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"Estate planning is ensuring that your hopes, dreams, and concerns for yourself and for your loved ones will be accomplished if you become incapacitated or die. It is protecting you and those you love by keeping you, your family, and your sensitive business information out of probate court *[i.e. public record]* ***when you become legally incapacitated or die."*** Rock W. Allen, Generations, p.4

CONFIDENTIAL ESTATE PLANNING DISCLOSURE QUESTIONNAIRE FOR MARRIED INDIVIDUALS

CRAIG L. TAYLOR & ASSOCIATES
472 North Main Street
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(801) 544-9955
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This questionnaire is intended to be "user friendly." It is designed to be completed in relatively short order and it should not be thought of as some form of test, seeking perfect answers. It consists of six (6) pages, plus any of the attached schedules that are required for the questionnaire. You should not complete any unnecessary schedules. A checklist of documents is attached as a convenient reminder to you. Please try to hold your answers to brief reminders that you can expand upon in your meeting with our law firm. Use abbreviations wherever clear and helpful to you. If you have any questions, please do not hesitate to call. You and your spouse should sign the questionnaire on page six (6). Thank you for your cooperation.

Please note, we cannot possibly know enough to cover every possible item of interest or special situation or desire peculiar to your and your spouse's personal situation and desires. Because of this, please think your situation through and be alert to call all matters to our attention that you know about and think might be important for us to know. It is unwise to rely upon the questions set forth herein or posed by us in meetings. Planning for your and your spouse's estate is a teamwork job and we need each other's full attention and care to do a good job.

You should be aware that although planning for your and your spouse's estates will affect and provide for your beneficiaries, our representations extend solely to you and your spouse unless we have otherwise agreed in writing.

GENERAL INFORMATION

1. FULL NAME, SOCIAL SECURITY NUMBER, BIRTH DATE, CITIZENSHIP, PARENTAL INFORMATION, PRIOR MARRIAGES AND COMMUNITY PROPERTY STATE INFORMATION OF CLIENT:

____
First Middle Last
Social Security Number:__________________________
Birth Date: ________________ Citizenship: ____________________
Parents' Names, if living: ____________________________________
Previous Marriages: [ ] No[ ] Yes
If yes, list terminating event(s) and date(s): ____________________
____
Do you now or have you ever lived in a community property state?
[ ] No [ ] Yes
If yes, please name the state(s): ___________________________

2. FULL NAME, SOCIAL SECURITY NUMBER, BIRTH DATE, CITIZENSHIP, PARENTAL INFORMATION, PRIOR MARRIAGES OF SPOUSE AND COMMUNITY PROPERTY STATE INFORMATION (IF APPLICABLE):

____
First Middle Last
Social Security Number: _______________________________
Birth Date: ________________ Citizenship: ____________________
Parents' Names, if living: ____________________________________
Previous Marriages: [ ] No[ ] Yes
If yes, list terminating event(s) and date(s): ____________________
____
Do you now or have you ever lived in a community property state?
[ ] No [ ] Yes
If yes, please name the state(s): _____________________________

3. HOME ADDRESS AND TELEPHONE NUMBER:

____
Street
________________ ____________ ____________ ____________
City County State Zip
(____) ________________ ___________________________
Telephone email address

4. BUSINESS ADDRESS AND TELEPHONE NUMBER OF CLIENT AND SPOUSE:

____
Street

____
City County State Zip

(____) __________________ ________________________________
Telephone email address

PRELIMINARY STATEMENT OF ESTATE PLANNING OBJECTIVES

In your own words, please state what your present thinking is about what you would have wanted to happen to your assets, particularly any special gifts of particular assets, charitable wishes, etc., and any desires with respect to your remains, should you have passed away last week: ____
____
____

In your spouse's own words, please state what his/her present thinking is about what he/she would have wanted to happen to his/her assets, particularly any special gifts of particular assets, charitable wishes, etc. and any desires with respect to his/her remains, should he/she have passed away last week:

____
____
____

SCHEDULES

Please answer the following questions and then complete and attach the applicable schedules. If you have any questions concerning the completion of the schedules, please let us know.

