

Newsletter

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The Effects of the Health Insurance Portability and Accountability Act (HIPAA) on Estate Planning

Introduction

People visiting their doctor or the hospital have grown accustomed to signing forms without reading them. Few realize the implications of their signatures. One of the forms patients sign is the Health Insurance Portability and Accountability Act (“HIPAA”) Notice of Privacy Practices. Generally, the notice informs patients about their medical records that include any “individually identifiable health information” and the different entities that may have access to the records. The main goal of HIPAA is to ensure that health care professionals provide high-quality health care without jeopardizing the public’s right to privacy. U.S. Dep’t of Health & Human Servs., Office for Civil Rights (“OCR”), “Summary of the HIPAA Privacy Rule,” available at www.hhs.gov/ocr/privacysummary.pdf (rev May 2003).

Although the purpose of HIPAA is admirable, the law has created unanticipated negative impacts that were not envisioned by its drafters. “[The] restrictions on disclosing information can lead to problems when families and lawyers are trying to figure out whether the patient is disabled for purposes of durable powers of attorney, advance medical directives, [and] trusts * * *.” Daniel B. Evans, “What Estate Lawyers Need to Know About HIPAA and ‘Protected Health Information,’” *Prob & Prop* 20, 20 (July/Aug. 2004). Estate planning practitioners must be aware of HIPAA provisions that affect their clients, the circumstances under which designated family members or lawyers may have access to protected health information, and the potential procedural remedies when disclosure has been blocked. *Id.* at 22.

The Basics of HIPAA

What Is “Individually Identifiable Health Information”? HIPAA imposes strict penalties on doctors, dentists, pharmacists, hospitals, and other health care providers who disclose their patients’ “individually identifiable health information” about their patients without authorization. 42 USC § 1320d(6). This includes information that relates to

- (1) the individual’s past, present, or future physical or mental health or condition;
- (2) the provision of health care to the individual; and
- (3) the past, present, or future payment for the provision of health care to the individual.

Id. HIPAA defines “protected health information” as individually identifiable health information that is maintained or transmitted in any form of electronic or other medium by a covered entity. 45 CFR § 164.501. Essentially, the definition is broad enough to cover any medical condition that a family member or lawyer may be interested in for the purpose of making decisions related to estate planning.

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Persons making unauthorized disclosures may be fined up to \$250,000 and imprisoned for up to 10 years, depending on the intent and mental state of the discloser. 42 USC § 1320d(6)(b). As a result of the significant fines and possible imprisonment, health care providers are reluctant to give out information unless they are convinced that they have complied with all the proper statutory procedures.

How Does One Get Access to Information? If a patient requests his or her own information, then HIPAA generally makes almost all information available for disclosure, with some exceptions, such as information that may hurt the patient or information gathered in the course of litigation. 45 CFR § 164.502(a)(1)(i).

To authorize a disclosure of protected health information under the regulations, a person must

- (1) have a written document signed and dated by the individual;
- (2) identify the protected health information to be used or disclosed;
- (3) identify the persons to whom the information may be disclosed;
- (4) identify who is authorized to make a disclosure;
- (5) identify the purpose of the disclosure;
- (6) include an expiration date;
- (7) identify the individual's right to revoke the authorization; and
- (8) acknowledge that the information may be redisclosed by the recipient.

45 CFR § 164.508(c). The good news is that the regulation specifically provides that a patient's "personal representative" shall be treated in the same manner as the patient. The question then follows: Who is considered a "personal representative"?

Who Is a "Personal Representative," and What Can He or She Do? Although HIPAA's privacy rules include a lengthy section devoted to definitions (45 CFR § 164.501), they do not include any definition of "personal representative." Instead, they merely say that:

"[i]f under applicable [state] law a person has authority to act on behalf of an individual who is an adult * * * in making decisions related to health care, a covered entity [e.g., medical provider] must treat such person as a personal representative under this subchapter, with respect to protected health information relevant to such personal representation." 45 CFR § 164.502(g)(2).

