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IF YOU DESIRE, YOU MAY COMPLETE THIS ESTATE PLANNING QUESTIONNAIRE AND PRESENT IT AT OUR FIRST MEETING. THIS IS NOT A MANDATORY FORM, BUT IS PROVIDED FOR CLIENTS NEEDING A WRITTEN QUESTIONNAIRE TO ORGANIZE HIS OR HER THOUGHTS.

ESTATE PLANNING QUESTIONNAIRE

1. Demographic Information

Date _____

Home Telephone _____

Name _____

Business Telephone _____

Address _____

Birthdate _____

Social Security Number _____

Marital Status _____

Your Occupation _____

Spouse's Name _____

Spouse's SSN _____

Spouse's Birthdate _____

2. Family Information

Name	Relationship	Address (if different than yours)	Birthdate
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. **Balance Sheet**

<u>Assets</u>	<u>In Your Name</u>	<u>In Spouse's Name</u>	<u>In Joint Names</u>
Residence			
Cash Accounts			
Business Interests			
Brokerage Accounts			
Stocks & Bonds			
Life Insurance (Face Value)			
Autos & Other Personal Property			
Other			
Pension Accounts			
IRA Accounts			
Liabilities			
Estimated Inheritance			

4. **Income Data**

	<u>Yours</u>	<u>Spouse's</u>	<u>Jointly</u>
Salary (plus bonus)			
Interest & Dividends			
Other			

5. Potential Individual & Charitable Beneficiaries

Identify all potential beneficiaries of your estate (i.e., children, grandchildren, other persons, charities) and insert dollar bequest or percentage of estate for each beneficiary.

NOTE: Listing a person in this section is not the final decision of whether your estate planning documents will include such beneficiary, but is simply a means of identifying beneficiaries for discussion purposes.

Name of Beneficiary	Relationship	Dollar Gift	Percentage Gift
		\$ _____	____%
		\$ _____	____%
		\$ _____	____%
		\$ _____	____%
		\$ _____	____%
		\$ _____	____%
		\$ _____	____%
		\$ _____	____%
		\$ _____	____%
		\$ _____	____%
		\$ _____	____%
		\$ _____	____%
		\$ _____	____%

6. Common Drafting Questions (Complete if Applicable)

- A. **Special family needs (parent or child support, special education, physical or medical handicap):**
- B. **Are you or any member of your immediate family a beneficiary or trustee of any trust?**
Yes ___ No ___
- C. **Are you (and your spouse) U.S. citizens?**
Yes ___ No ___
- D. **At what ages should your children receive their inheritance (i.e., 1/3 at ages 25, 30, 35; 1/2 at ages 25, 30 etc.)**
- E. **Would you consider leaving your children's inheritance permanently in trust (i.e., "Dynasty Trust") in order to provide heightened asset protection and possibly mitigate estate taxes upon their death?**
- F. **If you have grandchildren, do you wish to segment part of your wealth for their benefit (such as an educational trust)?**
Yes ___ No ___
- G. **If your entire immediate family was wiped out (you, spouse, children and grandchildren) to whom would you leave your inheritance to?**
- H. **Who will act as a fiduciary with respect to your estate plan (i.e., trustee under trust; executor under will; agent under property power of attorney; agent under health care power of attorney)? Please name at least two successors (in addition to your spouse if you are married).**

NOTE: If your are not sure of your fiduciaries, leave this section blank as this matter will be thoroughly discussed during the interview process.

Trustee _____

Executor _____

Guardian

Agent (Property POA)

Agent (Health POA)

7. Concerns & Anxieties

**PLEASE RANK EACH CONCERN ON A SCALE OF 0-5
(0 = No concern; 5 = High concern)**

TAX CONCERNS

RANKING (0-5)

Risk of the IRS “inheriting” you money

Risk of capital gain taxes upon the sale of property

Risk of unnecessary income taxes

FAMILY CONCERNS

Risk that you may die first and your spouse will disinherit your beneficiaries

Risk that you or a beneficiary will lose assets to creditors, lawsuits or to a divorcing spouse

Risk that an inheritance passing to a beneficiary may be squandered by that beneficiary

Risk that an inheritance received by a beneficiary who has a disability would make them ineligible for governmental benefits

Risk of litigation from persons who receive less than they think they are entitled to under your estate plan

Risk of private matters unnecessarily being made public

DISABILITY CONCERNS

Risk of losing control of your assets if you become disabled

Risk of “heroic” medical measures to save your life

Risk of losing your assets to a nursing home.
