

What's My Financial I.Q.? *What do I know and practice?*

	Yes	No	Not Sure
1. I can write a check to pay a bill.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I balance my checkbook regularly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I can balance my monthly checking account statement from the bank each month.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I pay my bills when they are due.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I have credit accounts in my name.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. My credit card(s) is/are at a competitive interest rate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I have a list of all my credit card numbers and whom to contact in case they are lost or stolen.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I check my credit card statements against my receipts on a monthly basis.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I pay the entire balance on my credit card bill each month.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I obtain copies of my credit report annually to check its accuracy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. I have a good credit rating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I know how much money I spend each month/year to live and can account for my spending.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. I have a monthly spending plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I have a savings account in my own name.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. I plan ahead for large expenses such as insurance premiums, holiday shopping, and appliance replacement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. My monthly credit card payments are less than 20 percent of my take-home pay.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. I save a minimum of 10 percent of my income.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. My home and valuables are adequately insured.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. I have a written, photographic, and/or video-taped record of my household goods.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. I have an emergency fund of six months of income easily available in a savings account, money market, or CD.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. I know what Social Security or other benefits will be available to me at 62 and 65.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. I can locate my family records: marriage, birth, divorce, and death.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. I can locate the certificates and records of my stocks and bonds.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. I know where my safe deposit box is located and where the key is kept.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. I have a record of the important papers I keep in my safe deposit box and know where this record is located.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. I can locate my insurance policies: disability, life, health, property, and automobile.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. I know the kinds and amounts of disability, life, health, and auto insurance protection I have and am comfortable with my coverage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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| 28. I know the names of the beneficiaries and contingent beneficiaries of my life insurance policies. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 29. I know the name and address of my insurance agent(s). | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 30. I have a savings and investment plan for retirement. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 31. I have an up-to-date will and can locate it, along with the name and address of my attorney. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 32. I can locate copies of the last three years' income tax returns. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 33. I can prepare state and federal tax returns for myself. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 34. I know my net worth. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | TOTAL: | ___ | ___ |

Score 1 point for each yes answer.

- 30-35: You are incredible!
- 24-29: You are doing **very** well.
- 18-23: You need to brush up your skills.
- 17 or less: You need help, but there's hope.