

Confidential Estate Planning Questionnaire

Please complete as thoroughly as possible and upload to your Client Portal prior to our meeting or bring a hard copy with you to our initial meeting. If you are unsure how to complete any part of the form, please give us a call, or just leave blank and we will discuss and complete during our initial meeting.

CLIENT INFORMATION	
SPOUSE 1	SPOUSE 2
Full Legal Name:	_____
Also known as:	_____
Date of Birth:	_____
Home Address:	_____
Home Phone:	_____
Cell Phone:	_____
Email:	_____
Occupation:	_____
Employer:	_____
Annual Salary:	_____
US Citizen:	Yes No Yes No
Date and Place of Marriage:	_____
Pre- or Post-Marital Agreement?	Yes No If yes, please provide copy
Previous Marriage: If Yes, ended in:	Yes No Divorce Death Yes No Divorce Death
Financial Advisor Contact Info:	_____
Tax Preparer Contact Info:	_____

LIVING CHILDREN

1)	Full Name:	DOB:	Child of:	Adopted (Y/N):
	Gender:	Current Address:		
	Phone Number:		Comments:	

2)	Full Name:	DOB:	Child of:	Adopted (Y/N):
	Gender:	Current Address:		
	Phone Number:		Comments:	

3)	Full Name:	DOB:	Child of:	Adopted (Y/N):
	Gender:	Current Address:		
	Phone Number:		Comments:	

4)	Full Name:	DOB:	Child of:	Adopted (Y/N):
	Gender:	Current Address:		
	Phone Number:		Comments:	

5)	Full Name:	DOB:	Child of:	Adopted (Y/N):
	Gender:	Current Address:		
	Phone Number:		Comments:	

Do you have any deceased children? Yes No If Yes, please provide:

Full Name:	DOD:	Child of:
Gender:	Was deceased child survived by any children?	

Is any beneficiary receiving or experiencing issues with:

Disability, SSI, or Govt Program	Yes	No	Explain: _____
Drug Addiction or Alcoholism	Yes	No	Explain: _____
Spendthrift	Yes	No	Explain: _____
Marital Problems	Yes	No	Explain: _____

Are you disinherit any child or family member? Yes No Explain: _____

FINANCIAL INFORMATION

For each property, please list if property is held as Joint, Tenant in Common, or individually (with name of owner).

ASSETS

Real Property: Please list all real property owned (including any vacation home, timeshare, undeveloped land and oil and gas interests) and either address or general legal description.

Address or General Description	State	Owner Name	Market Value	Est. Mortgage

Bank & Savings Accounts: List all checking, savings, Certificates of Deposit, including any business accounts.

Institution	Type	Ownership and Style	Approximate Balance
Total:			

Stocks, Bonds and Non-Qualified Brokerage: List any and all stocks and bonds that you own. If held in a brokerage account, just list the brokerage account, not each individual holding. Instead of completing this section, you may simply provide your last account statement.

Stock/Institution	Type	Ownership and Style	Approximate Balance
Total:			

Retirement Plans: List all pension, profit sharing, IRA, SEP, 401(k), 403(b), Roth accounts. Instead of completing this section, you may provide a copy of your last account statement.

Institution/Company	Type	Owner	Primary & Contingent Beneficiaries	Approximate Balance or Monthly Benefit
Total:				

Business Interests: List all types of interests - General and Limited Partnerships, corporations, limited liability companies. If there is a buy-sell agreement in place in the event of the owner's death, please bring copy.

Legal Name of Entity, including Inc., LLC or Ltd	S Corp Election?	Owner	Approx. Value
	Yes No		
	Yes No		
	Yes No		
		Total:	

Autos, Boats, RVs:

Description	Owner	Market Value
	Total:	

Life Insurance: List all term, whole life, split dollar, group life, annuity owned by you or another person on your life. Instead of completing this section, you may provide copies of your last account statement

Insurance Co	Type	Owner	Insured	Beneficiary	Face Amount	Death Benefit

Other Assets: Other property that does not fit into any listed category, including jewelry, firearms, accounts and notes receivable, custodial accounts and educational accounts.

Description	Owner	Estimated Value
	Total:	

LIABILITIES

	SP1/SP2/JT	Estimated Amount
Mortgage 1:		
Mortgage 2:		
Personal/Vehicle Loans		
Consumer Debt:		
	Total:	

OTHER RELEVANT INFORMATION

Are either of you expecting a substantial inheritance? Yes No If Yes, further information: _____

Are either of you the beneficiary of an existing trust created by someone else? Yes No If Yes, provide a copy of trust and further information: _____

If you have a previously deceased spouse, was a Form 706, U.S. Estate Tax Return filed? Yes No
If Yes, please provide copy of return.

Have either of you ever filed a Form 709, U.S. Gift Tax Return? Yes No If Yes, please provide copy.

DISTRIBUTION OF ESTATE AT DEATH

In your own words, how would you like your property distributed on your death and the death of your spouse?

Specific Bequests of Property to Particular Individuals:

[Empty box for specific bequests of property to particular individuals]

All remaining Property:

[Empty box for all remaining property distribution]

If one of your children fail to survive both of you, would that child’s share be passed down to their children? This is what’s called a “per stirpes” distribution, or would it be reallocated to the surviving beneficiaries?