Moreover, the U.S. Department of Health & Human Services' Office of Civil Rights' official guidance on "personal representatives" states that health care providers must recognize as a "personal representative" any person with legal authority to make health care decisions on behalf of the individual, citing as an example "health care power of attorney," and that the grant of such a health care power is primarily a matter of state law. OCR, "Personal Representatives" at 2, available at www.hhs.gov/ocr/hipaa/guidelines/personalrepresentatives.pdf (rev Apr. 3, 2003).

The definition of "personal representative" is a functional one. Evans, *supra*, at 22. Under the HIPAA regulations, a person who has the authority to act on behalf of an adult in making health care decisions will be treated as a "personal representative." 45 CFR § 164.502(g)(2). It follows that a "personal representative" will be defined by state law, and the information for decision making will be controlled by state law. Evans, *supra*, at 22. Therefore, some estate planning lawyers believe that if, under state law, a person is authorized to make medical decisions, as in the case of a health care representative under an Advance Directive in Oregon, then HIPAA should not affect the usual workings of the estate planning documents. On the other hand, others caution that particular care must be exercised for the reasons given below.

Estate Planning Ramifications and Problems

A health care provider may be unwilling to disclose information to family members or lawyers absent a medical release that specifically complies with HIPAA regulations. Evans considers that "[a] properly authorized attorney-in-fact who has the power to make medical decisions for the principal under state law should qualify as a 'personal representative' under the regulations and should be entitled to the same medical information as the principal." *Id.* at 24. In Oregon this would most likely be the health care representative under an Advance Directive or a court-appointed guardian. But this in turn raises issues.

Different Fiduciaries or No Advance Directive. Problems can arise if the health care representative is a different person from the fiduciaries under other documents, or if there is no signed Advance Directive. It is also unclear if it is possible to have more than one personal representative. Can the Advance Directive representative, the agent under a power of attorney, and the trustee of a revocable living trust all be "personal representatives," even if they are different people or institutions?

Broad Authorization. To avoid the risk of the personal representatives not having access to information, the drafter of a durable power of attorney might want to include in writing a broad "valid authorization" in favor of the agent. *Id.*

One problem, however, that may ensue from such a broad authorization is that a health care provider may become suspicious and deny access altogether. *Id.* On the other hand, Evans believes that “the best way to make sure that an [agent] under a power of attorney has access to all medical information is to make sure that the [agent] has the power to make all medical decisions, and not through additional wording in waivers or authorizations.” *Id.*

“Springing” Authorization. Access to medical records becomes especially important when a determination of incapacity or other medical issues needs to be made—for example, to begin to act under the principal’s power of attorney or to remove the trustor as the current trustee of an incapacitated person’s revocable living trust. Many powers of attorney and revocable living trusts require a doctor’s letter or consultation with a doctor before a determination of incapacity can be made and the agent or successor trustee can begin to act.

Similar problems can arise if the named agent or successor trustee is himself or herself arguably incapacitated. What is the authority of the next fiduciary in line to seek the current agent’s or trustee’s medical records or consult with a doctor? Can the instrument require the fiduciary to grant this access or be automatically removed?

Problems in Authorize Disclosure. Estate planning documents are often found to have technically deficient authorizations for disclosure. John R. Price, “Why HIPAA Keeps Us Hoppin’,” ACTEC Annual Meeting SI-22 (Mar. 11, 2004). Some health care providers may honor these documents, but do so at the risk of violating HIPAA regulations. *Id.* The following is an example of an authorization that may be problematic.

When Agents Authority Becomes Effective:

“(a) Except as provided in subsection (b) hereof, my agent’s authority becomes effective in the event that I lack the capacity to make my own health care decisions and shall cease to be effective upon my subsequently recovering my capacity to make my own health care decisions.

“(b) My agent’s authority to access and examine my medical records and to receive information concerning my medical condition and the medical treatments that I have received shall be effective immediately, shall not be affected either by my recovering or my losing the capacity to make my own health care decisions, and shall not be affected by my subsequent disability or incapacity.”

The above example incorporates a “springing” health-care-decision agency with an immediately effective power. However, the problem is that unless the power can be shown to have “sprung,” the intended agent is not the personal representative and does not have access to protected health information. *Id.* The intended agent may need the protected health information to establish incapacity and “spring” the power.

