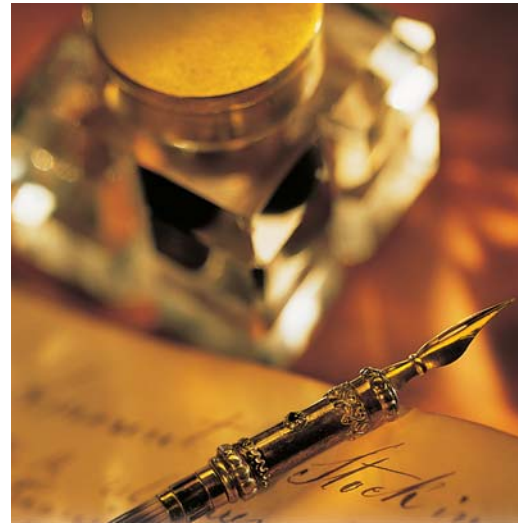


The **PARTNERSHIP** Program

THE FAMILY LOVE LETTER



INFORMATION IN A TIME OF CONFUSION

*Presented by Enterprise Fund Distributors, Inc.
in partnership with John J. Scroggin, J.D., LL.M.*

YOUR SOLUTIONS PARTNER

Enterprise Fund Distributors, Inc., in partnership with John J. “Jeff” Scroggin, J.D., LL.M., is pleased to extend to you a valuable resource that may serve you well in times of stress and sadness. The Family Love Letter is a document designed to provide information in a time of confusion. As a tax and estate planning attorney, Jeff writes, “The incapacity or death of a family member is always a traumatic event. But the emotional turmoil and family pain is often magnified by the resulting confusion over the plans, assets and desires of an incapacitated or deceased family member.”

Jeff Scroggin, J.D., LL.M., of Roswell, Georgia, is a nationally recognized speaker and author and has been quoted in dozens of publications, including *The Wall Street Journal*, *Forbes*, *Fortune*, *Journal of Financial Services Professionals*, *Financial Planning* and *Dow Jones Investment Advisor*. Enterprise Fund Distributors, Inc. has tapped his services to bring you a tool that will help your family avoid unneeded trauma or misfortune through lack of information. Included in this brochure is an article by Mr. Scroggin, which explains in more detail the value of The Family Love Letter, as well as a copy of The Family Love Letter.

Thank you for continuing to trust in Enterprise Fund Distributors for investment solutions. We hope that you find this tool, and the concepts behind it, of value to you and your family.

Expertise for your financial FUTURE

The AXA Enterprise collection of funds, advised by AXA Equitable Life Insurance Company and its affiliate, Enterprise Capital Management, provide the investment expertise and products to help build your financial future.

AXA Equitable and Enterprise Capital are part of AXA Financial, one of the premier U.S. organizations providing financial protection and wealth management to thousands of families around the country. With over \$70 billion of total assets under management as of December 31, 2005, AXA Equitable and Enterprise Capital, through the AXA Funds Management Group (AXA FMG), a business unit of AXA Equitable, rank among the largest U.S. managers of subadvised funds.

A MANAGER OF MANAGERS PROCESS

The fund advisors, through AXA FMG, employ an institutional process designed to deliver consistency and performance. AXA FMG works with nationally recognized third-party industry consultants for specialized research to help select, monitor and evaluate the investment management firms hired to manage the funds on a day-to-day basis. Once a manager is selected, the fund advisors, through AXA FMG, continue to closely monitor all aspects of the fund manager's investment activities.

- Performance Measurement — Monthly performance results are reviewed on an absolute basis and relative to benchmarks and peer groups.
- Attribution Analysis — Fund managers are assessed based on the amount of performance that can be explained by security selection and sector weighting to help evaluate the manager's stock-picking ability and the firm's research capabilities.
- Style Consistency — Each fund manager's investment decisions are watched closely to ensure that they are consistent with the fund's objective, investment criteria and reflect an appropriate level of risk.
- Due Diligence — Regular meetings with key people from each subadvisor firm provide insight into the continuity, practices and leadership of firm's management and operations.

THREE WAYS TO INVEST

The AXA Enterprise collection of funds offer investors three ways to access a unique blend of well known and boutique investment management firms.

