



SHORE TOMPKINS
ACTUARIAL RESOURCES, LLC

Retirement Plan Proposal Questionnaire

COMPANY NAME: _____
ENTITY TYPE: _____ (ie. C-Corp, Partnership, LLC, etc.)
FISCAL YEAR END: _____

Please list all employees who worked anytime during the current plan year, or if this is a new plan design, please include all employees who worked anytime during the current fiscal year.

Name	Date of Birth	Date of Hire	Date of Termination	Projected Annual Compensation	(F) Full Time/ (P) Part Time ¹	Estimated 401(k) Deferrals ²	Ownership %	Family Relationship to Owner(s)

¹ Indicate as part time if the employee does not work more than 1,000 hours during a 12-month period.

² Enter the employee's deferral % or \$ amount for the plan year.