

# ESTATE PLANNING QUESTIONNAIRE



Betts

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Austin

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Johnson

ATTORNEYS AT LAW

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# ESTATE PLANNING

Date: \_\_\_\_\_

**Family Information:**

**SPOUSE / PARTNER  
1 (P1)**

**SPOUSE / PARTNER  
2 (P2)**

Full Name: \_\_\_\_\_

\_\_\_\_\_

Citizenship: \_\_\_\_\_

\_\_\_\_\_

Social Security No.: \_\_\_\_\_

\_\_\_\_\_

Age: \_\_\_\_\_

\_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

\_\_\_\_\_

Home Telephone: \_\_\_\_\_

\_\_\_\_\_

E-mail: \_\_\_\_\_

\_\_\_\_\_

Employer: \_\_\_\_\_

\_\_\_\_\_

Office Address: \_\_\_\_\_

\_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

\_\_\_\_\_

Office Telephone: \_\_\_\_\_

\_\_\_\_\_

Father's Name (if living): \_\_\_\_\_

\_\_\_\_\_

City, State: \_\_\_\_\_

\_\_\_\_\_

Mother's Name (if living): \_\_\_\_\_

\_\_\_\_\_

City, State: \_\_\_\_\_

\_\_\_\_\_

Estimated size of any potential inheritance: \_\_\_\_\_

\_\_\_\_\_

Names of Prior Spouses (if any): \_\_\_\_\_

\_\_\_\_\_

Dependants other than Children (if any): \_\_\_\_\_

\_\_\_\_\_

***Your Children:***

<b>Name</b>	<b>Birthdate</b>	<b>Social Security Number</b>	<b>Adopted? Mark "A"</b>	<b>*Parents (Joint, P1, P2)</b>	<b>Married Yes / No</b>	<b>No. of Children</b>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

**\*In describing "Parents," use the following abbreviations:**

**J = Joint Children, P1 = Spouse/Partner 1's Child, P2 = Spouse/Partner 2's Child**

***Financial Advisor (if any):***

Name and Company: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

***Life Insurance:***

	<b>SPOUSE / PARTNER 1 INSURED</b>	<b>SPOUSE / PARTNER 2 INSURED</b>
Number of Policies:	_____	_____
Total Face Amount:	_____	_____
Total Present Cash Value:	_____	_____
Owner of Policies:	_____	_____
Total Loan Against Policies:	_____	_____
Primary Beneficiaries:	_____	_____
	_____	_____
	_____	_____
Contingent Beneficiaries:	_____	_____
	_____	_____

***Retirement Benefits:***

	<b>SPOUSE / PARTNER 1</b>	<b>SPOUSE / PARTNER 2</b>
<u>Employer Plans</u>		
Annual Salary:	_____	_____
Type (pension, profit sharing, ESOP, etc.):	_____	_____
Balances:	_____	_____
Primary Beneficiaries:	_____	_____
	_____	_____
	_____	_____
Contingent Beneficiaries:	_____	_____
	_____	_____
<u>IRA Balance</u>		
Primary Beneficiaries:	_____	_____
	_____	_____
	_____	_____
Contingent Beneficiaries:	_____	_____
	_____	_____
	_____	_____

***Assets (attach separate sheet if necessary):***

	<b>Total Value</b>	<b>-</b>	<b>Less Liability</b>	<b>= \$</b>	<b>Equity</b>
Primary Home:	\$ _____	-	_____	= \$	_____
Secondary Home:	\$ _____	-	_____	= \$	_____
Recreational Vehicles:	\$ _____	-	_____	= \$	_____
<u>Other Real Estate:</u> (Description & Location)					
_____	\$ _____	-	_____	= \$	_____
_____	\$ _____	-	_____	= \$	_____
_____	\$ _____	-	_____	= \$	_____

***Business Interests:***

Closely-Held Corporate Stock:

1. \_\_\_\_\_ Stock Value \$ \_\_\_\_\_  
(Company Name)

2. \_\_\_\_\_ Stock Value \$ \_\_\_\_\_  
(Company Name)

Partnerships:

1. \_\_\_\_\_ Value \$ \_\_\_\_\_  
(Partnership Name)

2. \_\_\_\_\_ Value \$ \_\_\_\_\_  
(Partnership Name)

Sole Proprietorship:

\_\_\_\_\_ Value \$ \_\_\_\_\_  
(Trade Name)

	Complete Names and Status Shown on Title Documents	Approximate Value
Cash or Cash Equivalents	_____	\$ _____
Traded Stock	_____	\$ _____
Bonds	_____	\$ _____
Receivables from Others	_____	\$ _____
Real Estate Contracts	_____	\$ _____
Loans to Children	_____	\$ _____
Investment Partnerships	_____	\$ _____
Autos, Boats, Furnishings, Jewelry	_____	\$ _____
	_____	_____
Burial Plots	_____	\$ _____