SINGLE MANAGER FUNDS

For investors who prefer to create a customized asset allocation, these investment options represent a broad array of well-known and boutique managers selected to manage a specific investment style or category.

MULTIPLE MANAGER FUNDS

For investors who prefer a semi-custom approach to asset allocation, these investment options fill specific asset class and style categories using a diversified multi-manager approach.

ASSET ALLOCATION FUNDS

For investors who prefer a ready-made, well-structured approach to fund selection and asset allocation, these investment options incorporate a "fund-of-funds" design that may simplify investing.

THE FAMILY LOVE LETTER

BY: JOHN J. SCROGGIN, J.D., LL.M.

As estate planners, we constantly admonish our clients to make sure they have properly planned for their incapacity and/or death. Unfortunately, our focus often begins and ends with the execution of proper documents and the titling of assets. We often fail to make sure the client's family and decision makers will have adequate information about the client's assets, liabilities and intents. For example, how many children know where a parent wants to be buried, or who the pallbearers should be? While many clients are reluctant to discuss the tragedy of their death or disability with family members, they have less concern about leaving written information behind. This is the purpose of The Family Love Letter.

“The only thing you take with you when you're gone is what you leave behind.”

John Allston

Estate planning is not fundamentally about the dead and the avoidance of a death tax. Instead, its most important goal should be to provide “A Legacy for the Living.”

Your incapacity or death will radically impact your family. Far too many people have the perspective of Paul Simon's song, Flowers Never Bend with the Rainfall: “[I will] continue to continue to pretend that my life will never end...” Seventy percent of Americans do not have an estate plan. Failure to plan and a failure to provide basic information in virtually every case will create family conflict, cause the dissipation of assets you have spent a lifetime building or result in the payment of income and estate taxes which might have been easily avoided.

The incapacity or death of a family member is always a traumatic event. But the emotional turmoil and family pain is often magnified by the resulting confusion over the plans, assets and desires of an incapacitated or deceased family member. The mental fogginess that accompanies the family's trauma is exasperated by the inability to make basic decisions because of the lack of basic information.

A FEW EXAMPLES MAY HELP:

- In August of 1997, my father was committed to a long-term nursing facility because of Alzheimers. I spent four days going through his papers (and making endless phone calls) trying to locate basic information about his life, long-term care, health and disability insurance policies, determining whether he had filed his income tax returns, and discerning his assets, debts and benefits from military service. Even after going through the process, I was never quite sure I had a full grasp of all the things I should know. The Family Love Letter is designed to substantially minimize this lingering worry.
- Years ago I had a client who carried a significant life insurance policy. The premium was automatically paid from his bank account. The policy had long since been lost in a clutter of papers, but the automatic debiting of the account kept the policy alive. When the man was no longer able to handle his own affairs, his children terminated his bank account and transferred the father and his assets to the city of one of the sons. They had no idea that they had also inadvertently terminated (for non-payment) a significant life insurance policy on their father, until after he died a year later. If there had been a Family Love Letter, they might have kept over a half million dollars in life insurance coverage — lost as a result of the inadvertent mistake of caring children.
- Recently a widowed client came to our office for a consultation. He had no children. No one had any knowledge of his personal assets or liabilities. In his documents, he appointed an old friend as his executor. We provided him a copy of The Family Love Letter and encouraged him to create a notebook of all his important documents. When he died, his friend was able to pull out his notebook, which included The Family Love Letter, and see that he was to be buried next to a deceased wife who died 20 years before. He knew who his pallbearers were and what the memorial should read. After death, the letter gave the executor and our firm the basic information about his estate, including the ownership of several vacant tracts of land in other states — assets we might have had a difficult time locating without the list.

We have designed this Family Love Letter to provide “information in a time of confusion” and help minimize the types of inadvertent mistakes, which often occur in these times of turmoil. While the document certainly will help save time, that is not its primary purpose. The primary purpose is to reduce the confusion and stress, which almost always accompanies the death or disability of a loved one.

