ProFeds Federal Fact Finder – 2025 v1

Along with the FFF, include pay stub, TSP & SS statements
Email to **Reports@ProFeds.com** / Fax to **866-779-9921**
MEMBER USE ONLY - NOT FOR DISTRIBUTION TO PUBLIC

Member Name:

Date submitted:

Requested due date:

Workshop Code

BASIC INFORMATION

Employee's name:		Date of birth:
Spouse's name:	Fed Emp?	Date of birth:
Address:	City	St	Zip

RETIREMENT SYSTEM

- ☐ CSRS
- ☐ CSRS Offset — Offset date:
- ☐ FERS
- ☐ FERS Transfer — Transfer date:

RETIREMENT TYPE

- ☐ Regular (fully-eligible or MRA+10 scenario)
- ☐ Optional (early out) — Offer date:
- ☐ Deferred (too young, but vested to get later)
- ☐ Disability (not already fully-eligible & must qualify)

EMPLOYEE TYPE

- ☐ Regular
- ☐ Regular – Postal Worker
- ☐ Regular – Military Reserve Technician
- ☐ Law Enforcement — LEO start date:
- ☐ Customs & Border Protection Officer
  Were you a CBPO on 7/6/2008 when the position became law enforcement?
  - ☐ Yes
  - ☐ No
  - ☐ Unsure
- ☐ Firefighter — FF start date:
- ☐ Air Traffic Controller — ATC start date:
- ☐ Foreign Service — FS start date:

RETIREMENT, PAY & LEAVE

	Leave SCD (required):	Retirement SCD (if known):
What are your Service Computation Dates? *The Leave SCD (on the pay stub) may be different than the Retirement SCD that is used for retirement credit purposes. Give both, if known.*		
When are you planning to retire? (Please check ONE) *To ensure there is no gap between payments, employees are encouraged to retire on the last day of the month.*	☐ Fully-eligible (no penalty) ☐ MRA+10	☐ Age: ☐ Date:
Is there any reason we should plan on providing less than the maximum pension protection to your current spouse? *Your spouse is underlined entitled to a maximum benefit, unless otherwise agreed.*	☐ Yes ☐ No	Reason:
Is there a court order that grants any of your federal benefits (pension, SBP, TSP) to a former spouse?	☐ Yes ☐ No	(If yes, describe below or provide a copy for review)
What is your current annual salary (including locality pay)?		Salary: $ /yr
Do you expect to earn your highest 3 years of pay at the end of your career? *If not, provide highest salary history below.*	☐ Yes ☐ No	(If no, describe below)
What are your current sick leave & annual leave balances? *If you plan to use all of your leave before you retire, leave blank.*	Sick Leave:	Annual Leave:

	SS at age 62:		SS at desired start age:	
What is your Social Security benefit at age 62 and at your desired start age? *The "age 62" SS benefit affects other benefits, so please include it. If already drawing SS, use current age & benefit.*	Age **62**	$ /mo	Age	$ /mo

Notes:

☐ **No to ALL military service**	**MILITARY SERVICE**

Military – Active Duty

Do you have any military service on active duty? ☐ Yes　☐ No	Dates of <u>ACTIVE DUTY</u> service?	to
	Have you already made a deposit into CSRS/FERS to get credit for this time?	☐ Yes　☐ No　☐ Unsure
	How much do you <u>currently</u> still owe?	☐ $ 0　☐ $ 　　　　☐ Unsure
	Did any military service interrupt federal service (called "Leave Without Pay – US")? List dates.	to
	If so, did you make a deposit for that time?	☐ Yes　☐ No　☐ Unsure
	Did you <u>RETIRE</u> from <u>ACTIVE DUTY</u>?	☐ Yes　☐ No
	If so, what is your military pension amount?	Pension amount: $　　　　/mo
	Was extra time added to your SCD for overseas/campaign service?	How much (if any):
	Notes:	

