

APPENDIX C

CHECKLISTS

Checklists included herein are specimens intended for instructional purposes only. They should not be thought of as the only way or the best way to perform any function. Steps on these specimen checklists may or may not apply to your organization's procedures. They should not be used in whole or in-part without thinking through how your organization intends to perform an action. Feel free to modify these checklists in any way to fit your situation. If any part of a checklist in this manual is of no use to your organization, then as a prominent mid-western attorney is fond of saying, "the delete key is your friend."

Each organization must think through its own process of handling a given task. In essence the checklist becomes your organization's procedure to accomplish a certain function, such as processing a matured gift annuity or receipt of a gift of real estate. Developing a checklist will help you to remember the many steps involved in effectively administering a planned giving and trust services department. After a checklist is developed it may be discovered that a specific step is un-necessary. Since it is your procedure you are free to change it. Be cautious however, as there may be steps in a given situation that may be required by statute or required to satisfy the standard of care in your jurisdiction. In some cases you may want to consult legal counsel as to the creation of an adequate checklist for a given purpose.

Developing a checklist system for your organization will assist in developing well thought out procedures. Utilizing well developed checklists will help you obtain consistent administrative performance. They also provide freedom from having to remember (and freedom from forgetting!) the myriad details involved in planned giving and trust services. Include only those steps in a checklist that you want to remember. If an action is included in a checklist and it does not need to be completed, then merely mark it with "n/a" and include a brief explanation adjacent to that step on the checklist. The checklist can be thought of as a communication tool between current personnel and future reviewers regarding the procedure being completed.

Accreditation standards require the consistent use of a checklist for only a few functions. Following these specimen checklists will not guarantee approval by the General Conference Auditing Service of how your organization performs its work. One way to improve compliance with the Accreditation Standards is to verify that all required actions spelled out in the standards are included as steps in the checklist. In addition, other best practices or audit requirements may also be included in the checklist to insure fulfillment.

The following specimen checklists are included in alphabetical order.

Asset Addition to Trust	Matured Will
Asset Withdrawal from Trust	New Annuity
Death of First Trustor	New Trust
Distribution Checklist and Table	New Will
File Review	Real Estate Addition to Trust
Gift Acceptance of Tangible/Intangible Personal Property	Real Estate Sale
Gift Acceptance – Real Estate	Real Estate Withdrawal from Trust
Independent / Outside Bequest	Return Unrecorded Deed
Matured Annuity	Return Will
Matured Trust	Revoked Trust

ASSET ADDITION TO TRUST CHECKLIST

(Other than Real Estate)

Trustor Name(s) _____ Trust Number _____

Asset Added _____ To _____

- _____ 1. Acknowledgement/Receipt to Trustor

- _____ 2. Prepare *Addition to Trust* Form _____ Mailed _____ Received

- _____ 3. Complete *Investment Direction* Form _____ Mailed _____ Received

- _____ 4. Obtain TMC acknowledgement and acceptance
TMC Action # _____ Date _____

- _____ 5. Prepare legal transfer documents as needed
Forward to attorney for drafting
_____ Draft _____ Attorney Review _____ Final prep.

- _____ 6. Trustor executes transfer documents as needed
_____ Deliver _____ Mail documents for execution

- _____ 7. Funding information to Treasury
_____ Investment Direction Form
_____ Update Trust Accounting
_____ Print new Asset Review for file

- _____ 8. _____ Copy of Asset document to Trustor Estate Planning Notebook
_____ File Checklist and Asset Addition Form with Trust
_____ File Investment Direction Form and Asset with Asset
_____ File Correspondence with correspondence

- _____ 9. Update Trust database

- _____ 10. Director sign as completed

ASSET WITHDRAWAL CHECKLIST

(Other than Real Estate)

Trustor Name(s) _____ Trust Number _____

Asset Withdrawn _____ From _____

- _____ 1. Document request from Trustor
 - _____ Memo of conversation or _____ Written request
 - _____ Initiate tickler _____ Add to TMC Agenda

- _____ 2. _____ Mail *Withdrawal From Trust* Form to Trustor include SAE/PP (if oral request or if written request unclear) _____ Also mail *Investment Direction Form* (if needed) _____ *Withdrawal From Trust* Form returned

- _____ 3. Check Request to Treasury
 - _____ Check & Cashier's Receipt Received
 - _____ Obtain non-monetary asset

- _____ 4. TMC acknowledgment of ALL withdrawals (not necessary to wait for TMC to return requested asset)
 - _____ Action # _____ Date _____
 - _____ Action noted on Summary Sheet

- _____ 5. Check to Trustor
 - _____ Prepare *Withdrawal Cover Letter & Receipt*, include SAE/PP
 - _____ Copy and stamp check endorsement area with receipt stamp
 - _____ Copy packet for file
 - _____ Printout updated Asset Summary for file

- _____ 6. Delivery/pick up date _____ or Mail date _____
Or Certified Mail sent _____ Cert. Receipt returned _____

