



Nationwide®



Personal Retirement Consultants

A few questions, a lot of answers

Our retirement income planning questionnaire helps us create a personalized strategy to assist your financial and retirement planning.

Get lifelong financial and retirement planning support

No matter where you're at in life, our Personal Retirement Consultant (PRC) team is here to offer professional financial planning guidance. They can help you in areas such as:

- ✔ Setting goals
- ✔ Budgeting
- ✔ Saving
- ✔ Investing
- ✔ Managing debt
- ✔ Estimating retirement income
- ✔ Planning for major life events

Once your questionnaire is complete, your Nationwide PRC will review it and give you a personal analysis.

Your PRC can help you understand many of the financial details about your retirement income. Our commitment to you is simple: We provide personalized financial services to help you make knowledgeable decisions up to and throughout your retirement. It's an added service at no additional charge, and it's our way of helping you take the next step in your journey.

Please review the questionnaire and gather the requested data. If you have any questions or require assistance, call your PRC.



Tell us about your retirement goals.

Tell us about what you want to do in retirement.

Check all that apply to you and/or your spouse.

- | | | |
|---|---|---|
| <input type="radio"/> Travel | <input type="radio"/> Volunteer/community service | <input type="radio"/> Help with grandchildren's education |
| <input type="radio"/> Recreation | <input type="radio"/> Relocate | <input type="radio"/> Give to charity |
| <input type="radio"/> Go back to school | <input type="radio"/> Start a new business | |
| <input type="radio"/> Work part time (teach, consult, etc.) | <input type="radio"/> Pursue hobbies | |

Tell us about your concerns and questions.

Tell us what concerns you most.

Mark 3 or 4 questions from the list below. Your responses will help your PRC prepare for your meeting. Of course, your PRC will discuss any relevant questions you have, even if they're not listed here.

Will I have enough money to do the things I want to do?

Will I have enough money to maintain my current standard of living?

Will I be able to afford health care?

How can I make sure that my money lasts as long as I do?

How can I catch up quickly on my retirement savings?

What is the best way for me to take my pension payments?

Do I need to take out my deferred compensation?

My spouse has a pension/retirement plan; how should we take the money from it?

What assets should I begin to draw from first for extra retirement income?

I have multiple savings and retirement accounts; are there benefits to consolidating them?

How can I maximize my retirement income?

Do I have the right investment mix for my/our situation?

When should I or my spouse begin receiving Social Security benefits?

I have/my spouse has a serious medical condition; how does this impact our planning?

What happens if I pass away before my spouse?

How will my income be taxed in retirement?

How did you hear about the PRC financial planning service? (Check all that apply)

- ☐ My local Retirement Specialist ☐ Website ☐ Local office
☐ Other: _____

Tell us about yourself and your family members.

Tell us about yourself.

First name: _____ MI: _____ Last name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Cellphone: _____ Work phone: _____

Email (required): _____

Date of birth: _____ Expected retirement date: _____

Occupation: _____

Employer: _____

Salary: _____

Do you think you'll work during your retirement years? ☐ Yes ☐ No

If yes, full-time or part-time? _____ Expected income: \$ _____

Tell us about your spouse.

First name: _____ MI: _____ Last name: _____

Spouse's email (required): _____

Date of birth: _____ Expected retirement date: _____

Occupation: _____

Employer: _____

Salary: _____

Do you think your spouse will work during their retirement years? ☐ Yes ☐ No

If yes, full-time or part-time? _____ Expected income: _____

Tell us about your children/dependents.

Name: _____ Relationship: _____ Date of birth: _____

Name: _____ Relationship: _____ Date of birth: _____

Name: _____ Relationship: _____ Date of birth: _____

Name: _____ Relationship: _____ Date of birth: _____

Name: _____ Relationship: _____ Date of birth: _____

Name: _____ Relationship: _____ Date of birth: _____

Tell us about your income.

Pension benefits

Description	Recipient	Annual amount	Start date/age	% payable to spouse at death	Annual COLA %
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Social Security benefits

Your Social Security Annual Benefit Statement can be accessed online at ssa.gov.

You	Monthly amount at full retirement	Expected start date/age	Spouse	Monthly amount at full retirement	Expected start date/age
Social Security: _____		_____	Social Security: _____		_____

Retirement: 457(b), 401(a), 401(k), IRA, Roth IRA, other

Please include a copy of your latest statement, if possible.

Plan type/name	Owner (you/spouse)	Current value	Current contribution amt.	Employer match? (%)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Bank, savings and investment accounts

If you maintain more accounts than will fit in this space, please attach a listing of those accounts on a separate page. Please also include a copy of your latest statement for each account.

Account type/name	Owner (you/spouse/joint)	Current value	Current contribution amt.
_____	_____	_____	_____
_____	_____	_____	_____

Do you have life insurance? ☐ Yes ☐ No

If yes, how much survivor benefit: \$_____ and monthly premium: \$_____

If Term, when does the term end? (Year) _____

If Permanent, what is the cash value? \$_____

Do you have a will or trust in place? ☐ Yes ☐ No

Date of last update: _____

Does your spouse have life insurance? ☐ Yes ☐ No

If yes, how much survivor benefit: \$_____ and annual premium: \$_____

If Term, when does the term end? (Year) _____

If Permanent, what is the cash value? \$_____

Do you have long-term care insurance? ☐ Yes ☐ No

If yes, what is the monthly benefit: \$_____ and monthly premium: \$_____

Does your spouse have long-term care insurance? ☐ Yes ☐ No

If yes, what is the monthly premium: \$_____

Tell us about your assets and debts.

Include assets that have a material impact on your net worth (primary, secondary and/or rental property; personal and business assets; etc.).

Housing ☐ **Own** ☐ **Rent (select one)** Rent: \$ _____ monthly expense

Own

Description	Purchase price	Current value	Annual taxes	Annual insurance	Annual maintenance/HOA
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_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Mortgage

Property description	Balance owed	Interest rate	Date paid off	Monthly payment	Principal and interest
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_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Do you own income-producing property? ☐ Yes ☐ No

If yes, monthly rental income: \$ _____

Debts

Include debts such as vehicle loans, student loans, credit cards, alimony, child support, etc.

Description	Current balance	Monthly payment	Annual interest rate
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Tell us about your expenses.

Potential expense sources	Current monthly expenses	Anticipated monthly expenses in retirement
Utilities, including cellphone and streaming services		
Household (furnishings/supplies)		
Transportation (gas, maintenance, registration)		
Car insurance		
Food at home		
Meals out		
Entertainment (recreation, hobbies, etc.)		
Travel		
Clothing		
Personal care (products and services)		
Health care premiums		
Medical/dental/vision out of pocket		
Professional expenses		
Charitable giving		
Child(ren) expenses		
Gifts		
Other (pets, hobbies, etc.)		

Major events and/or expenses

For planning purposes, please indicate any major events expected below (e.g., wedding, tuition, major celebrations, down payment for home or other large purchase).

Event _____ Year _____ Est. cost _____

Event _____ Year _____ Est. cost _____

Event _____ Year _____ Est. cost _____



Please return your information

Name _____

Email _____

Phone number _____



Neither Nationwide nor its representatives give legal or tax advice. Please consult your attorney or tax advisor for answers to specific questions.

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NRM-3694M6.2 (01/25)