Keith & Associates, PLLC Estate Planning Questionnaire

The purpose of this Estate Planning Questionnaire is to provide our attorneys with important information to allow them to prepare Wills, Trusts, Powers of Attorney, and other estate planning documents. After you complete this Questionnaire, please call us at 859-261-6800 to schedule a meeting to discuss and review the Questionnaire.

I. Personal and Family Information

Client Informati	ion:			
Full Name:				
Home Address:				
	Street Address			
	City	State	Zip Code	County
Date of Birth: _		Phon	e Number:	
Occupation:			U.S. Citizen: ☐ yes	no
	married previously? ce, please supply a copy of the		s □ no lecree or describe any ongoing o	obligations)
(If yes, please provid	le a copy)	post-ma	arital agreement? yes	□no
Spouse Informa	tion (if applicable):			
Full Name:			ÿ	
Home Address:				
(if different than above)	Street Address			
	City	State	Zip Code	County
Date of Birth:		Phon	e Number:	
Occupation:	1	-	U.S. Citizen: ☐ yes	□no
Have you been r	narried previously?	□ye	s 🔲 no lecree or describe any ongoing o	obligations)
Have you entere		post-ma	arital agreement? yes	□no

Children	S	Informa	ition	(if a	pplica	ble)	:
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If you have children, please state each child's name, sex, date of birth, and relationship:

Full Name	Sex (M/F)	Date of Birth	Relationship (biological, adopted, step)
			A. C.
		1 12 11	
Do any of your children have disabilityes, please describe:	ilities or speci	al needs?	□ yes □ no

If you have any other dependants to consider in your estate plan, please list their names, addresses and relationship below:

II. Estate Planning Objectives

The answers to the following questions will help us determine which estate planning vehicles will best allow you to achieve your estate planning objectives. If you have current wills, trust agreements, powers of attorney, or other estate planning documents, please bring them with you to your appointment.

1. At your death, please describe how you want your property to be distributed:

- a. If your spouse survives you?
- b. If you spouse **does not** survive you and your children survive you? (e.g. equal shares to your children?)
- c. If a child should predecease you, how do you want the predeceased child's share distributed? (e.g. to the deceased child's descendants?)
- d. In the event your spouse and all of your children and descendants fail to survive you, how do you want your property distributed?

2.	If your spouse survives and trust that they will			
3.	In regards to distribute their estate to their ch. Trustee to distribute a percent 5 years later are to retain your children that might be available is appropriate for you trust distributed outright.	ildren at different time a certain percent to you ad the balance 5 years a n's shares in trust for e, and the ages of you ar family. Please state	s; for example, your child at age 25 fter that. Alternate life. Consider the children, to sele	ou might direct your b, then an additional tively, you may wish he amount of assets act a time frame that
4.	Do you want to make a <i>If yes, please describe:</i>	ny charitable gifts at yo	ur death? □yes	no
5.	Do you wish to disinher	rit any of your children	or grandchildren	or other relatives?
	lyes □ no If yes, ple Do you wish to leave	ase elaborate: any items of property	(such as jewelry	or cash) to certain
	persons?	ase complete table below.		
<u>Item</u>		Identifying Feature	Recipient	
		J.		
=				E/A
				*
/		1	E	
7.	Is protecting your asse	ts from creditors a cond	ern? yes	no
8.	Do you expect your as	sets to exceed \$5,000,00	0?	no

9. Please use the following space to note any questions or ideas that may have occurred to you that don't necessarily fit within any of the items mentioned in this Questionnaire.

III. Fiduciaries to Manage your Financial Affairs and Estate

Executors, Guardians, Trustees, and Attorney-In-Fact are referred to as "fiduciaries". Generally a fiduciary is an individual or company entrusted with the safekeeping, management, and administration of your affairs.

1. **Executor** – An Executor is responsible for collecting the assets of your estate, carrying out the direction contained in your will, ensuring that your will is properly probated, and filing any tax returns which may be due. You should consider who might best handle these responsibilities, based upon the nature and complexity of your estate and the qualifications of those you would consider. You should name alternates in case your choice is unable to serve at the time of your death. *Most clients appoint their spouse to serve as first choice. Please state your choices*.

