



Questionnaire

Estate Analysis of Married Couple

**** *Confidential* ****

Family Information

A. Spouse Information

1. Spouse1 full name _____
2. Spouse2 full name _____
3. Home address _____

4. Home phone _____
5. Spouse1's mobile phone _____
6. Spouse2's mobile phone _____
7. Spouse1's personal email address _____
8. Spouse2's personal email address _____
9. Spouse1's date of birth _____
10. Spouse2's date of birth _____
11. Spouse1's Social Security Number _____
12. Spouse2's Social Security Number _____
13. Spouse1's occupation/employer _____
Business address _____

Business phone _____
Spouse1's business email address _____
14. Spouse2's occupation/employer _____
Business address _____

Business phone _____
Spouse2's business email address _____
15. Is Spouse1 a U.S. citizen? ☐ Yes ☐ No
If no, country(ies) of citizenship _____
16. Is Spouse2 a U.S. citizen? ☐ Yes ☐ No
If no, country(ies) of citizenship _____

B. Immediate Family

Children¹

Full Name	Date of Birth	Marital Status

Grandchildren

Full Name	Date of Birth	Marital Status	Parent's Name

C. Marital History

1. Date and place of marriage _____
2. List the states where you have lived since your marriage and the dates you lived in each state

3. Has either of you been previously married? ☐ Yes ☐ No
If yes, did the marriage end because of:
☐ Death; please give name of deceased spouse, the date and place of his or her death

☐ Divorce; please give name of divorced spouse, the date and place of divorce

D. Parents And Other Family Members

	Spouse1		Spouse2	
	<i>Father</i>	<i>Mother</i>	<i>Father</i>	<i>Mother</i>
1. Are your parents living?	_____	_____	_____	_____
2. What are their ages?	_____	_____	_____	_____
3. In what state do they live?	_____	_____	_____	_____
4. Do they have wills?	_____	_____	_____	_____
5. What is the approximate inheritance you might receive?	_____	_____	_____	_____
6. Is there any other information about you or your spouse's families that is relevant to your estate plan?	_____			
7. Do either of you or your children expect a substantial inheritance from anyone other than your parents?				
<input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, describe	_____			

¹ Indicate if any are children from a previous marriage of either spouse.

E. Personal Information

1. Is either spouse receiving social security, disability, or other governmental benefits?

☐ Yes ☐ No

If yes, describe _____

2. Is either spouse now or have you ever been in the military or married to a person who was or is in the military?

☐ Yes ☐ No

If yes, describe _____

3. Is either spouse making payments pursuant to a divorce or property settlement order?

☐ Yes ☐ No

If yes, please send a copy with this Questionnaire.

4. Have you signed a pre- or post-marriage contract?

☐ Yes ☐ No

If yes, please send a copy with this Questionnaire.

5. Is either spouse a signatory on a foreign bank account?

☐ Yes ☐ No

If yes, describe _____

6. Is either spouse named as an agent under someone else's power of attorney (either medical or financial)?

☐ Yes ☐ No

If yes, describe _____

7. Is either spouse a party to any judicial proceedings or lawsuits?

☐ Yes ☐ No

If yes, describe _____

F. Previous Estate Planning Instruments

1. Do you presently have a will?

Spouse1: ☐ Yes ☐ No

Spouse2: ☐ Yes ☐ No

If yes, please send a copy of the will and any codicils with this Questionnaire.

2. Have you ever established a trust?

Spouse1: ☐ Yes ☐ No

Spouse2: ☐ Yes ☐ No

If yes, please send a copy of the trust agreement and any amendments with this Questionnaire.

3. Are you or any of the members of your immediate family beneficiaries of any estates or trusts?

Spouse1: ☐ Yes ☐ No

Spouse2: ☐ Yes ☐ No

If yes, please send copies with this Questionnaire.

4. Are you or any of the members of your immediate family a trustee now (or are you or they likely to be a trustee in the future) of a trust?

Spouse1: ☐ Yes ☐ No

Spouse2: ☐ Yes ☐ No

If yes, please send a copy with this Questionnaire.

5. Are you or any of the members of your immediate family an executor of an estate?

Spouse1: ☐ Yes ☐ No

Spouse2: ☐ Yes ☐ No

If yes, describe _____

G. Miscellaneous Data

1. Name of Accountant _____
Address _____
Phone _____
Email address _____
2. Name of Insurance Agent/Consultant _____
Address _____
Phone _____
Email address _____
3. Name of Investment Advisor _____
Address _____
Phone _____
Email address _____
4. Name of Banker _____
Address _____
Phone _____
Email address _____
5. Safe Deposit Box
Bank _____ Branch Location _____
Persons Listed on Signature Card _____

GIFTING HISTORY

Have you ever made a gift in excess of \$10,000 to a single recipient?

Spouse1: ☐ Yes ☐ No

Spouse2: ☐ Yes ☐ No

If yes, please send copies of all gift tax returns with this Questionnaire.