EXECUTOR/ADMINISTRATOR CHECKLIST

I. AFTER MEETING WITH ATTORNEY

1. **Your next steps:**
   - □ Find the Original Will (and Codicil) and provide to Attorney (if not already provided)
   - □ Provide beneficiary and financial information to Attorney (if not already provided)
   - □ Obtain death certificates, driver's license, marriage licenses, birth certificates, and/or obituary

2. **Dossey and Jones, PLLC next steps:**
   - □ File Application to admit Will (and Codicil) to Probate or Application to Determine Heirship and Appoint Independent Administrator of intestate estate
   - □ Hand Deliver or FedEx Original Will (and Codicil) to court (if testate)

II. COURT PROCESS

1. **After Application Filed:**
   - □ Obtain signed Consents or Waivers to Probate and/or Declinations to Serve (Dossey and Jones, PLLC will assist with this)
   - □ Dossey and Jones, PLLC to set hearing date and draft ancillary documents

2. **Hearing:**
   - □ Attend hearing (in-person or via Zoom)
     - o Hearing Scheduled: ________________________at __:_____am/pm
   - □ Sign Proof of Death, Oath, and any other documents ready for filing
   - □ Dossey and Jones, PLLC to request Letters Testamentary or Letters of Administration
     - o Pick up from court house OR mailed to Dossey and Jones, PLLC

3. **Court Requirements (Deadlines after Appointment – See Letters Testamentary or Letters of Administration):**
   Dossey and Jones will assist with the following requirements.

   - □ Notice to Creditors (due 30 days)
   - □ Notice to Beneficiaries (due 60 days)
   - □ Notice to Secured Creditors (due 60 days)
   - □ Affidavit of Compliance (due 90 days)
   - □ Inventory, Appraisement and List of Claims (due 90 days)
   - □ Affidavit in Lieu of Inventory – if no debts (due 90 days)

III. AFTER APPOINTMENT

1. **Fulfill Court Requirements above.** Letters are often required to obtain account information.
   - □ Keep records of all expenses and distributions while appointed

2. **Locate Assets (Letters Testamentary or Letters of Administration may be required)**
   - □ Open any safe deposit box or lock box
   - □ Check filing cabinets or personal records
   - □ Check tax returns (if available)
   - □ Reach out to financial advisors (if known)
   - □ Check financial management software or computer files
   - □ Identification documents
   - □ Sort through mail, emails, and address books

- ◻ Inventory probate and non-probate assets (provide to Dossey and Jones, PLLC)
- ◻ Rental property Management information
- ◻ DATE OF DEATH Values for assets
- ◻ Business ownership information
- ◻ Leases and contracts owned by Decedent

3. **Notify the following (if not already done):**
   - ◻ Landlord
   - ◻ Neighbors
   - ◻ Physicians
   - ◻ Dentist
   - ◻ School
   - ◻ Church
   - ◻ Employer
   - ◻ Organizations
   - ◻ Homeowners Association
   - ◻ Creditors
   - ◻ Family
   - ◻ Medicare
   - ◻ Social Security
   - ◻ Military
   - ◻ Financial Institutions
   - ◻ IRS (Form 56 – Notice of Fiduciary Relationship)

4. **Establish Estate Bank Account (if necessary)**
   - ◻ Dossey and Jones, PLLC to obtain an Estate EIN if necessary
     - o Estate EIN: ________________
   - ◻ ___________to provide EIN and Letters to Financial Institution of choice to set up Estate Bank Account
     - o All expenses and income for Estate should flow through this account ONLY
     - o Order checks and deposit slips for Estate account
     - o If community funds are involved one-half of all the balances on deposit on date of death can be transferred into the new estate checking account.
   - ◻ Move bank accounts to Surviving Spouse if Joint Tenant with Right of Survivorship

