

Critical Documents Checklist

Handout (Front)

<p>Make burial and funeral Arrangements</p>	<p>Executor Checklist / <i>Primary Care Provider</i> documents to collect. In addition to locating the last Will and Testament, collect the following to establish insurance, pension, social security and ownership rights:</p>	<p style="text-align: center;">Who to notify</p>	<p style="text-align: center;">Notify Credit Reporting Agencies</p>	<p style="text-align: center;">Executor Checklist for what advisors to hire:</p>
<ol style="list-style-type: none"> 1. Check the WILL / health care directive for directions regarding funeral arrangements and organ donation. 2. Meet with the funeral director, cemetery representative and clergy to make burial and funeral arrangements. 	<ol style="list-style-type: none"> 1. POAs / Wills 2. Birth Certificate 3. Marriage certificate or divorce order 4. Death Certificates from the funeral home (10 min) 5. Social Security Card / 6. Social Security Statements / Most Recent Taxes 7. Passports 8. Citizenship Papers 9. Insurance Policies (life, health, credit, accident & Property (<i>Long-Term Care</i>)) 10. Bank Books and statements with all information 11. Deeds (<i>Real Estate</i>) 12. Leases and tenant information 13. Car title and registration - license number and (VIN) 14. Income Tax returns (IRS Form 4506) 15. Veterans Discharge Certificates 16. Disability Claims 17. Property Tax bills and receipts 18. Credit Card Information 19. Trusts 20. Names and Addresses of relatives and beneficiaries 21. Stocks - all information 22. Bonds - all information 23. Employment Death Benefits 24. Separation, prenuptial agreements; divorce decrees 25. IRS form 712 from each life insurance company 26. Income from all sources (earning statements etc) 27. All Medical information (POCs, Insurance ETC) 28. Nursing Home / In-home Care information 	<ol style="list-style-type: none"> 1. Creditors 2. Banks / Credit Unions Stockbrokers / Financial Planners Church or Synagogue 3. Post Office (change of Address if applicable) 4. Relatives 5. Employer 6. Insurance Agents: Life, Annuity, auto, health and disability religious, fraternal, civic, veterans, professional and alumni organizations 7. Newspapers regarding death notices 8. Attorney 9. Accountant 10. Beneficiaries 11. Social Security Administration 12. Veterans Administration 13. IRS Form 56: Notice Concerning Fiduciary relationship 14. Landlord 15. Trustees 16. Defense Accounting Services (see handout) 17. Office of Personal Management, (see handout) 18. U.S. Citizenship and Immigration Service (if decedent was not a U.S. citizen) 19. SC DMV (if decedent had a drivers license) 20. SC Department of Medicaid (as needed) 	<p style="text-align: center;">Credit Reporting Agencies:</p> <p>*Experian *Equifax *Transunion</p>	<ol style="list-style-type: none"> 1. SC attorney for probate and out-of-state attorney for ancillary probate if out-of-state property 2. Real Estate and personal property appraisers 3. Real Estate Broker 4. Investment Advisors CPA to prepare estate, individual and fiduciary returns and check with IRS 5. Insurance Agent for the executor's bond (if required)

Usernames and Passwords

***Flash Drive (Backup)**
***Safe Deposit Box**
***Safe**
***Fireproof Box**

KEY AND ESSENTIAL DOCUMENTS Executor Checklist for Critical Dates

Handout (Back)

Critical Dates	Date	Remarks
Date of Death		
Date Will Filed with probate court		Required to be within 30 days of death
Date of your appointment as Executor		
Date of first Publication to Creditors		
Date Notification mailed to heirs, devisees, etc		Required to be within 30 days of your appointment
Date inventory & Appraisalment filed		Required to be within 90 days of your appointment
Date Personal Income Tax Return filed with IRS		Required to be April 15 th year after death
Statute of Limitations on filing of Creditor Claims		8 months after date of first publication
Date of Filing an Accounting & Proposal for Distribution, and Petition for Settlement		Within 1 year from date of first publication or 90 days from receipt of S.C estate tax closing letter.
Termination of Appointment closing estate		30 days after filing Petition for settlement
Alternate estate tax valuation date		Date of death plus 6 months
Federal and State Estate Tax returns if required		Date of death plus 9 months
Tax Year End of Estate		
File federal and State Fiduciary Income tax returns		3-1/2 months from estate's tax year end.