- _____ 7. Obtain signed receipt
 - _____ File check, cover letter copies, checklist and receipt in respective asset section,
 - _____ Print and file updated asset value printout on top of respective asset section
 - _____ File *Withdrawal From Trust* Form in Trust Supporting Document section

- _____ 8. Update Trust database, remove from tickler

- _____ 9. Director verify completion

DEATH OF FIRST TRUSTOR CHECKLIST

Trustor name: _____

Field Rep.: _____ Date of Death: _____ File No.: _____

- _____ 1. Secretary:
- _____ Start Tickler _____ Mark on Calendar
 - _____ Mark date of death on File labels _____ Rolodex _____ Trust Database
 - _____ Mail will to PR/probate (certified) _____ Receipt returned from PR/probate
 - _____ Order flowers (if we know in time for the funeral/memorial service)
 - _____ Send card to the surviving spouse/immediate family
 - _____ Update mailing list and trust list
- _____ 2. Trust Management Assistant / Field Representative
- _____ Review trust document and remainder of file
 - _____ Note interim distributions
 - _____ Make contact with the surviving trustor
 - _____ Verify funeral/memorial service arrangements
 - _____ Order a copy(ies) of death certificate or print SS Death Index entry
 - _____ Attend funeral/memorial service if at all possible
 - _____ At surviving trustor's convenience, visit and review file for desired or necessary changes
 - _____ Check for One-life Annuity
- _____ 3. Director:
- _____ Acknowledge death (_____ Vote change of status to irrevocable if necessary)
 - _____ TMC Action # _____ Date _____
 - Notify treasury:
 - _____ Update mailing list
 - _____ Stop payments
 - _____ Adjust basis
 - _____ Other _____
- _____ 4. Director verify completion.

DISTRIBUTION CHECKLIST

Trust Name: _____ File No.: _____

- _____ 1. Preliminary distribution report to TMC
- _____ 2. Consult with Treasury Re:
_____ Updated accounting of the trust
_____ Approximate partial and final distribution date
- _____ 3. Notify each beneficiary by letter of:
(Within _____ days of death as required by state law) Deadline: _____
_____ Approximate assets in trust
_____ Approximate distribution date
_____ Percent of trust he/she is to receive
_____ Identity of in-kind assets beneficiary receives
_____ If a partial distribution is to be made
_____ Other required pertinent information
- _____ 4. For In-kind Distribution:
_____ Inventory in-kind Assets to be distributed
_____ Verify in-kind distribution in compliance with document
_____ Obtain valuations as appropriate
_____ Obtain certified appraisal(s) as necessary
_____ Consult with beneficiaries as appropriate according to document
_____ Obtain signed declination of in-kind distribution as necessary
_____ Prepare receipts for in-kind asset distribution
_____ Distribute in-kind assets
_____ Obtain signatures on receipts
- _____ 5. For Partial Payments: TMC: Action # _____ Date _____
_____ Verify with Treasury the amount of partial distribution
_____ Complete attached Distribution Table
- _____ 6. For Partial Payments: TMC: Action # _____ Date _____
_____ Verify with Treasury the amount of partial distribution
_____ Complete attached Distribution Table
- _____ 7. For Final Payments: TMC: Action # _____ Date _____
_____ Verify with Treasury the amount of final distribution
_____ Verify distribution in compliance with document
_____ Send Receipt of Final Distribution & Final Accounting to beneficiary to sign, include
PPD/SAE to private individuals (if SDA Entities include check with receipt)
_____ Complete attached Distribution Table
- _____ 8. Director review for completion

Distribution Table

Partial _____ Final _____ In-kind _____ Trailing Income				
Beneficiary	Receipt Sent	2nd Receipt Sent	Receipt Returned	Check Sent

Partial _____ Final _____ In-kind _____ Trailing Income				
Beneficiary	Receipt Sent	2nd Receipt Sent	Receipt Returned	Check Sent

Partial _____ Final _____ In-kind _____ Trailing Income				
Beneficiary	Receipt Sent	2nd Receipt Sent	Receipt Returned	Check Sent

FILE REVIEW CHECKLIST

Name: _____ Type: _____ File #: _____

Field Rep.: _____ Reviewer: _____ Review Date: _____ Last Reviewed: _____ Zip : _____

Mark or check the items that are not in compliance. Use spaces to make notes. Fix items that are immediately fixable.

BLUE FOLDER (Documents)

Section 1: Correspondence

- ___ Not in chronological order
- ___ Original request for service (on bottom) missing
- ___ Telephone message/notes missing

Section 2: Trust Document

Trust & Amendments:

- Execution error
- Giving guidelines problem
- Educational trust expired
- Amendment needed
- Cash trust action needed
- Death certificates of Grantor or beneficiaries missing
- Written revocation notice

Add/Withdrawals (transactions):

- Request from Trustor missing
- W/d receipt missing (terminated folder)
- Receipt for non cash assets missing

TMC Authorizations needed/missing:

- Trust
- Amendment(s)
- Personal Representative
- GCC becomes Trustee of Self Trust
- GCC staff DPOA
- GCC staff DPOA Activation
- GCC staff. Patient Advocate
- Change of Status (e.g. Irrevocable)
- First Trustor to die notice
- Exception to policy
- Additions: cash, notes receivable, life ins / comm'l annuities, real estate, mortgages/land contracts, etc.
- Withdrawals: all assets except contingent
- Revocation

