

# ESTATE PLANNING QUESTIONNAIRE

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All Information provided herein will be held in the strictest confidence, and will be used for the sole purpose of analyzing your estate planning needs and preparing estate planning documents. Preparation of this worksheet is not required prior to your initial appointment with us, but if we are able to review the completed worksheet prior to your appointment, more information and value will be received during the 30-minute complimentary initial consultation. Please return this questionnaire by U.S. Mail, fax or email.

## **WE OFFER A FREE NO-OBLIGATION, 30-MINUTE CONSULTATION**

During the initial appointment, we will determine your specific estate planning needs and goals. To assist us in this determination, please bring copies of any of your current estate planning documents. The potential cost of probate and estate tax which would occur with your current plan will be analyzed, and methods of reducing costs and accomplishing goals will be discussed. An exact quote on fees for estate planning will be provided before you decide to authorize completion of your estate plan.

**Barrett & Barrett, P.C.  
Mark W. Barrett, Esq.  
50 Congress Street, Suite 200  
Boston, MA 02109  
(617) 227-2230 (Phone) (617) 507-5830 (Fax)  
mbarrett@socialaw.com**



What is your primary motivation for considering estate planning? (Select one or more)

- Probate avoidance
- Guardianship for minor children
- Business or farm planning
- Federal estate tax planning
- Other: \_\_\_\_\_

How soon would you like to complete planning? Is there a specific deadline, such as an upcoming trip, surgery, etc.? \_\_\_\_\_

	<b>Husband</b>	<b>Wife</b>
Do you presently have a will?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you presently have a trust?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you interested in avoiding probate of your estate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were there any previous marriages?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are any of your children not from your current marriage?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do any of your children or other beneficiaries have disabilities?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you own a farm or business?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, do any of your children work in the business with you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, does the child working in the business have an ownership interest in the business?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you a U.S. citizen?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you entered into any agreements with your spouse (such as a prenuptial or community property agreement)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you or any family members or potential beneficiary have any serious health problems?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please describe briefly: _____		

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Do you own a long-term care (nursing home) insurance policy?  Yes  No  Yes  No

Do you hold everything jointly with your spouse, or is some property separate?  All joint (except IRA's, pensions, etc.)  Some separate

**NET WORTH:** If you added the value of all property owned by yourself and your spouse including real estate, personal property, bank accounts, stocks, bonds, IRAs, and anything else you own except death benefits on life insurance, what is the approximate total value of the estate of yourself and your spouse? \_\_\_\_\_

What is the value of death benefits on life insurance?      Insuring Husband \_\_\_\_\_      Insuring Wife \_\_\_\_\_

What is the total amount of your outstanding liabilities? \_\_\_\_\_

**INCOME/ASSET/LIABILITY INFORMATION**

Please list your income/asset/liability information in the appropriate category below.  
Attach a separate page if necessary.

	<b>Husband</b>	<b>Community/Joint</b>	<b>Wife</b>
<b>INCOME:</b>			
Earned Monthly Income from Labor	_____	_____	_____
Monthly Social Security Income	_____	_____	_____
Monthly Pension Income	_____	_____	_____
Other Monthly Income	_____	_____	_____

Type of Asset	Title in Which Held (Husband sole, Wife sole, Joint with spouse, Joint with third party, Tenants in common, etc.)	Current Value
<b>REAL ESTATE</b> (Include type of property e.g., residential, agricultural, commercial, or manufacturing)		
Personal Residence		
Vacant Land		
Other:		
<b>LIQUID ASSETS</b> (Include Account Number and Where Held)		
Cash on Hand		
Government and Publicly Traded Securities		

Type of Asset	Title in Which Held (Husband sole, Wife sole, Joint with spouse, Joint with third party, Tenants in common, etc.)		Current Value	
Unlisted Securities (Not Publicly Traded)				
Money Market Accounts				
Equity in Business Sole Prop. Partnership Other				
Notes and Loans Receivable				
Checking Accounts				
Savings Account				
Certificates of Deposit				
Automobiles				
Other Personal Property				
Annuities	Owner	Beneficiary	Current Value	
IRAs				
Pension/Profit Sharing				
Life Insurance			Cash Value	Death Benefit

Type of Asset	Title in Which Held (Husband sole, Wife sole, Joint with spouse, Joint with third party, Tenants in common, etc.)	Current Value
Other Assets		
LIABILITIES	Name Loan Taken In: (Husband, Wife, etc.)	Amount Owed

**CHILDREN OR OTHER BENEFICIARIES**

Name	Address	Date of Birth	Relationship

**GIFT TAX RETURNS**

Have gift tax returns ever been filed to report gifts made? \_\_\_\_\_ \*\*\*If YES, please bring copies of the returns to your appointment.