We recommend that clients complete the document, keep a copy with important records and perhaps, provide a copy to family member(s) and/or professional advisor(s). In many cases, clients have provided a copy of The Family Love Letter and their other estate planning documents to their heirs. The client may call a family meeting where the advisors and heirs can discuss both the documents and the desires the client has for his or her family using a family mission statement as the catalyst. This meeting assures that those who will be making decisions upon the client's death or disability know what the client wanted. These meetings encourage a broad range of discussion on topics — including areas of potential conflict (e.g., choice of trustees), which the client might not have anticipated. It also allows the advisors to gain a greater understanding of the family dynamics which may impact the client's plans.

Because the information in The Family Love Letter is only one part of the larger estate plan, we have also provided in the form basic information on other documents the client should consider signing. Additional value-added materials can be found at our Web site: www.scrogginlaw.com.

FUNDAMENTAL ESTATE PLANNING

Estate planning consists of two principal elements: the execution of documents that properly provide for your incapacity and/or death, and detailed facts about your assets, liabilities and desires upon either event. We recommend that every client review creating each of the following documents:

❶ A Will or Will substitute (e.g. a living trust), which disposes of your assets. Your will is your final declaration of how your assets and family (e.g. guardianship of minors) should be treated after your death. As such, it needs to be well thought out and deal with all of the potential issues that may face your survivors. Many clients want “simple” wills, but fail to realize the importance of a well-drafted will. For example, we represented an estate several years ago in which a woman had a child by a drug dealer who had been in and out of prison for years. The man had never seen the child or provided support. The child and the mother were injured in the same car accident. The woman died immediately and the child died 12 hours later. The lawyer who drafted her will provided that all of her assets passed to her son at her death. He held the assets for 12 hours and then, in accordance with state inheritance law, the drug dealer inherited the entire estate of his son — including several million dollars resulting from the death of the woman and her child. It was a simple will, but it certainly did not do what she would have wanted.

Your will has a number of purposes, including:

- Providing for how your assets should be disposed of at your death.
- Choosing people who will make decisions when you are gone.
- Creating trusts for heirs who may lack the maturity or talents to manage inherited assets.
- Providing for the guardians of any minor children.
- Minimizing any state and federal estate taxes.
- Reducing the state and federal income taxes of heirs.
- Minimizing the sources of potential conflicts among your family members.

Helpful Web sites on Estate Planning

- www.scrogginlaw.com
- www.naepc.org
- www.estateplanninglinks.com
- www.law.cornell.edu/topics/estate_planning.html
- www.forbes.com/estate_planning/
- www.abanet.org/rppt/public/home.html

❷ A Personal Property Disposal List is critically important. We have seen more family conflict over insubstantial personal property than over any other issue. Ask your children what assets they would want if you are gone and then prepare a detailed list (perhaps with pictures) directing how the assets should pass. In many states, if properly referenced in your will, this list will be legally enforceable. If your children are too young, use the list to describe which assets (e.g., family heirlooms) you want your personal representative to hold for the children until they are more mature. If you are married, you should consider preparing a list that describes which assets belong to you and which assets belong to your spouse — especially if you have children from a prior marriage.

❸ The Family Love Letter is designed to provide basic information to your family about your assets, liabilities, and personal desires upon your death or incapacity.

❹ A Living Will is your declaration that you do not desire life-sustaining treatment if there is no significant hope of recovery. In the Nancy Cruzan decision, the U.S. Supreme Court ruled that to be taken off life support (including intravenous nourishment and fluids), you must have declared your desire before becoming incapacitated. A 1992 study in the Archives of Internal Medicine reported that having a living will or medical power of attorney saved more than \$60,000 per patient in the final stay in the hospital. Even though you may be young and in good health, remember that Nancy Cruzan, Karen Ann Quinlan and Terri Schiavo were all young women in their late 20s/early 30s when they became incapacitated. In each case, the failure to have medical directives upon incapacity created tremendous emotional and financial costs to their families.

❺ A Medical Power of Attorney (otherwise called a Durable Healthcare Power of Attorney) may also be necessary. While a living will is simply your declaration not to use life-sustaining measures, a medical power of attorney is designed to grant someone the power to make any medical decisions for you upon your incapacity. Although a living will also deals with life sustaining issues, we generally recommend signing both a medical power of attorney and a living will. Having a medical power of attorney generally assures that the family, not the doctors, have the final say in such treatment. But, if it is clear that life cannot be sustained, the power holder can step away and allow the living will to take affect. “This is his decision, not mine” can make it much easier psychologically for the power holder and the family.

