

CHECKLIST

DATE: _____

What to bring to your first meeting with a financial adviser

Asset listing (see asset worksheet in this appendix) and statements related to those assets such as:

Investment Accounts

- ☐ Brokerage Accounts
- ☐ Mutual Fund Statements
- ☐ Annuity Statements
- ☐ Children's Assets, Such as 529 Plans or Custodial Accounts
- ☐ Investments in Closely Held Businesses

Real Estate

- ☐ Personal Residence
- ☐ Investment Real Estate
- ☐ Retirement Accounts
- ☐ 401(k) or 403(b) Accounts
- ☐ Pension Statements
- ☐ Profit-Sharing Plans
- ☐ IRAs

Listing of your liabilities along with term, interest rate, and expected payoff:

- ☐ Mortgage
- ☐ Home Equity Line
- ☐ Business Debt
- ☐ Student Loans
- ☐ Sources of Income/Expenses/Cash Flow
- ☐ Pay Stub
- ☐ Expected Bonus
- ☐ Business Income

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What to bring to your first meeting with a financial adviser *(continued)*

- ☐ Flows from Rental Real Estate
- ☐ Gifts/Expected Inheritances
- ☐ Expected Annual or Monthly Expenditures
- ☐ Charitable Giving
- ☐ One-Time Large Cash Outflows Such as
 - ☐ Real Property Purchase
 - ☐ Boat/RV Purchase
 - ☐ Vacation Costs

Tax Documents

- ☐ Latest Individual Income Tax Return (Form 1040)
- ☐ Statement of Capital Gains and Losses for the Current Year
- ☐ Summary of Income Tax Basis for Investment Assets
- ☐ Last-Filed Gift Tax Return

Insurance Policies

- ☐ Life Insurance
- ☐ Disability Policies
- ☐ Long-Term-Care Insurance

Legal Documents: If you have these bring them:

- ☐ Wills
- ☐ Designation of Health-Care Surrogates
- ☐ Advance Health-Care Directive
- ☐ Durable Power of Attorney
- ☐ Trust Agreements
- ☐ Prenuptial or Postnuptial Agreements

Source: Resource Consulting Group, Orlando

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Trusted Advisers

In case I get hit by a meteor, these are the key people to contact.

For my trust/will documents, please contact:

Lawyer's Name _____

Company _____

Phone number _____

Email address _____

Mailing address _____

For access to financial information, please contact:

Accountant's Name _____

Company _____

Phone number _____

Email address _____

Mailing address _____

For my funeral arrangements, please work with:

Name _____

Company _____

Phone number _____

Email address _____

Mailing address _____

ASSET WORKSHEET

DATE: _____

What do I have?

What do I own? (Assets)

Cash

Savings Accounts \$ _____

Checking Accounts _____

Cash on Hand _____

Rent Receivables _____

Loan Receivables _____

Other _____

TOTAL _____

Property

Value of Residence \$ _____

Second Home Value _____

Income Property _____

Land _____

Other Properties _____

TOTAL _____

Investments

Retirement Plans \$ _____

Certificates of
Deposit _____

Stocks/Bonds _____

Pension Plans _____

Mutual Funds _____

Other _____

TOTAL _____

What do I owe? (Liabilities)

Debts

Credit Card Balances \$ _____

Outstanding Bills _____

Income Taxes Owed _____

Property Taxes Owed _____

Alimony _____

Child Support _____

TOTAL _____

Mortgages/Rents

Residence \$ _____

Second Home _____

Income Property _____

Land _____

Other Properties _____

TOTAL _____

Loans

Home Equity \$ _____

Student _____

Bank _____

Personal _____

Against Retirement
Account _____

Finance Company _____

Other Obligations _____

TOTAL _____

ASSET WORKSHEET

DATE: _____

What do I have? *(continued)*

What do I own? (Assets)

Personal Property (Current Cash Value)

Vehicles	\$ _____
Furnishings	_____
Collectibles	_____
Antiques	_____
Jewelry	_____
Boat/RV	_____
Other	_____
TOTAL	_____

TOTAL ASSETS \$ _____

– TOTAL LIABILITIES \$ _____

= NET WORTH \$ _____

ASSET WORKSHEET

DATE: _____

Asset Inventory

To help your estate planner, personal representatives, and beneficiaries recover your assets (in case you get hit by a meteor), use this form to give them the information they will need.