___ Attorney Disclosure Letter missing

___ Updated file summary needed

___ Needs visit

Section 3: Supporting Documents

- ___ Add Forms current
- ___ Withdraw Forms current
- ___ Match WD/Add docs with directions/checks

Section 4: Will & Advance Directives

- ___ POW Will _____ Simple Will _____ No Will
- ___ Execution error in Will
- ___ POW pre-dates trust
- ___ Deceased Grantor's Will not sent to probate
- ___ Execution error in DPOA
- ___ GCC staff DPOA not current (>3 yrs)
- DPOA for GCC staff does not include giving to charity
- ___ No DPOA _____ Older than 3 years
- ___ No Living Will _____ Older than 3 years
- ___ Need HIPPA Release

Section 5: File Review

Section 6: Data Form

- ___ Beneficiary information needed
- ___ Family Information Form needed
- ___ Family Information Form not signed
- ___ Need receipt for original documents/cash/assets received from grantor

<p><u>GREEN FOLDER (Assets)</u> Section 1: Asset Summary ___ Year-end Asset Summary missing ___ Trust is dry ___ Cost/Benefits Problem Update Asset Summary add/remove: <input type="checkbox"/> FMV needed _____ <input type="checkbox"/> Contingent assets @ \$1 _____ <input type="checkbox"/> Item held for safe keeping @ \$1 _____ ___ Assets not @ basis (revocable) _____ ___ Assets not @ FMV (irrevocable) _____ _____ _____ _____</p> <p>Section 2: Accounting & Tax Information ___ Current 1041 missing ___ 1041 missing other years _____ ___ 1099 does not agree with income report & tax return ___ Tax ID# needed (GCC TTEE w/income or irrevocable) ___ Annual report to Grantor missing</p> <p>Section 3: Real Estate Deed (# of properties) _____ Use separate Review for each property</p> <p>Proper Titling: <input type="checkbox"/> GCC outright <input type="checkbox"/> GCC as Trustee <input type="checkbox"/> Other _____ Deed not recorded <input type="checkbox"/> Hold harmless or attorney statement not to record needs investigation as to relevancy</p> <p>Real Estate Information Form: (property added after 1992): <input type="checkbox"/> Missing <input type="checkbox"/> Incomplete <input type="checkbox"/> Site visit needed <input type="checkbox"/> Signed by Field Rep <input type="checkbox"/> Signed by Trustor(s) ___ Need cost basis statement ___ Appraisal needed ___ Mortgage information needed ___ Environmental concerns</p>	<p>Mortgage/Land Contract: <input type="checkbox"/> Need Assignment to Trust (not necessary if Trust owns Land Contract) <input type="checkbox"/> Assignment not recorded <input type="checkbox"/> Specific investment direction missing</p> <p>Property Insurance & Tax <input type="checkbox"/> Hold harmless-no insurance <input type="checkbox"/> Hold harmless-not adequate coverage <input type="checkbox"/> No proof of insurance in-force <input type="checkbox"/> Additional Insured missing or incorrect <input type="checkbox"/> Inadequate coverage <input type="checkbox"/> Property tax payment verification needed</p> <p>Reports: <input type="checkbox"/> Need Year-end mortgage/land contract report <input type="checkbox"/> Need Year-end rental inc/exp report</p> <p>Section 4: Bank, Brokerage, Securities & CURF ___ No Current Security Inspection & Reconciliation ___ No Proof of Ownership ___ No Specific Investment direction ___ Inappropriate titling ___ No cost basis ___ Year-end statements for bank accts, etc missing</p> <p>Section 5: Other Assets List Other Assets: _____ _____ _____</p> <p>Section 6: Contingent Assets (POD/TOD/ITF/other beneficiary designation) ___ Verification needed ___ Beneficiary correction needed</p> <p>_____ Reviewer Signature</p> <p>_____ Associate Director Sign: Remediation Complete</p>
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Comments:

GIFT ACCEPTANCE CHECKLIST

Tangible/Intangible Personal Property

Donor Name: _____ Donor SSN: _____

Property Description: _____

Gift Date: _____ Beneficiary _____ File No.: _____

- _____ 1. Written statement of gift intent & purpose
- _____ 2. TMC approval: Action # _____ Date _____
Include in action the intended use of the property (sell, retain for GC / Entity use etc.)
Purpose: _____
- _____ 3. Gift valuation as needed or attach copy of donor's appraisal: Appraised value _____
- _____ 4. Prepare and execute legal transfer documents as needed:
_____ Type document: _____
_____ Type document _____
_____ Who Prepares? _____ Donor Counsel _____ OGC _____ Other _____
- _____ 5. Thank you letters from:
_____ Planned Giving Director _____ Beneficiary Representative _____
- _____ 6. Send Donor gift substantiation _____ Receipt letter _____ 8283?
- _____ 7. To Treasury:
_____ Copy of statement of gift intent & purpose / other documentation
_____ Valuation _____
- _____ 8. Add to Gift Property Inventory for Resale
- _____ 9. Liquidation of asset: Disposition date: _____
_____ Real Estate Sale/Closing Checklist
_____ Other _____
_____ Cancel Insurance _____
- _____ 10. File IRS Form 8282 within 125 days after disposition of gift property
_____ Copy to file _____ Copy to Donor _____
- _____ 11. Distribution of Gift Proceeds:
_____ Request to Treasury _____ Check from Treasury
_____ Check, Cover letter, Receipt, SA/PP envelope to entity _____ Receipt returned _____
- _____ 12. Director verify completion

