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| **Principal® Deferred Compensation – Select Reward**  Request for proposal |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date: |  |  | |  |
| Principal agency/BGA partner office name and number\*: | | |  | |
| \*Proposals will not be provided without an indication of a valid Principal agency or BGA partner relationship. | | | | |

**Financial professional & proposal delivery information**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name and designations: | | | |  | | |
| Email: |  | | | | Phone: |  |
| Name and designations: | | | |  | | |
| Email: |  | | | | Phone: |  |
| **Principal wholesaler:** | | |  | | | |
| Should anyone else (Financial professional or BGA) receive this proposal? If so, please provide: | | | | | | |
| Name: |  | | | | | |
| Email address: | |  | | | | |

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| **Please allow 5 business days from receipt of RFP on all proposals.**  **Questions** can be sent to [newrfps@exchange.principal.com](mailto:newrfps@exchange.principal.com) or **call** 833-803-8345.  **Email** RFPto [newrfps@exchange.principal.com](mailto:newrfps@exchange.principal.com) or **fax** RFPto Case Design Team, 866-946-3209. |

**Client information**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Business/organization name: | |  | | | | Issue state: | |  |
| Business tax bracket (Federal & State): | | | 0%  21%  22%  24%  30%  32%  35% | | | | | |
|  | | | 37%  Other: | |  | | | |
| Business structure: | Corporation | | | LLC | | | Partnership | |
|  | Taxed as:  C corporation  S corporation | | | Taxed as:  Partnership  C corporation  S corporation | | | Sole proprietorship  Not-for-profit organization | |

**Employee information**(If greater than 5 employees, attach spreadsheet or send electronically.)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Name | Date of birth | Gender | Smoking status | Risk class | Tax rate |
| \* 1. |  |  |  |  |  | % |
| \* 2. |  |  |  |  |  | % |
| \* 3. |  |  |  |  |  | % |
| \* 4. |  |  |  |  |  | % |
| \* 5. |  |  |  |  |  | % |

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| --- |
| \* Check box if individual illustration is desired for each participant. |

**Plan options**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Service requirement | Years | |  | | | | | Or to age | | |  | | |  | | | | | | | | | | | |
|  |  | |  | | | | |  | | |  | | |  | | | | | | | | | | | |
| At fulfillment | Lump sum reward bonus to key employee | | | | | | | | | | |  | | | | | | | | | | | | |  |
| Or amount for each year of service period | | | | | | | | | | | $ | | | | | | | | | | | | |  |
|  |  | | | | | | | | | | |  | | | | | | | | | | | | |  |
| Tax at fulfillment | Pay tax via withdrawal from policy cash value | | | | | | | | | | | | Yes | | | | | | | | | | | |  |
| Other | | |  | | | | | | | | | | | | | | | | | | | | |  |
|  |  | | |  | | | | | | | | | | | | | | | | | | | | |  |
| Pre-retirement death benefit | **If Endorsement Split Dollar is used, choose:** | | | | | | | | | | | | | | | | | | | | | | | |  |
| **Option A:** Company gets the greater of premiums or  cash value with the balance to employee | | | | | | | | | | | | | | | |  | | | | | | | |  |
| **Option B:** Key employee receives level amount of | | | | | | | | | | | | | | | $ | | | | | | | | |  |
| **Other:** | | | |  | | | | | | | | | | | | | | | | | | | |  |
| **If additional Key Person Insurance is needed:** | | | | | | | | | | | | | | |  | | | | | | | | |  |
| Provide details: | | | | | |  | | | | | | | | | | | | | | | | | |  |
|  |  | | | | | | | | | | | | | | | |  | | | | | | | |  |
| Retirement income (if selected) | Yes | | | | | | | | | | | | | | | | | | | | | | | |  |
| Maximum level amount for 15 years beginning at age | | | | | | | | | | | | | | |  | | | or in year | | | |  | |  |
| Or |  | | | | amount for | | |  | years beginning at age | | | | | | | |  | | or in year | | | |  |  |
|  |  | | | | | | | | | | | | | | | |  | | | | | | | |  |
| Product |  |  | | | | | | | | | Interest rate: | | | | % | | | | | | Net  Gross | | | | |
| Premium is determined by the reward bonus amount.  Face amount is defaulted to minimum. | | | | | | | | | | | | | | | | | | | | | | | | |
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**Notes**

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