STATEMENT OF INTENTION FOR EFCA LEGACY PARTNERS

Confidential and Non-Binding

Name _____ Birth Date _____

Name _____ Birth Date _____

Address _____ City _____ State _____

Telephone (Home) _____ (Cell) _____ (email) _____

As an indication of my/our support of the Evangelical Free Church of America (EFCA), I/we are pleased to indicate that it is my/our intention to provide a gift as the Lord allows as follows:

Description of Gift (type / value)

- Bequest through will**
 - specific amount \$ _____
 - other (please specify) _____
 - percentage of estate _____
- Beneficiary designation**
 - savings or checking account
 - certificate of deposit
 - other (please specify) _____
- Charitable trust (select one)**
 - unitrust
 - annuity trust
 - revocable trust
 - lead trust
 - other (please specify) _____
- IRA or retirement plan** (please describe) _____
- Other** (please describe) _____

I/We have provided will provide choose not to provide to the EFCA Foundation a copy of that portion of my/our wills(s) or other instrument that pertains to the Evangelical Free Church of America or other Evangelical Free Church ministry.

With the understanding that values are subject to change and that I/we are under absolutely no obligation to honor this an estate gift designation, at this time I/we estimate the value of my/our gift to be approximately \$ _____ in today's dollars.

This is an update of a previously documented gift plan.

Purpose of Future Gift

- This gift is to be unrestricted and may be used where the need is greatest at the EFCA.
- I/we wish to specify that the gift be used for the following purpose(s): _____

EFCA Foundation
901 East 78th Street
Minneapolis, MN 55420

(800) 995-8578 toll free
(952) 853-8417 direct
foundation@efca.org email
www.efcafoundation.org web



EFCA
Foundation

901 East 78th Street
Minneapolis, MN 55420
Phone: (952) 853-8417 or (800) 995-8578
Fax: (952) 853-8488
foundation@efca.org
www.efcafoundation.org

The EFCA Foundation is a ministry of the
Evangelical Free Church of America

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