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CONFIDENTIAL ESTATE PLANNING QUESTIONNAIRE – Married Clients

I. FAMILY DATA

DATE: _____

HUSBAND:

Full Name: _____ Social Security No.: _____

Home Address: _____ Phone: _____

Business Address: _____ Phone: _____

County of Residence: _____ Date, Place of Birth, Citizenship: _____

Details on all prior marriages: _____

Occupation: _____

E-mail address: _____

WIFE:

Full Name: _____ Social Security No.: _____

Home Address: _____ Phone: _____

Business Address: _____ Phone: _____

County of Residence: _____ Date, Place of Birth, Citizenship: _____

Details on all prior marriages: _____

Occupation: _____

E-mail address: _____

Couple's Date of Marriage: _____

CHILDREN OF THIS MARRIAGE: Names, Dates of Birth, City/State of Residence:

CHILDREN OF PRIOR MARRIAGES: Names, Dates of Birth and Residence:

PARENTS (FOR EACH SPOUSE): Please list Names, Dates of Birth and Death:

Husband's Father: _____

Husband's Mother: _____

Wife's Father: _____

Wife's Mother: _____

II. ESTATE PLANNING GOALS: Please describe your overall estate planning goals.

Husband's Signature

Wife's Signature

III. SPECIAL CONSIDERATIONS: Please circle your answer.

- Is any member of your family incapacitated or does anyone have significant health problems? **Yes**, let's discuss **No**
- Have you made any significant (greater than \$3,000 per person per year) gifts? **Yes**, let's discuss this **No**
- Have you filed gift tax returns? **Yes** (bring copies with you) **No**
- Have you created any trusts? **Yes** (bring copies with you) **No**
- Are you serving as Trustee of any trust? **Yes** (bring copies with you) **No**
- Are you the beneficiary of any trust? **Yes** (bring copies with you) **No**

IV. ITEMS TO BRING WITH YOU WHEN YOU COME IN FOR OUR CONFERENCE:

- A copy of your most recent Will and any Codicil(s)
- Copies of all Divorce Decrees/Settlement Agreements
- Copies of all prior Gift Tax Returns
- A copy of your Federal Tax Return for the last year
- Copies of any Buy-Sell Agreements you have signed
- A copy of any Pre-Nuptial Agreement you have signed
- Copies of any trusts that have been created by or for you
- Copies of deeds and tax receipts to any real property you own.

V. FINANCIAL CONTACTS: We may need to contact your accountant or other professionals in order to serve your needs. If you use any of the following professionals, please provide us with their names and phone numbers:

CPA: _____

Financial Advisor: _____

Private Wealth Banker: _____

VI. ASSET SUMMARY: (Please use Fair Market Value and round to nearest \$1,000)

<u>Asset</u>	<u>Husband's Name</u>	<u>Wife's Name</u>	<u>Joint</u>
Real Estate			
Residence	_____	_____	_____
Farm	_____	_____	_____
Rental	_____	_____	_____
Commercial	_____	_____	_____
Out-of-State	_____	_____	_____
Other	_____	_____	_____
Cash, Bank Accounts CDs, etc.	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

VI. ASSET SUMMARY (cont'd):

Stocks, Bonds, Mutual Funds

Brokerage Accounts	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

Business Interests	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

Furniture, Jewelry, Etc	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

RETIREMENT BENEFITS, 401(k) PLANS, IRAs and TAX-DEFERRED ANNUITIES

Husband:		Primary	Contingent
<u>Description</u>	<u>\$Value</u>	<u>Beneficiary</u>	<u>Beneficiary</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Wife:		Primary	Contingent
<u>Description</u>	<u>\$Value</u>	<u>Beneficiary</u>	<u>Beneficiary</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

LIFE INSURANCE

On Husband's Life:		Face	Cash		Annual	
<u>Desc.</u>	<u>Owner</u>	<u>Type</u>	<u>Value</u>	<u>Value</u>	<u>Beneficiary</u>	<u>Premium</u>
_____	_____	_____	\$ _____	\$ _____	_____	\$ _____
_____	_____	_____	\$ _____	\$ _____	_____	\$ _____
_____	_____	_____	\$ _____	\$ _____	_____	\$ _____

On Wife's Life:		Face	Cash		Annual	
<u>Desc.</u>	<u>Owner</u>	<u>Type</u>	<u>Value</u>	<u>Value</u>	<u>Beneficiary</u>	<u>Premium</u>
_____	_____	_____	\$ _____	\$ _____	_____	\$ _____
_____	_____	_____	\$ _____	\$ _____	_____	\$ _____
_____	_____	_____	\$ _____	\$ _____	_____	\$ _____

LIABILITIES

<u>Owed by Husband</u>	<u>Owed by Wife</u>	<u>Owed Jointly</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

WE WILL COMPLETE THE FOLLOWING:

VII. SUMMARY

	<u>Assets</u>	<u>Life Insurance</u>	<u>Retirement</u>	<u>Indiv. Totals</u>
HUSBAND:	_____	_____	_____	_____
WIFE:	_____	_____	_____	_____
JOINT:	_____	_____	_____	_____
TOTALS:	_____	_____	_____	_____
TOTAL GROSS ESTATE:				_____
Less Total Liabilities:				_____
NET ESTATE:				_____

“Splitable Estate” \$_____

Death Taxes at 2nd Death \$_____

If No Tax Planning

Death Taxes at 2nd Death \$_____

w/Basic Tax Planning

Death Taxes Saved \$_____