If you are concerned about how medical decisions would be exercised by your power holder, you might use a Medical Directive which allows you (through a grid format) to direct the types of decisions your power holder will make. Copies of the directive can be obtained at www.Medicaldirective.org.

Helpful Web sites on Aging and Critical Care Issues

- www.critical-conditions.org
- www.abanet.org/aging/toolkit/
- www.ama-assn.org
- www.help4srs.com
- www.mag.org
- www.nolo.com
- www.caregiver.org
- www.Medicaldirective.org.

⑥ A Durable General Power of Attorney provides for who will manage your assets upon your incapacity. In some states, such a document has to specifically provide that it survives your incapacity, so it is always wise to make sure such language is in the document. Moreover, such a document should be drafted with extraordinary detail to assure that your power holder has as much authority as possible. A short document of minimal detail that grants “all authority” to your power holder can create significant restrictions for the power holder in making decisions and in handling tax issues. In many states the document can be drafted so it is not triggered until you become incapacitated.

⑦ An Ethical Will. Increasingly, clients are adding ethical wills to their list of estate planning documents. An ethical will is not a form document. It has no set format or required content. Instead, it is designed to accommodate the unique personalities, family structure, values and thoughts of one generation for the next. Perhaps one of the best descriptions is: “Ethical wills are windows into the souls of those who write them. It is this that makes them so cherished by family members from generation to generation.” One author has indicated three principal purposes of an Ethical Will: (1) Leaving an Intangible Legacy, (2) Personal Satisfaction and (3) Aiding the Estate Planning Process. At the end of the Family Love Letter, we have provided a place for you to begin an ethical will. Many clients will draft a more comprehensive statement and attach it to their Family Love Letter.

Materials on Ethical Wills

- Barry Baines, M.D., *Ethical Wills: Putting Your Values on Paper* (Pereus Publishing 2002). Available at www.ethicalwill.com along with other books and materials on Ethical Wills.
- Jack Riemer and Nathaniel Stampfer, *So That Your Values Live On: Ethical Wills and How to Prepare Them*, (Jewish Lights Publishing 1991)
- Elaine Tiller, *Ethical Wills, Spiritual Bequests*, (Baptist Senior Adult Ministries, Washington D.C. 1996)

⑧ Finding an Estate Planner. We believe you should use competent counsel to draft these documents. One place to find such attorneys is at www.martindale.com which can provide you the background of attorneys, their specialties, and how they are rated in their areas of competence by other attorneys. Another source is the National Association of Estate Planners and Councils. Information about its associated estate planners can be found at www.NAEP.org. Because mistakes in even simple estates can create inadvertent estate taxes and income taxes, I generally advise clients to use an estate planner who regularly does estate planning and who has a working knowledge of state and federal income taxes and estate taxes.

⑨ Reviewing the Process. How often should you review your documents? I generally advise clients to review their documents at least every 2-3 years or when a significant change occurs, such as marriage, divorce, birth of a child or grandchild, or receipt of a significant inheritance. Remember: “Estate planning is a process, not a conclusion. The conclusion begins when you are gone.” Your documents will continue to change and evolve as your personal and family situations change.

You are the only one who can leave this information and your failure to make adjustments as your life changes is potentially creating major turmoil for your family. Your death or incapacity is enough of a family tragedy, without adding to it by not updating your information and plans. Reviewing these documents every decade or so is not remotely advisable.

Tax Web sites

- All State Taxes: www.taxsites.com/agencies.html
- National Tax Association: www.ntanet.org
- Tax Foundation: www.taxfoundation.org
- Tax Analysts: www.tax.com
- Tax Lists: Providing for links to tax related web sites
www.taxresources.com
- Senior Law: www.seniorlaw.com
- Tax Forms:
www.irs.ustreas.gov/formspubs/index.html
www.taxsites.com/forms.html
- Federal Rates: www.pmstax.com/afr
- Federal Tax Tables: www.irs.gov/individuals/

ESTATE PLANNING CHECKLIST

A Will or Living Trust

A Personal Property Disposal List

The Family Love Letter

A Living Will

Medical Power of Attorney

Durable General Power of Attorney

Ethical Will

LOVE LETTER TO MY FAMILY FROM _____

(Effective _____, 20__)