5. **Manage Assets:**
   - ◻ Pets (arrange for care)
   - ◻ Vehicles (arrange for storage until distributions or sale)
   - ◻ Home maintenance
     - o Security (keys, garage door openers, alarm systems, gate locks, lights working)
     - o Heating/Cooling (check thermostat, confirm HVAC working properly, close vents)
     - o Lawn care (continue/end lawn service, check sprinkler system, check for dead plants/trees)
     - o Appliances (unplug and turn off unnecessary items, check for frayed cords or fire hazards)
     - o Insurance (verify end of existing homeowners insurance policy)
     - o Utilities (turn off or adjust)
       - ◊ Electric
       - ◊ Gas
       - ◊ Water
       - ◊ Sewer/Septic
       - ◊ Internet
       - ◊ Cable/Satellite
   - ◻ Mail/email (forward or put on hold; remove name from mailing lists)
     http://www.dmachoice.org http://www.privacyrights.org
   - ◻ Medications (safely dispose unused medications; cancel automatic refills)
   - ◻ Loans/Rentals (return to owner and request return of any deposit)
   - ◻ Subscriptions (cancel and request refunds for pre-paid costs)
     - ○ newspapers, magazines, books
     - ○ groceries, bottled water
     - ○ other
   - ◻ Memberships and Future Events (cancel and request refunds for pre-paid costs)

6. **Collect any Unpaid receivables (Claims Owed TO the Estate/Decedent)**
   - ◻ Salary
   - ◻ Any other death benefits
   - ◻ Government Bonds
   - ◻ Employee benefits
   - ◻ Dividends
   - ◻ Artistic Royalties
   - ◻ Insurance benefits (Form 712)
   - ◻ Military/Veteran benefits
   - ◻ Social Security

7. **<u>Pay Expenses, Debts, and Taxes</u>**
   - □ Pay federal estate taxes (usually within nine (9) months from date of death) if estate exceeds Federal Exemption, Form 706 and any ad valorem taxes
   - □ File joint income tax return (Form 1040) (with surviving spouse, if applicable) for year of death, due by April 15
   - □ File initial fiduciary income tax return (Form 1041) for estate if estate income exceeds $600. The estate is a taxpayer and will pay income tax on its net income (after distributions, if any).
     - o If a testamentary trust is provided for in the Will it won't come into existence until it is funded; meaning, when the executor distributes the estate's assets. Thereafter, the trust will file annual fiduciary income tax returns until it is terminated later.
     - o If the Will provides that a certain portion of the estate goes into a trust, the executor must become familiar with the funding requirements set out in Rev. Proc. 64-19 (requiring a distribution) that is "representative" of all of the assets in the estate.
   - □ Pay any creditor claims (request discount on fees) □ Close credit cards
   - □ Pay attorney's fees, administrator expenses, funeral expenses
   - □ Pay mortgage payments, utilities, homeowner insurance premiums until real property sold/transferred

8. **<u>Distribute Property</u>**
   - Maintain enough in Estate account to handle Taxes and Fees before distributions.
   - Document all payments (in case an accounting is requested by a beneficiary)
   - □ Dossey and Jones, PLLC to file any deeds transferring real property
   - □ Dossey and Jones, PLLC to assist with transferring business ownership to new owners
   - □ File Disclaimer (within nine (9) months from date of death) if applicable
   - □ Transfer assets to Estate Account or Beneficiaries (using Death Certificate, Letters Testamentary or Letters of Administration)
     - Stock brokers
     - Bank accounts
     - Securities
     - IRAs and Retirement Plans
     - Artistic Royalties
     - Charities

9. **<u>Trust Administrations</u>**
   - □ Fund any Bypass or Beneficiary Trusts created in Will or Revocable Trust
   - □ Co-ordinate with Trustees to set up accounts

IV. <u>DECEDENT'S PROPERTY</u>

1. **<u>BANK ACCOUNTS</u>** – Notify institution of death and request records. For each account, complete the information below and perform the listed tasks.

   A. INSTITUTION: ______________________________
   Address: ______________________________
   Contact: ______________ Phone #: ______________ Email: ______________
   Account Number(s): ______________________ □ Checking □ Savings
   Payable on death to: ______________________________
   DATE OF DEATH balance (principal): ______________ Accrued interest: __________
   Notes: ______________________________
   ____
   □ Signature card □ Print-out of accounts (depository and loans
   □ Account Statements (last six months) □ Confirm auto deposits/withdrawals
   □ Funds transferred to beneficiaries or Estate Account

B. INSTITUTION: ____
Address: ____
Contact: _____________Phone #:_____________Email:_____________
Account Number(s): __________________________ □ Checking □ Savings
Payable on death to: ____
DATE OF DEATH balance (principal): ___________Accrued interest: _______
Notes: ____
____
□ Signature card □ Print-out of accounts (depository and loans
□ Account Statements (last six months) □ Confirm auto deposits/withdrawals
□ Funds transferred to beneficiaries or Estate Account

