IMPORTANT: IF YOU ARE FILLING THIS FORM OUT ON YOUR COMPUTER YOU NEED TO SAVE A COPY OF THE FORM TO YOUR COMPUTER PRIOR TO FILLING OUT ANY INFORMATION AND THEN SAVE AGAIN PRIOR TO ATTACHING TO YOUR EMAIL. CHANGES WILL NOT BE SAVED UNLESS THE FORM IS SAVED FIRST.

ESTATE PLANNING QUESTIONNAIRE

This organizer will assist us in designing an estate plan that meets your goals. Please return the completed worksheet to our office at least a week before your appointment.

To Send by Mail:
Little Law Office, LLC
15530 East Broncos Parkway Suite 300
Centennial, CO 80112

To Send by Fax:
(303) 379-7405

To Send as an email attachment:
admin@littlelawoffices.com

ALL INFORMATION PROVIDED IS STRICLTY CONFIDENTIAL

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YOUR GOALS AND OBJECTIVES

It is important as your attorney to understand what prompted you to schedule this appointment. What is most important to you? What concerns raise above the others? Try not to focus on the need for a tool (will, trust, etc.) but rather the outcomes and goals to be achieved.

GOALS:	CONSEQUENCES IF GOAL ISN'T ACHIEVED:
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

CONCERNS:
Please rate the following in importance to you (HIGH, SOME, OR NO CONCERN) as it applies to you at this time:

Tax Concerns

Estate Taxes. We've heard that estate taxes can be as high as 50% of the value of my assets. We'd like to know how to reduce or eliminate any estate tax liability I might have.

High [◯] Some [◯] No Concern [◯]

Capital Gains Taxes. We have an asset that we're thinking about selling and we'd like to know how we might reduce or eliminate any capital gains taxes that we might owe.

High [◯] Some [◯] No Concern [◯]

Income Taxes. We have significant income from investment assets and we'd like to know if there is any way to reduce or eliminate the amount of income taxes we pay.

High [◯] Some [◯] No Concern [◯]

Interest Expense. We pay quite a bit of interest on business and/or personal loans or lines of credit and would like to know if we could reduce the amount of interest we pay.

High [◯] Some [◯] No Concern [◯]

Taxes on Retirement Plans. We have a large IRA and /or 401K. We know these assets will be subject to both income tax and estate tax at death. We would like to know how to reduce the 70-90% tax burden on these accounts.

High [◯] Some [◯] No Concern [◯]

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Family Concerns

Custodian of Minor Children. We're concerned that if either of us were to die, our children will be placed in the custody of someone other than whom we select.

High [◯] Some [◯] No Concern [◯]

Beneficiaries' Creditors. We're concerned that our children or other beneficiaries will lose any family wealth we might leave to them to their creditors, lawsuits, or divorcing spouses.

High [◯] Some [◯] No Concern [◯]

Fiscal Immaturity. We're concerned that our children or other beneficiaries will lose any family wealth we might leave to them due to their mismanagement of the money.

High [◯] Some [◯] No Concern [◯]

Children-In-Law. We're concerned about what might happen if a son-in-law or daughter-in-law ever got control over any inheritance we might leave to our children.

High [◯] Some [◯] No Concern [◯]

Mismanagement. We're concerned that the person(s) in charge of managing our children's or grandchildren's inheritance might squander or mismanage the funds.

High [◯] Some [◯] No Concern [◯]

Grandchildren's Education. We're concerned that our children might not provide for our grandchildren's education which is very important to us.

High [◯] Some [◯] No Concern [◯]

Risk of Making Beneficiary Ineligible for Governmental Benefits. We have a beneficiary whom we'd like to benefit in our estate planning who is currently receiving governmental benefits. We are concerned about loss of eligibility if they inherit assets.

High [◯] Some [◯] No Concern [◯]

Spousal Control of My Assets if I Pass First. We would like to know that when one of us passes, our assets are available to the other, but that upon the survivor's death, the assets pass to our children or other beneficiaries. We would not, for example, want our assets to pass to a future spouse or to any other individual who might influence a spouse/partner.

