MARRIED COUPLE ESTATE PLANNING INFORMATION

FOR

____

Prepared by:

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GENERAL INSTRUCTIONS FOR COMPLETING THIS QUESTIONNAIRE

The estate plan which is recommended to you will be based on our analysis of the information which you provide.

Therefore, the information which you provide should be as comprehensive and detailed as possible. Providing this information may require a significant amount of your time.

Some of the information requested will not be applicable to your personal situation. In particular, one or more of the Attachments A - H may not apply to you. You should indicate where anything is not applicable to you by marking "N/A".

Although the computations regarding the ESTATE SUMMARY on page 7 can be complex, you should attempt to complete as much of the ESTATE SUMMARY as you are able to.

A follow up office conference may address any additional clarification needed.

Thank you for investing the time to complete this questionnaire.

MARRIED COUPLE ESTATE PLANNING INFORMATION

Date Completed:___________________________

Please attach additional pieces of paper as needed to answer each item. Where requested, please designate ownership of assets: as the separate property of husband or wife, or jointly-owned property. Ownership impacts the tax planning of the individual estates and the total combined estate. Indicate where anything is not applicable to you by marking "N/A".

A. FAMILY INFORMATION

1. Husband:

(1) Full Name: ____

(2) Usual Signature Name: ____

(3) Social Security Number: ___________________

(4) Birth Date: _______________________________

(5) Home Address: ____

County: __________________

(6) Telephone Number:

(a) Home: ________________________________

(b) Office: ________________________________

(7) Name and address of Employer: _______________________________________

____

(8) Citizenship: ______________________________

(9) Date of Present Marriage: _________________

(10) Previous marriage? ______

Children of previous marriage: ____________________________________

____

2. Wife:

(1) Full Name: ____

(2) Usual Signature Name: ____

(3) Social Security Number: _______________________

(4) Birth Date: __________________________________

(5) Name and Address of Employer: _______________________________________

____

(6) Office Telephone Number: ______________________

(7) Citizenship: _________________________________

(8) Previous marriage? ______

Children of previous marriage: ______________________________________

____

3. Prior out of state residences: _______________________________________
(especially if in community property state)

4. If either spouse has a former spouse which is deceased:

(1) Name & Date-of-death: ____

(2) Was an IRS Form 706 Estate Tax Return Filed? ______

5. <u>Children</u>: List all children. (Include children born previous to the present marriage. If any such children, identify which spouse is the parent. If either spouse has legally adopted such children, so indicate. If a child lives with a former spouse, so indicate.)

Name	Soc. Sec. No.	Birth Date

a. ______________________________

Address if different from yours: ______________________________

b. ______________________________

Address if different from yours: ______________________________

c. ______________________________

Address if different from yours: ______________________________

d. ______________________________

Address if different from yours: ______________________________

e. ______________________________

Address if different from yours: ______________________________

f. ______________________________

Address if different from yours: ______________________________

Are any children deceased? ______ If yes, please list: ______________

Are any children age 18 and older spendthrifts or otherwise irresponsible? ______

6. <u>Grandchildren</u>: (list 5 oldest)

Name	Parent	Birth Date

a. ______________________________

b. ______________________________

c. ______________________________

d. ______________________________

e. ______________________________

7. <u>Your Parents</u>:

Provide names and addresses:

a. Husband's Parents Which are Living: ______________________________

____

b. Wife's Parents Which are Living: ______________________________

____

B. ADVISORS:

Name, Address, Telephone Number:

1. Attorney: ______________________________

____

2. Accountant: ______________________________

____

3. Life Insurance/Financial Planner: ______________________________

____

4. Stockbroker/Investment Advisor: ______________________________

____

C. DISTRIBUTION OBJECTIVES AND PRESENT ESTATE PLAN:

1. Husband: Upon your death, how and to whom do you want your assets distributed?
Provision for Spouse at your Death: ______________________________

____

Provision for Children at your Death: ______________________________

____

Provision for Others at your Death: ______________________________

____

Gifts to Spouse and Children during your lifetime: ______________________________

Gifts to Charities: ______________________________

____

2. Wife: Upon your death, how and to whom do you want your assets distributed?
Provision for Spouse at your Death: ______________________________

____

Provision for Children at your Death: ______________________________

____

Provision for Others at your Death: ______________________________

____

Gifts to your Spouse and Children during your lifetime: ______________________________