GIFT ACCEPTANCE CHECKLIST

Real Estate

Donor Name: _____

Parcel address/description: _____

Parcel Number: _____ Beneficiary: _____

- _____ 1. Complete Real Estate Information Form
- _____ 2. Voted through TMC Action # _____ Date _____ (Pending title commitment, tax status, environmental screening)
- _____ 3. Title Insurance Policy (Corp/Assn as insured):
 _____ Ordered _____ Commitment received _____ Final copy received
 Name of Title Company and Address _____
 Telephone and Contact Person _____
- _____ 4. Verify real estate taxes paid:
 _____ Copy of tax certification or tax payment receipt to file
- _____ 5. Obtain appraisal or copy of donor's appraisal: Appraised value _____
- _____ 6. Prepare Deed:
 _____ Initiate Tickler _____ Draft _____ Attorney Review _____ Final Prep.
- _____ 7. Execute Gift Acceptance Agreement with Donor (or Memorandum of Understanding for Gifts of Real Estate)
 _____ Original to file _____ Copy to donor
- _____ 8. Donor execute Deed: _____ Deliver _____ Mail / FedEx
 Deed returned from Trustor signed & notarized _____ (date)
- _____ 9. Record Deed: Deed sent to County with check for recording _____
 Recorded Deed returned _____ (date) _____ File in gift property folder
- _____ 10. Property Insurance:
 _____ Insurance information to Treasury/ARM, retain copy in file
- _____ 11. Gift Acknowledgement and Substantiation
 _____ Thank you letter from TRS _____ Thank you letter Beneficiary Rep
 _____ Gift receipt/substantiation ltr _____ Form 8283 & Instructions enclosed
- _____ 12. Add to Gift Property Inventory
- _____ 13. List property for sale: _____ Sale by Corp Assn: _____ Retain for Corp/Assn use? _____ Transfer to: _____
 Price _____
 Sale by Realtor: Name _____ Phone _____
 Address _____ FAX _____
 Listing agreement signed _____ List price _____
 TMC Action # _____ Date _____ Corp Action date and # _____
- _____ 14. File IRS Form 8282 within 125 days after disposition of gift property
 _____ Copy to file _____ Copy to Donor
- _____ 15. Director Review checklist & verify completion

MATURED ANNUITY CHECKLIST

Annuitant Name(s): _____ Annuity No. _____

Remainder Beneficiary: _____ Death Date: _____

Estate Representative: _____

Address: _____

Phone _____ FAX: _____

- _____ 1. Record date of death
 _____ File label _____ File Summary Sheet _____ Data Base
 _____ Initiate tickler _____ TMC Agenda

- _____ 2. Notice to Fund Manager _____ Death date: _____ Telephone memo _____ Fax / Email Memo

- _____ 3. Personal Representative/Family _____ Condolence letter _____ Copy of CGA Agreement
 Request copy of Death Certificate _____

- _____ 4. Receive copy of death certificate _____ File _____ Fax to Fund manager

- _____ 5. Request refund of payments made after death
 _____ None made _____ Letter sent _____ File claim with Estate
 _____ Refund received _____ Refund to Fund manager _____ Refund to Treasury

- _____ 6. If Annuitant dies before transition year: Transition Year _____
 Un-recovered basis in contract \$ _____
 (Get un-recovered basis from fund manager)
 _____ Letter to Estate Rep with Un-recovered Basis calculation and explanation
 _____ Enclose Fund Manager letter of deduction for undistributed investment
 _____ Enclose copy of calculation sheet from Fund Manager

- _____ 7. Request remainder balance and check from Mellon \$ _____
 _____ Date check received _____
 _____ Request corrected 1099-R _____

- _____ 8. TMC acknowledgement and authorization to distribute: Action # _____ Date _____
 _____ Log Action # on File Summary Sheet _____

- _____ 9. Estate Representative Information to Mellon for final 1099-R

- _____ 10. Distribution to beneficiary (ies)