Banking and Investment Accounts**Checking Account**

Where Located: _____

Account Number: _____

Who Has Access: _____

Who Is the Named Beneficiary: _____

Savings Account

Where Located: _____

Account Number: _____

Who Has Access: _____

Who Is the Named Beneficiary: _____

Retirement Account

Where Located: _____

Account Number: _____

Who Has Access: _____

Who Is the Named Beneficiary: _____

ASSET WORKSHEET

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Asset Inventory *(continued)***Certificates of Deposit**

Where Located: _____

Account Number: _____

Who Has Access: _____

Who Is the Named Beneficiary: _____

Stocks/Bonds

Where Located: _____

Account Number: _____

Who Has Access: _____

Who Is the Named Beneficiary: _____

Pension Plans

Where Located: _____

Account Number: _____

Who Has Access: _____

Who Is the Named Beneficiary: _____

ASSET WORKSHEET

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Asset Inventory *(continued)***Mutual Funds**

Where Located: _____

Account Number: _____

Who Has Access: _____

Who Is the Named Beneficiary: _____

Safe-Deposit Box

Where Located: _____

Where the Key Is: _____

Who Has Access: _____

Contents: _____

Storage Facility

Where Located: _____

How to Access: _____

Who Has Access: _____

Contents: _____

Household Bills

In case I get struck by a meteor, these are the ongoing household bills that will need to be addressed either by paying off the amounts or terminating the service. (Please note any payments that get automatically deducted from my bank account.)

House Mortgage or Rent Payment**Lender/Landlord:**

Account Number: _____

Monthly Amount: _____

Car Payment

Lender: _____

Account Number: _____

Monthly Amount: _____

Credit Card(s), Including Department Stores

Company: _____

Account Number: _____

Company: _____

Account Number: _____

Company: _____

Account Number: _____

Household Bills *(continued)***Utilities (Gas, Electric, Water, Landline):**

Company Name: _____

Account Number: _____

Company Name: _____

Account Number: _____

Company Name: _____

Account Number: _____

Company Name: _____

Account Number: _____

Cell phone

Company Name: _____

Account Number: _____

Cable/Internet Service

Company Name: _____

Account Number: _____

ASSET WORKSHEET

DATE: _____

Household Bills *(continued)***Car Insurance**

Company Name: _____

Account Number: _____

Payment Amount/Frequency _____

Property Insurance

Company Name: _____

Account Number: _____

Payment Amount/Frequency _____

Medical Insurance

Company Name: _____

Account Number: _____

Payment Amount/Frequency _____

Gardening Service

Company Name: _____

Account Number: _____

Payment Amount/Frequency _____

ASSET WORKSHEET

DATE: _____

Household Bills *(continued)***Pest Control**

Company Name: _____

Account Number: _____

Payment Amount/Frequency _____

Security Service

Company Name: _____

Account Number: _____

Payment Amount/Frequency _____

Other Recurring Bills

Attached to this worksheet is a list of all digital accounts, such as social media (Facebook, LinkedIn, Instagram), entertainment (Netflix, Hulu, Pandora), and shopping accounts (Amazon Prime) that will need to be closed. Include user names and passwords.

What matters?

Who matters to me? (These could be children, partners, parents, siblings, grandchildren, friends, pets.)

What places have been important in my life and have helped form who I am today? (Your hometown or community, your schools, your church or synagogue, a place you may have frequently visited over the course of your life and connect with.)

What matters? *(continued)*

How do I find joy? (Hiking, painting, worshipping, learning, listening to music, helping others.)

What has been the focus of my life's work?

Beyond the necessities, what do I spend my money on?

What matters? *(continued)*

What problems in this world do I believe need fixing? (Homelessness, drug abuse, teen suicide, racial tension, gender inequality, domestic violence, a specific medical disease or mental health condition, pollution, animal cruelty, etc.)

What am I grateful for? (My education, my book club, my hometown.)

What matters? *(continued)*

What charities have I supported in the past, and of those, which ones would I like to continue to support? Similarly, given what I cherish, what other charities or types of charities might be a good fit for my contributions?