C. INSTITUTION: ____
Address: ____
Contact: _____________Phone #:_____________Email:_____________
Account Number(s): __________________________ □ Checking □ Savings
Payable on death to: ____
DATE OF DEATH balance (principal): ___________Accrued interest: _______
Notes: ____
____
□ Signature card □ Print-out of accounts (depository and loans
□ Account Statements (last six months) □ Confirm auto deposits/withdrawals
□ Funds transferred to beneficiaries or Estate Account

D. INSTITUTION: ____
Address: ____
Contact: _____________Phone #:_____________Email:_____________
Account Number(s): __________________________ □ Checking □ Savings
Payable on death to: ____
DATE OF DEATH balance (principal): ___________Accrued interest: _______
Notes: ____
____
□ Signature card □ Print-out of accounts (depository and loans
□ Account Statements (last six months) □ Confirm auto deposits/withdrawals
□ Funds transferred to beneficiaries or Estate Account

2. REAL PROPERTY

A. PERSONAL RESIDENCE
Address: ____
County: _____________ **DATE OF DEATH value: ___________________**
Legal Description (from purchase deed): _____________________________
____
□ Property transferred to beneficiaries or sold
□ Funds from sale transferred to beneficiaries or Estate Account

B. RENTALS
Address: ____
County: _____________ **DATE OF DEATH value: ___________________**
Legal Description (from purchase deed): _____________________________
____

□ Property transferred to beneficiaries or sold
□ Funds from sale transferred to beneficiaries or Estate Account

C. OTHER -
Address: ____
County: _________________ **DATE OF DEATH value: ________________________**
Legal Description (from purchase deed): ____
____
□ Property transferred to beneficiaries or sold
□ Funds from sale transferred to beneficiaries or Estate Account

3. **<u>BROKERAGE ACCOUNTS</u>** - Notify institution of death and request records including detailed date of death valuation reports.

A. COMPANY: ____
Address: ____
Contact: __________________Phone #:__________________Email:___________________
Account Number(s): _________________________ Payable on death to: _______________
DATE OF DEATH balance (principal): _______________Accrued interest: __________
Notes: ____
____
□ Signature card □ Print-out of accounts (depository and loans
□ Account Statements (last six months) □ Confirm auto deposits/withdrawals
□ Funds transferred to beneficiaries or Estate Account

B. COMPANY: ____
Address: ____
Contact: __________________Phone #:__________________Email:___________________
Account Number(s): _________________________ Payable on death to: _______________
DATE OF DEATH balance (principal): _______________Accrued interest: __________
Notes: ____
____
□ Signature card □ Print-out of accounts (depository and loans
□ Account Statements (last six months) □ Confirm auto deposits/withdrawals
□ Funds transferred to beneficiaries or Estate Account

C. COMPANY: ____
Address: ____
Contact: __________________Phone #:__________________Email:___________________
Account Number(s): _________________________ Payable on death to: _______________
DATE OF DEATH balance (principal): _______________Accrued interest: __________
Notes: ____
____
□ Signature card □ Print-out of accounts (depository and loans
□ Account Statements (last six months) □ Confirm auto deposits/withdrawals
□ Funds transferred to beneficiaries or Estate Account

D. COMPANY: ____
Address: ____
Contact: __________________Phone #:__________________Email:___________________
Account Number(s): _________________________ Payable on death to: _______________

DATE OF DEATH balance (principal): _______________Accrued interest: __________
Notes: ____
____

- □ Signature card □ Print-out of accounts (depository and loans
- □ Account Statements (last six months) □ Confirm auto deposits/withdrawals
- □ Funds transferred to beneficiaries or Estate Account

4. **ANNUITY and LIFE INSURANCE CONTRACTS** - Notify institution of death and request records.