Military – Reserves

Do you have any military service in the reserves? ☐ Yes　☐ No	Dates of <u>RESERVE</u> service?	to
	How much reserve time is creditable in CSRS/FERS? *Determined when deposit calculated.*	YY　　MM　　DD　☐ Unsure
	Have you already made a deposit into CSRS/FERS to get credit for this time?	☐ Yes　☐ No　☐ Unsure
	How much do you <u>currently</u> still owe?	☐ $ 0　☐ $ 　　　　☐ Unsure
	Did any military service interrupt federal service (called "Leave Without Pay – US")? List dates.	to
	If so, did you make a deposit for that time?	☐ Yes　☐ No　☐ Unsure
	Did you <u>RETIRE</u> from the <u>RESERVES</u>?	☐ Yes　☐ No
	If so, what is your military pension amount?	Pension amount: $　　　　/mo
	When does your reserve pension begin? *Typically, reserve pensions begin at age 60.*	Pension start age:
	Notes:	

Military – Academy

Do you have any military academy service? ☐ Yes　☐ No	Dates of <u>ACADEMY</u> service?	to
	Have you already made a deposit into CSRS/FERS to get credit for this time?	☐ Yes　☐ No　☐ Unsure
	How much do you <u>currently</u> still owe?	☐ $ 0　☐ $ 　　　　☐ Unsure
	Does it appear that your academy time is included in your Leave SCD?	☐ Yes　☐ No　☐ Unsure
	Notes:	

☐ **No to ALL special service**	**SPECIAL TYPES OF FEDERAL SERVICE**

Non-Deduction Service	*An employee was not contributing to the CSRS/FERS system. If they are later hired into a permanent position, some employees are allowed to make a deposit to get credit for this service.*

Do you have any federal temporary, interim, casual, seasonal, or intern service? ☐ Yes ☐ No	Dates of NON-DEDUCTION service?	to
	Have you already made a deposit into CSRS/FERS to get credit for this time?	☐ Yes ☐ No ☐ Unsure
	How much do you currently still owe?	☐ $ 0 ☐ $ ☐ Unsure
	Notes:	

Break-in-Service	*An employee was in a position where they were contributing to CSRS/FERS, but then left federal service. If they took a refund of those contributions, they can repay those funds to regain credit for original service.*

Have you ever left federal service (had a "break-in-service")? ☐ Yes ☐ No	Dates of your ORIGINAL service (before leaving)?	to
	Dates of the BREAK-IN-SERVICE?	to
	Did you take a refund of your CSRS/FERS funds when you left?	☐ Yes ☐ No ☐ Unsure
	If so, did you repay ("redeposit") it when you returned to federal service?	☐ Yes ☐ No ☐ Unsure
	How much do you currently still owe?	☐ $ 0 ☐ $ ☐ Unsure
	Notes:	

Part-Time Service	*An employee is scheduled to work less than 40 hours per week. The pension will be prorated based on the percentage of time worked. Part-time service can also be "non-deduction" service (see above).*

Have you had any federal part-time service? ☐ Yes ☐ No	Dates of PART-TIME service?	to
	How many hours per week?	# hours per week:
	During this time, did you contribute to the retirement system (CSRS/FERS)?	☐ Yes ☐ No ☐ Unsure
	Notes:	

Other Pertinent Details
Is there anything else we should know about your service history as we prepare your report?

FEDERAL EMPLOYEES GROUP LIFE INSURANCE (FEGLI)

How much do you currently pay for coverage? *List all FEGLI premiums exactly as shown on the pay stub (even if you are unsure which coverage it pertains to). We will determine coverage based on the total premium.*	**Basic & Optional Coverage (A, B & C) –** *shown on up to 4 lines on pay stub* $ /pp $ /pp $ /pp $ /pp
Will you have ALL of this coverage in place for <u>at least 5 years</u> immediately before you retire?	☐ Yes ☐ No ☐ Unsure
Do you wish to keep this coverage in retirement?	☐ Yes ☐ No ☐ Unsure
Is FEGLI your sole source of life insurance and what is your purpose for having it?	☐ Yes ☐ No Purpose:
What are the ages of your dependent children? *Include unmarried children under age 22 (older, if disabled).*	Children's ages: *Asterisk any children disabled prior to age 22 and incapable of self-support.*

Notes:

FEDERAL EMPLOYEES HEALTH BENEFITS (FEHB)

