

Loss of Loved One

Losing a loved one is a profoundly stressful event which causes a high level of emotional pain and disruption. Years of shared decisions and financial structure is now over and a new one must be rebuilt. This checklist isn't designed to replace the professional advice of anyone (CPA, attorney, etc.). Rather, its purpose is threefold:

1. to simplify things by putting all the "to dos" in one place,
2. to ensure that – as much as possible – nothing is missed, and
3. to avoid any unintended or unexpected consequences (financial, tax, or otherwise)

« FINAL ARRANGEMENTS:

- ☐ Obituary ☐ Funeral services ☐ Burial services ☐ Cremation services

« DECEASED'S EMPLOYER: (if applicable)

- | | |
|--|---|
| <input type="checkbox"/> Notify employer | <input type="checkbox"/> Health savings account |
| <input type="checkbox"/> Work life insurance benefits | <input type="checkbox"/> Unpaid vacation |
| <input type="checkbox"/> Unpaid bonus income | <input type="checkbox"/> Stock options |
| <input type="checkbox"/> Unpaid salary | <input type="checkbox"/> Unpaid commission income |
| <input type="checkbox"/> Continuance of health care benefits | <input type="checkbox"/> Unpaid sick leave |
| <input type="checkbox"/> Deferred compensation plans | <input type="checkbox"/> Continuance of pension benefits, if applicable |

« MISCELLANEOUS:

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|---|--|
| <input type="checkbox"/> Notify children's school | <input type="checkbox"/> Inquire about bereavement benefits from surviving spouse's employer |
| <input type="checkbox"/> Obtain at least 12 copies of certified death certificates | <input type="checkbox"/> Cancel spouse's driver's license |
| <input type="checkbox"/> Contact Social Security about benefits (funeral home may help) | <input type="checkbox"/> Contact Medicare about benefits (funeral home may help) |
| <input type="checkbox"/> Safety deposit box with keys | <input type="checkbox"/> Sell car, if applicable |

« PROFESSIONALS/ADVISORS

- | | |
|--|--|
| <input type="checkbox"/> Notify estate planning attorney | <input type="checkbox"/> Notify financial advisor |
| <input type="checkbox"/> Notify CPA | <input type="checkbox"/> Notify executor of the estate |
| <input type="checkbox"/> Notify other attorneys | |

« LOGIN CREDENTIALS: (List the website address, user ID, and passwords for the following)

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|---|---|---|--|
| <input type="checkbox"/> Banks | <input type="checkbox"/> Email accounts | <input type="checkbox"/> Facebook | <input type="checkbox"/> LinkedIn |
| <input type="checkbox"/> Investment accounts | <input type="checkbox"/> Cable company | <input type="checkbox"/> Cell phone company | <input type="checkbox"/> Credit card companies |
| <input type="checkbox"/> Life insurance companies | <input type="checkbox"/> Amazon | <input type="checkbox"/> PayPal | |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ | | |

« **DOCUMENTATION:** *Create a single location – e.g., three ring binder – for the following personal documents:*

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|---|---|--|---|
| <input type="checkbox"/> Death certificates | <input type="checkbox"/> Birth certificates | <input type="checkbox"/> Last will and testament | <input type="checkbox"/> Revocable living trust |
| <input type="checkbox"/> Other trusts | <input type="checkbox"/> Marriage license | <input type="checkbox"/> Deeds for all real estate | <input type="checkbox"/> DD214 for military service |
| <input type="checkbox"/> Net worth statement, including title of all assets and liabilities | | | |
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Include most recent statements of the following:

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|---|--|--|--|
| <input type="checkbox"/> Social Security benefits | <input type="checkbox"/> Life insurance policies | <input type="checkbox"/> Annuities | <input type="checkbox"/> Checking accounts |
| <input type="checkbox"/> Savings accounts | <input type="checkbox"/> Money market accounts | <input type="checkbox"/> Retirement accounts | <input type="checkbox"/> Other investment accounts |
| <input type="checkbox"/> Credit cards | <input type="checkbox"/> Auto loans | <input type="checkbox"/> Mortgages | <input type="checkbox"/> Other loans |
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If deceased owned a business::

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|---|---|
| <input type="checkbox"/> Buy/sell agreement | <input type="checkbox"/> Profit and loss statements from last two years |
| <input type="checkbox"/> Balance statement for last two years | <input type="checkbox"/> Business tax returns for last two years |
| <input type="checkbox"/> Valuation statement for the business | <input type="checkbox"/> Valuation statement for business use real estate |
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« **CREDIT REPORTING AGENCIES:** *(Notify each of the following)*

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|--------------------------------------|----------------------------------|-----------------------------------|
| <input type="checkbox"/> Trans Union | <input type="checkbox"/> Equifax | <input type="checkbox"/> Experian |
|--------------------------------------|----------------------------------|-----------------------------------|
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« **NEXT STEPS:**

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|---|---|
| <input type="checkbox"/> File life insurance claims | <input type="checkbox"/> File medical insurance claims |
| <input type="checkbox"/> File long-term care insurance claims | <input type="checkbox"/> List recurring monthly bills and arrange payment for next three months |
| <input type="checkbox"/> File death claims for annuities, if applicable | <input type="checkbox"/> Access safety deposit boxes |
| <input type="checkbox"/> Estate valuation(s), if needed | <input type="checkbox"/> Contact the Department of Veterans Affairs, if applicable |
| <input type="checkbox"/> Review planned trips and cancel them | <input type="checkbox"/> If spouse was taking RMDs, ensure minimum is taken out for the year |
| <input type="checkbox"/> Cancel credit cards in spouse's name | <input type="checkbox"/> Review Your RMDs with Your Financial Professionals/CPA |
| <input type="checkbox"/> Missingmoney.com | <input type="checkbox"/> Review List of Important Documents |
| <input type="checkbox"/> File form SSA-8 | |
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Review financial and legal documents:

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|---|---|
| <input type="checkbox"/> Update your estate planning documents, if needed | <input type="checkbox"/> Review all fiduciaries in your documents |
| <input type="checkbox"/> Review all of your beneficiary designations | <input type="checkbox"/> Review title of all assets |
| <input type="checkbox"/> Have CPA file estate tax return | |
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Review insurance coverages:

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|---|---|---|---|
| <input type="checkbox"/> Health Insurance | <input type="checkbox"/> Disability Insurance | <input type="checkbox"/> Long-Term Care Insurance | <input type="checkbox"/> Homeowners Insurance |
| <input type="checkbox"/> Umbrella Policy | <input type="checkbox"/> Other Policies | | |
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