***Other Assets:***

Description: \_\_\_\_\_ Value \$ \_\_\_\_\_  
\_\_\_\_\_ Value \$ \_\_\_\_\_  
\_\_\_\_\_ Value \$ \_\_\_\_\_

**Machinery & Equipment:**

\_\_\_\_\_ Value \$ \_\_\_\_\_  
\_\_\_\_\_ Value \$ \_\_\_\_\_  
\_\_\_\_\_ Value \$ \_\_\_\_\_

**Livestock:**

- a. Milk Cows Value \$ \_\_\_\_\_
- b. Heifers Value \$ \_\_\_\_\_
- c. Dry Cows Value \$ \_\_\_\_\_
- d. Steers Value \$ \_\_\_\_\_
- e. Bulls Value \$ \_\_\_\_\_
- f. Calves Value \$ \_\_\_\_\_
- g. Horses
  - (1) registered Value \$ \_\_\_\_\_
  - (2) non-registered Value \$ \_\_\_\_\_

**Other Livestock:**

\_\_\_\_\_ Value \$ \_\_\_\_\_  
\_\_\_\_\_ Value \$ \_\_\_\_\_  
\_\_\_\_\_ Value \$ \_\_\_\_\_  
\_\_\_\_\_ Value \$ \_\_\_\_\_  
\_\_\_\_\_ Value \$ \_\_\_\_\_  
\_\_\_\_\_ Value \$ \_\_\_\_\_

Total Assets: \$ \_\_\_\_\_

**Debts and Liabilities (excluding Real Estate debts described above):**

	Creditor	Brief Description	Total Owed
1.	_____	_____	\$ _____
2.	_____	_____	\$ _____
3.	_____	_____	\$ _____
4.	_____	_____	\$ _____
5.	_____	_____	\$ _____
		Total Debts and Liabilities	\$ _____
		<b>TOTAL (assets less liabilities)</b>	\$ _____

**Background Questions:**

	Yes / No
1. Is all your property community property (i.e., marital property owned 50/50)?	_____
2. Have you ever signed a Community Property Agreement or Prenuptial Agreement?	_____
3. Are any of your assets titled Joint Tenancy with Right of Survivorship (JTWROS)?	_____
4. Do you intend for any JTWROS account to be distributed to such Joint Owner or under the Provisions of your Will?	_____
5. Are you a beneficiary or trustee of any trust?	_____
6. Have you ever made gifts over \$16,000.00?	_____
7. Have you ever filed any gift tax return?	_____
8. Do either of you suffer from any serious illness or incapacity?	_____
9. Do any of your children suffer from any serious illness or incapacity?	_____
10. Is either of you subject to any divorce or other court decree or agreement limiting your estate planning choices?	_____
11. Are you a party to any buy-sell agreement?	_____

**Documents to Bring with You:**

1. Existing Wills or Trust.
2. Any Community Property Agreements.
3. Any divorce decree or agreement referred to in Item 8 above.
4. Any buy-sell agreement referred to Item 9 above.

**Tentative Will Provisions:**

1. Personal Representative (administers Will during probate)

First Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_

Second Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_

Third Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_

2. Guardian of Minors (raises children who are not yet 18)

First Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_

Second Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_

Third Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_

3. Trustee (manages estate for the benefit of beneficiaries)

First Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_

Second Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_

Third Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_

4. Distribution of Trust Estate

a. Age of youngest child before distribution: \_\_\_\_\_

b. Distribution:

(1) Age for first portion: \_\_\_\_\_ Percentage/Amount \_\_\_\_\_

(2) Age for second portion: \_\_\_\_\_ Percentage/Amount \_\_\_\_\_

(3) Age for third portion: \_\_\_\_\_ Percentage/Amount \_\_\_\_\_

5. Durable Power of Attorney for Financial  
**(SPOUSE/PARTNER 1)**

First Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_

Second Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_

Third Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_



6. Durable Power of Attorney for Financial  
**(SPOUSE / PARTNER 2)**

First Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Second Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Third Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_

7. Durable Power of Attorney for Health Care  
**(SPOUSE / PARTNER 1)**

First Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Second Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Third Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_

8. Durable Power of Attorney for Health Care  
**(SPOUSE / PARTNER 2)**

First Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Second Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Third Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_

7. Minor's Power of Attorney for Health Care

First Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Second Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Third Choice: \_\_\_\_\_ Relationship: \_\_\_\_\_

***Your Specific Bequests or Special Objectives (if any):***

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