Gifts to Charities: ______________________________

____

3. **DESIGNATION OF FIDUCIARIES:**

(a) **Personal Representative:**

Husband: If wife is deceased or otherwise cannot serve, please name an additional personal representative: Name, Address, Social Security Number, & Telephone Numbers:

____

____

Wife: If husband is deceased or otherwise cannot serve, please name an additional personal representative: Name, Address, Social Security Number, & Telephone Numbers:

____

____

(b) **Agent for Durable Power of Attorney for Financial Affairs:**

Husband: If wife is deceased or otherwise cannot serve, please name an additional Agent to make decisions for you if you are incapacitated:
Name, Address, Social Security Number, & Telephone Numbers:

____

____

Wife: If husband is deceased or otherwise cannot serve, please name an additional Agent to make decisions for you if you are incapacitated:
Name, Address, Social Security Number, & Telephone Numbers:

____

____

(c) **Agent for Durable Power of Attorney for Health Care Decisions:**

Husband: If wife is deceased or otherwise cannot serve, please name an additional Agent to make decisions for you if you are incapacitated:
Name, Address, Social Security Number, & Telephone Numbers:

____

____

Wife: If husband is deceased or otherwise cannot serve, please name an additional Agent to make decisions for you if you are incapacitated:
Name, Address, Social Security Number, & Telephone Numbers:

____

____

(d) **Guardian and Conservator of Minor Children:**

Husband: If wife is deceased or otherwise cannot serve, please name an additional guardian and conservator for your minor children:
Name, Address, Social Security Number, & Telephone Numbers:

____

____

Wife: If husband is deceased or otherwise cannot serve, please name an additional guardian and conservator for your children:
Name, Address, Social Security Number, & Telephone Numbers:

____

____

(e) Trustee of any Trusts Established under Your Estate Plan:

**Husband: If wife is deceased or otherwise cannot serve, please name an additional trustee for any trusts established under your estate plan:
Name, Address, Social Security Number, & Telephone Numbers:**

____

____

**Wife: If husband is deceased or otherwise cannot serve, please name an additional trustee for any trusts established under your estate plan:
Name, Address, Social Security Number, & Telephone Numbers:**

____

____

4. If you and your spouse both die prematurely, should the property be held in trust until the children are of a more mature age such as age 25, 30, or 40, rather be distributed outright at age 21?

5. Is avoiding unnecessary estate taxation of great importance to you?

6. Is the minimizing of income taxes of great importance to you?

7. Do you contemplate making future gifts for the purpose of minimizing estate and income taxes or otherwise?

8. Do you wish to make bequests to your church or any other charitable organization?

9. Do you now have existing wills?

10. Have you created any trusts?

11. Are you now a trustee or beneficiary of any trust?

12. Do you now have a power of appointment under a will or a trust created by any other person which empowers you to direct where property goes on your death?

13. Have you or your spouse ever lived in any other state or a foreign country? If so, where and during what time period?

14. Did you or your spouse own any substantial amount of property at the time of your marriage? If yes, please identify such substantial amount of property.

(1) Husband: ______________________________

(2) Wife: ______________________________

15. Has either spouse inherited any assets or receive any gifts? ________

If yes, please identify: ______________________________

If you expect to in the future, please describe: ______________________________

____

16. Do either or both of you have a safe deposit box? If so, identify ownership and provide a general description of the contents.

____

17. Gift Information:

a. Have you ever filed any gift tax returns? If so, please provide a copy of returns, since this information is necessary for estate tax planning. (IRS Form 709)

b. For 1982 and thereafter, have you ever made any gifts which exceed $10,000 from either of you to a single individual (including members of your family) or $20,000 from both of you combined?

c. For 1981 and before, have you ever made any gifts which exceeded $3,000 from either of you or $6,000 from both of you combined?

D. **ESTATE SUMMARY - ESTIMATED VALUE OF ESTATE** (Correct ownership must be indicated for accurate estate planning)

		Husband's Separate Property	Wife's Separate Property	Jointly-Owned Property
1.	ASSETS: (from Attachments A - G)			
a.	Cash and Bank Accounts from Attachment A	________	________	________
b.	Notes, Stocks, Bonds from Attachment B	________	________	________
c.	Real Estate from Attachment C	________	________	________
d.	Life Insurance from Attachment D	________	________	________
e.	IRA, Retirement from Attachment E	________	________	________
f.	Closely-Held Business Interest from Attachment F	________	________	________
g.	Miscellaneous from Attachment G	________	________	________
	TOTAL ASSETS:	________	________	________