High [◯] Some [◯] No Concern [◯]

Family Disputes. We are concerned about our beneficiaries commencing lawsuits against each other because they feel that they've received less than they should have received.

High [◯] Some [◯] No Concern [◯]

Hard-to-Divide Assets. Our assets are comprised significantly because one or more assets are not easily divisible (such as an operating business) and we're concerned that disputes will arise relating to how the assets might be divided.

High [◯] Some [◯] No Concern [◯]

Values & Virtues. We're concerned that the inheritance we leave to our beneficiaries might prevent them from being productive citizens and would like to take the necessary steps to prevent that from happening.

High [◯] Some [◯] No Concern [◯]

Planning for Parents. We're concerned that our parents will need financial assistance if we were to die prematurely.

High [◯] Some [◯] No Concern [◯]

Disability Concerns

Guardianship. We're concerned that if we were to become disabled, a guardian would be required so that someone would have the legal ability to make health care and financial decisions for me.

High [◯] Some [◯] No Concern [◯]

HIPAA. Our current planning does not reflect the HIPAA privacy rule. We are concerned that if something happened to either of us, health care personnel might not disclose information about us to our loved ones.

High [◯] Some [◯] No Concern [◯]

Disability of Single, Adult Children. We're concerned that if a single, adult child of ours becomes disabled, that we would not have the legal ability to make decisions for that child or be informed about that child's health situation due to HIPAA privacy rules.

High [◯] Some [◯] No Concern [◯]

Independence. We're concerned that a long-term disability or the challenges of aging will create an unnecessary burden on our family and/or friends.

High [◯] Some [◯] No Concern [◯]

Creditor Concerns

Frivolous Lawsuits. We're concerned about our assets being taken through frivolous lawsuits.

High [◯] Some [◯] No Concern [◯]

Nursing Home. We're concerned about our assets being lost to the nursing home.

High [◯] Some [◯] No Concern [◯]

Creditors of Jointly Owned Property. We have property owned as joint tenants with someone other than our spouse and we're concerned that a creditor of that other person could take the entire property.

High [◯] Some [◯] No Concern [◯]

Post-Death Concerns

Probate. We're concerned about the unnecessary delays and costs that each of our estates will incur if our assets pass via a probate proceeding.

High [◯] Some [◯] No Concern [◯]

Liability of Executor. We're concerned that the person we've named as one of our executors might be sued by an heir because the Executor did not understand what duties were required of them and what liability they take on for serving as executor.

High [◯] Some [◯] No Concern [◯]

Fire Sale. We're concerned about our assets having to be sold in a "fire sale" to pay estate taxes or to pay debts that we owe.

High [◯] Some [◯] No Concern [◯]

Privacy. We're concerned that personal matters involving family or finance will become public knowledge.

High [◯] Some [◯] No Concern [◯]

Business Concerns (if you own a business)

Validity of Corporate Shield. We own a corporation or limited liability company and we're concerned that our personal assets may still be exposed to liabilities of the company because we've not held company meetings annually, kept minutes, elected officers, etc.

High [◯] Some [◯] No Concern [◯]

Employee Lawsuits. We're concerned that employees might sue because of an out-of-date or non existent employee agreements.

High [◯] Some [◯] No Concern [◯]

Business Succession Plan #1. We're concerned that our company might falter if either were to die unexpectedly because we don't currently have a business succession plan.

High [◯] Some [◯] No Concern [◯]

Business Succession Plan #2. We're concerned that we may pay too much tax when we ultimately sell or transfer ownership of the company.

High [◯] Some [◯] No Concern [◯]

Out-of-Date Buy-Sell Agreement. We have a buy-sell agreement with the other owners of the company in which we're involved but we have no idea if it's up-to-date or if the company will have to funds to buy out our interest if either of us were to die.

High [◯] Some [◯] No Concern [◯]

Pension Alternatives #1. We're concerned that the company's retirement or pension plan(s) may not be structured to maximize benefits for me and/or my employees.

High [◯] Some [◯] No Concern [◯]

Pension Alternatives #2. We're concerned that the company's current pension plan does not produce competitive returns or is administered at less than acceptable standards.