	Yes	No
Do you or your spouse have any children or other dependents? If yes, please complete Schedule A.	_____	_____
Do you or your spouse have any children under the age of 18? If yes, please review and complete Schedule B.	_____	_____
Do you or your spouse have a family advisor, e.g., accountant, stock broker, life insurance agent, trust officer, etc.? If yes, please complete Schedule C.	_____	_____

	Yes	No
Do you or your spouse have a checking account, savings account, securities account or similar type of account that holds cash? If yes, please complete Schedule D.	_____	_____
Do you or your spouse own any tangible personal property, e.g., autos, household furnishings, stamp collections, books, objects of art and/or other personal belongings? If yes, please complete Schedule E.	_____	_____
Do you or your spouse own any intangible personal property, e.g., contractual rights, minority stock interests, mutual funds, bonds, notes, leases, mineral rights, patents, copyrights, mortgages receivable? If yes, please complete Schedule F.	_____	_____
Do you or your spouse own any interest in real estate? If yes, please complete Schedule G.	_____	_____
Do you or your spouse own any business interests, either in the form of a sole proprietorship or a corporation, partnership or limited liability company that you and/or your family and/or other general partners control? If yes, please complete Schedule H.	_____	_____
If the answer to the above question is yes, do you have a Buy/Sell Agreement in place to protect your interest?	_____	_____
Do you or your spouse own an interest in any type of employee benefit, deferred compensation or retirement arrangements, e.g., profit-sharing plan, pension plan, stock option agreements, stock bonus plan, etc.? If yes, please complete Schedule I.	_____	_____
If the answer to the above question is yes, did you or your spouse separate from service prior to 1983?	_____	_____
If the answer to the above question is no, did you or your spouse separate from service prior to 1985?	_____	_____
Do you or your spouse own an interest in an individual retirement account or individual retirement annuity? If yes, please complete Schedule J.	_____	_____
Do you or your spouse own a life insurance policy? If yes, please complete Schedule K.	_____	_____

	Yes	**No**
Are there any insurance policies on either your or your spouse's life, e.g., "key man" insurance policies or policies owned by a lender to secure payment of a loan? If yes, please complete Schedule K.	_____	_____
Do you or your spouse currently have any outstanding loans that you have extended to others?	_____	_____
If yes, do you have a corresponding loan agreement in place?	_____	_____
During your lifetime(s) have you or your spouse ever established a trust, contributed anything to a trust or had the power to appoint or otherwise dispose of any interest in a trust? If yes, please complete Schedule L.	_____	_____
Are you or your spouse now or do you or your spouse expect to receive any benefit from a trust (other than a trust established by an employer under a pension plan), or a family limited partnership or limited liability company? If yes, please complete Schedule L.	_____	_____
During any calendar year prior to January 1, 1982, did you or your spouse make a gift or gifts the total of which exceeded for that year $3,000.00 per person? If yes, please complete Schedule M.	_____	_____
During any calendar year after December 31, 1981, and prior to January 1, 2002, did you or your spouse make a gift or gifts the total of which exceeded for that year $10,000.00 per person? If yes, please complete Schedule M.	_____	_____
During any calendar year after December 31, 2001, did you or your spouse make a gift or gifts the total of which exceeded for that year $11,000.00 per person? If yes, please complete Schedule M.	_____	_____
Do you or your spouse have any charitable gifts or bequests in mind or are you or your spouse interested in discussing charitable gifting? If yes, please complete Schedule M.	_____	_____
Do you or your spouse have any liabilities, either in individual or joint names, that are not listed on another schedule, that exceed $1,000.00, e.g. accounts payable? If yes, please complete Schedule N.	_____	_____

	Yes	**No**
Are there presently any judgments, court orders, divorce, alimony or support decrees or liens entered against either you or your spouse? If yes, please complete Schedule N.	_____	_____
Have you or your spouse ever given a personal guaranty, surety agreement or a pledge of your assets to secure the obligations of persons other than yourself that is currently outstanding and not listed previously? If yes, please complete Schedule N.	_____	_____
Are you or your spouse a general partner in a partnership, a joint venturer in a joint venture, a trustee in a trust of any type or participant in any personal business transactions, which involve or could involve any personal liabilities for you that have not been listed previously? If yes, please complete Schedule N.	_____	_____

SIGNATURES

We acknowledge that the foregoing information is true and that the representation of us by CRAIG L. TAYLOR & ASSOCIATES is conditioned on the truthfulness of the representations contained in this questionnaire.

Furthermore, each of us acknowledges our awareness about and waives any conflict of interest that CRAIG L. TAYLOR & ASSOCIATES or any of its attorneys will have in representing each of us on our estate plans, which are related to one another. Each of us knows that we are entitled to retain independent counsel of our own. Each of us authorizes CRAIG L. TAYLOR & ASSOCIATES, to share whatever information that it has obtained or may later obtain concerning the estate plan of either one of us with the other. Each of us is fully aware of the proposed estate plan of the other and has no objection to it. We also agree, that CRAIG L. TAYLOR & ASSOCIATES, is authorized to inform the other about any subsequent change that we make in our estate plan and to discuss, explain and/or advise concerning the change with the other, but shall be under no duty to do so. In addition, anything that CRAIG L. TAYLOR & ASSOCIATES, learns about one of us is subject to its disclosure to the other and may be legally imputed to the other as a matter of law, even in the absence of our personal knowledge on the subject.

____________________ X ______________________________
Date Client’s Signature

____________________ X ______________________________
Date Spouse’s Signature

PLEASE COMPLETE THE FOLLOWING SCHEDULES THOROUGHLY IF CALLED FOR BY THE QUESTIONNAIRE, WITHOUT EXCESSIVE DETAIL. PLEASE BE PREPARED TO EXPLAIN AND PROVIDE SUPPORTING DETAILS WHEN YOU MEET WITH US TO GO OVER THESE MATTERS.

SCHEDULE A: CHILDREN AND OTHER DEPENDENTS

1. NAME, ADDRESS AND BIRTH DATE OF CHILDREN OF BOTH CLIENT AND SPOUSE (PLEASE INCLUDE NAME OF CHILD'S SPOUSE, IF ANY AND ANY CHILDREN OF CHILD – ATTACH ADDITIONAL SHEETS AS NEEDED):

____
First Middle Last Birth Date

____
Street

____
City County State Zip

____
Name of Spouse (if applicable) _______________________________
If applicable, Children of Child (list name(s) and age(s)):

____
____

____
First Middle Last Birth Date

____
Street

____
City County State Zip

____
Name of Spouse (if applicable) _______________________________
If applicable, Children of Child (list name(s) and age(s)):

____
____

____
First Middle Last Birth Date

____
Street

____
City County State Zip

____
Name of Spouse (if applicable) ______________________________
If applicable, Children of Child (list name(s) and age(s)):
____
____

2. OTHER CHILDREN, IF ANY OF EITHER CLIENT OR SPOUSE (NOT LISTED ABOVE):

____
First Middle Last Birth Date

____
Street

____
City County State Zip

____
Name of Spouse (if applicable) ______________________________
If applicable, Children of Child (list name(s) and age(s)):
____
____

____
First Middle Last Birth Date

____
Street

____
City County State Zip

____
Name of Spouse (if applicable) ______________________________
If applicable, Children of Child (list name(s) and age(s)):
____
____

3. OTHER DEPENDENTS (NOT LISTED ABOVE):

Note: Please include deceased children, but indicate (D) after name.
Please also indicate adopted children by indicating (A) after name.

____
First Middle Last Birth Date

____
Street

____
City County State Zip

____
Name of Spouse (if applicable) ______________________
If applicable, Children of Child (list name(s) and age(s)):
____
____

____
First Middle Last Birth Date

____
Street

____
City County State Zip

____
Name of Spouse (if applicable) ______________________
If applicable, Children of Child (list name(s) and age(s)):
____
____

SCHEDULE B: GUARDIANS AND CONSERVATORS

If a child is under the age of 18 and if both parents should die, then the court will appoint a guardian of the person and a guardian or conservator of the property for that child. Often a single person or couple serves in both capacities. A parent may nominate those guardians in their will, and the court will give weight (but will not be bound) by that nomination. If you nominate co-guardians, please consider what your wishes would be if one of the named co-guardians is unwilling or unable to serve in that capacity. Please indicate your present thinking with regard to a guardian for a minor child or children as follows:

