# **Net Worth Calculation Worksheet**



A form to help you assess your loved one's financial situation.

A. ASSETS—List everything your loved one owns that has cash value.  1. Liquid Assets			
a. Checking Accounts:			
Bank Name:	Account Number:	Amount:	
Bank Name:	Account Number:	Amount:	
Bank Name:	Account Number:	Amount:	
a. Total:		\$	
b. Savings Accounts:			
Bank Name:	Account Number:	Amount:	
Bank Name:	Account Number:	Amount:	
Bank Name:	Account Number:	Amount:	
		\$	

Name:

Date:

For additional tools for caregiving or aging, visit www.CaregiversLibrary.org

b. Total:			
c. Certificates of Deposit, Treasury Bills, Money Market Accounts (List funds deposited for a specific period of time.)			
Bank Name:	Account Number:	Amount:	
Bank Name:	Account Number:	Amount:	
Bank Name:	Account Number:	Amount:	
c. Total:		\$	
d. Cash Value Life Insurance (Include cash v	alue, equity, investment built up in each policy;	NOT the face value.)	
Company Name:	Policy Number:	Cash Value:	
Company Name:	Policy Number:	Cash Value:	
Company Name:	Policy Number:	Cash Value:	
d. Total:		\$	
1. TOTAL LIQUID ASSETS:		\$	
(Add totals a, b, c, and d above)			

# 2. Equity Assets Include current market value of U.S. Savings Bonds, Treasury Bonds, and other money market and stock investments. a. Stocks: b. Bonds: c. Other Securities: Amount: 2. TOTAL EQUITY ASSETS: (Add totals a, b, and c above)

# 3. Tax Sheltered/Tax Deferred Assets

a. Pension and/or Profit Sharing Plans (These are only an asset if your loved one can convert them to cash and receive income from them.)			
Plan:	Account Number:	Amount:	
Plan:	Account Number:	Amount:	
Plan:	Account Number:	Amount:	
a. Total:		\$	
b. Individual Retirement Account Balance			
Account:		Amount:	

Account:	Amount:
Account:	Amount:
b. Total:	\$
c. Other—Tax-Sheltered Annuities or other annuities	
Description:	Amount:
Description:	Amount:
Description:	Amount:
c. Total:	\$
3. TOTAL TAX-SHELTERED ASSETS:  (Add totals a, b, and c above)	\$
4. Non-Income Earning Assets	
a. Home(s): (Contact a real estate agent or professional appraiser to estimate current market value.)	\$
b. Car(s): (Use current "Blue Book," or other valuation guide.)	\$
c. Other Vehicle(s):	\$

d. Personal Property: (Includes home furnishings, appliances, antiques, collectibles, art, jewelry, tools, livestock, etc.)	
4. TOTAL NON-INCOME EARNING ASSETS:	\$
(Add totals a, b, c, and d above)	

### 5. Other Assets

a. Accounts or Notes Receivable:	\$
b. Rebates or Refunds:	\$
c. Trusts, Patents, or Memberships:	\$
d. Other: (Include non-residential real estate)	\$
5. TOTAL OTHER ASSETS:  (Add totals a, b, c, and d above)	\$
A. Total Assets:  (Add totals 1–5 above.)	\$

# B. DEBT/LIABILITIES—List everything your loved one owes in debts.

# 1. Short-Term Debt

a. Car:	\$

b. Car:		\$
c. Other Vehicle:		\$
d. Credit Card: (Check current monthly statement)	Account Number:	\$
e. Credit Card:	Account Number:	\$
f. Credit Card:	Account Number:	\$
g. Total Installment Debt: (Check contracts by the number of months remaining on the contract.)		\$
h. Other Loans: (List loans of less than 5 years in length. Also list doctor bills, service bills, etc.)		\$
i. Other Liabilities: (List any court-ordered payments, lawsuit settlements, past-due accounts, and taxes due.)		\$
1. TOTAL SHORT-TERM DEBT:		\$
(Add totals a–i above.)		

# 2. Long-Term Debt

a. Home Mortgage(s): (Check the current period statements from the financial institution.)	\$
b. Other Mortgages:	\$
c. Other Loans: (List loans of more than 5 years in length)	\$
2. TOTAL LONG-TERM DEBT:  (Add totals a, b, and c above)	\$

# 3. Contingent Liabilities

a. Debts your loved one has cosigned:	\$
b. Suits pending against your loved one:	\$
c. Other Contingent Liabilities:	\$
3. TOTAL CONTINGENT LIABILITIES:  (Add totals a, b, and c above)	\$

B. Total Debt/Liabilities:	\$
(Add totals 1–3 above.)	

### C. NET WORTH

A. Total Assets:  (Enter total from section A above.)	\$
B. Total Debt/Liabilities:  (Enter total from section B above)	\$
Net Worth: (Subtract Total B from Total A.)	\$

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