High [◯] Some [◯] No Concern [◯]

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Financial Concerns:

Standard of Living. We're concerned that neither of us might not be able to maintain our current standard of living during retirement.

High [◯] Some [◯] No Concern [◯]

Exhaustion of Assets During Disability. We're concerned our assets might be completely consumed to pay for our care in the event of a disability.

High [◯] Some [◯] No Concern [◯]

Investment Allocation #1. We're concerned that our investment portfolio may not have an overall design or strategy to support our goals.

High [◯] Some [◯] No Concern [◯]

Investment Allocation #2. We're concerned that our portfolio might experience an ananticipated loss or volatility that would potentially affect our goals.

High [◯] Some [◯] No Concern [◯]

Investment Allocation #3. We're concerned that our portfolio might not include strategies that would potentially increase our rate-of-return.

High [◯] Some [◯] No Concern [◯]

Fees and Commissions #1. We're concerned that we do not understand the fees or commissions charged for investment or insurance programs.

High [◯] Some [◯] No Concern [◯]

Fees and Commissions #2. We are concerned that we are being overcharged for the financial services or products we own or are recommended to purchase.

High [◯] Some [◯] No Concern [◯]

Fees and Commissions #3. We are concerned that financial services or products are recommended with less than total objectivity.

High [◯] Some [◯] No Concern [◯]

Financial Review. We're concerned that our financial advisor may not monitor or review our investments and insurance for timely recommendations to support our goals.

High [◯] Some [◯] No Concern [◯]

Communication. We are concerned that our financial advisor doesn't keep us informed on a regular basis.

High [◯] Some [◯] No Concern [◯]

Giving Concerns

Loss of Privacy. We're concerned that giving to an organization either now or in the future may compromise our privacy.

High [◯] Some [◯] No Concern [◯]

Support. We're concerned that those individuals or organizations that currently rely on our financial support will also require this in the future and/or after our deaths.

High [◯] Some [◯] No Concern [◯]

Strategic Giving. We're concerned that we may not be aware of all of the possible ways we can financially support our favorite charities without placing our family at an economic disadvantage.

High [◯] Some [◯] No Concern [◯]

Final Distributions. We're concerned that too much money at either of our deaths will go to the government rather than family or charity.

High [◯] Some [◯] No Concern [◯]

Spiritual/Personal Values and Concerns

Legacy. We're concerned about the legacy we leave behind for our family both financially and spiritually. Our goal is our passing is to be as positive and helpful to our family as we can.

High [◯] Some [◯] No Concern [◯]

Faith and Medical. We're interested in learning more about faith-specific medical directives.

High [◯] Some [◯] No Concern [◯]

Memorials. We would like to leave thoughts and guidelines for how our family and friends can observe each of our passings.

High [◯] Some [◯] No Concern [◯]

Other Concerns (Please list below):

_____

_____

_____

_____

_____

_____

_____

_____

_____

I. GENERAL INFORMATION

Who can we thank for referring you to us?_____

	HUSBAND	WIFE
1. Full legal name:	_____	_____
2. Name as listed on property deed:	_____	_____
3. Other names known by, if any: (maiden name, etc.)	_____	_____
4. Date of birth:	_____	_____
5. Date of Death: (* if spouse has passed)	_____	_____
6. Last 4 digits of Social Security Number:	_____	_____
7. Home telephone number:	_____	_____
8. Cell telephone number:	_____	_____

Do you want us to text you? Yes [ ] No [ ]

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	HUSBAND	WIFE
9. Home mailing address:		
County of Residence:		
10. E-mail address:		
11. Citizenship:		
12. Other states previously resided in:		
13. Have you made a will signed a trust, powers of attorney, or other estate planning documents before?*		
14. Have you entered into a pre- or post-nuptial agreement?*		
15. Have you been married before?*		
a. Date of Current Marriage		
b. Previously Married?		
Notes:		

16. Names of children & birthdays

Child 1. Name/Birthday		
Does this child have children? Names/birthdays: H [◯] W [◯] Both [◯]		
Child 2. Name/Birthday		
Does this child have children? Names/birthdays: H [◯] W [◯] Both [◯]		

