



3(16) NEW CLIENT INFORMATION FOR PLAN ADMINISTRATION

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____

EIN: _____ Business Code (NAICS): _____

Fiscal Year End (MM/DD): _____ / _____

Total Number of Employees: _____

Do you employ paid Interns: Yes: ____ No: ____

Type of Company:

- C-Corp S-corp LLC—filing as S-corp
 LLC—filing as Partnership Sole Prop
 LLP P.C. PLLC

Other (please indicate): _____

Trustee(s) [Name & Email address]:

1) _____ Email: _____

2) _____ Email: _____

3) _____ Email: _____

Primary Day-To-Day Contact [payroll, HR, etc.]

Name: _____ Email: _____

Phone #: _____ Ext: _____

Accounts Payable/Billing Contact

Name: _____ Email: _____

Phone #: _____ Ext: _____



CPA:

Firm Name: _____

City: _____ **State:** _____

Contact Name: _____

Email: _____

Phone #: _____ **Ext:** _____

Ownership:

Name: _____ **Percentage:** _____ %

Name: _____ **Percentage:** _____ %

Name: _____ **Percentage:** _____ %

Name: _____ **Percentage:** _____ %

Do the Owners/Partners have any family members working for the company? If so, please list them and their relation:

Name: _____ **Relationship:** _____

Name: _____ **Relationship:** _____

Name: _____ **Relationship:** _____

Ownership of/Partnership In other companies:

Do the Owners/Partners own any other companies? Yes: ____ No: ____

If Yes, please identify as this is required under IRS Controlled Group rules:

Name: _____ **Percentage:** _____ %

Payroll Questions:

Payroll Company: _____

Which payroll "platform/product" do you use: _____



Payroll Cycle (weekly, bi-weekly, etc.): _____

Day of the week you run/submit payroll: _____

"Check" Day of the week or calendar date: _____

Day of the week 401(k) contributions submitted: _____

Do you have any Bonus/Commission payrolls? Yes: ____ No: ____

If yes, please identify how many & approximately when: _____

Do you withhold 401(k) contributions from the Bonus/Commissions? Yes: ____ No: ____

Does your Match get inputted per payroll period? Yes: ____ No: ____

If Yes, does your payroll company calculate your match? Yes: ____ No: ____

Please confirm your payroll company is using the correct Gross Compensation for employees.

Do you have multiple payrolls? Yes: ____ No: ____

If yes, please identify: _____

For 401(k) contributions, do you use 1 bank account or multiple bank accounts?

1 Account

Multiple Accts (If multiple, additional charges may apply)

Do you have 1099 employees or other excludable employees from the 401(k) plan?

If Yes, please identify & explain: _____

Do you currently have a retirement plan? Yes No

If Yes, who administers it currently:

Name:

Phone:

Email: