

PLANNING FOR EVERY SEASON OF LIFE

Your Retirement Lifestyle Workbook

A simple place to gather and organize everything we'll need — your goals, hopes, and the resources to fund them — so we can focus on building a plan for the retirement you've imagined.



Purpose of This Workbook

This lifestyle workbook is designed to help you collect and organize the information needed to develop your Retirement Plan, which includes your goals and the resources available to fund them. Gathering information from the checklist below will help you move through the workbook. It's a good idea to gather as much of this information as possible before you start filling it in. Thank you in advance for taking the time to gather these details, so we can focus on the fun stuff: developing a plan that addresses your goals, hopes, and dreams in retirement.

Helpful Checklist

Check off what you're able to gather

RISK MANAGEMENT

See your current insurance list.

- ☐ Life insurance with cash value
- ☐ Group term
- ☐ Long-Term Care
- ☐ Disability
- ☐ Auto
- ☐ Home
- ☐ Other

STATEMENTS

These statements may be helpful throughout the workbook.

- ☐ Social Security Administration
- ☐ Bank
- ☐ Investment
- ☐ Retirement accounts
- ☐ College savings accounts
- ☐ Mortgage

RETIREMENT INCOME

Gather the sources of income in retirement and the amounts.

- ☐ Pension
- ☐ Annuity Income
- ☐ Alimony
- ☐ Part-time work
- ☐ Royalties
- ☐ Rental properties
- ☐ HSA
- ☐ Other

INVESTMENT ASSETS & CONTRIBUTIONS

You'll be able to enter totals for each of these asset types.

- ☐ Employer-sponsored plans (e.g. 401k, 403b, 457)
- ☐ Traditional IRAs
- ☐ Roth IRAs
- ☐ Taxable / brokerage assets
- ☐ Tax-deferred accounts (e.g. Annuity)
- ☐ Tax-free / brokerage accounts
- ☐ 529 college savings plans
- ☐ Other

LIABILITIES OR DEBT

Current balance, interest rates, bequest value and payments.

- ☐ Mortgages
- ☐ Equity lines of credit
- ☐ Vehicle loans
- ☐ Business loans
- ☐ Credit cards
- ☐ Personal lines of credit
- ☐ Education or student loans
- ☐ Other

OTHER ASSETS

Other assets you may have, and their estimated dollar value.

- ☐ Home(s)
- ☐ Collectibles
- ☐ Personal property
- ☐ Business
- ☐ Real estate
- ☐ Inheritance or gift
- ☐ Other

Get Started

Personal Information

	C CLIENT	CO CO-CLIENT
Name		
Gender	☐ Male ☐ Female	☐ Male ☐ Female
Date of Birth	/ /	/ /
Email Address		
Employment Status	☐ Employed ☐ Retired ☐ Business Owner ☐ Homemaker	☐ Employed ☐ Retired ☐ Business Owner ☐ Homemaker
Employment Income	\$	\$
Other Income non-investment only	\$	\$
Marital Status		State of Residence

Important Relationships

Anyone included in this plan for gifting, goals, beneficiaries or ownership of policies (e.g. children, grandchildren, charities).

NAME	DATE OF BIRTH	RELATIONSHIP
	/ /	
	/ /	
	/ /	
	/ /	
	/ /	
	/ /	
	/ /	

Expectations & Concerns

What do you most look forward to? What worries or concerns you? Select what applies to you.

Retirement Expectations

	C	CO
Active Lifestyle	☐	☐
Quiet Lifestyle	☐	☐
Opportunity to Help Others	☐	☐
Moving to a New Home	☐	☐
Work by Choice	☐	☐
Time to Travel	☐	☐
Start a Business	☐	☐
Time with Friends & Family	☐	☐
Less Stress — Peace of Mind	☐	☐
Other:	☐	☐

Retirement Concerns

	C	CO	DEGREE		
			H	M	L
MONEY CONCERNS					
Not having a paycheck	☐	☐	☐	☐	☐
Running out of money	☐	☐	☐	☐	☐
Suffering investment losses	☐	☐	☐	☐	☐
Leaving money to others	☐	☐	☐	☐	☐
HEALTH CONCERNS					
Cost of health care or long-term care	☐	☐	☐	☐	☐
Current or future health issues	☐	☐	☐	☐	☐
Dying early	☐	☐	☐	☐	☐
Living too long	☐	☐	☐	☐	☐
Getting ill	☐	☐	☐	☐	☐
PERSONAL & FAMILY CONCERNS					
Being bored	☐	☐	☐	☐	☐
Parents needing care	☐	☐	☐	☐	☐
Other	☐	☐	☐	☐	☐

H = High · M = Medium · L = Low

Retirement Age If already retired, skip to Planning Age.