Dear Loved Ones:

In an attempt to simplify matters for you, I have written this letter to provide you with information that will be necessary when the time arises:

SECTION ONE — Advisors & Financial Information

MY ADVISORS

Having the right advisors is a critical part of my planning. Some of the people you will need to contact are listed below:

ACCOUNTANT

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

ATTORNEY

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

EMPLOYER

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

FINANCIAL PLANNER

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

LIFE, HEALTH AND DISABILITY INSURANCE ADVISOR

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

MORTGAGE HOLDER

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

PENSION BENEFITS

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

PROPERTY AND CASUALTY INSURANCE ADVISOR

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

STOCKBROKER

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

STOCKBROKER

Name: _____
Address: _____
Phone: _____
Fax: _____
Email: _____

OTHER

Name: _____
Address: _____
Phone: _____
Fax: _____
Email: _____

OTHER

Name: _____
Address: _____
Phone: _____
Fax: _____
Email: _____

MY ASSETS

Here is a list of all my stocks, bonds and other investments, including real property. I have listed a contact person and telephone number for each item, as well as the location of any documents. I have have not attached a financial statement.

Investment: _____
Contact: _____
Phone: _____
Documents are located: _____

Investment: _____
Contact: _____
Phone: _____
Documents are located: _____

Investment: _____
Contact: _____
Phone: _____
Documents are located: _____

Investment: _____

Contact: _____

Phone: _____

Documents are located: _____

Investment: _____

Contact: _____

Phone: _____

Documents are located: _____

Investment: _____

Contact: _____

Phone: _____

Documents are located: _____

Investment: _____

Contact: _____

Phone: _____

Documents are located: _____

Investment: _____

Contact: _____

Phone: _____

Documents are located: _____

Money is owed to us by: _____

Name: _____

Address: _____

Phone: _____

Amount: _____

This Loan is in a Signed Writing Yes No

Money is owed to us by: _____

Name: _____

Address: _____

Phone: _____

Amount: _____

This Loan is in a Signed Writing Yes No

Money is owed to us by: _____

Name: _____

Address: _____

Phone: _____

Amount: _____

This Loan is in a Signed Writing Yes No

Money is owed to us by: _____

Name: _____

Address: _____

Phone: _____

Amount: _____

This Loan is in a Signed Writing Yes No

I want the following loan(s) forgiven at the time of my death (NOTE: Your will or the promissory note should be changed to reflect this forgiveness and make it legally enforceable.):

I want the following loans to be forgiven as a part of the bequest I am leaving to the borrower at the time of my death (i.e., The debt will be one of the assets used to satisfy my bequest to such heir in my will.):

I have have not made any substantial deposits on certain accounts.

If applicable, the accounts are:

LOANED AND STORED ASSETS

I have assets stored at the following locations:

The key to the storage facility is at: _____

I have loaned the following personal property (furniture, art, collectibles etc.):

OBJECTS	PERSON HOLDING THEM

(If the loan of the assets are subject to a written agreement, I have attached a copy to this Family Love Letter.)

MY LIABILITIES

Here is a list of my liabilities, including a contact name and phone number of each, as well as the location of any related documents.

Liability: _____

Contact: _____

Phone: _____

Documents are located: _____

Liability: _____

Contact: _____

Phone: _____

Documents are located: _____

Liability: _____

Contact: _____

Phone: _____

Documents are located: _____

Liability: _____

Contact: _____

Phone: _____

Documents are located: _____

Liability: _____

Contact: _____

Phone: _____

Documents are located: _____

Liability: _____

Contact: _____

Phone: _____

Documents are located: _____

Liability: _____

Contact: _____

Phone: _____

Documents are located: _____

Liability: _____

Contact: _____

Phone: _____

Documents are located: _____

Liability: _____

Contact: _____

Phone: _____

Documents are located: _____

Liability: _____

Contact: _____

Phone: _____

Documents are located: _____

I am also a guarantor of the following debt:

Liability: _____

Contact: _____

Phone: _____

Documents are located: _____

Liability: _____

Contact: _____

Phone: _____

Documents are located: _____

I presently carry the following credit cards:

CREDIT CARD	ACCOUNT NUMBER	WEB ADDRESS	ACCESS NAME	PASSWORD

I lease the following assets:

ASSET	LOCATION	PAYMENT	LESSOR	PHONE NUMBER
		\$		
		\$		
		\$		
		\$		
		\$		

With regard to my assets and liabilities, the following is additional information which I think is important for my family and advisors to know:

SECTION TWO — Insurance & Benefits

MY INSURANCE COVERAGE

Please make sure the premiums on these policies continue to be paid if I become disabled. Please note that premiums may be paid on a monthly, quarterly, semi-annual or annual basis.

