

**BASIC EMPLOYER INFORMATION SHEET**

Information on this form is used to generate legal documents. Please provide complete and accurate information.

Legal Company Name

Ownership of the above company

Investment Group (Where assets will be held)

Address of Company

Plan Contact Name and Job Title

Plan Contact E-mail Address

Plan Contact Telephone Number

How is your company taxed?

Tax ID#

Tax Year-end Date

Date company was established

Nature of business

How many employees does the company employ?

Does the company employ any leased employees?

No

Yes

Does the company employ any union employees?

No

Yes

Do you share employees with another business?

Yes

No

Do the owners own any other businesses?

Yes

No

Is your business part of an affiliated service group?

Yes

No

Unsure

If you answered yes to the above question regarding owning other businesses please list the company name, owners names, and percent of ownership.

Has your company ever maintained any other retirement plans?

Yes

No

If yes, please provide

1. What type of plan

2. When & why it was terminated.