A. COMPANY: ____
Address: ____
Contact: __________________ Phone #:__________________ Email:__________________
Policy Number(s): _________________________ Payable on death to: ________________
DATE OF DEATH balance (principal): _______________Death benefit: _____________
Notes: ____
____
□ Funds transferred to beneficiaries or Estate Account

B. COMPANY: ____
Address: ____
Contact: __________________ Phone #:__________________ Email:__________________
Policy Number(s): _________________________ Payable on death to: ________________
DATE OF DEATH balance (principal): _______________Death benefit: _____________
Notes: ____
____
□ Funds transferred to beneficiaries or Estate Account

C. COMPANY: ____
Address: ____
Contact: __________________ Phone #:__________________ Email:__________________
Policy Number(s): _________________________ Payable on death to: ________________
DATE OF DEATH balance (principal): _______________Death benefit: _____________
Notes: ____
____
□ Funds transferred to beneficiaries or Estate Account

D. COMPANY: ____
Address: ____
Contact: __________________ Phone #:__________________ Email:__________________
Policy Number(s): _________________________ Payable on death to: ________________
DATE OF DEATH balance (principal): _______________Death benefit: _____________
Notes: ____
____
□ Funds transferred to beneficiaries or Estate Account

5. **PROPERTY INSURANCE** - Notify institution of death, verify coverage and request records.

A. HOUSE – notify of any potential vacancy of house
Agent: ________________________________Policy No.: ____________________________
Coverage effective through: □ Declaration page □ Account statement

B. VEHICLE – notify of any change in location of vechicle(s)
Agent: ________________________________Policy No.: ____________________________
Coverage effective through: □ Declaration page □ Account statement

C. PROPERTY/CASUALTY – notify of any change in location of covered item(s)
Agent: ________________________________Policy No.: ____________________________
Coverage effective through: □ Declaration page □ Account statement

6. OIL AND GAS ROYALTIES AND LEASES – Notify distributor of death; consider requesting suspense of payment pending probate.

A. COMPANY: ____
Address: ____
Contact: __________________Phone #:__________________Email:___________________
Account Number: _________________________ Unit No./Well No.: __________________
Date of lease: ____
□ Funds transferred to beneficiaries or Estate Account □ Division Orders

B. COMPANY: ____
Address: ____
Contact: __________________Phone #:__________________Email:___________________
Account Number: _________________________ Unit No./Well No.: __________________
Date of lease: ____
□ Funds transferred to beneficiaries or Estate Account □ Division Orders

C. COMPANY: ____
Address: ____
Contact: __________________Phone #:__________________Email:___________________
Account Number: _________________________ Unit No./Well No.: __________________
Date of lease: ____
□ Funds transferred to beneficiaries or Estate Account □ Division Orders

7. CLAIMS OWED TO DECEDENT – Notify debtor of death; give instructions for payments owed prior to death.

A. Debtor: ____
Address: ____
Contact: __________________Phone #:__________________Email:___________________
Type/Status of Debt: _________________________ Amount: _________________________
When promised or due: ____
□ Paid □ Funds transferred to beneficiaries or Estate Account

B. COMPANY: ____
Address: ____
Contact: __________________Phone #:__________________Email:___________________
Type/Status of Debt: _________________________ Amount: _________________________
When promised or due: ____
□ Paid □ Funds transferred to beneficiaries or Estate Account

C. COMPANY: ____
Address: ____

Contact: ___________________Phone #:___________________Email:___________________
Type/Status of Debt: _________________________ Amount: _________________________
When promised or due: ____
☐ Paid ☐ Funds transferred to beneficiaries or Estate Account

8. **VEHICLES**

A. VEHICLE 1 -
Address: ____
Year/Make/Model: _________________________**DATE OF DEATH value:** ___________
VIN: ____
☐ Vehicle title transferred to beneficiaries or sold
☐ Funds from sale transferred to beneficiaries or Estate Account

B. VEHICLE 1 -
Address: ____
Year/Make/Model: _________________________**DATE OF DEATH value:** ___________
VIN: ____
☐ Vehicle title transferred to beneficiaries or sold
☐ Funds from sale transferred to beneficiaries or Estate Account

C. VEHICLE 1 -
Address: ____
Year/Make/Model: _________________________**DATE OF DEATH value:** ___________
VIN: ____
☐ Vehicle title transferred to beneficiaries or sold
☐ Funds from sale transferred to beneficiaries or Estate Account

V. DECEDENT'S FINANCIAL OBLIGATIONS

1. **CREDIT BUREAUS** – Notify of death and request records.
☐ Experian (www.experian.com) ☐ Equifax (www.equifax.com)
☐ TransUnion (www.transunion.com) ☐ Other: ____________________________

2. **MORTGAGE LOAN(S)** – Notify of death; confirm payment terms.