Per Stirpes Reallocate Unsure – need to discuss

If you are naming beneficiaries other than just your spouse and children, please list them here:

Full Legal Name/Charity	Relationship	Age	Address

BURIAL AND FUNERAL ARRANGEMENTS

Spouse 1: _____ Silent Buried Cremated

Spouse 2: _____ Silent Buried Cremated

Special Instructions: _____

FIDUCIARIES

*In preparing for our meeting, please consider who you would want to fill the following roles, which are explained in more detail on the page 8. These decisions may require additional guidance from your attorney. For married persons, the first appointment is typically your spouse. **Please list full legal name as it appears on the fiduciary’s driver’s license.** You only need to list relationship and address once.*

SPOUSE 1 (as listed on page 1):

Executor:	Relationship	Address
1.		
2.		
3.		

Trustee:

1.		
2.		
3.		

Financial Power of Attorney:	Relationship	Address
1.		
2.		
3.		

Medical Power of Attorney & HIPAA:	Relationship	Address	Phone Number:
1.			
2.			
3.			

Do you want to include a Directive to Physicians? Yes No

Do you want to include all of your adult children on your HIPAA Release? Yes No

SPOUSE 2 (as listed on Page 1)

Executor:	Relationship	Address
1.		
2.		
3.		

Trustee:

1.		
2.		
3.		

Financial Power of Attorney:	Relationship	Address
1.		
2.		
3.		

Medical Power of Attorney & HIPAA:	Relationship	Address	Phone Number:
1.			
2.			
3.			

Do you want to include a Directive to Physicians with your Medical power of attorney? Yes No

Do you want to include all of your adult children on your HIPAA Release? Yes No

Guardians for Minor Children (if applicable):	Relationship
1.	
2.	

Fiduciary Roles

Executor - An executor is appointed by the court to manage a deceased person's estate pursuant to the terms of the Will. This is a short-term job (hopefully less than a year - maybe even shorter than 6 months). Their job is to collect the assets of the estate, pay all final debts and liabilities (including filing final tax returns) and distribute assets remaining in the estate to the beneficiaries named in the Will. An independent executor acts with minimal supervision of the court and can therefore administer the estate in a more cost-effective manner without having to ask the court permission to carry out their duties. Anyone convicted of a felony is not eligible to serve as an Executor.

Trustee - A trustee is responsible for administering an inter vivos trust, created during person's lifetime, or testamentary trust created in a Will after the person has passed away. A trust is a legal arrangement in which one or more trustees hold the legal title of the property for the benefit of the beneficiaries. This can be a much more long-term position depending on the life of the trust.- for the lifetime of a surviving spouse, or until a child attains a certain age of financial maturity. The trustee has three main duties: 1) manage the assets of the trust (cash, brokerage accounts, real estate, etc.), 2) make decisions on how much cash to distribute from the trust for the benefit of the beneficiaries, and 3) handle all administrative functions, like filing the annual trust income tax return. Depending on the document creating the trusts, trustees can serve with or without compensation, be individuals or corporate trustees, and may or may not also be a beneficiary of the trust. The Trustee has a fiduciary obligation to act in the best interest of the beneficiaries, has a duty of loyalty to the beneficiaries, and cannot engage in self-dealing.

Guardians of Minor Children - A Guardian of Minor Children is appointed by a court to be the guardian of the person of minor children. For a minor child, the court will first consider the persons named by the parent as choice for guardian. The court places a lot of weight on the parent's choice but has the discretion to appoint another party as guardian if the circumstances require it. Guardians must receive training and approval from the Judicial Branch Certification Commission before being appointed. In the instance where the minor children are the beneficiaries of a trust, the Trustee can provide financial assistance to the Guardian. The Guardian can be the same person as the Trustee for simplicity, or the roles can be filled by different persons to provide oversight that the funds are being used properly for the benefit of the minor children. Any Co-Guardians must be married.

Financial Agent - A Financial Agent's authority derives from Statutory Durable Power of Attorney and is only effective while the principal is alive. The agent manages assets and make financial decisions on behalf of the principal if the principal is unable to manage his or her own affairs due to a mental incapacity. The powers granted by a Statutory Durable Power of Attorney terminate upon the principal's death. The Property Agent has a fiduciary obligation to act in the best interest of the principal, has a duty of loyalty to the principal, and cannot engage in self-dealing.

Medical Agent - A Medical Agent's authority derives from a Medical Power of Attorney. The medical agent has the ability to make medical decision on behalf of the principal if the principal becomes incapacitated or is otherwise not able to communicate with the healthcare provider. The principal retains the ability to make medical decisions until they are incapacitated and will regain the ability to make their own decisions when they regain capacity. The medical agent has a fiduciary duty to act in the best interest of the principal and must follow the principal's Directive to Physicians/Advance Directive regarding withholding life support if the principal has a terminal or irreversible condition, if one has been signed,

HIPAA Release - Names persons who are authorized to receive protected health information. All medical agents should be included, but we can also include other family members, who will not be able to make medical decisions, but can be updated about your care.