Beneficiary Name	Date Delivered	Mail?	GC Treas/Personal?	Date Receipt Returned

_____ 11. Final Things: _____ Update Maturity spreadsheet _____ Cancel Tickler _____ File in Terminated

_____ 12. Assoc. Director Sign as Complete

MATURED TRUST CHECKLIST

Trust _____ Date Of Death _____ Trust No. _____

- _____ 1. Initial actions: _____ Record date of death: _____ Rolodex _____ File label..
 _____ Initiate tickler _____ Send flowers to funeral _____ Send card to family (as appropriate) _____ Notify organization legal counsel
- _____ 2. Update trust database (change status to pending, change name to Irrevocable, change type)
- _____ 3. Update beneficiary information (names & addresses)
- _____ 4. Sent Will to Probate (certified) _____ Receipt returned _____
 _____ Complete Matured Will Checklist if necessary _____ Not applicable
- _____ 5. Trust Committee vote to acknowledge death, change trust status to irrevocable, liquidate assets and give preliminary distribution report: Action # _____ Date _____
- _____ 6. _____ TMC--If Self-Administered and CORP/ASSN is willing to serve as Successor Trustee:
 Action # _____ Date _____
 _____ Prepare Certificate of Trust naming CORP/ASSOC as Successor Trustee
- _____ 7. Order (3-10 depending on assets) certified copies of Death Certificate
- _____ 8.. Stop retirement, annuity, social security payments etc. as needed
- _____ 9. Notify Treasury:
 _____ Change to Irrevocable Trust Account Numbers
 _____ File for Federal ID # for Irrevocable Trust # _____
 _____ Trust Income beneficiary payment stopped
 _____ Print Asset Review report as of date of death
- _____ 10. Value assets at fair market value as of date of death
 _____ 6 month alternative valuation date
- _____ 11. Decide if distribution reserve needed to pay taxes, administrative expenses etc.
- _____ 12. Review distribution & notify beneficiary (see Distribution Checklist) within 30 days after death
 _____ 30 day deadline (as required by state law)
- _____ 13. Notify creditors, terminate charge accounts, pay final bills as appropriate
- _____ 14. Determine in-kind distribution
- _____ 15. Collect contingent assets
- _____ 16. Liquidate trust assets as appropriate
- _____ 17. Obtain TMC authorization to make final distribution and close file
 Action # _____ Date _____
- _____ 18. Make distribution following Distribution Checklist
- _____ 19. Verify distribution receipts in file

- ____ 20. Treasury file final Federal 1040, 1041 and 706 and corresponding state tax returns as needed. Consider combining Trust and Estate for final 1041. If Trustor was an Annuitant and died before the life expectancy then calculate unrecovered basis deduction for decedent's final 1040.
____ No 1041 needed memo in file ____ Place on tax prep tickler for end of year
- ____ 21. Change status in trust database to matured, enter date closed, move to inactive database and place on term-up database, remove from tickler, file placed in terminated files
- ____ 22. Director review for completion

SPECIMEN

MATURED WILL CHECKLIST

_____ First Spouse To Die _____ Second Spouse To Die _____ Single Person

Name _____ County & State of Domicile _____

Field Rep.: _____ Date Of Death: _____ File # _____

- _____ 1. Memo death notice to file _____ notify department staff _____ legal counsel _____ initiate tickler
- _____ 2. Locate original Will and Review Will file
- _____ 3. Make contact with surviving spouse or family
- _____ 4. Verify funeral/flower arrangements if necessary
- _____ 5. Attend funeral if appropriate and practical
- _____ 6. Send condolence letter or card as necessary
- _____ 7. Meet with surviving spouse/family (if necessary) at their convenience to orient to process
- _____ 8. **If CORP/ASSN is NOT the Personal Representative:**
 - _____ Obtain copy of death certificate
 - _____ Send Will to Personal Representative / Attorney / Probate court per statutory requirement
 - _____ Update Will Database (for surviving spouse), remove decedent from Will Database and enter on Terminated-Up Database
 - _____ Stamp & date outside of folder and put in Terminated File, update tickler
- _____ 8. **If CORP/ASSN is the Personal Representative:**
 - _____ Authorize Personal Representative responsibilities and retention of independent attorney, if necessary through TMC:
 Action # _____ Date _____
 Personal Representative _____ Attorney _____
 - _____ Assign file number and update tickler
 - _____ Obtain Certified Death Certificate (3-10 copies)
 - _____ Secure heirs at law and beneficiary information (names, addresses, relationship, and SSN)
 - _____ Funeral expenses paid in full: Yes _____ No _____
 If unpaid: Determine if assets are sufficient to pay funeral expenses
 Obtain itemized statement from funeral director
 - _____ Determine if sufficient assets, denomination benefits and facts to justify opening probate.
 - _____ Determine if Small Estate procedure available/appropriate.
 - _____ Initiate *Probate Checklist* and *Probate Essential Dates Checklist* (per local jurisdiction/atty.)
 - _____ Make distribution following *Distribution Checklist*
 - _____ When Probate is declared complete: Update Will Database (for surviving spouse), remove decedent from Will Database
 - _____ Stamp & date outside of folder and put in Terminated-Up File, update tickler
- _____ 9. At surviving testator's convenience, visit and review estate plan for desired changes
- _____ 10. Director verify completed

