47-Point Family Estate Readiness Checklist

A comprehensive guide to ensure your family is prepared for estate planning, end-of-life decisions, and legacy preservation.

Your Information

Name: ____

Date started: ____

Target completion date: ____

Last reviewed: ____

How to Use This Checklist

- Work through each section at your own pace — there is no wrong order.
- Fill in the blanks where applicable. Leave items blank if they don't apply to you.
- Review and update every 3–5 years or after major life events (marriage, divorce, birth, death, move).
- Share document locations with your executor and trusted family members.
- This checklist is a guide, not legal advice. Consult a licensed attorney for your state.

Essential Documents (Points 1–12)

❑ 1. Will — Created, signed, witnessed, and notarized

Location: ______________________________

Last updated: ______________________________

Executor: ______________________________

❑ 2. Living Will / Advance Directive — Medical treatment preferences documented

Life support preferences: ______________________________

Pain management: ______________________________

Organ donation wishes: ______________________________

❑ 3. Durable Power of Attorney — Financial decision authority assigned

Agent name: ______________________________

Alternate agent: ______________________________

❑ 4. Healthcare Proxy — Medical decision authority assigned

Agent name: ______________________________

Medical preferences discussed (Y/N): ______________________________

❑ 5. HIPAA Authorization — Medical information access permissions

Authorized individuals: ______________________________

❑ 6. Organ Donor Registration — Preferences documented and shared

Registry: ______________________________

Family informed (Y/N): ______________________________

❑ **7. Digital Asset Inventory —** **Passwords, accounts, and access instructions**
Password manager: ______________________________
Digital executor: ______________________________

❑ **8. Letter of Instruction —** **Personal messages and funeral preferences**
Location: ______________________________
Recipients: ______________________________

❑ **9. Trust Documents —** **If applicable, properly established**
Type: ______________________________
Trustee: ______________________________
Beneficiaries: ______________________________

❑ **10. Business Succession Plan —** **If business owner, transition plan**
Successor: ______________________________
Timeline: ______________________________

❑ **11. Prenuptial / Postnuptial —** **If applicable, current and accessible**
Location: ______________________________
Attorney: ______________________________

❑ **12. Guardianship Designations —** **Minor children care arrangements**
Primary guardian: ______________________________
Alternate guardian: ______________________________
Financial provisions: ______________________________

Financial Preparation (Points 13–24)

❑ **13. Beneficiary Designations —** **All accounts reviewed and updated**
Retirement accounts: ______________________________
Life insurance: ______________________________
Investment accounts: ______________________________
Bank accounts: ______________________________

❑ **14. Debt Inventory —** **All debts documented with account numbers**
Mortgage: ______________________________
Auto loans: ______________________________
Credit cards: ______________________________
Medical debts: ______________________________

❑ **15. Asset Inventory —** **Real estate, vehicles, investments listed**
Real estate: ______________________________
Vehicles: ______________________________
Investments: ______________________________
Business interests: ______________________________

❑ **16. Bank Accounts —** **All accounts documented with locations**
Checking: ______________________________
Savings: ______________________________
Credit unions: ______________________________

❑ **17. Retirement Accounts —** **401(k), IRA, pension details**
401(k)/403(b): _______________________________
IRA (Traditional/Roth): _______________________________
Pension: _______________________________
Annuities: _______________________________

❑ **18. Investment Accounts —** **Brokerage, stock, bond details**
Brokerage firm: _______________________________
Stocks: _______________________________
Bonds: _______________________________
Mutual funds: _______________________________

❑ **19. Insurance Policies —** **Life, health, disability, long-term care**
Life insurance: _______________________________
Health insurance: _______________________________
Disability: _______________________________
Long-term care: _______________________________

❑ **20. Business Interests —** **Ownership documents and valuation**
Business name: _______________________________
Ownership %: _______________________________
Buy-sell agreement: _______________________________

❑ **21. Tax Documents —** **Last 7 years of returns available**
Location: _______________________________
Accountant: _______________________________
Digital copies (Y/N): _______________________________

❑ **22. Safe Deposit Box —** **Location, key, and inventory**
Bank: _______________________________
Box #: _______________________________
Key location: _______________________________

❑ **23. Digital Currency —** **Cryptocurrency access instructions**
Wallets: _______________________________
Exchanges: _______________________________
Recovery phrases stored securely: _______________________________

❑ **24. Monthly Expenses —** **Current living expenses documented**
Housing: _______________________________
Utilities: _______________________________
Healthcare: _______________________________
Transportation: _______________________________

Property & Assets (Points 25–34)

❑ **25. Real Estate Deeds —** **All properties with deed copies**
Primary residence: _______________________________
Vacation home: _______________________________
Rental properties: _______________________________