	HUSBAND	WIFE
Child 3. Name/Birthday		
Does this child have children?		
Names/birthdays:		
H [◯] W [◯] Both [◯]		
Child 4. Name/Birthday:		
Does this child have children?		
Names/birthdays:		
H [◯] W [◯] Both [◯]		
Child 5. Name/Birthday:		
Does this child have children?		
Names/birthdays:		
H [◯] W [◯] Both [◯]		
Child 6. Name/Birthday:		
Does this child have children?		
Names/birthdays:		
H [◯] W [◯] Both [◯]		

Anything you would like us to know about your children? (creditor issues, responsibility concerns, spousal issues, lawsuits or legal issues or other concerns)
Please describe below:

_____

_____

_____

_____

_____

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	HUSBAND	WIFE
17. Are you receiving Social Security, Disability or Governmental benefits? *	_____	_____
18. Are you making payments Pursuant to a divorce or Property Settlement Order? *	_____	_____
19. Have you ever made a gift in excess of $10,000? * attach gift tax forms	_____	_____
20. Do you anticipate receiving an inheritance? Approximate size?	_____	_____
21. Are you a trust beneficiary?*	_____	_____
22. Do you own property located in another state?	_____	_____

* If you answered "yes" to any of these questions, please bring a copy of the prior will, nuptial agreement, separation agreement, decree of dissolution, trust agreement, tax forms or other applicable document with you to our initial meeting.

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II. BENEFICIARIES

When we meet to discuss your estate planning, I will review with you in detail the various ways property can be distributed upon your death. For now, however, please list the names of the persons, groups of persons, or entities (including charitable organizations) that you would like to benefit from your estate upon your death or upon the death of the surviving spouse.

23. Specific beneficiaries. List the persons or entities to which you wish to make gifts of cash or real property upon your death.

HUSBAND	WIFE

24. Residuary beneficiaries. List the persons, or entities to which you wish to leave the remainder of your estate after specific bequests are made.

25. Contingent beneficiaries. If none of the residuary beneficiaries is living or is in existence at the time of your death, to whom or to what entities do you want your estate to pass?

III. CHARITABLE BENEFICIARIES

Some of our clients desire to direct a portion of their estate toward charities or other non-profit organizations. Whether it is your church, college, club or favorite philanthropy, you may wish to do the same. Take a moment to consider whether you might include a charity in your bequests, and write their information below for further discussion with your attorney.

NAME OF THE CHARITY/ INFORMATION

_____

_____

_____

_____

IV. ADVISORS

Your advisors play a key role in your comprehensive estate plan. We can coordinate with them as much or as little as you would prefer.

Tax Advisor/CPA/EP _____ Phone:_____

Life Insurance Agent _____ Phone:_____

Financial Advisor _____ Phone:_____

Stock Broker _____ Phone:_____

Banker _____ Phone:_____

V. FIDUCIARIES

In the course of your estate planning, you will be required to select fiduciaries, which are individuals or entities entrusted to act on your behalf in some capacity, such as to administer assets of your estate upon your death, to administer trust assets on behalf of beneficiaries, to make health care decisions for you if you are unable to make those decisions yourself, or to take care of your minor children in the event that you are unable to do so. Below, I have asked you to supply names and addresses for the persons whom you have selected for such fiduciary positions. In addition, please list the appointed fiduciary's relationship to you. When choosing a fiduciary, please note that it is often appropriate for a surviving spouse to act in such capacity and that you can name more than one person to act as a fiduciary. If you are having trouble choosing fiduciaries, feel free to skip over this section. I will go over each fiduciary position in detail when we meet to discuss your estate planning.

Personal representative: Often called an "executor," a personal representative has broad powers to administer and distribute your property after your death.

	HUSBAND	WIFE
26. Personal representative:	_____	_____
	_____	_____
	_____	_____
27. Successor personal	_____	_____
representative:	_____	_____
	_____	_____

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Trustee: A trustee is a person or entity who administers and distributes property held in a trust. A trust may be established under your will for a variety of purposes such as for tax purposes or for the purpose of administering property that would otherwise pass outright to minor children.

