



Premarital Preparedness Checklist Intro:

A marriage is upon you and your family. Congratulations are in order, but there is some additional planning that is necessary. This is planning beyond what is involved in the ceremony itself. Differences over finances are some of the most common issues that lead to divorce. These issues can be avoided if both parties go into marriage with their eyes wide open and on the same page financially. HB Retirement has put together a Premarital Preparedness Checklist. This checklist is an extension of HB Retirement's Standard of care, which is an application of our services to plan participants and clients. This checklist is a compilation of what we believe should be priorities as you prepared for marriage.

This checklist is designed to quickly assist you in identifying what you have done to prepare for this major life change as well as areas that may need some work. As you complete the checklist, mark **COMPLETED** when you are confident in your strategy or a task has been completed. You would select **WORKING ON**, when you have something in place, but a review would be beneficial. The final option is **NOT APPLICABLE**, that would be your selection if you have not made an action or the scenario does not apply.

Please take some time to review the questions in the checklist, it may be helpful to complete with a spouse or family member. Once complete, please return this checklist to a HB Retirement Financial Advisor or our support team at clientservices@hbretirement.com.



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Premarital Preparedness Checklist:

I. Premarital Financial and Insurance Review:

Have you completed cash-flow and budget analysis?	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>
Have you determined your long-term financial goals?	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>
Have you done a credit report analysis?	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>
Have you determined the necessity of a prenuptial agreement?	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>
Homeowners/Umbrella Insurance Review.	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>
Automobile Insurance Review. Health Insurance Review.	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>
Life Insurance (group/individual).	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>
Disability Insurance (group/individual).	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>
Policies to be canceled.	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>
Policies to be updated.	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>
Policies to be obtained.	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>
Insurance coverages that need updated.	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>

II. Financial Planning:

Are financial accounts being combined or kept separate?	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>
Have you reviewed respective asset allocations?	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>
Have you reviewed respective retirement and investment accounts?	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>
Do you have an established emergency fund?	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>
Are you planning to purchase a home together?	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>
Are you funding HSA accounts?	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>
Do you have debts that can be eliminated or consolidated?	Completed <input type="checkbox"/>	Working On <input type="checkbox"/>	NA <input type="checkbox"/>

III. Retirement Income Planning:

- | | | | |
|--|------------------------------------|-------------------------------------|-----------------------------|
| How much money will you need each month in retirement? | Completed <input type="checkbox"/> | Working On <input type="checkbox"/> | NA <input type="checkbox"/> |
| How much money will you want each month in retirement? | Completed <input type="checkbox"/> | Working On <input type="checkbox"/> | NA <input type="checkbox"/> |
| Are you planning to work in retirement? | Completed <input type="checkbox"/> | Working On <input type="checkbox"/> | NA <input type="checkbox"/> |
| What is your Social Security Strategy? For more information, please visit www.ssa.gov . | Completed <input type="checkbox"/> | Working On <input type="checkbox"/> | NA <input type="checkbox"/> |
| What does your retirement look like? | Completed <input type="checkbox"/> | Working On <input type="checkbox"/> | NA <input type="checkbox"/> |
| Will you have additional income sources in retirement? | Completed <input type="checkbox"/> | Working On <input type="checkbox"/> | NA <input type="checkbox"/> |

IV. Legal and Estate Planning:

- | | | | |
|---|------------------------------------|-------------------------------------|-----------------------------|
| Do you have wills and trust agreements (self/parents/others)? | Completed <input type="checkbox"/> | Working On <input type="checkbox"/> | NA <input type="checkbox"/> |
| Have you updated your beneficiaries appropriately? | Completed <input type="checkbox"/> | Working On <input type="checkbox"/> | NA <input type="checkbox"/> |
| Do you have powers of attorney? | Completed <input type="checkbox"/> | Working On <input type="checkbox"/> | NA <input type="checkbox"/> |
| Do you have advance medical directives? | Completed <input type="checkbox"/> | Working On <input type="checkbox"/> | NA <input type="checkbox"/> |

V. Review of Roles and Responsibilities:

- | | | | |
|---|------------------------------------|-------------------------------------|-----------------------------|
| Who will manage the day-to-day finances? | Completed <input type="checkbox"/> | Working On <input type="checkbox"/> | NA <input type="checkbox"/> |
| Who will build/monitor the budget? | Completed <input type="checkbox"/> | Working On <input type="checkbox"/> | NA <input type="checkbox"/> |
| How will spending be monitored/tracked? | Completed <input type="checkbox"/> | Working On <input type="checkbox"/> | NA <input type="checkbox"/> |
| Who will pay the bills or how will bills be divided? | Completed <input type="checkbox"/> | Working On <input type="checkbox"/> | NA <input type="checkbox"/> |
| How will major purchases be handled? | Completed <input type="checkbox"/> | Working On <input type="checkbox"/> | NA <input type="checkbox"/> |
| Have you defined major/large purchases? | Completed <input type="checkbox"/> | Working On <input type="checkbox"/> | NA <input type="checkbox"/> |
| Do you have a safe or safe deposit box for important items and legal documents? | Completed <input type="checkbox"/> | Working On <input type="checkbox"/> | NA <input type="checkbox"/> |

What would you like to work on first?

Notes:



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