		Husband's	Wife's	Joint
2.	LIABILITIES (from Attachment H) (List in each category only if greater than $10,000 in that category)			
a.	Promissory Notes	________	________	________
b.	Loans on Insurance Policies	________	________	________
c.	Tax Liabilities	________	________	________
d.	Charitable Pledges	________	________	________
e.	Credit Card Obligations	________	________	________
f.	Other Obligations	________	________	________
	TOTAL LIABILITIES	________	________	________
3.	NET WORTH (TOTAL ASSETS - TOTAL LIABILITIES)	________	________	________

E. <u>COPIES OF DOCUMENTS TO BE ATTACHED BEFORE ESTATE PLANNING MAY BE COMPLETED:</u>

(NOT necessary to bring these documents to an initial estate planning consultation)

1. Existing Wills.
2. Deeds to real property.
3. Life insurance policies.
4. Retirement plans.
5. Buy-sell or stock redemption agreements.
6. Previous trust documents.
7. Income tax returns for last year.
8. All Gift returns ever filed.
9. Business agreements and documents regarding interest held in corporation, partnerships, and sole proprietorships.
10. Pre- or postnuptial agreements.

ATTACHMENT A: CASH AND BANK ACCOUNTS

(Include IRA and retirement plan information on Attachment E, not here)

	Bank Name	Husband	Wife	Joint
Cash		________	________	________
Checking Account	____________	________	________	________
	____________	________	________	________
	____________	________	________	________
Savings Account	____________	________	________	________
	____________	________	________	________
	____________	________	________	________
TOTAL for this page		========	========	========

(Transfer to Estate Summary on page 7)

ATTACHMENT B: NOTES, STOCKS, BONDS, MUTUAL FUNDS (include IRA on Attachment E, not here)

1. Accounts Receivable, Notes & Mortgages

Debtor	Ownership	Maturity	Face Amount	Present Value
__________	__________	_________	__________	__________
__________	__________	_________	__________	__________

2. Stocks (Use Attachment F for Closely-Held Business Stock)

Description	Ownership	Cost	Current Value	Current Yield
__________	__________	__________	___________	___________
__________	__________	__________	___________	___________
__________	__________	__________	___________	___________
__________	__________	__________	___________	___________
__________	__________	__________	___________	___________

3. Bonds

Description	Ownership	Face Value	Current Value	Current Yield
__________	__________	__________	__________	__________
__________	__________	__________	__________	__________
__________	__________	__________	__________	__________
__________	__________	__________	__________	__________

4. Mutual Fund Shares

Description	Ownership	Cost	Current Value	Current Yield
__________	__________	__________	___________	____________
__________	__________	__________	___________	____________
__________	__________	__________	___________	____________

TOTAL for this page ___________

Husband: ___________; Wife: ___________; Joint: ___________

(Transfer amounts to The Estate Summary on Page 7, entering the proper amount for Husband, Wife, or Joint Ownership)

ATTACHMENT C: REAL ESTATE (attach additional sheets as necessary)

A. Basic Information	Parcel One	Parcel Two
1. Location	___________	____________
2. Type of Property (residential, commercial, land)	___________	____________
3. Ownership (Husband, Wife, or Joint)	___________	____________
4. If joint property, contribution of purchase price by each joint tenant	___________	____________
5. Date acquired	___________	____________
6. Income Tax Cost Basis	___________	____________
7. Present Fair Market Value	___________	____________

B. Mortgage and Other Obligations on the Property		
1. Original Mortgage Amount	___________	____________
2. Current Amount of Mortgage	___________	____________
3. Maturity and Payment Schedules	___________	____________
4. Other Debt on the Property	___________	____________

C. TOTAL Net Value of All Real Estate:
(Fair Market Value - Mortgage Obligations) ________________

Husband: __________; Wife: ___________; Joint: __________

(Transfer the amount of real estate owned to The Estate Summary on Page 7, entering the proper amount for Husband, Wife, or Joint ownership)

ATTACHMENT D: LIFE INSURANCE (Include Employer-Paid Insurance)

Information to Include Below: (ownership may be different from the life insured)

1. Policies owned by each spouse on their own life
2. Policies owned by each spouse on the other spouse's life
3. Policies owned by others on the life of each spouse.
4. Policies owned by each spouse on the lives of their children and others.

