

***TAX AND ESTATE PLANNING QUESTIONNAIRE***

**McCUE & LEE, LLP  
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**CONFIDENTIAL**

**I. FAMILY INFORMATION**

Name \_\_\_\_\_ Date \_\_\_\_\_

Home Address \_\_\_\_\_

Telephone Numbers \_\_\_\_\_ (Home) \_\_\_\_\_ (Office)

Soc. Sec. No. \_\_\_\_\_ U.S. Citizen : Yes \_\_\_\_\_ No \_\_\_\_\_

Occupation \_\_\_\_\_ Birthdate \_\_\_\_\_

Business Address \_\_\_\_\_

Spouse's Name (if any) \_\_\_\_\_

Spouse's Soc. Sec. No. \_\_\_\_\_ Birthdate \_\_\_\_\_

Spouse's Occupation (if any) \_\_\_\_\_ U.S. Citizen : Yes \_\_\_\_\_ No \_\_\_\_\_

Names of Children (if any)	Address	Date of Birth
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_____	_____	_____
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_____	_____	_____
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_____	_____	_____
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_____	_____	_____
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Do you have any other dependents? (Please list relationships, names, and ages)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are there any special considerations that might affect your financial planning (e.g., prior marriages, special health or education needs of family members, other extraordinary financial obligations)? Please furnish copies of any antenuptial, separation, divorce, buy-sell or other agreements which might affect your tax and estate plan.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**II. GENERAL INFORMATION**

Do you have a financial advisor? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please indicate name and address

\_\_\_\_\_

Do you have an accountant? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please indicate name and address

\_\_\_\_\_

Do you have an insurance agent? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please indicate name and address

\_\_\_\_\_

Do you have a will? Yes \_\_\_\_\_ No \_\_\_\_\_ Year signed \_\_\_\_\_

Do you have a trust? Yes \_\_\_\_\_ No \_\_\_\_\_ Year signed \_\_\_\_\_

Does your spouse have a will? Yes \_\_\_\_\_ No \_\_\_\_\_ Year signed \_\_\_\_\_

Does your spouse have a trust? Yes \_\_\_\_\_ No \_\_\_\_\_ Year Signed \_\_\_\_\_

Please indicate your preference for:

1. Executor (indicate relationship, if any) \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

Alternate Executor (indicate relationship, if any) \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

2. Guardian (indicate relationship, if any) \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

Alternate Guardian (indicate relationship, if any) \_\_\_\_\_

\_\_\_\_\_

3. Trustee (indicate relationship, if any) \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

Alternate Trustee (indicate relationship, if any) \_\_\_\_\_

Address \_\_\_\_\_

**III. PERSONAL BALANCE SHEET**

	Self	<u>Ownership</u> Spouse	Held In Joint Name
A. Estimated Value of Assets (Current Value)			
Bank Accounts	_____	_____	_____
Stocks and Bonds	_____	_____	_____
Mutual Funds	_____	_____	_____
Primary Residence (Full Market Value)	_____	_____	_____
Secondary Residence (Full Market Value)	_____	_____	_____
Income-Producing Real Estate (Full Market Value)	_____	_____	_____
Non-Income-Producing Real Estate e.g., Vacant Land (Full Market Value)	_____	_____	_____
Value of Ownership Interest in a Business or Professional Practice	_____	_____	_____
Value of Corporate Pension/Profit- Sharing Plan(s)	_____	_____	_____
Value of IRA/KEOGH	_____	_____	_____
Personal Property (e.g., Art, Jewelry, Antiques, etc.)	_____	_____	_____
Other Assets	_____	_____	_____
Monies Owed to You	_____	_____	_____

Please provide address(es) of secondary residence and other real estate:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**III. PERSONAL BALANCE SHEET (cont'd)**

LIFE INSURANCE

POLICIES ON YOUR LIFE

	1	2	3	4
Company	_____	_____	_____	_____
Policy Number	_____	_____	_____	_____
Type (whole life or term)	_____	_____	_____	_____
Face value	_____	_____	_____	_____
Cash Value	_____	_____	_____	_____
Owner	_____	_____	_____	_____
Beneficiary	_____	_____	_____	_____

LIFE INSURANCE

POLICIES ON LIFE OF SPOUSE

	1	2	3	4
Company	_____	_____	_____	_____
Policy Number	_____	_____	_____	_____
Type (whole life or term)	_____	_____	_____	_____
Face value	_____	_____	_____	_____
Cash Value	_____	_____	_____	_____
Owner	_____	_____	_____	_____
Beneficiary	_____	_____	_____	_____

B. LIABILITIES (current balance)	SELF	SPOUSE	HELD IN JOINT NAME
Mortgage on Primary Residence	_____	_____	_____
Mortgage(s) on Secondary Residence(s)	_____	_____	_____
Mortgage(s) on Other Property	_____	_____	_____
Other Debts and Liabilities	_____	_____	_____