NEW ANNUITY CHECKLIST

Present _____ Deferred _____

Annuitant Name(s): _____ Annuity No. _____

State of Residence: _____ Remainder Beneficiary: _____ Gift Date: _____

- | | | |
|-------|-------|--|
| _____ | _____ | 1. Document request from Donor:
Initial _____ Date _____
_____ Memo of conversation _____ Written request/ App _____ Initiate tickler & Checklist |
| _____ | _____ | 2. Packet to Donor
_____ Summary letter _____ Application _____ Atty. Disclosure _____ ACH Authorization
_____ MD Disclosure _____ Federal Disclosure _____ Privacy Policy _____ Rtn Envelope |
| _____ | _____ | 3. When Cash or Securities Received _____ Prep Annuity File _____ Add Annuity to TMC Agenda
_____ Attach Check copy to Original Application for File
_____ Prep Draft Contract, State specific forms/disclosure
_____ Prep CresPro calculator sheets with correct gift date and Income Tax schedule |
| _____ | _____ | 4. Acknowledgement receipt of check etc, thank you letter |
| _____ | _____ | 5. Packet to Fund Manager: How shipped _____ Reg Mail _____ Cert Mail _____ Over Night
_____ Check _____ Application Copy _____ ACH Application
_____ CresPro Calculator Sheets with correct gift date & Inc Taxation Schedule |
| _____ | _____ | 6. Packet to Treasury
_____ Application Copy _____ Copy of Check
_____ Calc Sheets with correct gift date & Inc Taxation Schedule |
| _____ | _____ | 7. Packet to Legal
_____ Contract Draft _____ Copy of Check _____ Application
_____ Signed Atty. Disclosure _____ CresPro Calculator Sheets |
| _____ | _____ | 8. Receipt Received From Fund Manager |
| _____ | _____ | 9. Contract Approved/Received From Legal |
| _____ | _____ | 10. TMC Authorization: Action # _____ Date _____
_____ Log Action # on File Summary Sheet |
| _____ | _____ | 11. Document Packet to Assn/Corp officers for signature _____ Packet Returned |
| _____ | _____ | 12. Contract Packet to Annuitant for Signature
_____ One original & one copy of contract _____ Cover Letter _____ Return Envelope |
| _____ | _____ | 13. All Documents received from Annuitant with signature _____ Contract _____ State Disclosure
_____ Federal Disclosure _____ Atty. Disclosure _____ ACH Application |
| _____ | _____ | 14. FAX executed CGA Agreement to Fund Manager |
| _____ | _____ | 15. Gift Substantiation Letter with 2-page calculation sheet attached, Final Thank You |
| _____ | _____ | 16. Update Database |
| _____ | _____ | 17. State Notification/other requirements |
| _____ | _____ | 18. Director Sign as Complete |

- New
- Amendment

NEW TRUST CHECKLIST

- Corp/ASSN Trustee
- Self-Administered
- Irrevocable
- CRT

Trustors Name: _____

Staff Rep.: _____ Date of Trust: _____ File #: _____

Trustor Counsel Name: _____ Phone: _____

Address: _____

- _____ 1. Gather Initial Information: Family Information Form _____ Atty Info Sheet _____
Atty Disclosure _____ Receipt for Documents received _____
- _____ 2. Determine Initial Funding: _____ Real Estate: Complete Real Estate Addition Cklist or Gift
Acceptance-Real Estate Cklist (for CRT)
_____ Other Investments: Complete Investment Direction Form
_____ Asset Assignment Needed
- _____ 3. Assign file number, enter in record book, initiate computer tickler
- _____ 4. Voted through TMC Action # _____ Date _____
- _____ 5. Prepare permanent file folders; insert docs according to File Map. Verify attorney disclosure letter in file.
Begin Summary Sheet
- _____ 6. Packet to Legal for document drafting: Family Info Form _____ Atty Info Sheet _____ Atty
Disclosure _____ Asset info/docs (deeds etc.) _____
Request for HIPPA authorization _____
- _____ 7. Execute Documents: _____ Staff Deliver _____ Office signing _____ Mail docs
- _____ 8. After trustor(s) return(s) documents, check signatures, dates, witnesses, notary, etc. also, attorney disclosure
letter
- _____ 7. Officers sign trust documents
- _____ 8. Packet to Treasury: _____ Asset info _____ Investment Direction Form
- _____ 9. Apply for Employer Tax ID # only if receiving income or at maturity:
Date applied for _____ Date received _____ Not applicable _____
- _____ 11. Verify Completion of Funding Checklists: _____ Real estate _____ Investment Direction Form
_____ Other _____ Copy of Treasury Asset Summary to file
- _____ 13. Prepare Estate Planning Notebook _____ Deliver _____ Mail
- _____ 14. _____ Update trust database, remove from tickler
_____ If there were prior wills, remove them from Will database
- _____ 15. Director Review trust folder and verify that trust is complete