Insuring Husband's Life

Owner	Company & Policy No.	Total Benefit	Annual Premium	Cash Surrender Value	Designated Beneficiary
TOTAL on Husband					

Insuring Wife's Life

TOTAL on Wife					
TOTAL on both spouses					

Insuring Other Lives, Policies Owned by Either or Both Spouses (Designate whose life is insured, such as children or parents)

TOTAL on other lives					
TOTAL value of all life insurance on this page					

Total benefit owned by Husband: __________; Total Benefit Owned by Wife: __________

(Transfer to the Estate Summary on Page 7, the total life insurance benefit owned by each spouse. Do not allocate by whose life is insured)

ATTACHMENT E: IRA, RETIREMENT, AND EMPLOYEE BENEFITS

a. Husband

Employer's name and address: ____

Type of Plan (Show lump sum payable upon death, since this amount is subject to estate tax)

	Benefit
1. Pension	__________
2. Profit Sharing	__________
3. Other Deferred Compensation	__________
4. IRA (personal)	__________
5. Incentive Stock Plan	__________
HUSBAND'S TOTAL	__________

b. Wife

Employer's name and address: ____

Type of Plan

	Benefit
1. Pension	__________
2. Profit Sharing	__________
3. Other Deferred Compensation	__________
4. IRA (personal)	__________
5. Incentive Stock Plan	__________
WIFE'S TOTAL	__________

TOTAL for this page __________

Husband: __________; Wife: __________; Joint: __________

(Transfer to the Estate Summary on Page 7, the total amount owned by Husband, Wife, or Joint)

ATTACHMENT F: CLOSELY-HELD BUSINESS INTERESTS (Businesses owned by you)

A. Basic Information

1. Name of Business ______________________________

2. Business Address ______________________________

3. Type of Business Organization ______________________________
(Proprietorship, C Corp., S Corp., Partnership, Limited Liability Company)

4. Business advisors, accountants ______________________________

B. Capitalization (if corporation)

	Common	Preferred
Outstanding	________	________
Authorized	________	________

C. Ownership (all organizations)

	Common	Preferred	Other
Husband	________	________	________
Wife	________	________	________
Children	________	________	________
Unrelated Parties	________	________	________

D. Buy-Sell Agreement

1. Does a buy-sell agreement exist? __________

2. If so, what type? ______________________________
(cross-purchase, stock redemption, combination)

3. How funded, and if so, what amount? ______________________________

4. Method for determining value ______________________________
(book value, earnings multiple, appraisal, agreed value)

E. Other Commitments of the Business

1. Stock option agreement ______________________________

2. Deferred compensation agreement ______________________________

3. Other employee benefit plans ______________________________

4. Key-person insurance ______________________________

F. Anticipated Disposition of Stock (assuming no buy-sell agreement)

____

G. Estimated total value of business and method used to determine: ____________

____

(Transfer to Estate Summary on page 7)

ATTACHMENT G: MISCELLANEOUS ASSETS

	Husband	Wife	Joint
1. Personal Effects			
a. Home Furnishings	_________	_________	_________
b. Jewelry	_________	_________	_________
c. Furs/Clothing	_________	_________	_________
2. Other Tangible Personal Property			
a. Automobiles	_________	_________	_________
b. Collections (art, coin, etc)	_________	_________	_________
c. Other (boats, aircraft, etc.)	_________	_________	_________
3. Patent, Copyright, Trademark, other Royalties	_________	_________	_________
4. Mineral Interests			
a. Oil and Gas	_________	_________	_________
b. Coal	_________	_________	_________
c. Other	_________	_________	_________
5. Estates and Trusts			
a. Anticipated beneficiary distribution under will or trust	_________	_________	_________
b. Powers of Appointment General or Limited	_________	_________	_________
c. Cemetery Plot	_________	_________	_________
TOTAL for this page	=========	=========	=========

(Transfer to Estate Summary on page 7)

ATTACHMENT H: PERSONAL LIABILITIES (other than real estate mortgages which should be shown on Attachment C)

Only list liabilities which are greater than $10,000; and indicate whether Owed by Husband, Wife, or Joint

	Owed By	Owed to	Amount
1. Promissory Notes	____________	____________	____________
	____________	____________	____________
	____________	____________	____________
2. Loans on Insurance Policies	____________	____________	____________
	____________	____________	____________
3. Tax Liabilities	____________	____________	____________
4. Charitable Pledges	____________	____________	____________
5. Credit Card Obligations	____________	____________	____________
6. Other Obligations	____________	____________	____________
______________________	____________	____________	____________
TOTAL for this page			____________

Husband: __________; Wife: __________; Joint: __________

(Transfer the amount of liabilities owed to The Estate Summary on Page 7, entering the proper amount for Husband, Wife, or Joint obligation)