1. NAME, ADDRESS AND RELATIONSHIP TO YOU OF PROPOSED GUARDIAN(S) OF THE PERSON:

First Middle Last

Street

City County State Zip

Relationship

First Middle Last

Street

City County State Zip

Relationship

2. NAME, ADDRESS AND RELATIONSHIP TO YOU OF PROPOSED GUARDIAN(S) OR CONSERVATOR(S) OF THE PROPERTY (IF DIFFERENT FROM ITEM 1 ABOVE):

First Middle Last

Street

City County State Zip

Relationship

First	Middle	Last	
	Street		
City	County	State	Zip
Relationship			

3. NAME, ADDRESS AND RELATIONSHIP TO YOU OF ALTERNATE GUARDIAN(S) OR CONSERVATOR(S):

First	Middle	Last	
	Street		
City	County	State	Zip
Relationship			

First	Middle	Last	
	Street		
City	County	State	Zip
Relationship			

SCHEDULE C: FAMILY ADVISORS

Please list the name, address and telephone number of all of your family advisors (if applicable). Add any pages if necessary.

1. ACCOUNTANT(S): ____

____
Street

____
City County State Zip
(____) ________________________
Telephone

2. LIFE INSURANCE AGENT(S): ______________________________

____
Street

____
City County State Zip
(____) ________________________
Telephone

3. STOCK BROKER(S): _______________________________________

____
Street

____
City County State Zip
(____) ________________________
Telephone

4. TRUST OFFICER(S): _______________________________________

____
Street

____
City County State Zip
(____) ________________________
Telephone

5. ATTORNEY(S): ____

____
Street

____
City County State Zip
(____) ________________________
Telephone

6. OTHER(S): ____

____
Street

____
City County State Zip
(____) ________________________
Telephone

SCHEDULE D: CASH

Name and Address of Bank				
Account Number				
Type of Account, i.e. C.D., checking, savings, managed acct				
Account Owner(s)				
Estimated Normal Balance				

SCHEDULE E: TANGIBLE PERSONAL PROPERTY

Include all autos and all substantial items of household furnishings and personal belongings (estimate collective value) owned by you and your spouse that you deem important enough to single out for special consideration, e.g., your boat, a special gun collection, a valuable painting or piano, etc. It may be helpful for you to establish a minimum fair market value necessary for individual items to be listed separately, e.g., $2,000. Attach additional sheets as necessary.

Particular Item or Class of Property					
Location of Property					
Exact Name(s) of Owner(s)					
Type of Ownership Interest, i.e. Individual, Joint					
Date of Acquisition					
Cost at date of acquisition, if known					
Estimated Present Value					

SCHEDULE F: INTANGIBLE PERSONAL PROPERTY

This type of property includes all interests, rights, licenses, leases, contracts, insurance policies, club memberships, favorable lawsuits, accounts and notes receivable, patents, copyrights, trademarks, service marks, stocks, mutual funds, bonds, debentures, and mortgages receivable and any other intangible assets whether or not carried on your balance sheet at all, which are owned by you and/or your spouse; and value only estimated numbers of shares, interests or dollar amounts, unless and until exact transfer documents are prepared. Attach additional sheets as necessary.

Particular Item or Class of Property					
Exact Name(s) of Owner(s)					
Type of Ownership Interest, i.e. Individual, Joint					
Date of Acquisition					
Cost at date of acquisition, if known					
Estimated Present Value					

SCHEDULE G: REAL ESTATE

Describe all real estate interests owned by you and your spouse, including oil and gas wells, mines, farms, etc., and the legal nature of your and your spouse's ownership.