Wisdom to Finish Well Seminar

NON-PROBATE ASSETS IN SC

- Real property which is owned in a joint tenancy where it can pass automatically to the joint owner outside of probate
- Personal property (vehicles, boats, etc) that are titled in a joint tenancy where it can pass to the joint owner outside of probate
- Bank accounts which have joint ownership as "OR" and not "AND"
- Life insurance policies which list a beneficiary who is not decedent or not the estate
- Retirement accounts such as 401(K)s and IRAs can pass outside of probate and can pass to the designated beneficiary on those accounts
- If the deceased has created a Living Trust to hold assets, they will not go through probate unless the assets left outside of the trust add up to more than South Carolina's small estate limit of \$25,000.00

Wisdom to Finish Well Seminar

PROBATE ASSETS IN SC

- Real property tied only to the name of the deceased or titled with someone else as tenants in common
- Personal property owned by the deceased such as a car, furniture, or household items
- Bank accounts if these accounts are solely in the name of the deceased
- Interests in certain types of businesses
- Life insurance which lists the estate as beneficiary on the policy
- Broker accounts which list the deceased or the estate as the beneficiary on the account

QUESTIONS THAT CAN GUIDE A CONVERSATION ABOUT END-OF-LIFE CARE

What do you value most about your life?

If you were diagnosed with an illness that could not be cured, would you still want to pursue every possible treatment, realizing that some could negatively affect your quality of life?

Do you imagine wanting to stop curative efforts if they were to be unsuccessful?

If you were unable to eat or drink due to a terminal illness, would you want artificial nutrition and hydration even if it could cause complications and might not help you live longer?

Understanding Cardiopulmonary Resuscitation (CPR) could result in broken bones and other medical problems, would you want it if you were dying from an illness and were extremely frail?

If you could not breathe on your own, would you want mechanical ventilation?

How do you feel about an extended hospitalization, nursing homes?

Do you want to die in your home?

How much pain is acceptable to you?

Would you want to pain free even if it meant trading comfort for wakefulness or alertness?

Do you want to be with your family when you die?

What decisions regarding care do you want to entrust to others and who do you want to designate to make decisions?

Have you shared your care preferences with that person and taken necessary steps to ensure he/she is recognized as a proxy?

Do you want a funeral, memorial service or obituary?

What would you want a service to be like, for example, what music would you want at your funeral or memorial service if you had one?

Would you want your body to be buried, cremated, donated to science?

If you had organs that could be donated to help others or science, would you want to do that?

What do you hope for most regarding your death or the death of a loved one?

The Conversation Project is dedicated to helping people talk about their wishes for end-of-life care.

We know that no guide and no single conversation can cover all the decisions that you and your family may face. What a conversation can do is provide a shared understanding of what matters most to you and your loved ones. This can make it easier to make decisions when the time comes.

NOTE If you are completing this document on a computer, first save it to your desktop with a name you can easily find again. Then open your saved document and type in your answers. (Otherwise, what you type will not be saved.) Completing it on your computer will create a digital document that you can easily share with others.

NAME

DATE

HOW TO USE THE STARTER KIT

This Starter Kit doesn't answer every question, but it will help you get your thoughts together, and then have a conversation with your loved ones.

You can use it whether you are getting ready to tell someone else what you want, or you want to help someone else get ready to share their wishes.

Take your time. This kit is not meant to be completed in one sitting. It's meant to be completed as you need it, throughout many conversations.

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Why talking matters

Sharing your wishes for end-of-life care can bring you closer to the people you love. It's critically important. And you can do it. **Consider the facts:**

92% of people say that talking with their loved ones about end-of-life care is important.