There are a few alternatives to the traditional springing powers. First, one might make the power immediately effective. Another alternative is to give valid authorization that becomes effective in specifically defined situations. A third is to “create a mechanism outside the health care world to make an independent determination that the power has sprung (e.g., a ‘lay’ committee in lieu of a committee of physicians).” *Id.* at SI-24.

Trusts will often run into the same problem with springing powers, because someone must determine that the grantor as trustee must become disabled in order to activate the powers. Evans suggests a few possible solutions to this problem. First, the language of the document could be changed so that the trustee’s failure to authorize the release of protected health information itself would be the triggering event. A second solution may be to arrange a separate authorization: “an authorization for the specific purpose of determining disability within the meaning of the trust document should be specific enough to pass muster under anything but the most stringent reading of the regulations.” Evans, *supra*, at 26. Also, similar to Price’s suggestion of an independent determination, the trust could designate one or more family members to determine disability. In that event the decision maker would not be a “covered entity” under HIPAA, and thus the determination could be made without requiring the disclosure of protected information.

Conclusion

The HIPAA privacy regulations are confusing and cause unanticipated consequences, which has necessitated revisions to estate planning documents. However, the hurdles are surmountable. If practitioners take precautions, implement the suggestions above, and communicate the different possible scenarios to their clients, HIPAA may be able to achieve its intended benefits without creating an overwhelming burden on families and their assets.

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Note: See page 5 of this issue for an update on Oregon legislation related to HIPAA.

Credit Shelter and QTIP Trusts Oregon Style (Drafting for the Oregon Inheritance Tax)

Recently enacted state legislation (HB 2469) substantially enlarges the drafting options to plan for, and minimize, the Oregon inheritance tax. In general, HB 2469 allows QTIP treatment, by election, for a credit shelter (bypass) trust so long as the surviving spouse is the only beneficiary during his or her life. The mandatory income requirement is no longer necessary for a partial Oregon QTIP election. In addition, HB 2469 provides an administrative process for modification of the credit shelter trust to eliminate nonspousal beneficiaries in a process akin to reformation.

Oregon's "decoupled" inheritance tax froze the Oregon inheritance tax calculation as of December 31, 2000 under the Internal Revenue Code then in effect. Fully funding a bypass trust with the federal exemption can result in a substantial tax for Oregon purposes. In 2005, that tax is essentially \$64,400 (the prior state "death tax" credit for a \$1.5 million federal taxable estate). Fortunately, ORS 118.010(7) allows the Oregon Department of Revenue to adopt regulations permitting a separate Oregon marital deduction, and the Department of Revenue has adopted liberal regulations permitting an Oregon QTIP (OAR 150-18.010(7)) to cut the Oregon taxable estate to the Oregon exemption amount: \$950,000 in 2005, and \$1 million in 2006 and after. Assuming the dispositive provisions of the credit shelter trust otherwise comply with QTIP requirements, the usual practice is to make a partial Oregon QTIP election for the credit shelter trust by formula resulting in the largest Oregon taxable estate that produces no Oregon inheritance tax.

The result can be at least three estate shares. The first share is exempt from both Oregon and federal tax at the death of both spouses. The second share is exempt from federal tax at both deaths but subject to Oregon inheritance tax as an Oregon QTIP marital trust at the second death. The final share is exempt from both state and federal estate tax at the first death but is subject to both federal and Oregon tax as a federal and Oregon QTIP marital trust at the second death.

Practitioners now have several options for addressing the Oregon inheritance tax. Here are some alternatives:

QTIP-able Credit Shelter

Draft the credit shelter in a fashion that will make it eligible to be the federal QTIP. An example of appropriate language is:

"During the lifetime of my spouse, my trustee shall distribute to my spouse, in quarterly or more frequent installments, the net income of the trust estate. In addition, my trustee shall distribute to my spouse

from the principal of the trust estate such amounts as my trustee determines to be necessary for the health, education, support, or maintenance of my spouse. My spouse may require that the trustee not invest the trust estate in property that is unproductive of income."

The executor should make a partial QTIP election by formula for Oregon purposes.