	Health	Dental	Vision	Dental/Vision
How much do you currently pay for coverage?	$ /pp	$ /pp	$ /pp	$ /pp
For the <u>health</u> insurance plan, who is covered?	☐ Self-Only ☐ Self+One ☐ Self+Family ☐ None			
Will <u>you</u> have the <u>health</u> coverage in place for <u>at least 5 years</u> immediately before you retire? *Family members do NOT have a 5-year requirement.*	☐ Yes ☐ No ☐ Unsure			
Do you wish to keep this coverage in retirement?	☐ Yes ☐ No ☐ Unsure			
In retirement, will your spouse be reliant on federal <u>health</u> benefits through your plan?	☐ Yes ☐ No ☐ Unsure			
Do you have other <u>health</u> coverage?	☐ TRICARE ☐ VA ☐ Spouse's plan ☐ Private health plan			

Notes:

FEDERAL LONG TERM CARE INSURANCE PROGRAM (FLTCIP)

	Employee	Spouse	Other Family
How much do you currently pay for coverage?	$ /pp	$ /pp	$ /pp
Do you recall what features you elected? *The options shown are currently available in FLTCIP (with a 90-day waiting period). If purchased prior to 2020, you may have different features available to Print a statement of benefits at LTCFEDS.com.*	Daily Benefit: $ ($100 – $450 per day) Benefit Period: ☐ 2 yrs ☐ 3 yrs ☐ 5 yrs Inflation Protection: ☐ ACIO 3% ☐ FPO		
If you do not currently have this coverage, would you like to discuss various options available?	☐ Yes ☐ No ☐ Unsure NOTE: OPM has suspended new applications until at least Dec 2026		

Notes:

THRIFT SAVINGS PLAN (TSP)

What are the ways you plan to use your TSP in retirement?	☐ Income ☐ Fun money ☐ Legacy ☐ Other
What is your goal to have in TSP by the time you retire?	$

HOW MUCH do you plan to need & WHEN do you need it?	$	☐ ASAP! ☐ At age: ☐ Unsure
Is the TSP your sole source of investing?	☐ Yes ☐ No	Explain:
What do you plan to do with TSP when you retire?	☐ Leave in TSP ☐ Rollover to IRA ☐ Unsure	
While working, have you taken an in-service withdrawal? *Note: this is different than a TSP loan.*	☐ Yes ☐ No	☐ Financial Hardship ☐ Age-Based (59½ or later)

NEW CONTRIBUTIONS

Regular contribution limit: $23,500/yr (average of $904/pp)
Catch-up contribution limit (50+): $7,500/yr (average of $289/pp)
Catch-up contribution limit (60-63): $11,250/yr (average of $433pp)

The TSP considers anything over $23,000 a catch-up.

Employees can split their new contributions in any combination between the Traditional & Roth sides of their accounts.

Traditional contributions	$	/pp
Roth contributions	$	/pp

OUTSTANDING TSP LOANS

Loan Type	**GENERAL PURPOSE** *Justification not required (repaid in 1-5 years)*	**RESIDENTIAL** *Justification required (repaid in 1-15 years)*
Date Loan Taken		
Current Balance	$	$
Repayment amount	$ /pp	$ /pp
Payoff Date (approx.)		

FUNDS

FUNDS	**BALANCE** of <u>existing</u> money	**ALLOCATION** of <u>new</u> money
G Fund	$	%
F Fund	$	%
C Fund	$	%
S Fund	$	%
I Fund	$	%
L Income	$	%
L 2025	$	%
L 2030	$	%
L 2035	$	%
L 2040	$	%
L 2045	$	%
L 2050	$	%
L 2055	$	%
L 2060	$	%
L 2065/70	$	%
TOTAL	$	%

RISK & END RESULTS

On a scale of 1-10, how would you rate your risk tolerance? *(1-very conservative & 10-very aggressive)*	**Why?**
Employee:	
Spouse:	

Thinking about TSP, what is the BEST POSSIBLE END RESULT you could imagine in retirement? *(Such as: never run out, leave to kids, have enough to do all I dreamed of doing, don't pay too many taxes)*

Thinking about TSP, what is the WORST POSSIBLE END RESULT you could imagine in retirement? *(Such as: run out too soon, nosedive in the market, my kids have to support me, I don't get to live the retirement I planned)*

COMMENTS / NOTES

ADDITIONAL NOTES

Please use this page to provide any additional information necessary for us to prepare an accurate report for the employee. Of course, feel free to use this area to add any notes that are helpful to you based on other information the employee may share.