



# ANNUAL CASHFLOW ANALYSIS

The worksheet on the following pages is one of the most important pieces of information required to complete your financial plan.

Yes, it does have a lot of lines and blanks. You will not use all of them. We list many expenses on this form with the goal of preventing something from being missed. It does not have to be perfect.

## Every cashflow starts with annual income...

- Please list each recurring, predictable income source.
- Name the income source (Jane's wages, Jane's Social Security, Joe's Bonus, etc.).
- Enter annual gross income before taxes and deductions (retirement savings, insurance, etc.).
- Do not list one-time, unguaranteed payments such as inheritance or rumored possible bonus.
- Consider income from pensions, IRAs, Annuities, Social Security, child support or alimony, and wages.

INCOME	
Source:	\$
Source:	\$
Source:	\$
Source:	\$
Source:	\$
Source:	\$



Start with last year's tax return. Specifically, the documents you used to complete and file your return such as: W-2s, 1099s, & Schedule K-1s to find annual incomes.

1: TOTAL ANNUAL INCOME	\$
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## Why is this worksheet so important?

A big part of your financial picture is what, where, and how you spend your money. We must make an educated guess about what you might spend in the years ahead on everything from cars to groceries to vacations. The best way to do that is to look at spending now. In our experience, every person spends differently and has a different definition of necessary spending. We need to learn yours. This worksheet will help us do that. We are not looking to judge you or "fix" your spending habits. **We need to understand where you are today, so we can plan for your tomorrows.**

## Next let's look at your expenses in a typical year...

- Only include recurring expenses. If it will only happen once, such as a bathroom remodel, leave it out.
- Be careful not to double count. If you pay your electric with a credit card, count as one or the other, not both.
- Provide what you actually spend, not what you wish you spent.

HOUSING	
Mortgage (Principal and Interest) or Rent	\$
Private Mortgage Insurance (PMI) <i>If applicable</i>	\$
Second Mortgage (Principal and Interest)	\$
Escrow	\$
<i>Homeowners/Renters' Insurance</i>	\$
<i>Property Taxes</i>	\$
Association Dues	\$
Ongoing Home Maintenance	\$
Household Cleaning and Other Services	\$
Landscaping and Lawncare Services	\$
Home Security System	\$



Your mortgage statement may show amounts for Principal, Interest, and Escrow. Principal & Interest should be added together and go into mortgage. Escrow is a combination of property taxes and insurance.

**If you enter an amount in escrow, don't use insurance or property taxes.**

You may have PMI if you have a loan and made a down payment less than 20% of purchase price. This amount can be found on your mortgage statement.

2: TOTAL HOUSING EXPENSES	\$
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BILLS & UTILITIES	
Electric	\$
Gas	\$
Internet/Cable	\$
Phone/Mobile	\$
Trash/Recycling	\$
Water/Sewer	\$
Streaming Services/Subscriptions	<i>See Entertainment &amp; Travel</i>

3: TOTAL BILLS & UTILITIES EXPENSES	\$
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AUTO & TRANSPORT		
Auto lease/loan payment #1	<input type="checkbox"/> This is a lease	\$
Auto lease/loan payment #2	<input type="checkbox"/> This is a lease	\$
Auto lease/loan payment #3	<input type="checkbox"/> This is a lease	\$
Gas/Fuel		\$
License & Registration		\$
Parking & Tolls		\$
Service & Maintenance	<i>(Tires, oil, etc.)</i>	\$
Auto Insurance		\$
Public Transportation		\$

4: TOTAL AUTO & TRANSPORT EXPENSES	\$
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**An important note regarding medical expenses...**

- Do not include insurance premiums deducted from your wages.
- Include medical expenses you pay yourself or using an HSA or FSA.

MEDICAL		
Dental Copays & Expenses		\$
Dental Insurance	<input type="checkbox"/> AUTO	\$
Medical Copays & Expenses		\$
Medical Insurance	<input type="checkbox"/> AUTO	\$
Vision Copays & Expenses	<i>(Glasses &amp; Contacts)</i>	\$
Vision Insurance	<input type="checkbox"/> AUTO	\$
Pharmacy & Medications		\$
Prescription Insurance/Medicare Part D	<input type="checkbox"/> AUTO	\$
Alternative/Other Health Care		\$



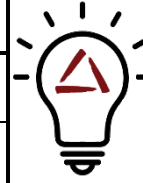
**Focus on medical costs and premiums that you pay yourself or with an HSA or FSA account.**

Optionally, if you would like to include insurance premiums automatically deducted from an income source (ie, employer-sponsored medical insurance), please check the "AUTO" box to the right.

5: TOTAL MEDICAL EXPENSES	\$
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You may notice a few familiar items. These expenses have multiple categories & are repeated as a reminder.

INSURANCE		
Auto Insurance		See Auto & Transport
Homeowners'/Renters Insurance		See Housing
Dental Insurance		See Medical
Medical Insurance		See Medical
Prescription Insurance/Medicare Part D		See Medical
Vision Insurance		See Medical
Life Insurance (Term, Universal, etc.)	<input type="checkbox"/> AUTO	\$
Long-Term Care Insurance	<input type="checkbox"/> AUTO	\$
Disability (Long-Term, Short-Term)	<input type="checkbox"/> AUTO	\$
Umbrella Insurance	<input type="checkbox"/> AUTO	\$
Other Insurance	<input type="checkbox"/> AUTO	\$



Please list premiums that you pay yourself rather than those deducted from an income source.