Clayton Flip QTIP

This dispositive provision for the QTIP allows the accumulation of income. The provision allows for discretionary distribution of income and principal under an ascertainable standard, with mandatory distribution of income becoming required to the extent that a QTIP election for Oregon purposes is made. This may be a good arrangement to use in a multijurisdictional situation if the inheritance tax of another state is payable and the foreign state does not recognize Oregon's HB 2469 QTIP variation. An example of the language is:

"For so long as my spouse shall live, my trustee shall pay or otherwise apply for the benefit of my spouse such sums from income or principal of the trust estate as my trustee shall determine, in my trustee's sole discretion, to be necessary for the health, education, support or maintenance of my spouse. In addition, during the lifetime of my spouse, my trustee shall pay to or for the benefit of my spouse, not less frequently than quarterly, all of the income from the portion of the trust estate for which an inheritance tax QTIP marital deduction election is made. My spouse may require that my trustee not retain in the portion of the trust estate for which an inheritance tax QTIP election is made, beyond a reasonable time, any asset that is or becomes unproductive of income."

Accumulation Trust (HB 2469)

This appealing alternative allows the accumulation of income in both the marital (for Oregon) and nonmarital portion of the bypass trust. An example of the provision is:

"For so long as my spouse shall live, my trustee shall pay or otherwise apply for the benefit of my spouse such sums from income or principal of the trust estate

as my trustee shall determine, in my trustee's sole discretion, to be necessary for the health, education, support, or maintenance of my spouse."

A special election described in HB 2469 must be made for the Oregon marital share. After the election is made, that share will be exempt from Oregon estate tax as an Oregon QTIP marital trust. A disadvantage of the special-marital-property procedure is the express inclusion (by statute) of special marital property in the gross estate of the surviving spouse. HB 2469 § 4. Certainly there will be jurisdictional questions in the future if the surviving spouse migrates to a noninheritance-tax state, particularly if the trust situs is also moved.

One consideration for determining which of the above alternatives to use is whether or not the surviving spouse will be the trustee. It obviously provides more flexibility if the surviving spouse is trustee, as the surviving spouse will be able to make his or her own discretionary distributions.

HB 2469 takes effect on November 3, 2005; however, for decedents who died on or after January 1, 2002 and before November 3, 2005, the Oregon inheritance tax return may be amended to make the special election described above. *Id.* § 5.

With the advent of HB 2469, options abound to minimize the Oregon inheritance tax at the death of the first spouse.

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New Resource

The Oregon State Bar has recently published, "Legal Issues for Older Adults: An Oregon Legal Information and Reference Guide." The 179-page book addresses topics especially relevant to older Oregonians, including Social Security, Medicare/Medicaid, nursing homes, personal finance, estate planning, landlord/tenant law, age discrimination, insurance products and consumer rights. The book presents information in a clear and understandable way, avoiding the unnecessary use of legalese. A copy of Legal Issues for Older Adults can be purchased for \$10 from the Oregon State Bar Order Desk at (503) 620-0222 or (800) 452-8260 ext. 413. In addition, individual chapters or the entire book can be downloaded at www.osbar.org/public/legalissuesbook.html. The Estate Planning and Administration Section has donated 100 of these books to senior centers throughout the state.

SB 278: Personal Representative for Deceased for Protected Health Information

SB 278, enacted by the Oregon legislature, took effect June 20, 2005. The act clarifies who may obtain a decedent's protected health information under the federal Health Insurance Portability and Accountability Act (HIPAA), as implemented by Oregon law.

Section 3 of SB 278 provides that if no person as been appointed as personal representative under ORS chapter 113, or the person so appointed has been discharged, then the following persons, in descending order of priority, are eligible to serve as the personal representative able to receive a decedent's protected health information from health care providers:

- A person appointed as the decedent's guardian with authority to make medical and health care decisions at the time of the decedent's death;
- The decedent's spouse;
- An adult designated in writing by the persons listed in Section 3, if no person listed objects;
- A majority of the adult children of the decedent who can be located;
- Either parent of the decedent or an individual acting in loco parentis to the decedent;
- A majority of adult siblings of the decedent who can be located; and
- Any adult relative or adult friend.