32% have actually done so.

Source: The Conversation Project National Survey (2018)

21% of people say they haven't had the conversation because they don't want to upset their loved ones.

53% say they'd be relieved if a loved one started the conversation.

95% say they are willing or want to talk about their end-of-life wishes.

Source: The Conversation Project National Survey (2018)

80% of people say that if seriously ill, they would want to talk to their doctor about wishes for medical treatment toward the end of their life.

18% report having had this conversation with their doctor.

Source: Survey of Californians by the California HealthCare Foundation (2012) and Kaiser Family Foundation Serious Illness in Late Life Survey (2017)

97% of people say it's important to put their wishes in writing.

37% have actually done it.

Source: Kaiser Family Foundation Serious Illness in Late Life Survey (2017)

A conversation can make all the difference.

Step 1 Get Ready

You will have many questions as you get ready for the conversation. **Here are two to help you get started:**

? What do you need to think about or do before you feel ready to have the conversation?

? Do you have any particular concerns that you want to be sure to talk about? (For example, making sure finances are in order; or making sure a particular family member is taken care of; or any fear or mistrust you may have in the health care system.)

REMEMBER:

- You don't need to have the conversation just yet. It's okay to just start thinking about it.
- You can start out by writing a letter—to yourself, a loved one, or a friend.
- You might consider having a practice conversation with a friend.
- Having the conversation may reveal that you and your loved ones disagree. That's okay. It's important to simply know this, and to continue talking about it now—not during a medical crisis.
- Having the conversation isn't just a one-time thing. It's the first in a series of conversations over time.

Step 2 Get Set

What's most important to you as you think about how you want to live at the end of your life? What do you value most? **Thinking about this will help you get ready to have the conversation.**

? Now finish this sentence: **What matters to me through the end of life is...**

(For example, being able to recognize my children; being in the hospital receiving treatments; being able to say goodbye to the ones I love.)

Sharing your “what matters to me” statement with your loved ones could be a big help down the road. It could help them communicate to your health care team what abilities are most important to you—what’s worth pursuing treatment for, and what isn’t.

WHERE I STAND SCALES

Use the scales below to figure out how you want your end-of-life care to be. Select the number that best represents your feelings on the given scenario.

As a patient, I'd like to know...

- 1 2 3 4 5
- Only the basics about my condition and my treatment
- All the details about my condition and my treatment

.....

As I receive care, I would like...

- 1 2 3 4 5
- My health care team to do what they think is best
- To have a say in every health care decision

If I had a terminal illness, I would prefer to...

1

2

3

4

5

Not know how quickly
it is progressing

Know my doctor's
best estimation for
how long I have to live

? Look at your answers.

What kind of role do you want to have in the decision-making process?

How much medical treatment do you want to try?

1

2

3

4

5

I want to try every
treatment available,
no matter how
uncomfortable I become

Quality of life is
more important to
me than quantity

.....

What are your concerns about medical treatments?

1

2

3

4

5

I worry that I won't
get enough care

I worry that I'll get
too much care

.....

What are your preferences about where you want to be?

1

2

3

4

5

I want to spend
my last days in a
health care facility

I want to spend my
last days at home

? Look at your answers.

What do you notice about the kind of care you want to receive?

How involved do you want your loved ones to be?

- 1 2 3 4 5

I want my loved ones to do exactly what I've said, even if it makes them uncomfortable

I want my loved ones to do what brings them peace, even if it goes against what I've said

When it comes to your privacy...

- 1 2 3 4 5

When the time comes, I want to be alone

I want to be surrounded by my loved ones

When it comes to sharing information about my illness with others...

- 1 2 3 4 5

I don't want my loved ones to know everything about my health

I am comfortable with those close to me knowing everything about my health

? Look at your answers.

What role do you want your loved ones to play? Do you think that your loved ones know what you want, or do you think they have no idea?

