

LAWYERS PROFESSIONAL LIABILITY ESTATE / TRUST SUPPLEMENT

Firm Name: _____

Please complete this Supplement if any lawyer listed on the application shows a percentage in the Estate/Trusts area of practice.

1. What types of Estate Planning Services does the firm provide? (check all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Wills | <input type="checkbox"/> Business Formation | <input type="checkbox"/> Guardianship |
| <input type="checkbox"/> Estate Planning | <input type="checkbox"/> Tax Advice (Non Shelter) | <input type="checkbox"/> Medicaid Planning |
| <input type="checkbox"/> Probate | <input type="checkbox"/> Tax Shelter Advice | <input type="checkbox"/> Litigation |
| <input type="checkbox"/> Trust Administration | <input type="checkbox"/> Asset Protection | <input type="checkbox"/> Real Estate Purchase & Sale ** |
| <input type="checkbox"/> Other – Describe: _____ | | |

** Please complete the Real Estate Supplement

2. Please list the five largest trusts to which any member of the firm provided legal services in the last 24 months.

Name of Trust	Name of Attorney	Trustee/ Personal Rep/ Executor Y/N	Co-trustee? Y/N	Description/ Type Of Trust	Size of Trust/ Value of Assets	Date Service Began	Annual Firm Billings	% of Firm Billings	Description of Services Provided

3. Is a report to a court or outside authority required? Yes No
If "Yes", please describe: _____
4. Does your firm have the authority to write checks, provide investment advice, make investments, or have discretionary control of funds? Yes No
If "Yes", please describe: _____
5. Does the firm use engagement letters that clearly define the scope of the services that will be provided? Yes No
6. Are written scope of service agreements requiring dual signatures in place for each trust? Yes No
7. Does a second firm member review all trust and estate documents drafted by a firm member? Yes No

8. Does any trust have or reasonably anticipate having any disputes over assets or distribution of the trust? Yes No
9. Are firm members permitted to accept gifts or bequests from Estate and Trust clients? Yes No
10. Does the firm conduct conflict checks in 100% of estate/probate/trust cases? Yes No

If "No", please explain: _____

11. Does the firm have controls in place to monitor trust activity by third parties, trust beneficiaries, or other beneficiary parties? Yes No

If "Yes", please describe: _____

12. How often are client estate/trust files:

- a) Independently audited or reconciled? Quarterly Annually Other – Describe: _____
- b) Reviewed for material changes in the estate? Quarterly Annually Other – Describe: _____
- c) Reviewed for changes in tax code or other laws? Quarterly Annually Other – Describe: _____

13. How does the firm handle tax advice given in conjunction with estate and trust work?

- Firm requires client to obtain independent tax representation
- Firm outsources or refers all tax work to outside entities
- Firm employs accountants/CPAs who handle or advise on all tax matters
- Firm's attorneys are tax attorneys who handle or advise on all tax matters
- The nature of the firm's trust and estate work does not require tax advice
- Other – Describe: _____

14. Does the firm outsource or refer business to any third party professionals (Accountants, Investment Advisors, other Attorneys)? Yes No

If "Yes":

- a) Does the firm use written referral agreements in 100% of these cases? Yes No
- b) Does the firm obtain proof of insurance from all third parties? Yes No
- c) Does the client sign off on all third parties in writing? Yes No
- d) Does the client retain the third party professional? Yes No

15. Do firm members acting as Trustees/Personal Representatives/Executors engage in the following activities:

- a) Use of Trust funds to invest in entities related in any way to the firm? Yes No
- b) Employment by the Trust of anyone related in any way to a firm member? Yes No
- c) Use of Trust funds as loans to any firm client, firm member or person related in any way to a firm member? Yes No
- d) Delegation of Trustee duties to others? Yes No

If yes to any of the above, please explain: _____

Signature of Officer or Partner of Firm

Print name of Officer or Partner

Date