❑ 26. Mortgage Documents — **Current balances and lender info**

Lender: ______________________________

Account #: ______________________________

Balance: ______________________________

❑ 27. Vehicle Titles — **All vehicles with title copies**

Make/Model/Year: ______________________________

VIN: ______________________________

Title location: ______________________________

❑ 28. Personal Property Inventory — **High-value items documented**

Jewelry: ______________________________

Art: ______________________________

Antiques: ______________________________

Electronics: ______________________________

❑ 29. Jewelry & Collectibles — **Appraisals and photos**

Appraisal date: ______________________________

Photos taken (Y/N): ______________________________

Insurance: ______________________________

❑ 30. Intellectual Property — **Patents, trademarks, copyrights**

Patents: ______________________________

Trademarks: ______________________________

Copyrights: ______________________________

Royalties: ______________________________

❑ 31. Rental Properties — **Lease agreements and tenant info**

Property address: ______________________________

Tenant: ______________________________

Lease end date: ______________________________

❑ 32. Timeshares — **Ownership documents and maintenance fees**

Location: ______________________________

Maintenance fees: ______________________________

❑ 33. Storage Units — **Location, contents, and payment info**

Facility: ______________________________

Unit #: ______________________________

Contents: ______________________________

❑ 34. Agricultural Assets — **Farmland, livestock, equipment**

Acreage: ______________________________

Crops/Livestock: ______________________________

Equipment: ______________________________

Family & Relationships (Points 35–41)

❏ **35. Family Contact List —** **Immediate and extended family**
Spouse/Partner: ______________________________
Children: ______________________________
Parents: ______________________________
Siblings: ______________________________

❏ **36. Professional Advisors —** **Attorney, accountant, financial planner**
Estate attorney: ______________________________
Financial planner: ______________________________
Accountant: ______________________________
Insurance agent: ______________________________

❏ **37. Healthcare Providers —** **Doctors, specialists, pharmacy**
Primary care: ______________________________
Specialists: ______________________________
Dentist: ______________________________
Pharmacy: ______________________________

❏ **38. Religious / Spiritual Preferences —** **Ceremony and ritual instructions**
Faith tradition: ______________________________
Clergy contact: ______________________________
Ceremony location: ______________________________

❏ **39. Pet Care Instructions —** **Caregiver designation and funds**
Pet names: ______________________________
Caregiver: ______________________________
Veterinarian: ______________________________
Care fund: ______________________________

❏ **40. Charitable Bequests —** **Organizations and amounts**
Organization: ______________________________
Amount or percentage: ______________________________
Contact: ______________________________

❏ **41. Special Needs Planning —** **If applicable, trust established**
Special needs trust: ______________________________
Trustee: ______________________________
Government benefits: ______________________________

Final Arrangements (Points 42–47)

❏ **42. Funeral Preferences —** **Burial, cremation, or donation**
Preference: ______________________________
Pre-paid (Y/N): ______________________________
Funeral home: ______________________________

❏ **43. Memorial Service —** **Location, format, and participants**
Location: ______________________________
Format: ______________________________
Officiant: ______________________________
Music/Readings: ______________________________

❑ **44. Obituary Information —** **Key facts and photo selection**

Biography notes: ______________________________

Photo selected: ______________________________

Publications: ______________________________

❑ **45. Cemetery Plot —** **Location and deed if purchased**

Cemetery: ______________________________

Plot location: ______________________________

Deed location: ______________________________

❑ **46. Headstone / Marker —** **Design and inscription preferences**

Design: ______________________________

Inscription: ______________________________

Material: ______________________________

❑ **47. Legacy Letters —** **Personal messages to loved ones**

Recipients: ______________________________

Letters completed (Y/N): ______________________________

Important Notes

• This checklist is a guide, not legal advice. Consult with a licensed estate planning attorney for your specific situation and state laws.

• Review and update your documents every 3–5 years or after major life events such as marriage, divorce, birth, death, diagnosis, or relocation.

• Store original documents in a fireproof safe or safe deposit box. Keep copies in a separate location.

• Share document locations with your executor, healthcare proxy, and trusted family members.

• Consider creating a "When I'm Gone" folder — physical or digital — with all essential information in one place.

• Discuss your plans with family members openly. Surprises cause conflicts; clarity prevents them.

• If you own property in multiple states, each state's probate rules may apply. An attorney can advise on whether a trust would simplify things.

• Beneficiary designations on retirement accounts and insurance override what your will says. Review them.

Signatures

Prepared by: _______________________________________ Date: ________________

Reviewed with family: ______________________________ Date: ________________

Attorney consultation: _____________________________ Date: ________________