Optionally, if you would like to include insurance premiums automatically deducted from an income source, (ie, employer-sponsored life term life insurance), please check the "AUTO" box to the right to indicate that this is automatically taken from your income.

6: TOTAL INSURANCE EXPENSES	\$
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ENTERTAINMENT & TRAVEL	
Books, Magazines, Movies & Music	\$
Concerts & Events	\$
Sports, Hobbies, & Activities	\$
Streaming Services & Subscriptions	\$
Travel & Vacation	\$
Miscellaneous Entertainment	\$



Streaming services and subscriptions... Think about services like:

- Netflix
- HBO
- YouTube
- Apple Music
- Dropbox
- Antivirus
- Apps
- Amazon

7: TOTAL ENTERTAINMENT & TRAVEL EXPENSES	\$
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PERSONAL & FAMILY CARE	
Groceries & Household Supplies	\$
Restaurants & Dining	\$
Gifts <i>(Holidays, birthday, planned cash gifts...)</i>	\$
Clothing & Shoes	\$
Hair, Skin, and Nail Care	\$
Pocket Money/Cash	\$
Technology, Computers & Mobile Devices	\$
Dues & Memberships	\$
Other Miscellaneous Expenses	\$



For dues & memberships, think about things like:

- The gym or health center
- Community Centers
- Country Clubs
- Golf Clubs
- Subscriptions boxes, ie: clothing, art, wine, etc.

A great starting point for expenses is a year-end bank or credit card statement. These often automatically categorize your spending for you!

8: TOTAL PERSONAL & FAMILY CARE EXPENSES	\$
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CHARITY		
Charitable Gifting	<i>Are any of these Qualified Charitable Distributions?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	\$
Tithes/Church		\$

9: TOTAL CHARITY	\$
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LEGAL/PROFESSIONAL	
Child Support	<i>See Kids &amp; Education</i>
Alimony	\$
CPA/Accountant	\$
Other Expenses	\$



We include HFF investment management fees. You don't need to include them.

10: TOTAL LEGAL/PROFESSIONAL EXPENSES	\$
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**No children or children all grown up? Skip this section!**

KIDS & EDUCATION	
Child Support	\$
Books & School Supplies	\$
Clothing, Toys & Other Supplies	\$
Day Care/Child Care/Sitters	\$
K-12 Education/Tuition	\$
College Tuition	\$
Education Savings (529s, College Accounts, etc)	<i>See Savings</i>



If you contribute to a 529 or other college savings plan through automatic withdrawal, ACH, or direct payments please include that annual contribution amount.

11: TOTAL KIDS & EDUCATION EXPENSES	\$
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SAVINGS	
Retirement Savings (401(k), IRA, etc.) <input type="checkbox"/> AUTO	\$
Annual Savings to Cash Accounts	\$
Brokerage/Taxable Savings	\$
Education Savings (529s, College Accounts, etc)	\$
HSA and/or FSA Savings <input type="checkbox"/> AUTO	\$
Other Savings	\$



Please list any manual savings you do outside of employer-sponsored accounts.

Optionally, if you would like to include employer plans, please check the "AUTO" box to the right.

12: TOTAL SAVINGS	\$
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No furry, feathered, finned, or scaled friends? Skip this section!

PETS	
Food & Supplies	\$
Grooming	\$
Boarding/Pet Sitting Fees	\$
Vet	\$
Other Pet Expenses	\$

13: TOTAL PET EXPENSES

\$

### An important note about debts...

- Be sure not to double count credit card payments. If you use your credit card to purchase groceries, that amount should not be entered in both groceries and credit card. Pick one.

DEBTS	
Auto Payment #1	<i>See Auto &amp; Transport</i>
Auto Payment #2	<i>See Auto &amp; Transport</i>
Mortgage (Principal and Interest)	<i>See Housing</i>
Second Mortgage (Principal and Interest)	<i>See Housing</i>
Credit Card(s)	\$
Home Equity or Personal Line(s) of Credit	\$
Student Loan(s)	\$
Other Debts	\$



Please provide the annual debt payment, **not** your outstanding balance amount.

14: TOTAL DEBTS

\$

**You're almost done!** The following page will calculate your totals. Thank you for all your hard work!

## ANNUAL SUMMARY SUBTOTALS

1: INCOME	\$	8: PERSONAL & FAMILY CARE	\$
2: HOUSING	\$	9: CHARITY	\$
3: BILLS & UTILITIES	\$	10: LEGAL/PROFESSIONAL	\$
4: AUTO & TRANSPORT	\$	11: KIDS & EDUCATION	\$
5: MEDICAL	\$	12: SAVINGS	\$
6: INSURANCE	\$	13: PETS	\$
7: ENTERTAINMENT & TRAVEL	\$	14: DEBTS	\$

To calculate your total annual expenses, follow the formula below.

$$\boxed{2} + \boxed{3} + \boxed{4} + \boxed{5} + \boxed{6} + \boxed{7} + \boxed{8} + \boxed{9} + \boxed{10} + \boxed{11} + \boxed{13} + \boxed{14} = \boxed{\text{TOTAL EXPENSES}}$$

## ANNUAL SUMMARY CALCULATION

