

### ESTATE PLANNING QUESTIONNAIRE

[NOTE: We will prepare your will or trust using the information exactly as you provide it in this questionnaire, but you will have the opportunity to review and revise those documents. The terms “you” and “your” refer to the person who will sign the will.]

#### Personal Information

1. Your Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

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

2. Your Spouse’s Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

[Put “N/A” if you are not married.]

3. Your *Children* from all marriages (*circle* if deceased or disabled):

<u>Name</u>	<u>Year of Birth</u>	<u>Deceased / Disabled?</u>
_____	_____	Deceased / Disabled
_____	_____	Deceased / Disabled
_____	_____	Deceased / Disabled
_____	_____	Deceased / Disabled
_____	_____	Deceased / Disabled
_____	_____	Deceased / Disabled

4. Your *Grandchildren* (circle if deceased or disabled):

<u>Name</u>	<u>Year of Birth</u>	<u>Deceased / Disabled?</u>
_____	_____	Deceased / Disabled
_____	_____	Deceased / Disabled
_____	_____	Deceased / Disabled
_____	_____	Deceased / Disabled
_____	_____	Deceased / Disabled
_____	_____	Deceased / Disabled

5. Do you wish to disinherit (or limit gifts to) a child or grandchild? Yes \_\_\_\_ No \_\_\_\_

If Yes, to whom / Explain: \_\_\_\_\_

6. Do you and your spouse have a *pre-marital agreement* providing for separate property?

Yes \_\_\_\_ No \_\_\_\_ [If Yes, furnish us a copy.]

**Distribution of Assets**

7. **Specific Gifts.** If you wish to give specific sums of money, family heirlooms, jewelry or other items of special value to specific persons, list them here or attach a separate list (if not listed, they will pass as part of the *Remainder Distribution* below):

<i>Description of Item/Property</i>	<i>Name of Recipient</i>
_____	_____
_____	_____
_____	_____
_____	_____

8. **Real Property.** You may leave a residence or other real estate to a specific person, with a mortgage attached to it **or** paid off first from your estate funds *before* they are distributed to your heirs. (If none listed, such properties will be part of the *Remainder Distribution* below.)

<i>Description of Property</i>	<i>Name of Recipient</i>	<i>Pay off Mortgage?</i>
_____	_____	Yes No
_____	_____	Yes No

9. **Remainder Distribution.** You may leave your assets to anyone you desire, in any amounts or proportions, except that a married person in Mississippi may *not* totally omit his/her spouse from inheriting. [NOTE: Assets like land or bank accounts held with another as “joint tenants with rights of survivorship,” and life insurance or retirement accounts for which you have named a designated beneficiary, will **NOT** pass through your will or trust, but will pass automatically to the surviving joint owner(s) or to the designated beneficiary. Consult with us about this if you have such assets.]

Also, the law requires a court-supervised guardian be appointed to receive assets left to a child under age 21, or a conservator for an adult who is mentally incapacitated. To avoid such a guardianship or conservatorship, you may wish to create a private *trust* in your will and name a *trustee* to receive and hold (without court supervision) any assets that may be left to a minor child or grandchild or to an adult who may be mentally disabled in your family. Assets in such a trust will **not** be counted by Medicaid or SSI if the trust is properly drafted for “special needs”.

A. **If you are MARRIED, answer each of the following that apply:**

(i) My spouse is mentally able to manage financial assets. Yes \_\_\_\_ No \_\_\_\_

(ii) I want to: \_\_\_\_ Leave everything to my spouse, if s/he is living at my death, **OR**  
\_\_\_\_ Leave everything in **equal** shares to my spouse and children.