The personal representative, for this purpose, is highest ranked person on the list who can be located upon reasonable effort by a health care provider and who is willing to serve as the personal representative. Section 3 will become part of ORS 192.518 to 192.524, dealing with disclosures by health care providers.

Section 4 of SB 278 adds parallel provisions for identifying a personal representative to receive disclosures of a decedent's protected health information from health insurers, if there is no personal representative appointed under ORS chapter 113.

The term "personal representative" in Sections 3 and 4 is confusing, because it is used in two different ways: (1) as the person able to receive another's protected health information and (2) as the person appointed by the probate court to settle a decedent's estate.

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Notice Requirements Under the Oregon Uniform Trust Code

One of the changes the newly enacted Oregon Uniform Trust Code (the "Trust Code") makes to Oregon law affects a trustee's duty to keep beneficiaries informed about the trust. In comparison with current Oregon law, the Trust Code both narrows the trustee's duties by limiting the group of beneficiaries entitled to receive information and expands the trustee's duties by creating new affirmative duties to report to beneficiaries. Because ORS citations are not yet available, references throughout this article are to sections of SB 275, which enacted the Trust Code,

A trustee's duty to keep the beneficiaries reasonably informed about the trust's administration has long been a fundamental fiduciary duty. *See* Restatement (Second) of Trusts § 173 (1959). Commonly referred to as "the duty to inform and report," the Restatement (Second) of Trusts' description of the duty directs the trustee to respond to reasonable requests for information. Oregon added statutory requirements to the common-law duty. Until the Trust Code becomes effective on January 1, 2006, ORS 128.125(2) requires a trustee to respond to a beneficiary's request for an itemized statement of receipts and disbursements or a statement of property held by the trustee. A beneficiary has a right to petition a court to obtain this information if the trustee fails to provide it, ORS 128.125(5), and a right to petition for an accounting under ORS 128.135. Thus both the Restatement (Second) of Trusts and Oregon law before adoption of the Trust Code focus on the beneficiary's right to request information. The Trust Code retains this duty to respond to requests but also creates affirmative duties for the trustee. The Restatement (Third) of Trusts § 82 (Tentative Draft No. 4, Apr. 5, 2005) adds some of the affirmative duties to its description of the trustee's duty to provide information to beneficiaries and to respond to requests from beneficiaries.

Trust law is primarily default law—i.e., rules that apply if the trust settlor does not provide other guidance for the trustee. A settlor can waive or modify almost all of the specific notice requirements, but the trustee must have a duty to provide information to a person designated by the settlor so that some person other than the trustee can enforce the trust. The final section of this article explains the extent to which a settlor can waive the notice requirements.

Duty to Keep Qualified Beneficiaries Reasonably Informed (the Common Law Duty)

The trustee has a duty to keep "qualified beneficiaries" reasonably informed about the trust. SB 275 § 71(1). Qualified beneficiaries are beneficiaries currently eligible to

receive distributions of trust income or principal, whether mandatory or discretionary ("permissible distributees"); beneficiaries who would be next in line if the interests of all the permissible distributees terminated; and beneficiaries who would or might take if the trust terminated on the date in question. *Id.* § 3(14). The duties under section 71 run only to this more limited group of qualified beneficiaries and not to all beneficiaries (e.g., not to those with contingent remainder interests, unless the contingency would be resolved in their favor if the trust terminated on the date in question).

Under section 10(3), the Oregon Attorney General steps up to the level of a qualified beneficiary with respect to a charitable trust, unless contingencies make the charitable interest negligible. For example, the Attorney General probably would not be entitled to reports under section 71 if a charity is designated to take only after all the members of a large family have died. However, if a charity is third in line to take an interest (to A for life; then to B if B is living on A's death; and, if B is not then living, to charity), the Attorney General, but not the charity, would probably be entitled to reports while A and B are both alive.

Affirmative Duties to Send Information

New Trustee. When a trustee accepts a trusteeship, the trustee must notify the qualified beneficiaries of the acceptance and of contact information for the trustee. *Id.* § 71(2)(b). This requirement applies only to acceptances that occur after December 31, 2005. *Id.* § 72(1).

