

Qualified Retirement Plan Proposal Request Application

Company Name: _____
(legal name)
Street Address: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____ E-mail: _____
Contact Person: _____ Title: _____
Contact's phone #: _____ Contact's E-mail address: _____
Form of Business C-Corp. S-Corp. LLC Partnership LLP Sole Proprietorship Other _____

Please complete all that apply:

_____ Questions 1-4 for all proposals;
_____ Questions 5-6 if there is an existing Retirement Plan;
_____ Questions 7-9 if there is an existing VEBA or 419(e) Plan.

Advisors – don't forget to provide a plan design wish list.

1. Federal Tax ID number
2. Fiscal Year:
- 3(a). Current Census – complete & attach

3(b). Control/Affiliated Service Group – attach current census

Existing Retirement Plan Information

4. Existing Retirement Plan (Pension, Profit Sharing, 401(k), Money Purchase Plan) _____
Yes/No

If Yes, for either 3(a) or 3(b):

5. Effective Date(s) of existing Retirement Plan (if yes): _____

6. Existing Retirement Plan - the following (X) must be provided:

- ___ a) Plan Document
- X b) Adoption Agreement
- X c) Summary Plan Description (SPD)
- X d) the latest 5500, latest ADP/ACP, top heavy, etc tests and allocation/account information

Existing VEBA Information

7. Existing VEBA or 419(e) Plan _____
Yes/No

If Yes:

8. Effective Date of existing VEBA or 419(e) Plan (if yes): _____

9. Existing VEBA or 419(e) – provide all info requested in #6 above.