(iii) If my spouse is **incapacitated** at my death and cannot manage his/her assets, I want to place those assets in a *trust* for my spouse’s needs? Yes \_\_\_\_ No \_\_\_\_

(iv) If my spouse is **deceased** at my death, I want to:

- \_\_\_ Leave everything to my child(ren) in equal shares, **OR**
- \_\_\_ Leave \_\_\_ % or \$ \_\_\_ to \_\_\_\_\_
- \_\_\_ Leave \_\_\_ % or \$ \_\_\_ to \_\_\_\_\_
- \_\_\_ Leave \_\_\_ % or \$ \_\_\_ to \_\_\_\_\_

(v) If any **child** of mine (or **grandchild** whose parent is deceased) is **under 21** at my death, I want to:

- \_\_\_ Leave that child’s share to the child outright (may require a court-supervised guardianship), **OR**
- \_\_\_ Leave that child’s share in a **trust** for his/her needs, to be managed by the trustee I name as described in the Trust Provisions section below.

(vi) If a **child** of mine is **deceased** at my death with surviving children, I want to:

- \_\_\_ Give my deceased child’s share to my surviving children, **OR**
- \_\_\_ Give my deceased child’s share to his/her children in equal shares

(viii) If I have **no** surviving spouse or children, I want to leave my assets to:

**B. If you are SINGLE, answer each of the following that apply:**

(i) I want to: \_\_\_ Leave everything to my child(ren) in equal shares, **OR**

- \_\_\_ Leave \_\_\_ % or \$ \_\_\_ to \_\_\_\_\_
- \_\_\_ Leave \_\_\_ % or \$ \_\_\_ to \_\_\_\_\_
- \_\_\_ Leave \_\_\_ % or \$ \_\_\_ to \_\_\_\_\_

(ii) If any **child** of mine (or **grandchild** whose parent is deceased) is **under 21** at my death, I want to:

- \_\_\_ Leave that child’s share to the child outright (may require a court-supervised guardianship), **OR**
- \_\_\_ Leave that child’s share to a **trust** for his/her needs, to be managed by the trustee I name as described in the Trust Provisions section below.

(iii) If a **child** of mine is **deceased** at my death with surviving children, I want to:

- \_\_\_ Give my deceased child’s share to my surviving children, **OR**
- \_\_\_ Give my deceased child’s share to his/her children in equal shares

(viii) If I have **no** surviving children, I want to leave my assets to:

C. Other or special provisions: \_\_\_\_\_  
\_\_\_\_\_

10. **Trust Provisions.** You may give assets to someone you name as Trustee to hold and manage for the benefit of a spouse, child or grandchild. The most common types of trusts used are: (a) a *minor's trust*, to hold assets for an underage child or grandchild until that child reaches a certain age; (b) a *“special needs trust”*, to hold and spend assets for a spouse, child or grandchild with a disability in a way that Medicaid and SSI benefits will not be lost; and (c) a *“spendthrift trust”*, to hold assets for a person who may have debts/liabilities that threaten the assets or who may not have the good judgment or ability to effectively have and use the money for him/herself.

A. Do you want the share for any minor child or grandchild to be held in trust for that child / grandchild until they are old enough to receive it? Yes \_\_\_\_\_ No \_\_\_\_\_

- (i) If “Yes”, indicate the types of things you would like the trustee to pay for that child:  
 \_\_\_\_\_ for the child’s general health, education and support, [**OR select from the following**]  
 \_\_\_\_\_ pay medical expenses not covered by other insurance  
 \_\_\_\_\_ pay education expenses, including college / vocational / graduate school  
 \_\_\_\_\_ provide summer trips, camps or other cultural experiences  
 \_\_\_\_\_ purchase a car at certain ages or up to a certain purchase price  
 \_\_\_\_\_ pay a monthly / quarterly income to the child / grandchild starting at age 21 / age \_\_\_\_\_  
 \_\_\_\_\_ other: \_\_\_\_\_

(ii) The trustee must distribute the *principal* of the trust at one or more times in the future.

How would you like the trust to be finally distributed:

- \_\_\_\_\_ distribute all to the child / grandchild at age 21, **OR**
- \_\_\_\_\_ distribute \_\_\_\_\_% at age \_\_\_\_\_, then distribute \_\_\_\_\_% at age \_\_\_\_\_, then distribute \_\_\_\_\_% at age \_\_\_\_\_, then distribute the remaining balance at age \_\_\_\_\_
- \_\_\_\_\_ Other: \_\_\_\_\_

B. Do you want the share for a spendthrift child or grandchild to be held in trust for that child / grandchild? Yes \_\_\_\_\_ No \_\_\_\_\_

- (i) If “Yes”, indicate the types of things you would like the trustee to pay for that person:  
 \_\_\_\_\_ pay medical expenses not covered by other insurance  
 \_\_\_\_\_ pay education expenses, including college / vocational / graduate school  
 \_\_\_\_\_ pay for summer trips, recreation or other cultural experiences  
 \_\_\_\_\_ purchase a home or automobile for the beneficiary (up to a certain purchase price?)

