

Adopting Employer 401(k) Survey for Contract ID 932184



Survey completed by:
Company Name:
Primary 401(k) contact person:
Company Address:
Phone:
E-mail:

Title: _____ **Date:** _____

Select Customer Type: New Customer Existing Customer Prospective Customer
Type of Corporation: C Corp. S Corp. Partner Sole Prop. LLC Non Profit
Date of Incorporation: Fiscal year: _____ Calendar year: _____
Select Contact Preference: Call Client Directly Call Association Sponsor Contact Name: _____ Phone: _____
 Call Other Contact Name: _____ Phone: _____
Did your company have a 401(k) Plan during the prior year? Yes No Provider: _____
 If yes, please attach copy of summary plan document (SPD), last 5500, and individualized contract.
 If no, was a retirement savings plan offered? Yes No Type: _____

Questions for Worksite Company Owner or Operator:

1. Do any owners, spouses or minor children own any part of any other business with Employer? Yes No
2. Is this company a subsidiary of any other company? Yes No
3. Has the company ever sponsored a Qualified Retirement Plan?
 If yes, what was the prior plan # (i.e. 001 002) Yes No
4. Does the company currently sponsor a Qualified Retirement Plan? Yes No
5. Is the company part of a controlled group of companies? Yes No
6. Does the company have an old plan it wants to merge Yes No
7. Will the company consider making a matching and/or profit sharing contribution to the plan? Yes No
8. Have you been part of another professional employer organization's retirement plan? Yes No
9. Are there any assets and participants currently on this plan? Yes No
 If yes, what are the estimated Assets: _____ What are the estimated # of participants: _____

Employee Information:

Number of Full-time Employees: _____ Gross Annual Payroll: _____
 Number of Part-time Employees: _____
 Does payroll include owners? Yes No Will they participate in Plan? Yes No

Main Reasons to Set Up A Plan:

Personal savings Reduce turnover Competitive requirement Help employees save for retirement

Identify Highly Compensated Employees:

- (A) List all owners of the company with 5% or more ownership in the current and prior year:
- | | |
|-------|-----------------------|
| Name: | Percent of Ownership: |
| Name: | Percent of Ownership: |
| Name: | Percent of Ownership: |
- (B) List all relatives of each owner who are on the company payroll:
- | | |
|-------------------|---------------|
| Name of Relative: | Relationship: |
| Name of Relative: | Relationship: |
| Name of Relative: | Relationship: |
- (C) Number of employees of the company who earned, with the employer, in excess of \$100,000 in the prior year:
- | | | | | |
|-------|-------|-------|-------|-------|
| Name: | Name: | Name: | Name: | Name: |
|-------|-------|-------|-------|-------|

Mail Completed Forms To: RELIANCE Investing, Inc., 1498 SE Tech Center Place, Suite 160, Vancouver, WA 98683
E-mail Completed Forms To: info@relianceinvesting.com
Fax Completed Forms To: (360) 694-7301