When would you like to retire? Enter your Ideal Retirement Age, then indicate how willing you are to delay retirement beyond that age if it helps you fund your Goals.

	C CLIENT	CO CO-CLIENT
Ideal Retirement Age	Age:	Age:
How willing are you to retire later (if necessary) to attain your Goals?	☐ Not at All ☐ Slightly ☐ Somewhat ☐ Very	☐ Not at All ☐ Slightly ☐ Somewhat ☐ Very
What order of retirement do you prefer?	☐ Both retire in the same year ☐ Either can retire first	

Planning Age (Life Expectancy)

With Americans living longer, it's a good idea to consider how long you think you will live — your plan needs to cover expenses for the full length of your retirement. Your answers help your advisor determine a reasonable planning age.

	C CLIENT	CO CO-CLIENT
Are you a smoker?	☐ Yes ☐ No	☐ Yes ☐ No
For your age, how would you rate your health?	☐ Poor ☐ Good ☐ Excellent	☐ Poor ☐ Good ☐ Excellent
Compared to others, how long do your family members tend to live?	☐ Shorter than average ☐ About average ☐ Longer than average	☐ Shorter than average ☐ About average ☐ Longer than average

Lifestyle Goals — Before & After Retirement

Some common goals that may fall under wants and wishes include:

College

Pay for all or part of a college education — for yourself, a child, or grandchild.

Leave a Bequest

Money you'd like to leave at your death to family, friends, charities, or institutions.

Gifts or Donation

Give back, or help family. Use Gift Goals for any cash gifts.

Home Improvement

Plans to renovate? Create Goals for major home improvements and repairs.

Major Purchase

A sailboat, a motor home, a hot tub — whatever it is, make it a Goal.

Travel

One special place, or travel every year — a single trip or recurring travel.

Wedding

Help pay for a wedding — all or part of the cost.

New Home

Trade up, gain more space, or add a vacation home.

Provide Care

Care for someone you love — a parent in a nursing home, or a child with special needs.

Celebration

A Bar/Bat Mitzvah, family reunion, anniversary, or retirement party.

Start a Business

Start a business or buy a business franchise.

*Something else?
Add your own goal.*

Goal Importance Scale

Use this scale on the next few Lifestyle pages to rate each Goal from 10 to 1, with 10 being the most important. This exercise groups your goals into **Needs** (what you must have), **Wants** (what you'd like to have), and **Wishes** (what you wish to have).



Needs *What you must have*

Be sure you don't "double count" any expenses during retirement. For example, if you entered a separate Goal for a car, don't include the purchase cost in your Living Expense — but do include all operating expenses (gas, taxes, maintenance). If you're not sure how much you need, use the Budget Worksheet on page 17.

IMPORTANCE	DESCRIPTION	ANNUAL AMOUNT
10	Living Expense	\$
10	Health Care (out-of-pocket)	\$

LIVING EXPENSE

Your basic day-to-day living expenses (food, clothes, utilities) during retirement. Making this a separate Goal shows exactly what it takes to pay the bills for the rest of your life. When you're confident your basics are covered, you can sleep better and feel free to enjoy your other Lifestyle Goals.

HEALTH CARE

If you believe Health Care costs — beyond basic expenses such as your Medicare supplement — are likely to be particularly significant for you or your family, use this Goal to separate those costs from your retirement living expense.

Adjustments to Living Expense

Your Living Expense may include some costs that will end during retirement. When those expenses end, your Living Expense would be reduced. Please indicate any expenses that will end.

DESCRIPTION	ANNUAL AMOUNT (CURRENT \$)	YEAR EXPENSE WILL END	AMOUNT INFLATES?
<i>e.g., Mortgage</i>	\$ 16,000	2031	✓
	\$		☐
	\$		☐
	\$		☐
	\$		☐
	\$		☐

Car

Add separate Goals for buying cars in retirement. Remember a trade-in — use the amount you'll need after subtracting the trade-in from the new car price.