**APPOINTMENTS**

- PERSONAL REPRESENTATIVE.** The will should name a personal representative to probate the estate. (Personal representative is also sometimes referred to as executor or administrator.) (E.g., spouse as primary personal representative, with a child, relative, friend, or corporate trustee as alternate. In second marriage situations, spouse as primary personal representative may not be appropriate.)

PERSONAL REPRESENTATIVE: \_\_\_\_\_

ALTERNATE: \_\_\_\_\_

SECOND ALTERNATE: \_\_\_\_\_

- SUCCESSOR TRUSTEE.** If you choose to avoid probate of your estate by executing a living trust during lifetime, a successor trustee should be named. The successor trustee would be responsible for managing assets if you were unable, or in the case of a joint trust, if neither you nor your spouse were able, to manage assets due to incompetence. The successor trustee would distribute assets to beneficiaries after death, or in a joint trust, when neither you nor your spouse survives.

SUCCESSOR TRUSTEE: \_\_\_\_\_

ALTERNATE: \_\_\_\_\_

SECOND ALTERNATE: \_\_\_\_\_

3. **HEALTH CARE AGENT.** Who should be named to make medical decisions on your behalf including decisions regarding medical consents, life support issues, and nursing home admission if you were unable to make these decisions yourself? (Frequently, the primary agent is the spouse.) It is not necessary to appoint the same person who is your successor trustee or personal representative as your health care agent.

HEALTH CARE AGENT: \_\_\_\_\_

ALTERNATE: \_\_\_\_\_

SECOND ALTERNATE: \_\_\_\_\_

### PLAN OF DISTRIBUTION

1. **SPECIFIC GIFTS.** Do you want to make charitable gifts, such as to a house of worship or other institution? Do you wish to make a special gift to a particular person, such as a piece of jewelry to a particular child?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Briefly describe where you would want assets remaining after any specific gifts are distributed. (Don't worry about tax planning or other considerations in answering this question. We'll consider those details later if needed.)

- All to spouse; then equally between children, and if a child didn't survive, the deceased child's children would take the share of the deceased child.  
 All to spouse, then equally between surviving children  
 All to spouse, then \_\_\_\_\_

As follows: \_\_\_\_\_  
\_\_\_\_\_

3. **ULTIMATE DISTRIBUTION.** You might want to provide for the distribution of your property if neither you, your spouse nor your children/other beneficiaries named above survive.

\_\_\_\_\_  
\_\_\_\_\_

### PLEASE COMPLETE THIS SECTION ONLY IF YOU HAVE MINOR BENEFICIARIES OR BENEFICIARIES WITH DISABILITIES

1. **GUARDIAN.** If you have minor children or a beneficiary with special needs, you may need to appoint a guardian. The guardian is responsible for the day-to-day care of the child. It is a good idea to name an alternate guardian to act if your first choice cannot serve.

GUARDIAN: \_\_\_\_\_

ALTERNATE: \_\_\_\_\_

2. **TESTAMENTARY TRUSTEE.** You may need a trustee to manage assets for beneficiaries until they reach an age when you believe they should be capable of managing assets on their own. A trustee can keep the beneficiary's money invested wisely and use it for their education, support, etc., until they reach the age specified for outright distribution of assets to them. The trustee can be a relative, friend, trust company, or other person or institution you trust to manage and distribute assets according to your wishes. The testamentary trustee can be the same person named as the guardian, or could be a different person or institution.

TESTAMENTARY TRUSTEE: \_\_\_\_\_

ALTERNATE: \_\_\_\_\_

3. **AGE OF DISTRIBUTION.** If you do establish a trust to allow a third party to manage assets for beneficiaries, then it is necessary for you to decide when the beneficiaries will be mature enough to manage assets on their own. You may want to give each beneficiary his or her share at the time the beneficiary reaches a particular age. You may consider splitting the distribution, such as  $\frac{1}{2}$  at age 25 and the balance at age 30, or  $\frac{1}{3}$  at 21,  $\frac{1}{3}$  at 25, and  $\frac{1}{3}$  at 35. You may use any age or combination of ages that you choose.

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