I have the following **life insurance** policies (including company-owned) on my life:

TYPE	OWNER	BENEFICIARY	FACE VALUE	LOANS	CASH VALUE	CARRIER	POLICY NUMBER	ANNUAL PREMIUM
			\$	\$	\$			\$
			\$	\$	\$			\$
			\$	\$	\$			\$
			\$	\$	\$			\$

These life insurance policies can be found at: _____

I have have not attached a policy in force statement for the above life insurance policies.

If I am disabled, my life insurance policy allows does not allow for pre-payment of death benefits to support me.

If I am disabled, my life insurance policy allows does not allow you to stop making premium payments.

I have the following **disability insurance** policies:

CARRIER	POLICY LOCATED AT	POLICY NUMBER	ANNUAL PREMIUM	THIS POLICY IS PAID BY THE BUSINESS
			\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
			\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
			\$	<input type="checkbox"/> Yes <input type="checkbox"/> No

If I am disabled, my disability insurance policy allows does not allow you to stop making premium payments.

I have the following **long-term care insurance** policies:

CARRIER	POLICY LOCATED AT	POLICY NUMBER	ANNUAL PREMIUM	THIS POLICY IS PAID BY THE BUSINESS
			\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
			\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
			\$	<input type="checkbox"/> Yes <input type="checkbox"/> No

I have the following **health insurance** policies:

CARRIER	POLICY LOCATED AT	POLICY NUMBER	ANNUAL PREMIUM	THIS POLICY IS PAID BY THE BUSINESS
			\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
			\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
			\$	<input type="checkbox"/> Yes <input type="checkbox"/> No

I have the following other policies:

TYPE	CARRIER	POLICY LOCATED AT	POLICY NUMBER	ANNUAL PREMIUM
Auto				\$
Umbrella				\$
Home				\$
Boat/Airplane				\$
Overhead Expenses				\$
Jewelry				\$
				\$
				\$
				\$

The following insurance premiums are paid automatically from my bank account. (Please make sure you do not close my account without making sure the premiums are still being paid.):

MY EMPLOYMENT BENEFITS

I have the following disability and/or death benefits where I work or worked (briefly describe):

Retirement Plan(s): _____

Military Retirement Benefits: _____

Military Survivor Benefits: _____

Life Insurance: _____

Health Insurance: _____

Long-Term Care Insurance: _____

Disability Insurance: _____

Deferred Compensation: _____

Stock Ownership: _____

Stock Options: _____

Cafeteria Plan: _____

Flexible Spending Accounts: _____

Other: _____

I am am not entitled to military and/or governmental benefits. List the benefits:

I am am not entitled to other benefits. List the benefits:

With regard to my insurance and employment benefits, the following is additional information which I think is important for my family and advisors to know:

SECTION THREE — Documents & Other Information

MY DOCUMENTS

I have executed each of the following documents and you can find them where noted:

DOCUMENT	DATE SIGNED	LOCATION	NOT APPLICABLE
Will			<input type="checkbox"/>
Living Will			<input type="checkbox"/>
Medical Power of Attorney			<input type="checkbox"/>
Medical Directive			<input type="checkbox"/>
General Power of Attorney			<input type="checkbox"/>
Living Trust			<input type="checkbox"/>
Insurance Trust			<input type="checkbox"/>
Charitable Trust			<input type="checkbox"/>
Minor's Trust			<input type="checkbox"/>
Custodial Account			<input type="checkbox"/>
Organ Donation			<input type="checkbox"/>
Children Adoption Papers			<input type="checkbox"/>
Section 529 Education Plan			<input type="checkbox"/>
Pre-Nuptial Agreement			<input type="checkbox"/>
Post-Nuptial Agreement			<input type="checkbox"/>
Divorce Decree or Settlement			<input type="checkbox"/>
Citizenship Papers			<input type="checkbox"/>
Burial Agreement			<input type="checkbox"/>