? What do you feel are the three most important things that you want your friends, family, and/or health care team to understand about your wishes and preferences for end-of-life care?

1.
2.
3.

Step 3 Go

When you're ready to have the conversation, think about the basics.

MARK ALL THAT APPLY:

? WHO do you want to talk to now?

- | | |
|--|---|
| <input type="checkbox"/> Parent(s) | <input type="checkbox"/> Faith leader (Minister, Priest, Rabbi, Imam, etc.) |
| <input type="checkbox"/> Chosen family member(s) | <input type="checkbox"/> Trusted friend |
| <input type="checkbox"/> Child/Children | <input type="checkbox"/> Health care provider |
| <input type="checkbox"/> Spouse/Partner(s) | <input type="checkbox"/> Caregiver |
| <input type="checkbox"/> Sibling | <input type="checkbox"/> Other: <input type="text"/> |

? WHEN would be a good time to talk?

- | | |
|--|--|
| <input type="checkbox"/> The next holiday | <input type="checkbox"/> Before the baby arrives |
| <input type="checkbox"/> Before my child goes to college | <input type="checkbox"/> The next time I visit with family |
| <input type="checkbox"/> Before my next trip | <input type="checkbox"/> On a video or phone call |
| <input type="checkbox"/> Before I get sick again | <input type="checkbox"/> Other: <input type="text"/> |

? WHERE would you feel comfortable talking?

- | | |
|---|--|
| <input type="checkbox"/> At the kitchen table | <input type="checkbox"/> Sitting in a park |
| <input type="checkbox"/> At a favorite restaurant | <input type="checkbox"/> At my place of worship |
| <input type="checkbox"/> In the car | <input type="checkbox"/> Other: <input type="text"/> |
| <input type="checkbox"/> On a walk | |

? WHAT do you want to be sure to say?

If you wrote down your three most important things at the end of Step 2, you can use those here.

How to start

Here are some ways you could break the ice:

"I need your help with something."

"Remember how someone in the family died—was it a 'good' death or a 'hard' death? How will yours be different?"

"I was thinking about what happened to , and it made me realize..."

"Even though I'm okay right now, I'm worried that , and I want to be prepared."

"I need to think about the future. Will you help me?"

"I just answered some questions about how I want the end of my life to be. I want you to see my answers. And I'm wondering what your answers would be."

What to talk about:

- When you think about the last phase of your life, what's most important to you? How would you like this phase to be?
- Do you have any particular concerns about your health? About the last phase of your life?
- What affairs do you need to get in order, or talk to your loved ones about? (*Personal finances, property, relationships*)
- Who do you want (or not want) to be involved in your care? Who would you like to make decisions on your behalf if you're not able to? (*This person is your health care proxy.*)
- Are there any disagreements or family tensions that you're concerned about?
- Are there important milestones you'd like to be there for, if possible? (*The birth of your grandchild, your 80th birthday.*)
- Where do you want (or not want) to receive care? (*Home, nursing facility, hospital*)

- Are there kinds of treatment you would want (or not want)?
(Resuscitation attempts if your heart stops, breathing machine, feeding tube)
- When would it be ok shift from a focus on care that cures to a focus on care that comforts?
- Anything else: _____

.....

This list doesn't cover everything you may need to think about, but it's a good place to start. Talk to your health care team if you'd like them to suggest more questions to talk about.

.....

REMEMBER:

- Be patient. Some people may need a little more time to think.
- You don't have to steer the conversation; just let it happen.
- Don't judge. A "good" death means different things to different people.
- Nothing is set in stone. You and your loved ones can always change your minds as circumstances change.
- Every attempt at the conversation is valuable. Keep trying.
- This is the first of many conversations—you don't have to cover everyone or everything right now.
- Try emailing the guide, or your thoughts, so someone at least has access to it if needed.

Now, just go for it! Each conversation will empower you and your loved ones. You are getting ready to help each other live and die in a way that you choose.