	HUSBAND	WIFE
28. Proposed trustee:	_____	_____
	_____	_____
	_____	_____
29. Successor trustee:	_____	_____
	_____	_____
	_____	_____

Guardian: A guardian is a court approved individual who makes decisions regarding a minor child's support, care, education, health, and welfare.

30. Guardian:	_____	_____
	_____	_____
	_____	_____
31. Successor guardian:	_____	_____
	_____	_____
	_____	_____

Conservator/Guardian: A court appointed person to take care of you during periods of your own incapacity. Conservator will make decisions regarding your finances, Guardian will take care of your physical person.

32. Conservator/Guardian	_____	_____
during incapacity:	_____	_____
	_____	_____

Agent with financial power of attorney: An agent with financial power of attorney is a person authorized to make financial decisions for you during your life. The power of attorney document can authorize your agent to assist you in making those decisions for yourself while you have capacity or to make those decisions for you in the event that you are incapacitated.

	HUSBAND	WIFE
33. Agent with financial power of attorney:	_____	_____
	_____	_____
	_____	_____
34. Successor agent with financial power of attorney:	_____	_____
	_____	_____

Agent with medical power of attorney: An agent with medical power of attorney is a person authorized to make medical and healthcare decisions for you during your life. The power of attorney document can authorize your agent to assist you in making those decisions for yourself while you have capacity or to make those decisions for you in the event that you are incapacitated.

35. Agent with medical power of attorney:	_____	_____
	_____	_____
36. Successor agent with medical power of attorney:	_____	_____
	_____	_____

Do You Want Life-Sustaining Treatment if you are found to be in a terminal condition?

_____ _____

Specific Information You Would Like Us To Know regarding Life Sustaining Treatment?

_____

Do You Have Specific Spiritual Needs That You Would Like Considered In Your Medical Documents?

_____

Any Other Medical Information You Would Like Us To Know?

_____

VI. ASSETS

Please list the value of the following assets owned by you, by your partner, or jointly. It is not necessary to provide the exact value of each asset; an approximation or average balance is sufficient. If you have any questions about the information requested below, please feel free to make a note and I will discuss it with you in detail when we meet.

	HUSBAND	WIFE	JOINT
37. Cash			
38. Checking Accounts			
39. Savings Accounts			
40. CDs			
41. Money Market Funds			
42. Stocks & Stock Funds			
43. Taxable Bonds/Bond Funds			
44. Retirement Funds			
Beneficiaries:			
45. 401(k) Plans			
Beneficiaries:			

	HUSBAND	WIFE	JOINT
46. IRAs			
Beneficiaries:			
47. Keoghs			
Beneficiaries:			
48. Annuities			
Beneficiaries:			
49. Primary Residence			
50. Secondary Residence			
51. Other Real Estate			
52. Copyrights, Royalties, Patents, Trademarks, and other Tangible Rights			
53. Life Insurance			
Beneficiaries:			
54. Long-term Care Insurance:			
55. Motor Vehicles			
56. Boats			
57. Aircraft			
58. Sports and Hobby Equipment			

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	HUSBAND	WIFE	JOINT
59. Household Possessions (Antiques, artwork, jewelry, collections, etc.)	_____	_____	_____
60. Interests in Trusts	_____	_____	_____
61. Family Business	_____	_____	_____
62. Other Business Interests	_____	_____	_____
63. Property subject to a power of appointment	_____	_____	_____
64. Other	_____	_____	_____
TOTAL ASSETS	_____	_____	_____

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	HUSBAND	WIFE	JOINT
V. LIABILITIES			
65. Real Estate Mortgage	_____	_____	_____
66. Auto Loans	_____	_____	_____
67. Business Loans	_____	_____	_____
68. Educational Loans	_____	_____	_____
69. Other Long-term Debt	_____	_____	_____
70. Credit Card Debt	_____	_____	_____
71. Personal Loans	_____	_____	_____
72. Other Short-term Debt	_____	_____	_____
TOTAL LIABILITIES	_____	_____	_____

Anything Else You Would Like Us To Know?

_____

_____

_____

_____

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