CONFIDENTIAL

ESTATE PLANNING QUESTIONNAIRE

for
[Names]

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We are pleased that you have asked us to prepare your estate plan. To start the process, we would ask that you complete this form to the best of your ability, and bring it with you to our first meeting.

We have found that when clients take the time to compile the information on this Questionnaire and to think about how they want to leave their estates, the initial meeting time can be spent very productively.

The Questionnaire has three parts. Part I asks for general information. Part II pertains to the current values and ownership of your property. Part III asks some basic question about who you want to handle your affairs in the event of death or disability, and how you want to leave your property at death. If you are uncertain about how to respond to a particular question, simply note that fact and we can discuss it at the first meeting.

If you need help in putting together any financial information, we will be happy to assist you.

Please be assured that all the information you provide me with will be held in strict confidence.

We look forward to working with you to help you achieve your estate planning goals.

DOCUMENTS TO BE BROUGHT TO THE FIRST MEETING

Please bring with you to the first meeting any of the following documents that may be available to you (copies are acceptable):

- Any existing wills, trust instruments, powers of attorney, or "living wills" signed by either spouse.
- Current beneficiary designations of life insurance policies and annuity contracts.
- Current beneficiary designations of qualified retirement plans and retirement accounts (IRA and Keogh accounts) in which you are a participant.
- All federal gift tax returns (Form 709) previously filed.
- If applicable, any pre-nuptial or post-nuptial agreement which you have signed, and any property settlement agreement or divorce decree relating to either spouse.

PART I

GENERAL CLIENT INFORMATION

FIRST SPOUSE:	
Name	
Other Names Used on T	itle to Assets:
Social Security No.	
Home Address	
Home Telephone	
Occupation	
Employer	
Position	
Business Address	
Business Phone	
E-Mail Address	
Date and Place of Birth	
Citizenship	
SECOND SPOUSE:	
Name	
Other Names Used on Ti	tle to Assets:
Other rames osed on 11	no to Assets.
Social Security No.	
Home Address	
Home Telephone	
Occupation	
Employer	
Position	
Business Address	
Business Phone	
E-Mail Address	
Date and Place of Birth	
Citizenship	

YOUR CHILDREN:				
<u>Names</u>	Date of Birth	Occupation	Marital <u>Status</u>	Number of Own Children
Do any of your children	have a disabilit	y or special needs?	If yes, please ex	plain:
YOUR ADVISORS:	<u>Name</u>			Telephone No.
Accountant				
Life Insurance Agent				
Investment Advisor				
Other Attorney				
Physician				
Other Consultant or Advisor				

PART II

ASSETS AND LIABILITIES

Note: Please use worksheets on pages 8-10 to list specific assets in each of the applicable categories, and enter totals on this page:

DESCRIPTION OF ASSET

SUMMARY OF VALUES

	Owned <u>Husband</u>	Solely By: <u>Wife</u>	Jointly Owned	
Primary Residence (Worksheet, Part A)	\$	\$	\$	
Second Homes (Worksheet, Part A)				
Investment Real Estate (Worksheet, Part A)				
Listed Stocks, Mutual Funds, Securities (Worksheet, Part B)				
Bonds and Bond Funds (Tax-exempt and taxable) (Worksheet, Part B)				
Cash, C.D.'s, Bank Accounts and Money Market Funds (Worksheet, Part C)				
Professions or Businesses in which you are active (Worksheet, Part D)				
Other Closely Held Businesses (in which you are not active)				

(Worksheet, Part D)			
Annuities			
(Worksheet, Part D)			
Home Furnishings/Collections			
(Worksheet, Part D)			
Automobiles			
(Worksheet, Part D)			
Other Tangible Personal Property			
(Worksheet, Part D)			
Miscellaneous Assets			
(Identify if significant)			
(Worksheet, Part D)			
SUBTOTAL:	\$	\$	\$
SOBTOTAL.	Ψ	Ψ	Ψ
Retirement Plans			
(including IRAs)			
(Worksheet, Part E)			
Life Insurance on Your life			
(Worksheet, Part F)			
(survivor)			
SUBTOTAL:	\$	\$	\$
TOTAL ASSETS:	\$	\$	\$
TOTAL ASSETS.	Φ	Φ	Φ
TOTAL LIABILITIES:	\$	\$	\$
(Worksheet, Part G)			
TOTAL NET ASSETS:	\$	\$	\$

WORKSHEETS

		WC	<u>ORKSHEETS</u>	
PART	A REALE	<u>STATE</u>		
	Location	When Acquired	Cost or Other Basi	S Current Value
1.				
2.				
3.				
<u>PART</u>	B STOCKS	, MUTUAL FUNDS, S	SECURITIES, AND BOND	O FUNDS
	Company	No. of Shares or Unit	<u>Cost or Other Basis</u>	Current Value
1.				
2.				
3.				
PART	C CASH, C	C.D.'s, BANK ACCOU	INTS AND MONEY MAR	KET FUNDS
	Type of Ir	nvestment	Name of Financial Institution Where Held	Current Value
1.				
2.				

3.