Step 4 Keep Going

Congratulations! You have had “the conversation” — hopefully, the first of many. You can use the following questions to collect your thoughts about how your first talk went, and to think about what you’d like to talk about in future conversations.

.....

? Is there something you need to clarify that you feel was misunderstood or misinterpreted?

? Who do you want to talk to next time? Are there people who should hear things at the same time (like siblings who tend to disagree)?

? How did this conversation make you feel? What do you want to remember? What do you want your loved ones to remember?

? What do you want to make sure to ask or talk about next time?

Now that you have had the conversation, you're ready to think about **completing two important legal documents** to make sure your wishes are clearly stated — and respected when the time comes.

Choose a Health Care Proxy

A health care proxy (also known as a **durable power of attorney for health care**) is a legal document in which you appoint another person (a proxy or agent) to express your wishes and make health care decisions for you if you cannot speak for yourself. Choose someone who knows your wishes well — a person you trust to speak for you if you're not able to speak for yourself.

Complete an Advance Directive

An Advance Directive, also known as a **Living Will**, is a legal document in which you state your wishes regarding end-of-life medical care — including the types of treatments you do and do not want — in case you are no longer able to make decisions or communicate your wishes. (Note: This is different from your Last Will and Testament, which is used to distribute assets.)

Every state has its own Advance Directive forms.

See this website for more information: <https://www.nhpc.org/patients-and-caregivers/advance-care-planning/advance-directives/downloading-your-states-advance-directive/>

Contact Us

VISIT US

theconversationproject.org

E-MAIL US

conversationproject@ihi.org

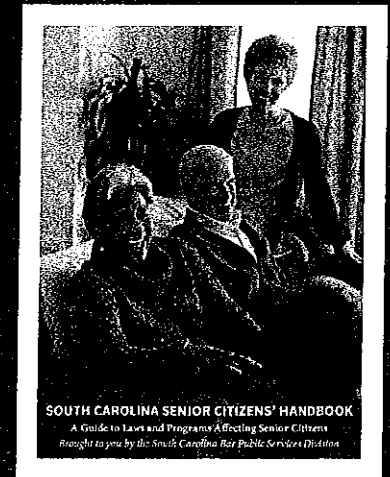
**FOLLOW US ON FACEBOOK
AND TWITTER**

 @convoproject

 TheConversationProject



SOUTH CAROLINA SENIOR CITIZENS' HANDBOOK ORDER FORM



The South Carolina Bar is pleased to provide this comprehensive resource to seniors and those who care for members of this population throughout the Palmetto State.

The handbook valuable resource for church groups, civic organizations and others who work with seniors.

To obtain multiple copies, complete this order form and return to the SC Bar Public Services Division at P.O. Box 608, Columbia, SC 29202 or email to ccoker@scbar.org.

There is no charge for the manual, however there is a nominal charge to help defray the costs of shipping.

If you would like to pick up your copies, please indicate this on the form and pick them up at 950 Taylor Street, Columbia, 29201 between 9 a.m. and 5 p.m. weekdays.

Name: _____

Organization: _____

Phone: _____

E-mail: _____

I would like to order _____ copies of the South Carolina Senior Citizens' Handbook.

- I will pick up my copies. (This is **free** of any charges.)
- Please ship my copies of the Senior Citizens' Handbook.

Address: _____

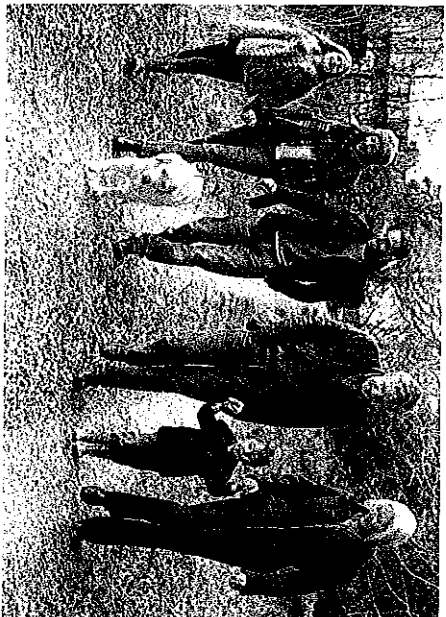
City, State, Zip: _____

Shipping charges

1-5 copies \$5.00

6-10 copies \$10.00

Over 10 copies contact the Public Services Division at (803) 799-6653, ext. 111.