IMPORTANCE 10 ↔ 8	DESCRIPTION	AMOUNT AFTER TRADE-IN	HOW OFTEN	HOW MANY TIMES	AT RETIREMENT		
					C	CO	BOTH
10	<i>e.g., John's SUV</i>	\$ 30,000	Every 4 Yrs	6	✓		
		\$			☐	☐	☐
		\$			☐	☐	☐
		\$			☐	☐	☐
		\$			☐	☐	☐
		\$			☐	☐	☐

Other Needs

Did we miss something? If it's expensive or important, make it an "Anything Else" Goal — just be sure to add a good description.

IMPORTANCE 10 ↔ 8	DESCRIPTION	FREQUENCY	START DATE	COST PER YEAR / MONTH
		☐ One Time ☐ Recurring		\$
		☐ One Time ☐ Recurring		\$
		☐ One Time ☐ Recurring		\$
		☐ One Time ☐ Recurring		\$
		☐ One Time ☐ Recurring		\$

Wants *What you'd like to have*

IMPORTANCE 7 - 4

IMPORTANCE 7  4	DESCRIPTION	START YEAR	C	CO	BOTH	AMOUNT	HOW OFTEN	NUMBER OF TIMES
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
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			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		

Wishes *What you wish to have*

IMPORTANCE 3 - 1

IMPORTANCE 3 ↔ 1	DESCRIPTION	START YEAR	C	CO	BOTH	AMOUNT	HOW OFTEN	NUMBER OF TIMES
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
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			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		
			☐	☐	☐	\$		

Retirement Income

Identify all the resources you have to fund your Goals. All amounts are pre-tax and begin at retirement unless otherwise noted. Don't include interest or dividend income from your investments.

Social Security Benefits

If available, provide your estimate from ssa.gov.

	C CLIENT	CO CO-CLIENT
Are you eligible?	☐ Yes ☐ No ☐ Receiving Now	☐ Yes ☐ No ☐ Receiving Now
Benefit amount	Primary Insurance Amount (PIA) \$	Primary Insurance Amount (PIA) \$
When to start	☐ At Full Retirement Age (per Social Security) ☐ At a specific age _____ ☐ When I stop working	☐ At Full Retirement Age (per Social Security) ☐ At a specific age _____ ☐ When I stop working

Part-Time Work & Other Income

Rental property, annuities, royalties, alimony, etc.

DESCRIPTION	OWNER		MONTHLY INCOME	YEAR ENDS / NO. OF YEARS
	C	CO		
<i>e.g., Part-time work</i>	☒	☐	\$	5
	☐	☐	\$	
	☐	☐	\$	
	☐	☐	\$	
	☐	☐	\$	

Pension Income

For a lifetime pension, put "End of Life" in Year Ends.

DESCRIPTION	OWNER		MONTHLY	START YR	YEAR ENDS / YRS	% SURVIVOR	INFLATES	GPO
	C	CO						
<i>e.g., ABC Pension</i>	☒	☐	\$1,500		End of Life	50%		
	☐	☐	\$			%	☐	☐
	☐	☐	\$			%	☐	☐
	☐	☐	\$			%	☐	☐
	☐	☐	\$			%	☐	☐

Investment Assets

Identify all the resources you have to fund your Goals. Don't worry about exact amounts — reasonable estimates are fine. If available, provide your investment statements.

c Client

INVESTMENT TYPE	CURRENT VALUE	ANNUAL ADDITIONS	APPROXIMATE ALLOCATION		
			CASH	BOND	STOCK
Retirement Plans (e.g. 401k, 403b)	\$	\$ or %	%	%	%
Employer Match	\$	\$ or %	%	%	%
Traditional IRA	\$	\$	%	%	%
Roth IRA	\$	\$	%	%	%
529 Savings Plan	\$	\$	%	%	%
Annuities	\$	\$	%	%	%
HSA	\$	\$	%	%	%
Taxable / Brokerage	\$	\$	%	%	%
Other	\$	\$	%	%	%

co Co-Client

INVESTMENT TYPE	CURRENT VALUE	ANNUAL ADDITIONS	APPROXIMATE ALLOCATION		
			CASH	BOND	STOCK
Retirement Plans (e.g. 401k, 403b)	\$	\$ or %	%	%	%
Employer Match	\$	\$ or %	%	%	%
Traditional IRA	\$	\$	%	%	%
Roth IRA	\$	\$	%	%	%
529 Savings Plan	\$	\$	%	%	%
Annuities	\$	\$	%	%	%
HSA	\$	\$	%	%	%
Taxable / Brokerage	\$	\$	%	%	%
Other	\$	\$	%	%	%