DOCUMENT	DATE SIGNED	LOCATION	NOT APPLICABLE
Retirement Plan Beneficiary Designation			<input type="checkbox"/>
Insurance Beneficiary Designation			<input type="checkbox"/>
Military Discharge Papers (DD214)			<input type="checkbox"/>
Employment or Independent Contractor Contract			<input type="checkbox"/>
Other			<input type="checkbox"/>
Other			<input type="checkbox"/>
Other			<input type="checkbox"/>
Other			<input type="checkbox"/>
Other			<input type="checkbox"/>

My important records can generally be found at:

- my home filing cabinet
- my safe deposit box
- my home safe
- my attorney's office
- my accountant's office
- my financial planner's office
- other: _____

My most recent personal and any business tax returns can be found at: _____

I have do not have a divorce decree which may require that certain payments be made after I am disabled or after my death.

I may receive an inheritance from: _____

The amount of the inheritance may be as much as \$ _____

Upon my death, my heirs will will not receive a distribution or benefits from a trust.

If yes, the trust instrument was created by : _____

The Trust instrument can be found: _____

I am am not currently the Trustee for a trust.

If I am a Trustee, the trust document is located at: _____

I am am not a beneficiary of a trust.

If I am a beneficiary, the trust document is located at: _____

I am currently Legal Guardian for the following person(s): _____

Documents appointing me can be found at: _____

I have ownership and/or buy-sell agreements for the following businesses in which I have an ownership:

BUSINESS	DATE SIGNED	LOCATION	PARTNER

I have buy-out insurance for the following businesses: _____

I have a buy-sell agreement for the following businesses: _____

MY GENERAL INFORMATION

I do do not have a safe deposit box.

It can be found at: _____

The key can be found at: _____

The following people have signature authority on the box:

I do do not have a personal safe.

The combination is: _____

The safe can be found: _____

The Password to my Computer is: _____

My Email Address is: _____ Password: _____

Other Passwords: _____

My Internet Account is with: _____ Account Number: _____

Other important Passwords Include:

ITEM, PROGRAM OR BANK	ACCESS NAME	PASSWORD

I have have not attached a list of the persons I want to receive my personal property when I die.

I have have not attached a list of important personal property which I own.

My Social Security number is: _____

My driver's license number is: _____

My Medicare number is: _____

My passport number is: _____

The passport can be found: _____

I am a member of the following religious group(s):

I am a member of the following fraternal group(s):

I have provided the following for the education of my family in the following manner:

I have a special needs family member or friend who I take care of:

Name: _____

Relationship: _____

Nature of disability: _____

Special services they receive: _____

Primary Physician & Phone #: _____

Is there a Trust for such person? Yes No

Trust Documents are at: _____

I have been Appointed Legal Guardian for such person: Yes No

I believe the following person should take over this responsibility: _____

Information on any Accounts I handle for this person:

With regard to my general information, the following is additional information which I think is important for my family and advisors to know:

IN THE EVENT OF MY INCAPACITY

I have appointed (in the above documents) the following persons to act on my behalf if I become disabled:

Power of Attorney over my Assets: 1st _____ 2nd _____

Power of Attorney for Medical Decisions: 1st _____ 2nd _____

Guardian over my Property: 1st _____ 2nd _____

Guardian over my Person: 1st _____ 2nd _____

It is my desire that the persons having the above powers of attorney act on my behalf rather than a guardian being appointed, unless my family believes guardianship is necessary.

In the event of my incapacity, I do do not want to be kept at home as long as possible, taking into account the cost.

In the event of my incapacity, the following is additional information which I think is important for my family and advisors to know:

IN THE EVENT OF MY DEATH

I have the following final wishes:

Funeral Home: _____

Location: _____

Cemetery: _____

Plot/Drawer #: _____

I have have not prepaid:

my burial costs

for my burial plot

for my casket

Information can be found at: _____

I have a deceased spouse parent child who is buried at: _____
and I wish to be buried next to such person if I check here .