\_\_\_\_\_ pay a monthly / quarterly income to the child / grandchild

\_\_\_\_\_ other: \_\_\_\_\_

(ii) The trustee must distribute the *principal* of the trust at one or more times in the future.

How would you like the trust to be finally distributed:

\_\_\_\_\_ distribute all to the child / grandchild when the trustee determines that s/he becomes able to effectively manage it, **OR**

\_\_\_\_\_ distribute the remaining trust assets to others at the child's / grandchild's death (if this selected, distribute to: \_\_\_\_\_

\_\_\_\_\_ Other: \_\_\_\_\_

C. Do you want the share for a **disabled** spouse or child/grandchild to be held in a special needs trust for that person? Yes \_\_\_\_\_ No \_\_\_\_\_ [Ask for Special Needs Trust Information Form.]

(i) If "Yes", the trustee must distribute the remaining *principal* of the trust at the death of the disabled beneficiary in the future. How would you like the trust to be finally distributed:

\_\_\_\_\_ (if for a **spouse**;) to my surviving children in equal shares, or

Other: \_\_\_\_\_

\_\_\_\_\_ (if for a **child**;) to my remaining children in equal shares, or

Other: \_\_\_\_\_

\_\_\_\_\_ (if for a **grandchild**;) to that grandchild's siblings in equal shares, or

Other: \_\_\_\_\_

**Appointment of Fiduciaries**

11. **Executor.** The person who must marshal and manage your estate assets, pay any taxes due and other debts, and carry out the directions in your will is called your "Executor". You may have more than one ("co-executors") and you should list at least one alternate to serve if the initial executor(s) cease to serve.

First Executor Name(s): \_\_\_\_\_

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

First Alternate Name: \_\_\_\_\_

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

Second Alternate Name: \_\_\_\_\_

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

Third Alternate Name: \_\_\_\_\_

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

The law requires an Executor to file a formal inventory and annual accountings of your estate with the court and to purchase an insurance bond for handling your estate, **unless you waive** these requirements. Do you wish to waive these requirements? Yes \_\_\_\_\_ No \_\_\_\_\_

12. **Guardian.** If your child(ren) are under age 21, identify the person(s) you wish to act as their guardian in the event of your death (in the case of a single parent) or in case of the joint death of you and your spouse (if married).

Name(s): \_\_\_\_\_

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

Relationship (if any): \_\_\_\_\_

If that person is unwilling or unable to serve as guardian, please list an alternate:

Name(s): \_\_\_\_\_

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

Relationship (if any): \_\_\_\_\_

13. **Trustee.** You may select one or more persons or financial institutions as Trustee (or Co-Trustees) of the assets for a minor child or a disabled spouse or child (the “beneficiary”). The Trustee will act as financial custodian and hold and disburse the trust funds for the beneficiary’s needs so long as they are disabled or until the beneficiary reaches certain ages you select. You should obtain the consent of that person or entity before executing your Will. Please list the person(s) or entity you wish to act as the Trustee:

First Trustee Name(s): \_\_\_\_\_

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

First Alternate Name: \_\_\_\_\_

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

Second Alternate Name: \_\_\_\_\_

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

Third Alternate Name: \_\_\_\_\_

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

**Miscellaneous Provisions**

14. **“No Contest” Provision.** Do you wish to include a provision that anyone who contests or challenges your will is to receive nothing? Yes \_\_\_\_\_ No \_\_\_\_\_

15. **Burial Specifics.** Do you wish to specify in your Will (a) where you are to be buried or (b) how you are to be buried (cremated, etc.)? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, specify: \_\_\_\_\_