GADSDEN SCHNEIDER & WOODWARD LLP
Estate Planning Questionnaire
(for unmarried clients)

Date: ______________________

To plan your estate properly, we need to have a thorough understanding of your personal and financial situation. This questionnaire is intended to be a "first step" in the planning process. We would appreciate your filling it out as completely as you consider appropriate and sending us copies of all documents requested. Thank you.

PERSONAL INFORMATION

Name: ________________________________

Date of Birth: ________________________________

Social Security #: ________________________________

Citizenship: ________________________________

Home Address: ____________________________

____

County: ____________________________ Resident since / /

Municipality: ____________________________

Phone: ____________________________

Fax: ____________________________

Occupation: ________________________________

Business Address: ________________________________

____

Phone: ________________________________

Fax: ________________________________

E-mail Address: ________________________________

If previously married:

Date of Marriage: ____________________________

End of Marriage: ____

If divorced, was there
a property agreement? Yes No

FAMILY INFORMATION

CHILDREN

Full Name:	______________	______________	______________	______________
Date of Birth:	______________	______________	______________	______________
SSN: (if readily available)	______________	______________	______________	______________
Home Address:	______________	______________	______________	______________
	______________	______________	______________	______________
Other Parent (if applicable):	______________	______________	______________	______________
Marital Status:	______________	______________	______________	______________
Occupation:	______________	______________	______________	______________
Beneficiary of Custodial Acct?	Yes No	Yes No	Yes No	Yes No
Approximate Net Worth:	______________	______________	______________	______________
Special Needs/ Considerations?	______________	______________	______________	______________
Children (if any):				
Name:	______________	______________	______________	______________
Age:	______________	______________	______________	______________
Name:	______________	______________	______________	______________
Age:	______________	______________	______________	______________
Name:	______________	______________	______________	______________
Age:	______________	______________	______________	______________
Name:	______________	______________	______________	______________
Age:	______________	______________	______________	______________

Other Potential Beneficiaries
(include charities if desired):

Name: ______________________________

Relationship: ______________________________

Name: ______________________________

Relationship: ______________________________

Name: ______________________________

Relationship: ______________________________

Name: ______________________________

Relationship: ______________________________

Name: ______________________________

Relationship: ______________________________

Name: ______________________________

Relationship: ______________________________

Name: ______________________________

Relationship: ______________________________

INCOME

Salary: ______________________

Rental Income: ______________________

Investment Income: ______________________

Notes Receivable: ______________________

Retirement Income: ______________________

TOTAL:	$____________________

If you anticipate that your income will undergo a significant change over the next several years, please explain.____
____

ASSETS

CASH

Checking Accounts: ___________________

Savings Accounts:______________________

Money Market: _____________________

Cert. of Deposit: _____________________

Other ( ): _____________________

TOTAL: $______________________

TANGIBLE PERSONAL PROPERTY

Automobiles: _______________________

Jewelry: _______________________

China, Silver: _______________________

Antiques: _______________________

Furnishings: _______________________

Boats: _______________________

Other (________): _______________________

Other (________): _______________________

Other (________): _______________________

Other (________): _______________________

Other (________): _______________________

Other (________): _______________________

TOTAL: $______________________

REAL ESTATE

1. PRIMARY RESIDENCE

Address: ______________________

____

Date Acquired: ______________________

Fair Market Value: ___________________________________

Mortgage(s) Amt.: ___________________________________

Cost (or other)
Basis: ______________________

2. OTHER RESIDENCES

	#1	#2	#3
Address:	__________________	__________________	__________________
	__________________	__________________	__________________
Date Acquired:	__________________	__________________	__________________
Fair Market Value:	_____________	__________________	__________________
Mortgage(s) Amt.:	_____________	__________________	__________________
Cost (or other) Basis:	__________________	__________________	__________________
Rental Income:	Yes ($ /yr) No	Yes ($ /yr) No	Yes ($ /yr) No