Existence of an Irrevocable Trust. When a trustee becomes aware that an irrevocable trust has been created, or that a revocable trust has become irrevocable, the trustee must notify the qualified beneficiaries of the trust's existence, the identity of the settlor, the right to request a copy of the trust instrument, and the right to a trustee's report. *Id.* § 71(2)(c). These duties apply only to trusts that become irrevocable, or are created as irrevocable trusts, after December 31, 2005. *Id.* § 72(2).

Fees. A trustee must notify qualified beneficiaries in advance of any change in the method or rate of the trustee's compensation. *Id.* § 71(2)(d).

Annual Reports – Permissible Distributees. A trustee must send annual reports to the permissible distributees of trust income or principal. *Id.* § 71(3). Permissible distributees are those beneficiaries who are currently eligible to receive mandatory or discretionary distributions from the trust. *Id.* § 3(10). The annual reports must include a listing of trust

property and liabilities; the market values of trust assets, if feasible; the trust's receipts and disbursements; and the source and amount of the trustee's compensation. *Id.* § 71(3).

Waiver. A beneficiary entitled to receive reports or other information can waive those rights. *Id.* § 71(4).

Duties to Respond to Requests for Information

Beneficiaries Other Than Qualified Beneficiaries. If "reasonable under the circumstances" a trustee may respond to requests for information from beneficiaries. *Id.* § 71(1). Under current law, the trustee must respond to a request from any beneficiary. ORS 128.125.

Annual Reports – Other Qualified Beneficiaries. A trustee must send annual reports to qualified beneficiaries who request reports. SB 275 § 71(3). Thus a trustee must send the reports to permissible distributees and, in addition, to other qualified beneficiaries who request the reports.

Copy of Trust Instrument. A trustee must provide a copy of the trust instrument to a qualified beneficiary who requests one. *Id.* § 71(2)(a).

Requests Must Be Specific. If a beneficiary requests information, the request must be with respect to a specific trust and not a general "let me know about any interests I have in any trust you manage." *Id.* § 71(6).

Costs of Providing Information

A trustee may charge the beneficiaries a reasonable fee for providing information under section 71. *Id.* § 71(5).

Restrictions on Providing Notice

Revocable Trusts. As long as the settlor of a revocable trust is alive, beneficiaries other than the settlor have no right to receive information about the trust, *id.* § 71(9), and the trustee's duties run only to the settlor, *id.* § 48(1).

Trust Created for Spouse. During the period that a surviving spouse is alive, financially capable ("financially incapable" is defined in ORS 125.005-(3)), and the only permissible distributee of the trust, and if all other qualified beneficiaries of the trust are descendants of the spouse, then the trustee can provide information only to the surviving spouse. SB 275 § 71(8).

Spouses often want to control their property until the death of the survivor and not provide information about the property to their children until after the second death. For example, the first spouse to die might create a credit shelter trust for tax reasons, providing a life estate for the surviving spouse with the remainder going to their children. If the children are all children of the surviving spouse and the surviving spouse is competent (and can keep an eye on the trustee), the default

rule provided by the Trust Code does not require that notice be given to the children.

Modification by the Settlor. A settlor can waive or modify almost all of the duties related to notice, information, and reports. The settlor must do so in writing, either in the trust instrument itself or in another writing delivered to the trustee. *Id.* § 5(3). All duties can be waived during the period that either the settlor or the settlor's spouse (if the spouse is a qualified beneficiary) is alive and financially capable. *Id.* § 5(3)(a). Thus the settlor can direct that no information be sent to anyone other than the surviving spouse, as long as the surviving spouse remains financially capable, regardless of the identity of the other beneficiaries.

In other circumstances, the settlor can waive the trustee's duties to beneficiaries under section 71 if the settlor designates a person to receive the required notice, information, and reports. *Id.* § 5(3)(b). The person designated must act in good faith to protect the interests of the qualified beneficiaries. *Id.* For example, a settlor may create a trust for an irresponsible child and not want the child to have information about the trust. The settlor can designate some other person, who need not be a beneficiary of the trust, to receive all information, notice, and reports the child would otherwise be entitled to receive. This provision balances the need for someone to have information about the trust in order to enforce the trust with the possible desire of a settlor to limit certain beneficiaries' knowledge about the trust.

