

LAW OFFICES  
**ALISHA L. JACOBSEN**

I am working remotely and  
can consult with clients virtually

www.jacobsenattorney.com  
alisha@jacobsenattorney.com

PHONE 301-424-0677  
FAX 301-340-6947

## CONFIDENTIAL ESTATE PLANNING QUESTIONNAIRE

- All potential clients should complete **Parts A, B, and C.**
- **Part D, Asset Information**, should be completed by potential clients who desire an evaluation of federal and state estate and capital gains tax liability. Generally, this should be completed if your total assets, **including jointly owned property, life insurance, and retirement plans**, exceed \$5M, since that is the current Maryland estate tax trigger.
- If you feel some items do not apply to you, or have questions regarding same, just leave the item blank.
- *Whom may we thank for referring you?* \_\_\_\_\_

---

### PART A. PERSONAL AND FAMILY DATA

Name: \_\_\_\_\_ Date (mm/dd/yyyy): \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Home e-mail: \_\_\_\_\_  
Year Maryland Residence  
Established: \_\_\_\_\_  
Profession/Your title \_\_\_\_\_  
Citizenship: \_\_\_\_\_  
Date of Birth \_\_\_\_\_

#### 1. Your Children (Including those legally adopted):

Name	Birthday M/D/YYYY	Marital Status	Address
_____	_____	<input type="checkbox"/> Married	_____
_____	_____	<input type="checkbox"/> Married	_____
_____	_____	<input type="checkbox"/> Married	_____

**2. Your Prior Marriages (If Applicable)**

Prior Spouse: \_\_\_\_\_

Children of Prior Marriage: \_\_\_\_\_

Date of Prior Marriage: \_\_\_\_\_

Place: \_\_\_\_\_

Date of divorce or death: \_\_\_\_\_

**3. Deceased Children and Their Children:**

Name of Deceased Child

Name of Deceased Child's Son/Daughter

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**4. Your Grandchildren:**

Name of Grandchild

Name of Parent

Date of Birth

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**5. Your Living Parents:**

\_\_\_\_\_

\_\_\_\_\_

**6. Your Brothers and Sisters:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- 7. Do you have a Safe Deposit Box: \_\_\_\_\_
- 8. Who has access to the Safe Deposit Box?
- 9. Do you have a will or have you had a will prepared in the past? Yes  No
- 10. Do you have any medical conditions that affect your decision-making? Yes No

**PART B. WILL PROVISIONS DESIRED BY CLIENT**

- 1. Do you have any special wishes regarding your funeral or burial (e.g., cremation)?

**2. Choosing a Personal Representative**

You will be asked to choose a Personal Representative (otherwise known as an Executor or Executrix) to serve as the person who will deal with your property upon your death. This person should be:

- Over 18 years of age;
- Mentally competent;
- Never been convicted of a serious crime.

Your Personal Representative (P.R.) may be a resident of another state but a qualified in-state resident agent would have to be appointed for service of process. Your P.R. should be mature, honest and financially secure. It is preferable if the individual chosen is younger than you. It is also prudent to also name at least one successor personal representative ("Contingent P.R.") in case the preceding individual is unable or unwilling to serve.

First Choice P.R. \_\_\_\_\_

Contingent P.R. \_\_\_\_\_  
\_\_\_\_\_

**3. Choosing a Guardian for Minor Children**

Until minor children reach age 18, they must have a guardian appointed with respect to both their person and any property they may own individually. Usually the surviving parent is named Guardian of the property (a parent is automatically Guardian of the person). Some other person, preferably a related couple should be named in the alternative in the event neither parent survives. They can serve individually or jointly.

Guardian(s)

---

Successor

Guardian(s)

---

**4. General Disposition Intentions:**

Use full legal names, including any middle names, as they appear on the named individual's birth certificate.

**Bequeathing Property**

You can bequeath your property in total, such as "...all my personal and real property...", or you can make special bequests such as, "I give my antique jewelry to my niece, Jane Smith." However, it is important to fully identify the property bequeathed. You can also divide your property into shares such as, "sixty percent to my sister, Jane Smith, and twenty percent to each of my niece and nephew, Mary Smith and Robert Smith."

**Specific Bequests**

Gifts you wish to pass to individuals before the bulk of your property, for example, a gift of family jewelry, artwork, or cash to an individual.