I do do not want to be cremated. Crematory: _____

Minister/Rabbi to Perform Service: _____

Pallbearers:

SPECIAL REQUESTS:

Obituary Reading: _____

Tombstone Engraving: _____

Organs for Donation: _____

In lieu of flowers, please ask for donations to: _____

Other Special Requests: _____

I would like the following songs, music, poetry, etc. at my funeral: _____

I currently have the following pets: _____

I ask that _____ take care of my pets and receive as a debt of my estate the sum of \$_____ for taking care of such pets for the rest of their lives.

In the event of my death, the following is additional information which I think is important for my family and advisors to know: _____

SECTION FOUR — Family History & Ethical Will

MY FAMILY HISTORY

I was born in _____ on _____, 19_____.
City, State *Month, Day*

My parents are/were _____ and _____.
Full Name *Full Name*

My maternal grandparents are/were _____ and _____.
Full Name *Full Name*

My paternal grandparents are/were _____ and _____.
Full Name *Full Name*

I have the following brothers and sisters (including step and half-siblings):

_____ Born _____

_____ Born _____

_____ Born _____

_____ Born _____

_____ Born _____

My children are:

_____ Born _____

_____ Born _____

_____ Born _____

_____ Born _____

_____ Born _____

I have no children.

I was adopted and my birth mother and father are/were: _____

I have do not have detailed information on my family's history. It is located at:

Some important facts about my family history:

MY ETHICAL WILL

I have have not attached a more comprehensive Ethical Will.

When I am gone, I hope my family will learn from my experiences:

I believe that the most important things in life are:

The most important thing I have done in my life is:

It is my hope that my family will use its inheritance from me to accomplish the following goals in their lives:

How I would like to be remembered:

I have attached to this Family Love Letter my favorite quote poem story scripture.

I have signed this Family Love Letter this _____ day of _____.

This document is not intended to replace or supersede my will or any other estate planning documents signed by me. However, it is my express desire that each heir, family member, Power Holder, Executor, Trustee and Guardian will use this Family Love Letter and the other documents signed by me in making any discretionary decisions for me and my family.

Signature

Print Name

Copies of this document were delivered to:

I have attached the following documents to my Family Love Letter:

- my current financial statement
- a copy of my current life insurance
- a policy in force statement for my life insurance policies
- a personal property ownership list
- a personal property disposition list
- a more detailed ethical will
- personal property agreements

CAUTION

Identity theft has become a major problem in the United States. The Family Love Letter is purposely designed to provide your family and advisors as much information as possible about you and your personal financial situation. It is also information, which in the wrong hands, could help someone steal your identity and/or your assets. We strongly advise you to (1) keep all copies of the Family Love Letter in a locked location which is only accessible by people you fully trust and (2) provide copies of the Family Love Letter only to persons who you are confident can be trusted to maintain the secrecy of your information.

Author: John J. Scroggin, AEP, J.D., LL.M. is a graduate of the University of Florida and is a nationally recognized speaker and author. Mr. Scroggin has written over 300 published articles and outlines, and three books. To be added to his free blast email system on estate and income tax planning, contact Luann@scrogginlaw.com. Mr. Scroggin can be contacted at Jeff@scrogginlaw.com.

Additional copies of this Family Love Letter can be obtained at www.axaenterprise.com.

THE FAMILY LOVE LETTER

John J. Scroggin, J.D., LL.M., practices as a tax and estate planning attorney in Roswell, Georgia and is a graduate of the University of Florida. He is a nationally recognized speaker and author and has been quoted in *The Wall Street Journal*, *Forbes*, *Fortune*, *Journal of Financial Services Professionals*, *National Underwriter*, *Kiplinger's Personal Finance*, *Financial Planning*, *Registered Representative*, *Life Association News*, *Advisor Today*, *Dow Jones Investment Advisor*, *Medical Economics*, *SmartMoney Magazine*, *Active Times Magazine*, *South China Morning Post*, *The Los Angeles Times*, *The Atlanta Journal/Constitution*, *Secured Retirement* and *Money*.



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Atlanta Financial Center, 3343 Peachtree Road, N.E., Suite 450, Atlanta, Georgia 30326-1022
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