Investment Assets (Continued)

Identify all the resources you have to fund your Goals. Don't worry about exact amounts — reasonable estimates are fine. If available, provide your investment statements.

Joint Accounts

INVESTMENT TYPE	CURRENT VALUE	ANNUAL ADDITIONS	APPROXIMATE ALLOCATION		
			CASH	BOND	STOCK
Retirement Plans (e.g. 401k, 403b)	\$	\$	%	%	%
Employer Match	\$	\$	%	%	%
Traditional IRA	\$	\$	%	%	%
Roth IRA	\$	\$	%	%	%
529 Savings Plan	\$	\$	%	%	%
Annuities	\$	\$	%	%	%
HSA	\$	\$	%	%	%
Taxable / Brokerage	\$	\$	%	%	%
Other	\$	\$	%	%	%

Extra Savings

Maximum additional amount you could save each year, above your existing annual savings	\$			
How willing are you to save more?	☐ Not at All	☐ Slightly	☐ Somewhat	☐ Very

Other Assets

Other homes, real estate, personal property, collectibles, inheritance, etc.

DESCRIPTION	OWNER			CURRENT VALUE	PLANNING TO SELL?			YEAR SELL / REC'D	CASH REC'D (AFTER-TAX)
	C	CO	JT		YES	NO	IF NEEDED		
	☐	☐	☐	\$	☐	☐	☐		\$
	☐	☐	☐	\$	☐	☐	☐		\$
	☐	☐	☐	\$	☐	☐	☐		\$
	☐	☐	☐	\$	☐	☐	☐		\$
	☐	☐	☐	\$	☐	☐	☐		\$
	☐	☐	☐	\$	☐	☐	☐		\$
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	☐	☐	☐	\$	☐	☐	☐		\$
	☐	☐	☐	\$	☐	☐	☐		\$
	☐	☐	☐	\$	☐	☐	☐		\$
	☐	☐	☐	\$	☐	☐	☐		\$
	☐	☐	☐	\$	☐	☐	☐		\$
	☐	☐	☐	\$	☐	☐	☐		\$

Liabilities

DESCRIPTION	OWNER			BEGINNING BALANCE	CURRENT BALANCE	MONTHLY PAYMENT	TERM	INTEREST RATE
	C	CO	JT					
	☐	☐	☐	\$	\$	\$		%
	☐	☐	☐	\$	\$	\$		%
	☐	☐	☐	\$	\$	\$		%
	☐	☐	☐	\$	\$	\$		%
	☐	☐	☐	\$	\$	\$		%
	☐	☐	☐	\$	\$	\$		%
	☐	☐	☐	\$	\$	\$		%

Risk Score

Two-thirds of all investors score between 40 and 60, and only 1 in 1,000 select a score lower than 20 or greater than 80. Does your score feel right as you compare yourself to others?

C CLIENT	CO CO-CLIENT

AVERAGE SCORES, FOR COMPARISON

	HOUSEHOLD			MEN			WOMEN		
AGE GROUP	>64	50-64	<50	>64	50-64	<50	>64	50-64	<50
AVG SCORE	47	50	54	50	54	59	45	48	52

Additional Considerations

Do you have any of the following? If available, provide statements.