PART D -- TANGIBLE PERSONAL PROPERTY AND OTHER ASSETS

Description Current V 1.			t Value	
2.				
3.				
4.				
PART E RETIREMENT	<u>PLANS</u>			
	Pension	Profit-Sharing	<u>IRA</u>	Keogh
FIRST SPOUSE'S PLANS: Name of Beneficiary				
Payment Option Chosen (lump sum, annuity, etc.)				
Present Value of Benefit (including life insurance)				
SECOND SPOUSE'S PLAN Name of Beneficiary	<u>IS</u> :			
Payment Option Chosen (lump sum,				
annuity, etc.) Present Value of Benefit				

(including life insurance)

PART F -- LIFE INSURANCE

	Name of Insurance Co.	Policy <u>Number</u>	Type of Policy	Face Amou		resent Cash <u>Value</u>	Name of Primary Bene.
1.							
2.							
3.							
4.							
<u>PAl</u>	RT G MORTG	AGES AND C	OTHER DE	<u>BTS</u>			
			Debt 7	#1 <u>Del</u>	ot #2	Debt #3	Debt #4
Nar	ne of Mortgagee/0	Creditor					
Pres	sent Balance of D	ebt					
	cription of Assets cumbered (if any)						
(ind "no wife	sonal Liability? licate "yes" or ", and husband (H e (W) or joint (J) here is personal lia						

MISCELLANEOUS ASSET AND LIABILITIES INFORMATION

- 1. Have either of you guaranteed an obligation of a business or of another person? If so, provide details.
- 2. Are either or both of you involved in any pending or threatened litigation which may result in a money judgment being entered against you? Has a money judgment or award been entered against either of you that remains unpaid? If so, please provide details.
- 3. Do either of you own any property jointly with someone other than your spouse? If so, identify the asset and the extent of your contribution to its acquisition.
- 4. Have you created any "in trust for," "PUGMA" (Pa. Gift to Minors' Act) or "PUTMA" (Pa. Transfers to Minors' Act) accounts for anyone? If so, give details.
- 5. Has either spouse made any gifts (outright or in trust) exceeding \$10,000 per year to any person, or filed a federal gift tax return?
- 6. To your knowledge, has either spouse been given a power of appointment or a beneficial interest under a will or trust instrument created by someone else?
- 7. Does either spouse expect to receive a significant inheritance in the future?
- 8. Is either of you a party to a buy-sell agreement, stock option plan, salary continuation plan, or deferred compensation plan in connection with your business or employment?
- 9. Do you own a life insurance policy on someone else's life? If so, give details.
- 10. Do you own a safe deposit box? If so, where is it located, and in what name or names is it titled?

PART III

ESTATE PLANNING GOALS

A. Lifetime Planning

If you become <u>incapacitated</u> during your lifetime
Whom would you want to handle your <u>property</u> and <u>business affairs</u> for you?
Name(s):
If that person could not serve, who should be their backup(s)?
Name(s):
Who would you want to handle your <u>personal needs</u> and <u>medical treatment decisions</u> ?
Name(s):
Who would be the backup?
Name(s):
B. Post-Death Planning
WHEN THE FIRST SPOUSE DIES:
Who do you want to be the Executor(s) of this estate?
Name(s):
Who should be the backup Executor?
Name(s):

In addition to the surviving spouse, do you want anyone else to receive any part of the first spouse's estate (i.e., someone else to get specific items of tangible personal property, a specific cash bequest, real estate, or a share of the residuary estate)? If so, provide details.
WHEN THE SECOND SPOUSE DIES:
Who should serve as the Executor(s) of this estate?
Name(s):
Who should be the backup Executor(s)?
Name(s):
If any of your children is under age 18 at the second spouse's death, who do you want to have custody of your child?
Name(s):
Who should be the backup?
Name(s):
Describe how you would want the surviving spouse's estate distributed, specifically in terms of who should receive:
Household goods and tangible personal property (e.g., jewelry, furniture, and automobiles):
Beneficiaries:

Other specific gifts, if any:	
Remainder of the estate:	
If any of your children or other family members are residing with you at your death, what should be done with your residence?	ıt
<u>Γrusts</u> . Do you want the property passing to your children, grandchildren, or any other beneficiary (minor or adult) to be held in trust until they reach a specific age(s), or (becapt a specific situation) for their lifetime?	use
Yes No	
If you do want a trust for a child or other family member:	
While the property is held in trust, what standards do you want the Trustee to considered deciding on the amount and timing of discretionary distributions? Some examples:	er in
 health, maintenance, and support; complete education; comfort and welfare; down payment on purchase of home; defray costs of wedding; start or enter a business or profession considered a good risk by the trustee. 	
To guide your trustee(s), do you want to express a preference of one or two standards over others, or prefer one beneficiary to others? If so, please specify.	
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Should there be one trust fund from which all of your children may share according to their needs, or should there be separate trusts for each of your children?
Yes No
At what age(s) should the trust distribute income or principal outright to your children o other beneficiary? (All at one age or in percentages upon attaining certain ages?) When should the trust end?
Age(s):
Trust Ends When:
If a child dies prior to the termination of his/her trust, where should his/her remaining trust property go?
Who should serve as the trustee(s) of the trusts for children or other beneficiaries?
Name(s):
Who should be the backup trustee(s)?
Name(s):
If one of your children predeceases you but leaves any of their own children who survive you, should your deceased child's share of your estate pass to their own children, or should be divided among your other surviving children?
If none of your children or their descendants survive the second spouse, who then should ultimately receive your property?
Ultimate Beneficiaries:

Do you want to make any <u>charitable</u> gifts as part of your estate plan, including making a contingent charitable gift if none of your family survives you?
If yes, name(s) of charities:

Finally, is there anything you want included in your estate planning documents that was not mentioned above? If so, please explain below or on attached sheet.

OTHER DOCUMENTS THAT YOU MAY NEED TO REFER TO, AS APPLICABLE

(You DO NOT have to bring these to our first meeting.)

- If available, any other person's will or trust in which you are named as a beneficiary, executor, or trustee.
- Any buy-sell agreement, stock option plan, salary continuation plan or deferred compensation plan (other than qualified retirement plans) to which either spouse is a party.
- Most recent personal federal income tax return.
- Most recent federal income tax return of any closely held business in which you own an interest, and a list of the present shareholders, partners, or other owners, and their ownership interests.