A. COMPANY: ____
Account Number: _________________________
Contact: ___________________Phone #:___________________Email:___________________
Notes: ____
____

B. COMPANY: ____
Account Number: _________________________
Contact: ___________________Phone #:___________________Email:___________________
Notes: ____
____

3. **CREDIT CARDS** - Notify institution of death and request final statements; ask about credit life insurance.

A. COMPANY: ____________________
Address: ____________________
Account Number: ____________________
Contact: __________ Phone #: __________ Email: __________
Type/Status of Debt: __________ Amount: __________
Notes: ____________________
____
□ Paid

B. COMPANY: ____________________
Address: ____________________
Account Number: ____________________
Contact: __________ Phone #: __________ Email: __________
Type/Status of Debt: __________ Amount: __________
Notes: ____________________
____
□ Paid

C. COMPANY: ____________________
Address: ____________________
Account Number: ____________________
Contact: __________ Phone #: __________ Email: __________
Type/Status of Debt: __________ Amount: __________
Notes: ____________________
____
□ Paid

4. **OTHER DEBTS OWED BY DECEDENT** - Notify creditor of death and request payment terms and amount.

A. CREDITOR: ____________________
Address: ____________________
Account Number: ____________________
Contact: __________ Phone #: __________ Email: __________
Type/Status of Debt: __________ Amount: __________
Notes: ____________________
____
□ Paid

B. CREDITOR: ____________________
Address: ____________________
Account Number: ____________________
Contact: __________ Phone #: __________ Email: __________
Type/Status of Debt: __________ Amount: __________
Notes: ____________________
____
□ Paid

C. CREDITOR: ____
Address: ____
Account Number: ____________________
Contact: _______________Phone #:_______________Email:________________
Type/Status of Debt: ____________________ Amount: ____________________
Notes: ____
____
□ Paid

5. **CONTRACTUAL OBLIGATIONS OF DECEDENT** - Notify contract holder of death and confirm status of contract.

A. Contract Holder: ____
Address: ____
Contact: _______________Phone #:_______________Email:________________
Type/Status of Obligation: ____
____

B. Contract Holder: ____
Address: ____
Contact: _______________Phone #:_______________Email:________________
Type/Status of Obligation: ____
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6. **JUDGMENT OBLIGATIONS OF DECEDENT** – Confirm Decedent's obligations under judgment.
Judgement Terms: ____
Obligee: ____
Amount Due: ____

VI. DECEDENT'S MISCELLANEOUS

1. **ONLINE AND MISCELLANEOUS ACCOUNTS** - Locate passwords, print out statements, terminate accounts.
□ Websites owned or controlled by Decedent: confirm and/or arrange for interim management
□ Financial Accounts □ Social Media □ Email
□ Merchants (e.g. Paypal) □ Bank and/or brokerage □ Internet

2. **EMPLOYEE BENEFITS** – Contact Decedent's employer and confirm status of accrued/unpaid benefits.
□ Salary □ Medical savings plan □ Life Insurance □ Pension/retirement
□ Accidental death/dismemberment insurance □ PTO

3. **UTILITIES** - Notify institution of death, turn off or change billing address.
□ Electric □ Gas □ Water □ Sewer/Septic □ Phone (landline)
□ Phone (cell) □ Cable/Satellite □ Streaming services

4. **INCOME TAX RETURNS**
□ Contact Decedent's accountant and check if any filing or tax is due

- □ Work with CPA to file tax returns
- □ Pay any amounts owed to stop accrual or penalties and interest

5. **MILITARY BENEFITS**
   □ Contact Veteran's Association and determine nature and value of any available benefits

6. **UNCLAIMED PROPERTY**
   □ Contact Texas State Comptroller's Office to determine whether Estate is entitled to funds (www.window.state.tx.us/up/reclaiming.html)

7. **TUITION REFUNDS**
   □ Contact any school or training institute to cancel Decedent's enrollment; request refund for portion of unused tuition; request whether tuition-guarantee provision was in place.

8. **ITEMS ON ORDER**
   □ Check with any retail, wholesale or mail-order outlets for orders placed by Decedent and make arrangements for payment or refund.

9. **INTELLECTUAL PROPERTY RIGHTS**
   □ Check USPTO (or international) for trademarks, patents, copyrights or other intellectual property to determine if renewals or modifications must be filed.

VII. OTHER MATTERS AND GENERAL NOTES

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