Property Description, e.g. residence, unimproved acreage, industrial or business property				
Location (county, state and country, if foreign)				
Date of Acquisition				
Cost or Value at date of acquisition				
Exact Name(s) of Owners as shown on deed				
Type of Ownership Interest*				
Estimated Current Market Value				
Current Debt				

* Type of Ownership Interest includes: Individual, Joint, Joint Tenancy, Joint Ownership with Right of Survivor

SCHEDULE H: BUSINESS AND EMPLOYMENT INTERESTS

Please describe all business interests of any consequence owned by you and your spouse, including any liabilities associated therewith. Attach on a separate sheet to summarize any relevant securities, contracts, employment agreements, options, proxies, voting trusts, restrictions, plans, litigation, liens, rights, obligations, etc. that are necessary for an understanding of these economic interests.

Types of Interest include, but are not limited to, Securities, Partnership, Membership (Limited Liability Company), Deferred Compensation, and Insurance Rights.

Type of Interest				
Special Aspects, Risks, or Limitations Thereon				
Name of Business				
Type of Business				
Exact Owner(s) of Interest				
Estimated Value of Interest Owned				
Do you have a Buy/Sell Agreement in place?				

SCHEDULE I: PENSION, PROFIT SHARING, AND OTHER EMPLOYEE BENEFITS

Please describe all of your and your spouse's employment benefits.

Owner (Employee)				
Employer				
Type of Benefit, e.g. Profit Sharing, 401(k), etc.				
Other Benefits				
Death Benefits				

SCHEDULE J: INDIVIDUAL RETIREMENT ACCOUNTS AND ANNUITIES

Please describe all of your and your spouse's individual retirement accounts and annuities.

Owner's Name				
Type of Account, Trad. or Roth IRAs, SEP IRAs, etc.				
Custodian/Financial Institution				
Account Number				
Designated Beneficiary				

SCHEDULE K: LIFE INSURANCE

Please describe all of the life insurance on your and your spouse's lives.

Name of Insured				
Insurance Company				
Policy Number				
Policy Owner(s)				
Type of Policy, i.e. Whole Life, Term, Group				
Approx Amt of any Loan against policy				
Primary Beneficiary				
Contingent Beneficiary				
Face Value				
Cash Value				

SCHEDULE L: TRUST INTERESTS

During your and your spouse's lifetimes, have either of you ever established a trust, been a beneficiary of any trust, contributed anything to a trust or had the power to appoint or otherwise dispose of any interest in a trust? Please describe briefly.

Do you and/or your spouse now receive or do you and/or your spouse expect to receive any benefit from a trust (other than a trust established by anyone under a pension or a profit-sharing plan) or an estate or a family limited partnership or limited liability company,? Please describe briefly.

SCHEDULE M: GIFTING

During any calendar year prior to January 1, 1982, did you or your spouse make a gift or gifts the total of which exceeded for that year $3,000.00 per person or make any gifts to persons other than your spouse or your own children? Please describe, including gifts to any grandchildren.

During any calendar year after December 31, 1981, and prior to January 1, 2002, did you or your spouse make a gift or gifts the total of which exceeded for that year $10,000.00 per person or make any gifts to persons other than your spouse or your own children? Please describe, including gifts to any grandchildren.

During any calendar year after December 31, 2001, did you or your spouse make a gift or gifts the total of which exceeded for that year $11,000.00 per person or make any gifts to persons other than your spouse or your own children? Please describe, including gifts to any grandchildren.

Do you have any charitable gifts or bequests in mind or are you or your spouse interested in discussing some of the major advantages of charitable gifting?

SCHEDULE N: LIABILITIES

Please cover all material liabilities owed by you and your spouse. If you and/or your spouse are insolvent or cannot pay all of your bills as they come due, please let us know.

Type of Liability			
Co-obligor(s)			
Date Due			
Any Litigation?			
Any Defenses, Counterclaims, Contingencies, etc.			
Type and Value of Property that Secures Debt			
Names(s) of Creditor(s)			
Estimated Amount of Liability			

CHECKLIST OF DOCUMENTS FOR YOU TO CONSIDER FOR EXAMINATION IN CONNECTION WITH PREPARATION OF YOUR AND YOUR SPOUSE'S ESTATE PLAN

The following is a checklist of documents that will need to be reviewed in connection with the preparation of your and your spouse's estate plan. If you or your spouse has any of these documents or any other document that might be material to us or to you and/or your spouse, please bring them to our attention before we begin preparation of your and your spouse's estate plan. The particular location of any item should be noted for us. These documents will not necessarily be reviewed by us, unless you provide them to us and specifically request us to do so.