Introduction

We all plan ahead for expected events such as vacations, a birth or a wedding, or even a trip to the grocery store. Did you know it is just as important to plan ahead for the health care you want in the future and at the end of life?

The goal of Advance Care Planning (ACP) is for you to live in a way that is meaningful to you, for as long as you live.

It involves making your wishes known to those who care about you through conversation and a written plan.

Planning ahead – now, while you are able – is a gift you can give to yourself and your loved ones. Your decisions should be based on your wishes, values, and beliefs. It does not mean that they need to be made alone.

Now is the time to talk.

"I have an advance directive, not because I have a serious illness, but because I have a family."

– Ira Byock, MD



For more information:

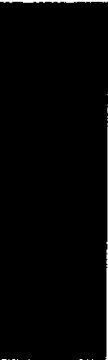
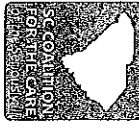
These websites provide additional resources and information on SC advance directives (including the legal forms) to help guide you through the advance care planning process.

- The Carolinas Center: cchospice.org/aitwt
- SC Hospital Association: [scha.org/shared-decision-making](http://www.scha.org/shared-decision-making)
- SC Bar Association: <http://www.sbar.org/Public-Information/Free-Publications>
- Lieutenant Governor's Office on Aging: <http://aging.sc.gov/legal/Pages/AdvancedDirectives.aspx>
- SC Coalition for the Care of the Seriously Ill: <http://www.scmcdical.org/content/csi>



Isn't It Time We Talk?

Planning Ahead for Future Health Care Decisions



"It always seems too early, until it's too late."

What is Advance Care Planning?

Advance Care Planning involves 4 steps to make decisions about the care and treatment you want as your health changes and at the end of life:

[1] Understand future health choices

- These choices may be about specific treatments for an illness, where you would want to receive care -- whether at home or in an assisted living or long-term care facility, and considerations about organ donation.
- Decisions like these are best made before there is a health crisis. Talk with your doctor, faith leader, legal advisor, and loved ones.

[2] Think about your choices in light of what is important to you

- What worries, if any, do you have about your health now? What kind of care would you want if your life changed because of illness or injury?
- Think about what you value most about your life. What does it mean for you to "live well?"
- What religious or spiritual beliefs give you support and guidance?

[3] Talk about your decisions with your loved ones and your doctors

- Without these conversations, your health care providers and family would not know what you want if a health care crisis were to occur. This might result in uncertainty, anxiety, or disagreement among loved ones.
- To start the conversation, try using a book or a movie as a chance to bring up the subject. Or refer to a situation that your family would know, like the experience of a friend or a celebrity.

[4] Put your plans into writing so they will be ready if they are needed

- SC law provides for several documents called "advance directives" which will help you make your wishes known.
- A Health Care Power of Attorney allows you to designate someone who will make health care decisions for you if you are ever unable to communicate. This is the form most attorneys recommend.
- A Living Will (Declaration of Desire for a Natural Death) allows you to express choices about your care, but only if you're terminally ill or permanently unconscious.
- The EMS-DNR (Do-Not-Resuscitate) order can only be obtained from your physician. It prohibits emergency personnel from using resuscitative measures, such as CPR or ventilation, if you are terminally ill and don't want them.



Things to Consider:

No matter what the state of your present health, a change such as an accident or illness could occur. Having preparations in place for such an event will give you and your family peace of mind.

Advance care planning is not a single conversation, or a one-time signing of forms, but an ongoing discussion.

