YOUR FINANCIAL GOALS

RETIREMENT G	OAL										
Goal Importance											
10	9	8	7	6	5	4	3	2	1		
	Needs			War	its			ishes			
Age to retire:					Life	expectanc	y:				
Retirement Livin	ıg Expense	s:									
Enter living expens	ses for the fo	ollowing r	etirement p	eriods:							
Expense Period 1 -	— Client reti	red/Co-C	Client workin	ıg	\$		р	er	□Мо	nth	
Expense Period 2 -	– Co-Client	retired/C	Client workin	ıg	\$		р	er	□Мо	nth	
Expense Period 3 — Client AND Co-Client retired					\$		р	er	□Мо	nth	
Expense Period 4 -	– Client alo	ne			\$		р	er	□Мо	nth	
Expense Period 5 -	— Co-Client	alone			\$		р	er	□Мо	nth	
Expenses that end	during retir	ement (e.	g., mortgage	, loan):							
					_			_	_		
Des	cription		Year Expens Will End			Amo (Current				In	flat
				\$			☐ Month	□ Yea	r [∃ Yes	
				\$			☐ Month	□ Yea		□ Yes	
				\$			☐ Month	☐ Yea	r [∃ Yes	[
				\$			☐ Month	☐ Yea	r [□ Yes	[
Will this amount	inflate? □	No □ Y	es, Base Inf	flation R	ate 🗆 `	Yes, Base Ir	nflation Ra	te +/-			
Will you change :	states in re	tirement	? □ No □	Yes	Sta	ate where yo	ou will mov	e:			
When Wi	II You Move?	² □ Clie	nt's Retirem	ent 🗆 (Co-Clie	nt's Retiren	nent OR Ye	ar		_	
			5							_	

COLLEGE GO	AL									
Child's name:			Year to Start:	# of years o	f college:					
Goal Importan	ce (circle one)									
10	9 8	7 6	5 4	3 2	l					
	Needs	Wants	3	Wishes						
Cost Estimate	: (fill in A, B or C)									
A. My cost estir	nate: \$	(Annual Cos	t)							
B. Use an avera	ge cost:									
□ Public Ir	☐ Public In-State (4-year) ☐ Public Out-of-State (4-year)									
□ Public Ir	☐ Public In-State (2-year) ☐ Public Out-of-State (4-year)									
☐ Private (4-year)	☐ Average A	AII							
C. Specific coll	ege:			□ Undergraduate	□ Graduate					
State in whi	ch the college is located	l:								
Include cost of the following: (Check which to include)										
☐ Tuition	☐ Out-of-State Fees	□ Room & Board	□ Books & Su	pplies Other Cost	S					
Have you p	repaid for college usir	ng a 529 Prepaid Tu	ition Plan? □ N	No □ Yes						
How many y	ears of tuition and fees	will be covered for t	his college?							
Outside fundir	ng for college (optional))								
Other funding s	ources during college: (a	annual amounts)								
Scholarships: \$		S	tudent employme	ent: \$						
Students loans:	\$	G	Gifts and other: \$							
Your own incom	e: \$	Y	our loans: \$							
Outside assets (Assets not owned by you that will be used to pay for this college, not including UGMAs, UTMAs or 529 Plans)										
1. Type of assets		С	escription:							
Current value	: \$	Annual additi	on: \$	Growth	rate: %					
2. Type of asset:		С	escription:		-					
Current value	Current value: \$ Annual addition: \$ Growth rate: %									
Will this amou	nt inflate? (Note: the de	efault rate is 6%)								
□ No □ Yes, Ba	ase Inflation Rate 🗆 Yes	s, Base Inflation Rate	e +/- %							