First Choice:			
Second Choice:		¥	:
	(4)		
Third Choice:			

2. Guardian (complete only if you have minor children or anticipate having minor children) - A guardian assumes responsibility for your minor children in the event that both parents die before your children become adults. You should name one or more successor guardians in case the first is unable to serve. The guardian does not have to be the same person who would manage finances for your children. Please consider who might be best able to raise and care for your children. If you choose a married couple to serve together as guardian, consider your wishes in the event they divorce or if one of them dies. Please state your choices.

First Choice:			
Second Choice:	C		
Third Choice:			

3. **Trustee** — The Trustee will be responsible for investing any assets held in trust, preserving such assets for the beneficiaries of the trust, and distributing such assets to the beneficiaries according to the directions contained in any trust agreement which you might execute. When choosing a trustee you should consider their ability to invest and

First Choice: Second Choice: Third Choice: 4. Attorney-In-Fact – Your attorney-in-fact will manage your business and financial affairs during your lifetime (e.g. paying your bills, filing taxes, making investments). The attorney-in-fact operates under either a "Durable Power of Attorney" that takes effect immediately or a "Springing Power of Attorney" that only takes effect if and when you become disabled. When choosing an attorney-in-fact you should consider someone with knowledge of your finances and their ability to manage such. You should name an alternate in the event your first choice is unable to serve. Most clients appoint their spouse to serve as first choice. Please state your choices, First Choice: Second Choice: Third Choice: 5. Agent for Advance Medical Directive – Your agent will be responsible for personal and medical decisions for you if you are incapacitated and cannot do so yourself. You should consider alternates in case your first choice is unable to serve. Most clients appoint their spouse to serve as first choice. Please state your choices. First Choice: Full Name: Address: Street Address Zip Code County State Relationship: Phone Number: **Second Choice:** Full Name: Address: Street Address

manage finances. You should name an alternative in the event your first choice is unable to serve. Most clients appoint their spouse to serve as first choice. Please state your

choices.

City	State	Zip Code	County
Relationship:		Phone Number:	
Third Choice:			
Full Name:			
Address: Street Address			
City	State	Zip Code	County
Relationship:		Phone Number: _	
IV. Assets			
worry about being exact with the fair ma			
vorry about being exact with the fair ma Real Property: Primary Residence:			
vorry about being exact with the fair ma . Real Property: Primary Residence:			
vorry about being exact with the fair ma . Real Property: Primary Residence: Address:	State	Zip Code	County
Norry about being exact with the fair ma Real Property: Primary Residence: Address: Street Address	State □ indiv		County
Norry about being exact with the fair ma Real Property: Primary Residence: Address: Street Address City	State indiv	Zip Code vidual name with spouse r – please describe	County
Norry about being exact with the fair material. Real Property: Primary Residence: Address: Street Address City How is the real estate titled?	State individual joint othe so that we convection p	Zip Code ridual name with spouse r – please describe an confirm title.	County
Norry about being exact with the fair material. Real Property: Primary Residence: Address: Street Address City How is the real estate titled? Please provide copy of the deed Do you have any investment or If yes, please list property address	State individual joint othe so that we convection p	Zip Code ridual name with spouse r – please describe an confirm title.	County
Address: Street Address City How is the real estate titled? Please provide copy of the deed Do you have any investment or	State indiving joint other so that we convacation passes and all	zip Code ridual name with spouse r – please describe an confirm title. roperties?	County

3. Investments:	Identify the type of investment and estimate its value.
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Type (stocks, bank accounts, partnership accounts, personal property, etc.)	Estimated Value	Ownership (individual, joint, ect.)	

4. Retirement Plans: Identify the type as well as its estimated value.

Type (IRA, 401(k), pension, etc.)	Estimated Value	Beneficiary	
	La L		

5. **Other:** Please use the following space to describe any material assets that are not described in the previous categories.