- You can ALWAYS change your mind, even after you put plans into writing.
- You should review your plans from time to time, to make sure they still express your wishes as your situation changes.

All SC advance directives are free of cost and available from your physician or from websites on the back of this brochure.

- If / when you complete (or update) these documents, make sure you give your doctor a copy AND discuss your wishes with them.

By reading this, you have already started the process of advance care planning. Talking about your thoughts and choices is the most important step, but don't feel pressured to start that before you are ready. Remember, this is an ongoing process!



What to ask when you tour an independent living/assisted living/ memory care:

1. What level of care do you offer (independent, assisted, or memory care)?
2. What length of stay do you offer (permanent, respite, or day stays)?
3. Is there a minimum requirement of days each month for respite or day stays?
4. What fees can I expect (are you all-inclusive, charge room and board plus Level of Care, what ancillary services are included/additional?)
5. Is there a deposit, community fee, or buy in?
6. What is the length of my contract?
7. What 3rd party services do you use? Who are they and why?
8. Private Room Options- What are the room sizes available? What are the cost differences?
9. How do you determine what level of care my loved one needs?
10. Spacious Closet- What is the storage space in each room?
11. Bathroom-Is the bathroom private?
12. Walk-In Shower- Do you have walk- in showers? Are benches built in?
13. 24-hour Night Lighting- What is the lighting in the rooms at night?



14. Apartment Thermostats- Does each apartment have individual heating and cooling controls?
15. Emergency Call System- What system do you use and what is your policy for emergency call response? How do you monitor and what is your average response time?
16. Utilities Included- What utilities are included in the room and board fee?
17. Cable/Phone Connection- Is cable and phone provided or an additional cost?
18. Home-Style Meals a Day- How many meals and snacks are provided? Who supplies your food? What is your cooking philosophy? (scratch vs. pre-packaged)
19. Laundry Services- How often is laundry done? Is this service included in our fees or separate?
20. Housekeeping- How often is housekeeping done and is this included in our fees or separate?
21. Maintenance- What is included and not included in our monthly fees?



22. Community WIFI- Is WIFI included or additional? Will it be available in each apartment?
23. Computer Stations- Do you have common area computer stations?
24. Resident Mailboxes- Do you have resident individual mailboxes?
25. Resident Parking- Will you have resident assigned parking?
26. Private Dining Room- Do you have spaces for my family to host events such as birthdays and holidays?
27. Transportation Services- Is transportation included? What days do you provide transportation? What is the cost, if it is additional?
28. Medication Management- How do you manage medications? What pharmacy do you use? Will they meet my current co-pays? Do nurses or med-techs administer medications? What system do you use to assure medication accuracy?
29. Pharmacy Services Coordination- Who is your pharmacy? What services do they provide? Any additional cost?



30. Coordination of Medical and Personal Supplies- What items do you coordinate the purchase of? Do you charge a fee for this service?
31. Personal Care in Each Activity of Daily Living- Will my loved one have a personalized care plan? How often do you review?
32. 24-Hour Nurse and Caregiver Staffing- Do you have nurses 24 hours a day?
IF not, how are you staffing when a nurse is not available in the building?
33. Coordination of Medical Services- What other medical services do you provide or coordinate? (lab, x-ray, physician visit, etc.)
34. On-Site Physician Services- Who is your on-site physician and why?
35. What is your company mission statement and values?
36. Therapy Services- What therapy services do you provide? Who provides them?
37. Nutrition Services- What diets do you accommodate? Who oversees your menus?
38. Who is your leadership team? (be introduced to each one)



- ❖ Remember to schedule your first tour and then re-visit when you are not expected.


For any additional questions please feel free to reach out.