Child's name:			Year to Start:	# of years o	f college:			
Goal Importan	ice (circle one)							
10	9 8	7 6	5 4	3 2 1				
	Needs	War	ts	Wishes				
Cost Estimate	: (fill in A, B or C)							
A. My cost esti	mate: \$	(Annual Co	st)					
B. Use an avera	ige cost:							
☐ Public Ir	n-State (4-year)	□ Public (Out-of-State (4-ye	ar)				
☐ Public Ir	n-State (2-year)	☐ Public (Out-of-State (4-ye	ar)				
□ Private ((4-year)	☐ Average	e All					
C. Specific coll	ege:			□ Undergraduate	☐ Graduate			
State in whi	ich the college is located	l:						
Include cost of the following: (Check which to include)								
☐ Tuition	☐ Out-of-State Fees	☐ Room & Board	□ Books & Su	upplies 🗆 Other Costs	3			
Have you p	orepaid for college usin	ng a 529 Prepaid 7	uition Plan? 🗆	No □ Yes				
How many y	ears of tuition and fees	will be covered for	this college?					
Outside fundir	ng for college (optional))						
Other funding s	ources during college: (a	annual amounts)						
Scholarships: \$			Student employm	nent: \$				
Students loans:	\$		Gifts and other: \$	\$				
Your own incom	e: \$		Your loans: \$					
Outside assets (Assets not owned by you that will be used to pay for this college, not including UGMAs, UTMAs or 529 Plans)								
1. Type of asset	:		Description:					
Current value	: \$	Annual add	tion: \$	Growth	rate: %			
2. Type of asset	:		Description:					
Current value	: \$	Annual add	tion: \$	Growth	rate: %			
Will this amou	nt inflate? (Note: the de	efault rate is 6%)						
□ No □ Yes, B	ase Inflation Rate 🛚 Yes	s, Base Inflation Ra	te +/- %					

PRIVATE SCHOOL GOAL									
Child's name:		Year to Start:	# of years of college:						
Goal Importance (circle one)									
10 9 8	7 6	5 4	3 2 1						
Needs	Want	S	Wishes						
Annual cost: \$	(today's dollars)								
Will this amount inflate? ☐ No ☐ Yes, Base Inflation Rate ☐ Yes, Base Inflation Rate +/- %									
Child's name:		Year to Start:	# of years of college:						
Goal Importance (circle one)									
10 9 8	7 6	5 4	3 2 1						
Needs	Want	S	Wishes						
Annual cost: \$	(today's dollars)								
Will this amount inflate? □ No	□ Yes, Base Inflation Ra	ite 🗆 Yes, Base In	flation Rate +/-	%					
Child's name:		Year to Start:	# of years of college:						
Goal Importance (circle one)									
10 9 8	7 6	5 4	3 2 1						
Needs	Want	S	Wishes						
Annual cost: \$	(today's dollars)								
Will this amount inflate? ☐ No ☐ Yes, Base Inflation Rate ☐ Yes, Base Inflation Rate +/-									

FINANCIAL GOA	L (Major Purchases, V	Weddings, Travel, New Home,	etc.)						
Description:									
Goal Importance:	(circle one)								
10	9 8 7	6 5 4	3 2 1						
	Needs	Wants	Wishes						
Year of goal:		Cost: \$	☐ Month	□ Year					
Will this amount inflate? ☐ No ☐ Yes, Base Inflation Rate ☐ Yes, Base Inflation Rate +/-									
Is this goal recurri	ing? □ No □ Yes	How often will it occur: Ex	very year(s)						
When will it end?	☐ Client's Retirement☐ End of Co-Client's F		□ End of Client's Plan□ Total Occurrences:						
Description:									
Goal Importance:	(circle one)								
10	9 8 7	6 5 4	3 2 1						
	Needs	Wants	Wishes						
Year of goal:		Cost: \$	☐ Month	□ Year					
Will this amount in	nflate? □ No □ Yes, E	Base Inflation Rate ☐ Yes, Base	Inflation Rate +/-	%					
Is this goal recurr	ing? □ No □ Yes	How often will it occur: Ex	very year(s)						
When will it end?	☐ Client's Retirement☐ End of Co-Client's F		☐ End of Client's Plan☐ Total Occurrences:						
Description:									
Goal Importance:	(circle one)								
10	9 8 7	6 5 4	3 2 1						
	Needs	Wants	Wishes						
Year of goal:		Cost: \$	☐ Month	□ Year					
Will this amount inflate? ☐ No ☐ Yes, Base Inflation Rate ☐ Yes, Base Inflation Rate +/-									
Is this goal recurr	ing? □ No □ Yes	How often will it occur: Ev	very year(s)						
When will it end?	☐ Client's Retirement☐ End of Co-Client's F		☐ End of Client's Plan ☐ Total Occurrences:						