Executive Benefits

	C CLIENT	CO CO-CLIENT	NOTES
Stock Options	☐ Yes ☐ No	☐ Yes ☐ No	
Restricted Stock	☐ Yes ☐ No	☐ Yes ☐ No	
Deferred Compensation	☐ Yes ☐ No	☐ Yes ☐ No	
Small Business Ownership	☐ Yes ☐ No	☐ Yes ☐ No	

Insurance *Have your coverage reviewed to see if you have enough.*

	C CLIENT	CO CO-CLIENT	NOTES
Group / Term Life Insurance	☐ Yes ☐ No	☐ Yes ☐ No	
Death Benefit	\$	\$	
Cash Life Insurance	☐ Yes ☐ No	☐ Yes ☐ No	
Death Benefit	\$	\$	
Cash Value	\$	\$	
Disability Insurance	☐ Yes ☐ No	☐ Yes ☐ No	
Long-Term Care Insurance	☐ Yes ☐ No	☐ Yes ☐ No	
Cash Value Life Insurance	☐ Yes ☐ No	☐ Yes ☐ No	

Estate *Completing this section helps us review your estate plans.*

	C CLIENT	CO CO-CLIENT	NOTES
Will	☐ Yes ☐ No	☐ Yes ☐ No	
Including a provision for a Bypass Trust	☐ Yes ☐ No	☐ Yes ☐ No	
Date documents were last reviewed	/ /	/ /	
Medical Directive	☐ Yes ☐ No	☐ Yes ☐ No	
Power of Attorney	☐ Yes ☐ No	☐ Yes ☐ No	

Budget Worksheet

OPTIONAL — use this to help determine your Basic Living Expense. Enter what you spend now, and what you expect to spend in retirement.

Not sure what to budget for healthcare? You're not alone — it's one of the hardest costs to estimate. Simply write "don't know," and we'll apply our own well-researched healthcare estimates when we build your plan.

PERSONAL & FAMILY EXPENSES	CURRENT	RETIRE.
Alimony	\$	\$
Bank Charges	\$	\$
Business Expense	\$	\$
Cash — Miscellaneous	\$	\$
Cell Phone	\$	\$
Charitable Donations	\$	\$
Child Allowance / Expense	\$	\$
Child Care	\$	\$
Child Support	\$	\$
Clothing	\$	\$
Club Dues	\$	\$
Credit Card Debt Payment	\$	\$
Dining	\$	\$
Entertainment	\$	\$
Gifts	\$	\$
Groceries	\$	\$
Healthcare	\$	\$
Hobbies	\$	\$
Household Items	\$	\$
Laundry / Dry Cleaning	\$	\$
Personal Care	\$	\$
Pet Care	\$	\$
Recreation	\$	\$
Vacation / Travel	\$	\$
Other	\$	\$
TOTAL	\$	\$

VEHICLE EXPENSES	CURRENT	RETIRE.
Loan / Lease	\$	\$
Insurance	\$	\$
Personal Property Tax	\$	\$
Fuel	\$	\$
Repairs / Maintenance	\$	\$
Parking / Tolls	\$	\$
Other	\$	\$
TOTAL	\$	\$

Budget Worksheet — Continued

HOME EXPENSES	CURRENT	RETIRE.
Mortgage / Rent	\$	\$
Equity Line	\$	\$
Real Estate Tax	\$	\$
Homeowner's Insurance	\$	\$
Association Fees	\$	\$
Electricity	\$	\$
Gas / Oil	\$	\$
Trash Pickup	\$	\$
Water / Sewer	\$	\$
Cable / Satellite TV	\$	\$
Internet	\$	\$
Telephone (land line)	\$	\$
Lawn Care	\$	\$
Maintenance	\$	\$
Furniture	\$	\$
Other	\$	\$
TOTAL	\$	\$

PERSONAL INSURANCE EXPENSES	CURRENT	RETIRE.
Disability for Client	\$	\$
Disability for Spouse	\$	\$
Life for Client	\$	\$
Life for Spouse	\$	\$
Long-Term Care for Client	\$	\$
Long-Term Care for Spouse	\$	\$
Medical for Client	\$	\$
Medical for Spouse	\$	\$
Umbrella Liability	\$	\$
Other	\$	\$
TOTAL	\$	\$

TOTAL ALL EXPENSES	CURRENT	RETIRE.
Personal & Family Expenses	\$	\$
Vehicle Expenses	\$	\$
Home Expenses	\$	\$
Personal Insurance Expenses	\$	\$
TOTAL	\$	\$

Questions & Notes

Jot down anything you'd like to ask, or anything about your situation we should know as we build your plan together.

QUESTIONS FOR MY ADVISOR

NOTES



When you have the right plan — and the right partner — everything feels clearer, calmer, and more connected.

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