3. COMMERCIAL OR RENTAL PROPERTIES

	#1	#2	#3
Address:	__________________	__________________	__________________
	__________________	__________________	__________________
Date Acquired:	__________________	__________________	__________________
Fair Market Value:	_________________	__________________	__________________
Mortgage(s) Amt.:	_________________	__________________	__________________
Cost (or other) Basis:	__________________	__________________	__________________
Rental Income:	Yes ($ /yr) No	Yes ($ /yr) No	Yes ($ /yr) No

TOTAL:	$________________	$________________	$________________

MARKETABLE SECURITIES

Stocks: ______________________

Tax-Exempt Bonds: ______________________

Taxable Bonds: ______________________

Traded Stock Options: ______________________

Warrants: ______________________

Others (_______): ______________________

Others (_______): ______________________

TOTAL: $________________

CLOSELY-HELD BUSINESS INTERESTS **(i.e. C Corp, S Corp, LLC, Partnership)**

1. BUSINESS #1

Name: ______________________

Address: ______________________

____

Type of Business: ______________________

% Equity Interest: ______________________

Non-Equity Int. ______________________

Fair Market Value of Entity: ______________________

2. BUSINESS #2

Name: ______________________

Address: ______________________

____

Type of Business: ______________________

% Interest Owned: ______________________

Fair Market Value of Entity: ______________________

3. BUSINESS #3

Name: ______________________

Address: ______________________

____

Type of Business: ______________________

% Interest Owned: ______________________

Fair Market Value of Entity: ______________________

4. SOLE PROPRIETORSHIP

Type of Business: ______________________

Fair Market Value: ______________________

TOTAL FAIR MARKET VALUE: $______________________

MISCELLANEOUS ASSETS

Notes Receivable: ______________________

Oil/Mineral Interests: ______________________

Intellectual Property: ______________________

Other (________): ______________________

Other (________): ______________________

TOTAL: $______________________

RETIREMENT ASSETS

		BENEFICIARY (PRIMARY/ALTERNATE)
IRA(s):	____________________	____________________
		____________________
Pension Plan(s):	____________________	____________________
		____________________
Profit Sharing Plan(s):	____________________	____________________
		____________________
401(k) (s):	____________________	____________________
		____________________
Keogh Plan(s):	____________________	____________________
		____________________
ESOP(s):	____________________	____________________
		____________________
Tax-Def. Annuity:	____________________	____________________
		____________________
Deferred Comp.		
Qualified:	____________________	____________________
Non-Qualified:	____________________	____________________
Other (__________):	____________________	____________________
	____________________	____________________

TOTAL: $______________

Employee Stock Options –

[List on Separate Sheet]

INSURANCE

	POLICY 1	POLICY 2	POLICY 3	POLICY 4	POLICY 5
Insured:	____________	______________	______________	______________	______________
Primary Beneficiary:	____________	______________	______________	______________	______________
Alternate Beneficiary:	____________	______________	______________	______________	______________
Owner:	____________	______________	______________	______________	______________
Type:	____________	______________	______________	______________	______________
Company:	____________	______________	______________	______________	______________
Policy No.:	____________	______________	______________	______________	______________
Face Value:	____________	______________	______________	______________	______________
Cash Surr. Value:	____________	______________	______________	______________	______________
Loans Outstanding:	____________	______________	______________	______________	______________

LIABILITIES

SECURED	AMOUNT	LENDER'S NAME	PROPERTY SECURING DEBT
Mortgage	(________):	________________________________	_______________________________
Mortgage	(________):	________________________________	_______________________________
Mortgage	(________):	________________________________	_______________________________
Other	(______________):	________________________________	_______________________________
Other	(______________):	________________________________	_______________________________

UNSECURED

Other (__________): ________________________________

Other (__________): ________________________________

Other (__________): ________________________________

Other (__________): ________________________________

FIDUCIARY APPOINTMENTS

EXECUTOR

An executor or personal representative is the person who, or bank or trust company which, is charged with the duty of collecting your assets, paying off your debts and distributing the remaining property in accordance with your Will. You may appoint one or more executors or personal representatives to act concurrently or consecutively. We strongly recommend that you appoint at least two persons, banks or trust companies (whether concurrently or consecutively) as executors or personal representatives.

