



Set your retirement goals.

EMPLOYEE

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

Pre-retirement income \$ _____

*Pre-retirement savings rate _____ %

SPOUSE/PARTNER

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

Pre-retirement income \$ _____

*Pre-retirement savings rate _____ %

*Include both your personal savings and any employer match.

1. Estimate your basic monthly spending.

Housing	Mortgage payments, rent, condo fees, utilities, home maintenance, appliances, property taxes, and home insurance.
Transportation	Car loan payments, fees and licenses, gas, repairs and maintenance, and auto insurance.
Food	Groceries and any restaurant expenses you want to include as part of your basic spending.
Personal	Personal items, such as toiletries, new clothing and shoes, laundry or dry cleaning, and alterations or repairs.
Health care	Health insurance premiums, deductibles and co-payments, dental and vision expenses, and prescriptions.
Insurance	Costs for other insurance coverages, such as life or long-term care insurance, or Medicare supplement.
Taxes	Other taxes, including federal and state income taxes, and taxes on properties other than your home.
Other	Any other expenses you want to consider as part of your basic spending, perhaps payments on credit cards or other loans.
Monthly Total	Your monthly total for basic spending.
Basic Income Annual Total	Multiply by 12 to estimate your annual basic spending This is the annual amount to consider for your basic income goal.

2. Estimate your flexible monthly spending.

Travel	Travel and lodging expenses for trips, purchase of a recreational vehicle, or purchase of a vacation home or timeshare.
Entertainment	Expenses for dining out, movies, and shows, purchase of books, magazines, or CDs, and costs for personal computers and electronics.
Recreation	Golf club memberships, health club dues, sports equipment, and similar expenses.
Hobbies	Costs for hobby supplies and equipment.
Gifts	Gifts for family and friends, or other contributions to charities and organizations you routinely support.
Other	Any other expenses you want to consider as part of your flexible spending, perhaps costs for decorating or remodeling your home.
Monthly Total	Your monthly total for basic spending.
Flexible Income Annual Total	Multiply by 12 to estimate your annual basic spending This is the annual amount to consider for your flexible income goal.

3. Check your insurance protection.

	EMPLOYEE	SPOUSE/PARTNER	
Health	Yes No	Yes No	Indicate yes or no regarding whether you expect to have health insurance needs taken care of through Medicare or other sources.
Long-term care	Yes No	Yes No	Indicate yes or no regarding whether you already have long-term care insurance in place.
Life			Indicate the face amount of any life insurance you already have in place.
Years remaining			For term life insurance, indicate the number of years of protection that remain. For permanent insurance indicate, "life."

4. Estimate your retirement date.

Employee DOB	Month, day, and year of birth for Employee.
Employee DOR	Desired month and year for Employee's retirement.
Spouse/Partner DOB	Month, day, and year of birth for Spouse/Partner.
Spouse/Partner DOR	Desired month and year for Spouse/Partner's retirement.
Current Tax Rate	Average tax rate before retirement.

Review your sources of retirement income.



CUNA MUTUAL
RETIREMENT SOLUTIONS

1. Estimate your regular retirement income.

	EMPLOYEE	SPOUSE/PARTNER	
Social Security			For an estimate of your Social Security payments, contact your local Social Security office or check out www.ssa.gov .
<i>Begin at age</i>			Your expected age to begin receiving Social Security.
Pension			Your employer can provide your monthly income from the company's defined benefit pension plan.
<i>Begin at age</i>			Your expected age to begin receiving pension payments.
<i>Cost of living adjustment</i>			Indicate yes or no regarding whether your pension is adjusted for inflation.
<i>Survivor benefit rate</i>	%	%	The percent of your pension that will pass to any survivor.
Post-retirement wages			Expected monthly income from a part-time job or from consulting work.
<i>Years remaining</i>			Indicate the number of years you plan to work after retirement. If already retired, indicate the years remaining to receive wages.
Annuity payments			Income you're already receiving in the form of an annuity.
Investment income			Any regular income you're already receiving from your investments, including any substantially-equal payments set up under Sec. 72(t).
Reverse mortgage			Any reverse mortgage you're already planning to receive during retirement.
Other			Any other regular income you currently receive, including income from a settlement or inheritance, or rental income.
Monthly Total			Your monthly income totals.
			x12
Annual Total			Your annual income totals.

2. What's more important to you?

	MOST IMPT.	NEUTRAL	MOST IMPT.
Receive a stable, regular paycheck in retirement			Have withdrawal access to my savings
No/low investment risk (i.e., steady 2% return)			Willing to take on higher market risk to possibly receive greater investment returns (i.e., willing to lose more than 20% in a one-year span)
Maximize my income in retirement			Leave legacy to children/heirs/charities
Be actively involved in managing my investments			Have someone else manage my investments

3. Estimate your current assets.

	EMPLOYEE	SPOUSE/PARTNER	
401(k) plan(s)			Dollars in an employer-sponsored 401(k) plan.
Other qualified retirement plan(s)			Dollars in other employer retirement plans, including 403(b) plans, 457s, SEPs, SIMPLEs, profit-sharing, or thrift savings.
Tradit'l IRA			Your traditional individual retirement accounts, including dollars in deductible or non-deductible IRAs.
Roth IRA			Your investments in Roth IRAs.
Annuities			The balances in any deferred annuities.
CDs			Dollars in certificates of deposit at your credit union or bank.
Insurance			The cash value of any life insurance policies.
Mutual Funds			Dollars held outside of qualified plans that you have invested in mutual funds.
Personal Property			The value of your personal property, including your car, jewelry or coins, art, antiques, and other collectibles.
Real Estate			Your home and other real estate you may own.
Savings			Money in your personal savings or money market accounts.
Securities			Money outside of qualified plans that you've invested in securities, including stocks, bonds, and government treasuries.
Other			Any other assets to consider, perhaps ownership interest in a business.
Asset Total			The total of your current assets.

4. Assess your attitudes toward investment risk.

STRONGLY AGREE AGREE NEUTRAL DISAGREE STRONGLY DISAGREE

I have prior investment experience with stocks, bonds, and international investments, and I understand the concept of risk.

I am patient with my investments and can accept occasional years with negative returns.

I have adequate insurance coverage in case of accidents to myself, my family, my home, and my automobile.

I consider myself an aggressive investor and seek above-average returns.

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