1. Present and prior wills;

2. Present and prior trust instruments, conservator, custodian, guardian, investment advisor or any other asset management or possession contracts under which you, your spouse, or any child of yours is either grantor, trustee or beneficiary or holds any rights or powers;

3. Gift tax returns (all) and nature and extent of lifetime gifts, including amounts, name of donees (recipients), and relationship to you and your spouse, dates and types of property gifted;

4. Your and your spouse's most recent financial statement(s);

5. Copies of all federal tax returns for the previous two years;

6. Real and personal property tax bills, recent and any past due, with or without liens;

7. Deeds to and other interests in real estate currently owned by you and your spouse in whole or in part;

8. Promissory notes for which you and/or your spouse are the creditor and any mortgages, other security interests or pledges securing those notes;

9. Promissory notes which you and/or your spouse are the debtor and any mortgages, other security interests or pledges securing those notes (for example, your home mortgage, if any);

10. The most current monthly or quarterly statements issued by each financial institution in which you and/or your spouse hold an account, including banks, brokerage firms, credit unions, mutual funds, savings and loan associations;

11. Securities owned by you and/or your spouse of record or beneficially, including any certificates evidencing them in your and/or your spouse's possession, including such things as stocks, mutual fund shares, warrants, debentures, promissory notes, bonds, whether government, municipal and corporate bonds, photocopies of such certificates and investment letters and pledge and purchase/sale agreements;

12. Life and/or disability insurance policies, whether individually owned or group, together with the documents showing primary and contingent beneficiaries;

13. Annuities, including beneficiary designation documents, if any;

14. Savings account passbooks and certificates of deposit;

15. Business, stockholder, limited liability company or partnership agreements (for example, restricted securities, option, voting, proxy, "buy/sell", operating and employment agreements);

16. Documents pertaining to pension and profit-sharing plans, stock purchase and bonus plans, stock option plans, ESOPs, SEPs, 401(k) plans, life and/or disability insurance and annuity plans, IRA accounts and any other employee benefit and/or deferred compensation plans, including data showing ownership, currently vested values, death benefits and beneficiaries;

17. Leases, loans and/or licenses of real and personal property (including cash and intangible assets), showing nature of property, lessee and lessor and location;

18. Instruments under which you and/or your spouse have any right, title or interest or holds any power of appointment or power of attorney;

19. Prenuptial or postnuptial agreements or separation, alimony and property settlement agreements;

20. Divorce, alimony, child support or related decree(s);

21. Court orders, injunctions, or agreements under which you or your spouse are obligated to provide support to another person;

22. Inventories and supplies of tangible and intangible property, whether or not it is being held for sale or finished goods or raw materials (for example, safe deposit box inventories, brokerage account inventories, street name securities, patents, copyrights, trademarks, service marks, bonds, books, tools, fixtures, equipment, investment portfolios, etc.) showing any appraisals or other basis of evaluation, basis for tax purposes, name(s) in which assets are held and nature of your and your spouse's legal interest therein):

23. Outstanding judgments, awards, injunctions, court orders, and/or decrees against you and/or your spouse;

24. Outstanding guarantees or suretyship obligations against you and/or your spouse;

25. Outstanding liens upon any property of you and/or your spouse;

26. Positions held by you and your spouse, e.g., corporate officers or director, general partner or limited partner, member or manager, trustee, agent, ward, guardian, conservator, personal representative, licensee, licensor, landlord, tenant, elected official, consultant, beneficiary, shareholder, creditor, debtor, co-obligor, surety, guarantor or custodian under the Uniform Gifts to Minors Act or similar legislation.

27. Any document, contract, policy or record not within a category described above that evidences your or your spouse's ownership of any asset (regardless of location) in whole or in part or that controls the disposition at your or your spouse's death of any asset that you or your spouse own in whole or in part; and

28. Any document, contract, policy or record not within a category described above that evidences any indebtedness or liability of you or your spouse to anyone, including without limitation, any tax obligations, both liquidated and nonliquidated contractual duties to perform and loan documents.