Lindsey Daugherty, Cell 864.350.5348

Principal, Role Model South Carolina

Lindseyd@dominionseniorliving.com



 **BAPTIST**
FOUNDATION OF SOUTH CAROLINA

For Future Generations


*Let this be written for a future generation,
that a people not yet created may praise the LORD*

Psalms 102:18

1

OUR PURPOSE

*We help God's people
fund the Great Commission.*



2

What's on your
BUCKET List 



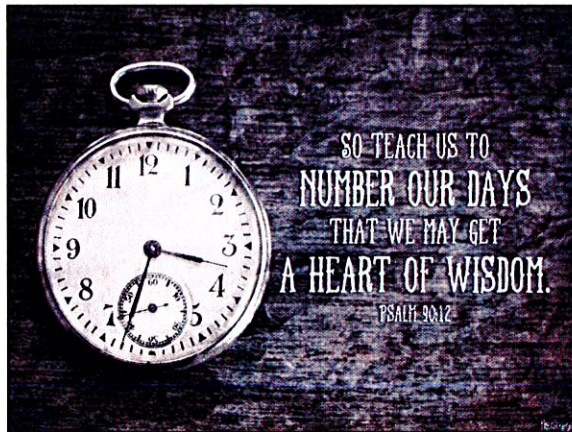
3



4



5



6

YOUR RESOURCES

Time... Talent... Treasure

A sacred trust.
Given by God.
Given with purpose.



7

GOD'S RESOURCES



is the OWNER;
I am HIS Steward.

is responsible for
my success.

holds me responsible for
what I do with HIS property



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YOUR LEGACY

A legacy is not what you leave
to a person...


A legacy is what you leave
in a person.



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A LEGACY PLAN

- 1) End of life planning
- 2) After-life planning
- 3) Document Execution
- 4) Communication




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WHY...

did God bless me?

2 Corinthians 9:7

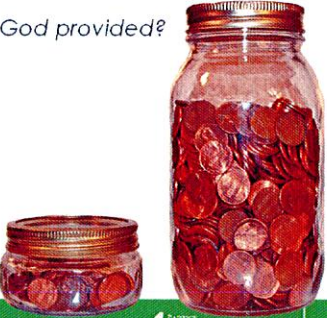


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WHAT...

resources has God provided?



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WHERE...

will His resources go?

CHILDREN? GRAND-CHILDREN? OTHER CAUSES? MINISTRY?

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WHEN...

will those resources be given?

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Giving to Loved Ones & Ministry

Assumptions

- Estate Value - \$600,000
- 2 Children

Plan

- Give each child \$50,000 outright
- Put remaining \$500,000 in trust
- 5% annual / \$25,000
- Term options
- Remainder to charity

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WHO...

will carry out my wishes?

- ❖ Lifetime Health and Financial Representative
- ❖ After-Life Representative
 - Personal Representative
 - Financial and guardianship needs for dependents

who me?




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HOW...

do I execute and communicate my wishes?




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1) Prayerfully Plan

- Plan – ask questions, evaluate, pray
 - Your financial planner
 - Baptist Foundation planning service

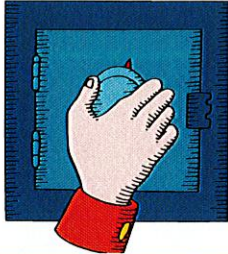


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2) Execute Documents

- Use an attorney
- Secure your records



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3) Communicate

- Meet with designees
- Tell those that need to know how to find your records
- Be clear about how is getting what
- Prepare a personal property list (or give things away while you're living)
- Share your story / write letters

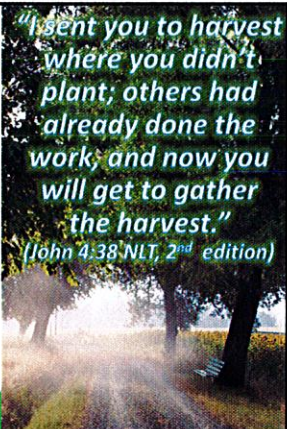
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YOUR LEGACY...

...planting trees under which you may never sit

"I sent you to harvest where you didn't plant; others had already done the work, and now you will get to gather the harvest."
(John 4:38 NLT, 2nd edition)



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