GIFT OR DONAT	ION							
Description:								
Importance: (circle	e one)							
10	9 8	7 6	5 4	3 2	1			
	Needs	Want	s	Wishes				
Who is the donor?	,							
Who will receive t	his gift?							
Year you plan to g	ive this gift or don	ation?						
Amount of gift or donation? \$ per ☐ Month ☐ Year								
Will this amount inflate? ☐ No ☐ Yes, Base Inflation Rate ☐ Yes, Base Inflation Rate +/-								
Is this goal recurri	ing? □ No □ Yes	How often	will it occur: E	very year(s)				
When will it end?	☐ Client's Retirem☐ End of Co-Client	ent □ Co-Client t's Plan □ End of	's Retirement Plan OR	☐ End of Client's Plan☐ Total Occurrences:				
Description:								
Importance: (circle	e one)							
10	9 8	7 6	5 4	3 2	1			
	Needs	Want	S	Wishes				
Who is the donor?	,							
Who will receive t	his gift?							
Year you plan to g	ive this gift or dona	ation?						
Amount of gift or	donation?\$		per □ Month	ı □ Year				
Will this amount in	nflate? □ No □ Ye	es, Base Inflation Ra	te □ Yes, Base	Inflation Rate +/-	%			
Is this goal recurri	ing? □ No □ Yes	How often	will it occur: Ex	very year(s)				
When will it end?	☐ Client's Retirem	ent Co-Client	's Retirement	☐ End of Client's Plan				
	☐ End of Co-Client	t's Plan □ End of	Plan OR	☐ Total Occurrences:				

LEAVE	E BEQUES	т									
Descri	iption/Rec	ipient:									
Import	tance: (circ	cle one)									
	10	9	8	7	6	5	4	3	2	1	
		Needs			Wai	nts			Wishes		
Who will receive this gift?											
When will the bequest be made: ☐ End of Client's Plan ☐ End of Co-Client's Plan											
Amoui	Amount of bequest: \$ (today's dollars)										
Will this amount inflate? ☐ No ☐ Yes, Base Inflation Rate ☐ Yes, Base Inflation Rate +/-									%		
Descri	iption/Rec	ipient:									
Import	tance: (circ	cle one)									
	10	9	8	7	6	5	4	3	2	1	
		Needs			Wai	nts			Wishes		
Who w	Who will receive this gift?										
When will the bequest be made: ☐ End of Client's Plan ☐ End of Co-Client's Plan											
Amoui	nt of bequ	est: \$			(toda	y's dollars	;)				
Will th	is amount	inflate? [No □Y	es, Base	Inflation F	Rate □ Ye	es, Base I	nflation	Rate +/-		%

1. How willing are you to retire later than your target retirement age? ☐ Not at All ☐ Slightly Willing ☐ Somewhat Willing ☐ Very Willing 2. In what order do you prefer to retire? \square Both retire in the same year ☐ Either can retire first ☐ Co-Client can retire first ☐ Client can retire first 3. If you had to save more, what is the maximum extra amount you could save annually to meet your goals? This amount is above and beyond the total additions you are already making to investment assets. \$ 4. How willing are you to save more money? ☐ Somewhat Willing ☐ Very Willing ☐ Slightly Willing 5. When considering all of the goals you have classified as **NEEDS**, how willing are you to reduce your goal amounts from the target? ☐ Slightly Willing ☐ Somewhat Willing ☐ Very Willing 6. When considering all of the goals you have classified as WANTS, how willing are you to reduce your goal amounts from the target? ☐ Slightly Willing ☐ Somewhat Willing ☐ Very Willing

WILLINGNESS TO ADJUST PREFERENCES



3000 Langley Avenue // Suite 200 // Pensacola, FL 32504 T: 850.361.4978 // ironhorsews.com