REAL ESTATE ADDITION CHECKLIST

Trust Name: _____ Trust # _____

Parcel address/description: _____

Tax/Parcel Identification Number: _____

- _____ 1. Complete Real Estate Information form
- _____ 2. Prepare Deed:
 _____ Initiate Tickler _____ Draft _____ Attorney Review _____ Final Prep.
- _____ 3. Voted through TMC Action # _____ Date _____
- _____ 4. Obtain Title Commitment/Policy (if applicable)
- _____ 5. Verify real estate taxes paid: _____ Copy of paid taxes _____ Hold Harmless
- _____ 6. Trustor execute Deed: _____ Deliver _____ Mail
 _____ Deed returned from Trustor signed & notarized (date) _____
- _____ 7. Record Deed _____ Send Deed to County with check for recording
 _____ Hold Harmless not to record
- _____ 8. Recorded Deed returned _____ File in Asset folder _____ Mail copy to Trustor
- _____ 9. Property Insurance:
 _____ Additional Insured
 _____ Hold Harmless: _____ Not named Add'l Insured _____ Inadequate Coverage
 _____ Not Insured
 _____ Copy of Insurance Policy for file
 _____ Prepare letter and envelope to insurance co., then send to Trustor(s) for signatures
 _____ Endorsement received from insurance co., verify that GCC is properly listed
 _____ File endorsement
 _____ Update insurance information file and database
- _____ 10. Land Contract/Mortgage:
 _____ Investment Direction Form _____ Memo regarding who pays taxes & insurance
 _____ Sellers Assignment of Land Contract/Mortgage _____ Original Land Contract for file
 _____ Draft _____ Attorney Review _____ Trustor Execute _____ Return
 _____ Title Policy for Corp/Assn _____ Ordered _____ Received
- _____ 11. Complete Transfer Tax declaration
- _____ 12. Obtain appraisal (for irrevocable trusts only): Appraisal value _____
- _____ 14. Rental property? _____ No _____ Yes: Place on annual report tickler
- _____ 15. Mortgage on property? _____ No _____ Yes: Place on annual report tickler
- _____ 16. Update Trust Summary _____ Property Tax and Insurance _____ Databases
- _____ 17. Director Review checklist & verify completion

REAL ESTATE SALE/CLOSING CHECKLIST

Seller: _____

Buyer: _____

Property: _____

Realtor: _____

- _____ 1. Authorization TMC/Corp Board Action # _____ Date _____
_____ Investment direction to sell
- _____ 2. Appraisal _____ Ordered _____ Received _____ Amount _____
Name of Appraiser _____
Phone & Contact person _____
- _____ 3. Survey _____ Ordered _____ Received _____
Name of Surveyor _____
Phone & Contact person _____
- _____ 4. Offer to purchase _____ Draft _____ Attorney approval _____
_____ Seller's Disclosure Statement prepared. Given to buyer _____
_____ Trustor/Corp/Assn Accepted/Approved Action # _____ Date _____
_____ Signed by buyer _____ Signed by seller _____
- _____ 5. Order Title Insurance: (Verify with legal counsel type of policy needed for each circumstance)
Name of Title Co _____
Address _____
Phone & Contact person _____
- _____ 6. Prepare documents as required by Title Co: (Title commitment generally lists required documentation)
_____ Affidavit & Resolution _____ Certificate of Trust _____ Draft _____ Attorney approval
_____ Warranty Deed _____ Draft _____ Attorney approval
_____ Affidavit Certifying Interest in Real Property (if Land Contract sale)
_____ Draft _____ Attorney approval
_____ Closing Statement _____ Proof read
_____ Bill of Sale _____ Draft _____ Attorney approval
_____ Disclosure of Info on Lead-based paint if required
_____ Other _____
- _____ 7. Inspection reports
_____ Structural and mechanical report
_____ Environmental audit, including septic tank
- _____ 8. Closing set: Place _____ Mail _____
Date & Time _____
- _____ 9. Property Insurance: Terminate Additional Insured endorsement _____
- _____ 10. Director review for completion

REAL ESTATE WITHDRAWAL

Trustor Name(s) _____

Trust Date _____ Trust No. _____

Parcel address/description _____

- _____ 1. Document request from Trustor/Treasury
 _____Memo of telephone request _____Written request _____Place on tickler _____TMC Agenda
- _____ 2. _____Obtain signed Withdrawal From Trust Form
 _____File with Trust document _____Trust Revocation --Withdrawal Form not needed
 _____Obtain Investment Direction Form to Sell
- _____ 3. TMC / Corp/Assn Action convey to Trustor or sell out of Trust
 _____Action # _____Date _____File Minute copies (one with Deed, one with Trust)
- _____ 4. If a Sale out of Trust then Complete Real Estate Closing Checklist
- _____ 5. If a Withdrawal From Trust _____If Unrecorded deed—complete Returning Unrecorded Deed Checklist
 _____If Recorded deed in TRS file—Atty prepare deed to Trustor
- _____ 6. Forward Documents to attorney for drafting: _____Grantor / Title Comp attorney to prepare?
 _____If Corp/Assn is selling the property prepare Corporate Resolution
 _____Draft _____Attorney Review Final prep. _____Proof legal description
 _____Secure and notarize signatures of Corp/Assn officers
 _____If Trustee to record:
 _____Send Deed to County with check for recording, request Deed return to Corp
 _____Mail copy to Trustor (if necessary)
 _____Recorded Deed returned from County
 _____Copy recorded Deed for file and send original to Trustor
 _____If Trustor / Title Company to record:
 _____Send Deed to Trustor/Title Company for recording
 _____Send Trustor/Title Company Corporate Resolution
- _____ 7. Prepare letter to Trustor &/or Title Co. listing documents enclosed and reporting new asset balance to Trustor
 _____Receipt of Documents & return envelope
- _____ 8. Deliver to: _____Trustor/Buyer: _____Title Co./Attorney: Date delivered or mailed _____
- _____ 9. Obtain signed Receipt of Documents from Trustor, Buyer, Attorney, Title Company, etc.
- _____ 10. Cancel ARM insurance &/or add'l. insured. endorsement by letter to ins. company/agent. Only if total parcel is withdrawn
- _____ 11. Update Accounting records
 _____Memo to Treasury listing parcel withdrawn, include withdrawn parcel size if only a partial withdrawal is made
 _____If Land Contract cancel/update Investment Directions due to withdrawal
 _____Adjust basis if a partial withdrawal of real estate parcel
 _____Printout updated Asset Summary for file and return to Trust Department
- _____ 12. Verify that the entire parcel has been deeded back to the Trustor. Make a file note of the change in the legal description.) _____Update File Summary
- _____ 13. Director verify Completion