Primary Executor(s):

Name: ______________________________

Relationship: ______________________________

Name: ______________________________

Relationship: ______________________________

Name: ______________________________

Relationship: ______________________________

Alternate Executor(s):

Name: ______________________________

Relationship: ______________________________

Name: ______________________________

Relationship: ______________________________

Name: ______________________________

Relationship: ______________________________

TRUSTEE

A trustee is the person who, or bank or trust company which, holds the assets placed in each trust created under your Will or Deed of Trust, as the case may be, for your beneficiaries. The trustee is responsible for investing the trust assets and, in accordance with your directions, making distributions of income and principal. You may appoint one or more trustees to act concurrently or consecutively. We strongly recommend that you appoint at least two persons, banks or trust companies (whether concurrently or consecutively) as trustees.

Primary Trustee(s):

Name: ______________________________

Relationship: ______________________________

Name: ______________________________

Relationship: ______________________________

Alternate Trustee(s):

Name: ______________________________

Relationship: ______________________________

Name: ______________________________

Relationship: ______________________________

GUARDIAN

If both of the parents of a minor child (i.e., a child who is under the age of 18) should die, a guardian of the person and a guardian of the property of such child should be appointed. The "guardian of the person" will take physical custody of the child, and the "guardian of the property" will manage the child's assets. You may appoint one or more persons to act concurrently or consecutively as guardians of the person and guardians of the property of a minor child. We strongly recommend that you appoint at least two persons (whether concurrently or consecutively) as guardians.

Primary Guardian(s):

Name: ______________________________

Relationship: ______________________________

Specify Type: Person Property Both

Name: ______________________________

Relationship: ______________________________

Specify Type: Person Property Both

Alternate Guardian(s):

Name: ______________________________

Relationship: ______________________________

Specify Type: Person Property Both

Name: ______________________________

Relationship: ______________________________

Specify Type: Person Property Both

QUESTIONS

1. Do you have a Will? Yes No

2. Do you have a Power of Attorney? Yes No

3. Do you have a Living Will? Yes No

4. Are you the trustee of any trust? Yes No

5. Are you the beneficiary of any trust? Yes No

6. Do you expect to receive a large inheritance? Yes No

7. Do you have a power to appoint the principal of any trust? Yes No

8. Have you ever filed a gift tax return? Yes No Y

9. If there are special considerations that might affect your estate planning, please explain.____

____

____

____

9. Your preferred address for correspondence: ______________________________

____

10. Who referred you to us for estate planning? ______________________________

POINTS TO CONSIDER

Before discussing estate planning and tax consequences with us, you may want to consider the following:

(1) Which, if any, of your beneficiaries (e.g., children, grandchildren, dependent parents, other relatives or charities) do you want to receive property outright and which, if any, do you want to receive property in trust?

(2) To what extent do you want your trust beneficiaries to be able to direct what happens to the assets of a trust on their deaths?

(3) If you have young children, do you want to (a) create one trust for all of your children so that the trustee can allocate assets based on need until the youngest child reaches a certain age or (b) divide all assets equally among your children? Similarly, at what age or ages do you want your children (or other beneficiaries) to have control over part or all of the property that you give them?

DOCUMENTS TO BE ATTACHED

Please provide us with copies of the following documents (if applicable): ATTACHED

1. Existing Estate Planning Documents _________
2. Divorce Decree/Property Agreement _________
3. Trust(s) under which you serve as trustee _________
4. Will(s)/Trust(s) under which you have a power of appointment _________
5. All gift tax returns previously filed by you _________
6. Plan documents for retirement assets (particularly, provisions governing beneficiary designations and death pay-out options)_________
7. Buy-Sell Agreement(s) _________
8. General Partnership Agreement(s) _________
9. Limited Partnership Agreement(s) _________
10. LLC Operating Agreement(s) _________
11. Living Wills _________
12. Powers of Attorney _________
13. Deeds for all real estate held _________