To:

---

To:

---

To:

---

**Disposition of Residue**

The remainder of your estate (after specific bequests)

To:

---

To:

---

To:

---

**5. Minor Children and Young Adults as Beneficiaries**

Where minor children, or even young adults are named as beneficiaries of the Will, it is recommended that a Testamentary Trust be established in the Will for their benefit. To accomplish this, it is necessary to name a Trustee. This individual should be mature, trustworthy, and financially secure. (This Trustee may, but need not be, the same individual as the Guardian or Personal Representative). However, as a Trustee, the individual chosen should also have some experience in handling money. Again, it would be wise to name a second person if the first named Trustee is unable or unwilling to serve.

**6. Trust Terms**

Where you establish a Trust, you also must decide at what age the beneficiary of the Trust may receive the principal (corpus) of the Trust, and when the Trust is to be terminated. For large amounts, we generally recommend one-third distribution at ages 25, 30, and 35, but this is entirely discretionary with you. Where there are extenuating circumstances, such as a beneficiary with a disability, special arrangements must be made.

7. Do any of your children have special educational, medical or financial needs? (If so, please explain on a separate sheet of paper how you would like to provide for these needs.)

8. Have you made or do you plan on making future gifts in excess of Fifteen Thousand Dollars (\$15,000.00) to one person in any one year?

Yes  No

9. Do you wish to make bequests to a religious organization or other charitable organization?

Yes  No

**10. Trustees for Testamentary Trust, if any (a testamentary trust is a trust set up in the Will that is not created until after death)**

A disinterested party must be appointed as trustee in order to make discretionary decisions regarding distributions without incurring adverse tax consequences. The surviving spouse or other family member may also serve, but would have limited authority.

Trustee(s) \_\_\_\_\_  
Successor  
Trustee(s) \_\_\_\_\_

---

**PART C. POWERS OF ATTORNEY**

Powers of Attorney are often used to authorize someone to act for you under certain legal conditions, especially legal incapacitation. We recommend that you consider executing such power. Whom would you like to name as your agent (and Successor agent) under such power? There are two types of such power — a “Durable General Power of Attorney” and a “Durable Health Care Power of Attorney.” The first power of attorney appoints an agent to act for you in connection with financial matters and to manage assets while the Health Care Power appoints an agent to make health care decisions for you in the event of incapacity.

**1. Durable General Power of Attorney (for financial decision making)**

Name of Attorney-in-Fact \_\_\_\_\_  
Address: \_\_\_\_\_  
Relationship to you: \_\_\_\_\_  
Successor Attorney-in-Fact \_\_\_\_\_  
Address \_\_\_\_\_  
Relationship to you: \_\_\_\_\_

**2. Durable Health Care Power of Attorney (for medical decisions)**

Name of Agent (Attorney-in-Fact) \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Relationship to you: \_\_\_\_\_  
 Successor Agent (Attorney-in-Fact) \_\_\_\_\_  
 Address \_\_\_\_\_  
 Relationship to you: \_\_\_\_\_

**PART D. ASSET INFORMATION (Optional)**

**1. Do you:**

	Yes	No
a) Expect to inherit something from parents or others?	<input type="checkbox"/>	<input type="checkbox"/>
(b) Expect to receive benefits from a retirement plan?	<input type="checkbox"/>	<input type="checkbox"/>
(c) Have powers of appointment?	<input type="checkbox"/>	<input type="checkbox"/>
(d) Expect to receive gifts from parents or others?	<input type="checkbox"/>	<input type="checkbox"/>
(e) Have beneficial interests in trusts?	<input type="checkbox"/>	<input type="checkbox"/>
(f) Have an interest in a business Buy-Sell Agreement?	<input type="checkbox"/>	<input type="checkbox"/>

What is your annual income?

Salary \_\_\_\_\_

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

**2. Real Estate:**

Location and Type	Current Market Value	Cost Basis (Purchase Price)	How Is Title Held? (Joint/Sole by Whom)

**3. Insurance:**

Company and Policy Number	Death Benefit	Approx. Cash Value	Person Insured	Owner	Beneficiary

**4. Cash Accounts:**

Institution	Approximate Balance	In Whose Name(s)?

**5. Securities/Mutual Funds:**

Company	No. of Shares	Orig. Cost	Approx. Market Value	Date of Purchase	In Whose Name?

**6. Approximate Values of Personal Property (vehicles, jewelry, art, collections, other household goods):**

Description	Original Cost	Appx. Fair Market Value

**7. Notes, Retirement Plans, and Other Assets:**

Description	Value

**8. Mortgages and Debts:**

Type and to Whom Owed	Amount