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Questions, Comments or Suggestions About This Newsletter?

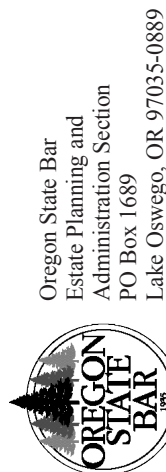
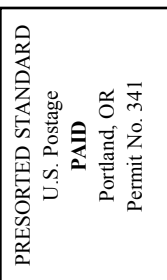
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CALENDAR OF SEMINARS & EVENTS

- October 27-28, 2005 (Sponsored by PLI) **36th Annual Estate Planning Institute**, PLI California Center, San Francisco, CA. Telephone: (800) 260-4PLI or register online at www.pli.edu.
- October 28, 2005 (Sponsored by OLI) **Guardianships and Conservatorships**, Oregon Convention Center, Portland, OR. Telephone: (800) 222-8213 or register online at www.lclark.edu/org/oli.
- November 2-4, 2005 (Sponsored by PLI) **Tax Strategies for Corporate Acquisitions, Dispositions, Spin-off's, Joint Ventures, Financing, Reorganizations & Restructurings**, Beverly Hills, CA. Telephone: (800) 260-4PLI or register online at www.pli.edu.
- November 4, 2005 (Sponsored by OSB and the Estate Planning & Administration Section) **Administering Trusts in Oregon**, Portland, OR. Telephone: (503) 684-7413 or register online at www.osbar.org.
- November 7-8, 2005 (Sponsored by PLI) **Understanding the Sophisticated Real Estate Practice 2005**, San Francisco, CA. Telephone: (800) 260-4PLI or register online at www.pli.edu.
- November 7-8, 2005 (Sponsored by WSBA) **50th Anniversary Estate Planning Seminar**, Seattle, WA. Telephone: (800) 945-WSBA or register online at www.wsba.org.
- November 14-18, 2005 (Sponsored by ALI-ABA) **Planning Techniques for Large Estates (limited enrollment)**, San Francisco, CA. Telephone: (800) CLE-NEWS, or register online at www.ali-aba.org.
- November 17-19, 2005 (Sponsored by ALI-ABA) **Representing the Growing Business: Tax, Corporate, Securities and Accounting Issues**, Scottsdale, AZ. Telephone: (800) CLE-NEWS or register online at www.ali-aba.org.
- November 28-29, 2005 (Sponsored by PLI) **Understanding the Sophisticated Real Estate Practice 2005**, New York, NY. Telephone: (800) 260-4PLI or register online at www.pli.edu.
- December 1-2, 2005 (Sponsored by ALI-ABA) **Tax Exempt Charitable Organizations**, Washington, D.C. Telephone: (800) CLE-NEWS or register online at www.ali-aba.org.
- December 8-9, 2005 (Sponsored by PLI) **Understanding Estate, Gift & Fiduciary Income Tax Returns 2005: Strategies for Maximum Advantage with the "706", "709" and "1041"**, New York, NY. Telephone: (800) 260-4PLI or register online at www.pli.edu.
- January 12-14, 2006 (Sponsored by ALI-ABA) **Real Estate Financing Documentation: Strategies for Changing Times**, Scottsdale, AZ. Telephone: (800) CLE-NEWS or register online at www.ali-aba.org.
- January 15-22, 2006 (Sponsored by National Law Foundation) **2006 Mid-Winter Tax & Estate Planning Conference**, St. Croix, U.S.V.I. Telephone: (302) 656-4757 or register online at www.nlfcl.com.
- January 20, 2006 (Sponsored by Estate Planning Council of Portland) **35th Annual Estate Planning Seminar**, Portland, OR. Telephone: (503) 205-2653 or register online at www.epcp.org.
- January 31-February 1, 2006 (Sponsored by PLI) **8th Annual Real Estate Tax Forum**, New York, NY. Telephone: (800) 260-4PLI or register online at www.pli.edu.



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