

Law Offices of Jeffrey B. Kahn, P.A.

www.kahntaxattorney.com

Jeffrey B. Kahn, LL.M.(Tax)
Board Certified Tax Law

E-mail: jkahn@attorney-cpa.com

Coral Springs Office:
3300 University Drive, Suite 711
Coral Springs, Florida 33065
Telephone: 954-757-6100 Facsimile: 954-757-6110

Boynton Beach Office:
2500 Quantum Lakes Drive, Suite 203
Boynton Beach, Florida 33426
Telephone: 561-853-2103 Facsimile: 561-853-2199

ESTATE PLANNING QUESTIONNAIRE

In order to aid our analysis of your estate, please complete this questionnaire and submit it to our office along with a copy of all Wills and Trusts currently in force.

Your Name: _____ Social Security Number: _____

Birthdate: _____ Occupation: _____ Daytime Telephone Number: _____

U.S. Citizen (Yes/No) Divorces/Previous Marriages: _____

Spouse's Name: _____ Social Security Number: _____

Birthdate: _____ Occupation: _____ Daytime Telephone Number: _____

U.S. Citizen (Yes/No) Divorces/Previous Marriages: _____

Address: _____ City: _____ State: _____

Zip Code: _____ Home Telephone Number: _____

How Long At Present Address: _____ Previous Address: _____

State of Domicile: _____ Date & Place of Marriage: _____

CHILDREN

Name	Address (if different from your residence)	Birthdate	Special Circumstances

OTHER ISSUES AND RELATIONS

Name	Address (if different from your residence)	Birthdate	Relation

OTHER BENEFICIARIES

Name	Address (if different from your residence)	Birthdate	Relation

PROFESSIONALS(include address and telephone number)

Accountant: _____

Investment Advisors: _____

Please answer YES or NO to the following questions:

Do you or your spouse lack a Will executed in Florida?	
Value of you and your spouse's estate greater than \$1,500,000?	
Either spouse own any interest in a closely-held business?	
Either spouse own real estate located outside of Florida?	
Do you or your spouse own assets in one name only without any "in trust for" or other beneficiary designation?	
Does either spouse own life insurance or annuities?	
Does either spouse participate in a pension plan or IRA?	
Do you and your spouse differ as to the ultimate disposition of the estate?	
Do you or your spouse have children from a prior marriage?	
Any children or other heirs of either estate that are minors?	
Either spouse concerned over the ability of any heir to adequately manage his or her inheritance?	
Either spouse desire to disinherit a child?	
Does any family member have creditor problems, disability, history of substance abuse or pending divorce?	
Does either spouse desire to accumulate funds for retirement?	
Does either spouse desire to accumulate funds for any family member's college education?	
Has either spouse been diagnosed or currently suffers from a condition that contributes to the incompetency or the decline of said spouse's life expectancy?	
Is either spouse responsible for an elderly or disabled family member's care?	
For any Wills executed by either spouse, has your underlying facts and circumstances changed since their execution?	

Does either spouse lack a Living Will?	
Either spouse wish to make charitable or anatomical gifts?	
Does either spouse wish to qualify for Medicaid?	
Is either spouse not a U.S. citizen?	
Is either spouse concerned over any creditor exposure of their assets including assets jointly held with non-spouses?	
Is either spouse concerned about the surviving spouse's ability to manage the estate or prospect to remarry?	

FIDUCIARIES
(Who will administer your estate?)

	Husband	Wife
Personal Representative		
Successor Personal Representative		
Trustee		
Successor Trustee		
Alternate Successor Trustee		
Guardian of Minor Children		

DIVISION OF ESTATE

Husband's Assets to: _____

Husband's Specific Bequests/Devises _____

Wife's Assets to: _____

Wife's Specific Bequests/Devises _____

ANNUITIES

Description	Owner	Beneficiary Designations	Value
Total Net Value:			

RETIREMENT ACCOUNTS

Description	Owner	Beneficiary Designations	Value
Total Net Value:			

LIFE INSURANCE

Insurance Company/ Type of Policy (Term, Universal, etc.)	Owner	Beneficiary Designations	Death Benefit	Net Cash Surrender Value
Total Net Value:				

INTERESTS IN CLOSELY HELD OR FAMILY OWNED BUSINESS

Description	Ownership	Value
Total Net Value:		

OTHER ASSETS

(Loans Receivable, Vehicles, Artwork, Collectibles and Other Tangible Personal Property)

Description	Ownership	Net Value
Total Net Value:		

TOTAL NET VALUE OF ESTATE: \$ _____

ASSETS NOT OWNED BY YOU BUT SUBJECT TO POWER OF APPOINTMENT HELD BY YOU

Description of Assets	How Assets Held & Date Power Acquired	Value