RETURNING UNRECORDED DEED CHECKLIST

Trustor Name: _____ Trust No.: _____

_____ 1. Mark original unrecorded deed "Unrecorded", make a copy (which will go to Trustor), put original back in the file.

_____ 2. Prepare Trustee's Quit Claim Deed. (Each state a specific form. Use atty in that state.)

Attorney Contact Info: _____

_____ Review _____ Proof legal description _____ Final preparation as needed

_____ 3. Secure and notarize signatures of GCC officers.

Corporation Action Number _____ Date _____

_____ 4. The new Quit Claim Deed should have a notice stating "DO NOT RECORD" attached to and/or stamped on it. Put a copy in the file in front of the original deed mentioned in #1, original new Quit Claim Deed will go to Trustor.

_____ 5. Type a letter of explanation concerning the return of the unrecorded deed (retain original unrecorded deed to trust and copy of quit claim deed, send original QC deed to trustor with a copy of unrecorded deed into trust.)

_____ Return to Revoked Trust Checklist if applicable

_____ 6. Director verify as complete.

RETURN OF WILL CHECKLIST

Name: _____

Current Address: _____

- _____ 1. Document request to return Will
_____ Memo of oral contact _____ Written request received
_____ Initiate tickler
- _____ 2. Make copy of original will(s), put in folder
- _____ 3. Mail original wills certified to testator(s) with cover letter and Receipt Documents Form of
_____ Date mailed _____ Certified Mail Receipt returned (green card)
_____ Receipt of Documents Form returned
_____ Update Tickler
_____ Personally Delivered
- _____ 4. After receipt is received then remove will(s) from Wills Database and put on Terminated-up Database, remove from tickler
- _____ 5. Mark file label "Terminated" with date put in Terminated-up files
- _____ 6. Associate Director/TMA sign as complete

REVOKED TRUST CHECKLIST

Trust Name _____

Trust No. _____ Revocation Date _____

- _____ 1. Document request from Trustor
_____ Memo of conversation _____ Written request _____ Initiate tickler
- _____ 2. Revocation Letter sent to Trustor(s) (include Revocation of POA letter if appropriate), include ppd/sae
- _____ 3. Revocation Letter (and Revocation POA) is returned signed by all persons named as Trustor(s)
- _____ 4. TMC acknowledgement of revocation, authorization to return assets, & close file
Action # _____ Date _____
- _____ 5. Treasury
_____ Trust Revocation notice to Treasury
_____ Close asset accounts
_____ Treasury issues check if necessary, place check in file for return to Trustors
_____ Print Asset Summary showing assets removed from trust
_____ Place on Tax Return Tickler for final 1041, Grantor Trust
- _____ 6. Prepare documents to return assets to Trustor
Real Estate _____ Complete Real Estate Withdrawal Checklist
_____ Complete Unrecorded Deed Checklist
Other Assets _____ Attach Asset list
POW _____ Return POW, make copy for file
Trust _____ Return copy of Trust marked revoked/date
_____ Mark original Trust revoked/date keep in our file
_____ Copy of Revocation notice for their file
- _____ 7. Return documents and assets to Trustor
Mail check, Receipt of Documents Form, PPD/SAE, Certified-Return Receipt Requested, Original POW, Copy of Trust, all asset documents (e.g. assignments, insurance policies, deeds, etc.) Final copy of revocation notice stapled to copy of revoked trust.
- _____ 8. Receipt of Documents form returned, signed
- _____ 9. Update Trust database, remove assets, update tickler
_____ Change trust type, move record to Non Active Trust Database
_____ Remove from tickler; add to Terminated-Up database
_____ File stamped revoked, dated and placed in terminated files
- _____ 10. Final Federal 1041 return. I.D. # _____
_____ Return filed or _____ No return needed memo in file
- _____ 11. Director Review for Completion