

ANN MARIE MURPHY
Attorney At Law

ESTATE PLANNING QUESTIONNAIRE

This questionnaire and checklist has been prepared for your use in giving me needed information for drafting Wills or other papers involved in planning your estate. The answers to this questionnaire will save me time and enable me to estimate and reduce the charge for my work. Please complete pages 1 and 2 and bring those with you to the initial appointment. Please complete pages 3 and 4 also if you have a potentially taxable estate or are considering the use of trusts in your estate planning. Pages 5 and 6 are for your information only.

Date _____

PERSONAL DATA

A. Information regarding yourself

| | |
|---|---|
| Name (full and as usually written, if different): | |
| Address: | |
| US Citizen: | yes ___ no ___ |
| Telephone: | residence () _____ office () _____ |
| Birth Date: | |
| Occupation/Employer: | |
| Office Address: | |

B. Information regarding spouse

| | |
|---|---|
| Name (full and as usually written, if different): | |
| Address (if different than above): | |
| US Citizen: | yes ___ no ___ |
| Telephone: | residence () _____ office () _____ |
| Birth Date: | |
| Occupation/Employer: | |
| Office Address: | |

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PRIOR MARRIAGES

If husband or wife has been previously married, describe any caretaking obligations under the divorce decree (supply copy if available).

CHILDREN

| Name of Child | Age or date of birth | Address | Married (Yes/ No) | Grand-children |
|---------------|----------------------|---------|-------------------|----------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

If any children are from a prior marriage, indicate with the letter [H] for husband's child and a letter [W] for wife's child before child's name.

Are any children adopted?

If so or in process of adoption, indicate with the letter [A].

Are any children handicapped or in poor health?

Are any children, grandchildren, heirs, beneficiaries, etc. born out of wedlock?

PARENTS

Father's Name Age Address

Mother's Name Age Address

SPOUSE'S PARENTS

Father's Name Age Address

Mother's Name Age Address

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ASSETS AND LIABILITIES

Tenancy-in-common interests should be included in column headed "Husband" or "Wife", and not under column headed "Joint" which is reserved for joint interests with right of survivorship and tenancies by entireties. The amounts entered in the several columns should be *estimated* at present value. (Please round numbers to nearest thousand.)

If estates are not taxable (under \$5.25 million in 2013), provide approx. values only.

| Asset Description | Husband | Wife | Joint or Community Property |
|---|---------|------|-----------------------------|
| 1. TANGIBLE PERSONAL PROPERTY: | | | |
| Household Furnishings | | | |
| Jewelry | | | |
| Automobiles | | | |
| Other | | | |
| 2. CASH AND SECURITIES: | | | |
| Stocks | | | |
| Bonds and Notes | | | |
| Bank and Money Market Accounts | | | |
| Other | | | |
| 3. REAL ESTATE:: | | | |
| Residence | | | |
| Recreation Property | | | |
| Investment Property | | | |
| Other | | | |
| 4. BUSINESS INTERESTS | | | |
| 5. EMPLOYEE BENEFITS | | | |
| (Keogh or other retirement) | | | |
| 6. INDIVIDUAL RETIREMENT PLAN (IRA) | | | |
| 7. LIFE INSURANCE (attach list if necessary) | | | |
| 8. PARTNERSHIP INTERESTS | | | |
| 9. Interests in ESTATES OR TRUSTS OF OTHERS | | | |
| 10. MISCELLANEOUS | | | |
| TOTAL ASSETS | | | |
| Less Mortgages, loans and other liabilities | | | |
| NET ASSETS | | | |

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LIFE INSURANCE (bring policies to review if you're unsure)

| Company | Policy No. | Type | Owner | Insured | Beneficiary | Death Benefit | Face Value |
|---------|------------|------|-------|---------|-------------|---------------|------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

LIABILITIES. Please list your debts and liabilities and whether secured or unsecured.

Secured Unsecured

SUMMARY OF ASSETS AND LIABILITIES:

| | Husband | Wife | Total |
|----------------|---------|------|-------|
| NET ASSETS | | | |
| LIFE INSURANCE | | | |
| LIABILITIES | | | |
| ESTATE VALUE | | | |

Do you or your spouse have a power of appointment or other interests under a will or trust of another person ? _____

ANY EXPECTED INHERITANCES

From Whom _____ For Client/Client's Spouse

Approximate Value _____

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GIFTS PREVIOUSLY MADE

A. Of Husband Alone. Gifts in excess of annual exclusion (\$14,000 in 2013) for each year after 1976 and name(s) of donee(s).

Bring copies of gift tax returns if any were filed for such gifts.

B. Of Wife Alone. Gifts in excess of annual exclusion (\$14,000 in 2013) for each year after 1976 and name(s) of donee(s).

Bring copies of gift tax returns if any were filed for such gifts.

FIDUCIARIES

Identify those individuals or institutions you wish to name in your will as your fiduciaries.

A. Executor(s):

Alternates and successors should be mentioned if you have present thoughts on this subject.

B. Trustee(s):

Alternates and successors should likewise be mentioned if trusts are desired and if you have present wishes on who should be named.

C. Guardian of Person of a Minor Child: Whom would you like to name as guardian of the person for your minor children if you spouse does not survive you? Consider an alternate if your first choice fails to serve.

D. Guardian of Property of a Minor Child: Whom would you like to serve as guardian of the property of your minor children regardless of whether you spouse survives you? Consider an alternate.

DOCUMENTS NEEDED

A. Income Tax Returns. These are often important in considering investments, short-term trusts, irrevocable trusts, and property left to the family.

B. Previous Wills. Please bring a copy of any existing wills.

C. Trusts. Please bring a copy of any trusts you created or of which you may be a beneficiary.

D. Retirement Benefits. Please bring a copy of any benefit package furnished you showing your retirement benefits.

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E. Closely-Held Business Interests. Please bring a copy or describe any stock redemption agreements, stock options, salary contribution, or other deferred compensation plans that may be applicable to you.

F. Self Employed. If you or your spouse are self-employed or a member of a partnership, give details of any contracts or commitments to sell such interest at death or retirement, as well as any retirement plans that may be applicable.

DESIRED DISPOSITION OF PROPERTY

A. Bequests (of Money and other Personal Property) and Devises of Real Estate other than to Spouse or Children.

| <u>Item Description</u> | <u>Primary Beneficiary</u> | <u>Contingent Beneficiary</u> |
|-------------------------|----------------------------|-------------------------------|
|-------------------------|----------------------------|-------------------------------|

B. What Bequests to Spouse of Household Furnishings, Personal Effects, Automobile(s), Residence and other Property are Desired?

C. What Property Do You Desire to Leave to Your Children or Other Descendants if You Survive Your Spouse and if Your Spouse Survives You?

D. What other Dispositions of Your Property Would You Like to Make and Under What Circumstances?

ADVANCE MEDICAL DIRECTIVES: Have you considered whether you want an Advance Medical Directive?

POWERS OF ATTORNEY: Do you want a power of attorney to authorize another person (or agent) to manage your affairs in the event of incapacity?