



Key employee benefits

How happy are you with your current benefits program?



FACT FINDER FOR AN EXISTING PLAN

Is your current nonqualified plan doing all it can to provide the benefits your key employees value? Having the right plan in place can help your top employees save more for retirement than a 401(k) or 403(b) plan allows — and give you a leg up in recruiting, rewarding and retaining them.

☐ Yes ☐ No Do your key employees understand and appreciate the value of their nonqualified plan benefits?

☐ Yes ☐ No Are all eligible key employees participating in the nonqualified plan?

☐ Yes ☐ No Are the plan investment options offered to your participants meeting their needs?

☐ Yes ☐ No Is the administration of your existing plans cost-effective and time-efficient?

☐ Yes ☐ No Can you easily access daily valuation of plan liabilities and asset values?

☐ Yes ☐ No Are you satisfied with the level of plan administrative services you're receiving?

☐ Yes ☐ No Do your participants have the flexibility to take money from the nonqualified plan during retirement and while working, based on personal savings goals?
(Not applicable to tax-exempt organizations)

☐ Yes ☐ No Are you aware that different plan financing techniques may affect the tax treatment of your nonqualified plan? (Not applicable to tax-exempt organizations)

If you answered “no” to any of these questions, it may be a good time to re-evaluate your existing benefits program to ensure it’s still meeting the needs of your organization and your key employees. We can help you with a detailed review of your plans to see if there are any areas for improvement.

To get started, just complete the questionnaire on the backside and return it to us.

Additional questions can help determine if your current key employee benefits are meeting your needs.

Business profile

1. Organization name: _____
2. Type of business entity:
 - ☐ Corporation taxed as:
____ C corp ____ S corp
 - ☐ Limited liability corporation taxed as:
____ Partnership ____ C corp ____ S corp
 - ☐ Partnership ☐ Sole proprietorship
 - ☐ Non-governmental tax-exempt organization
3. Total employees in the organization: _____
Number eligible to participate: _____
Number actually participating: _____
Number of highly compensated employees: _____
Includes business owner? ☐ Yes ☐ No
4. Years the organization has been operating:
☐ 1-2 ☐ 3-5 ☐ 6-9 ☐ 10-20 ☐ 21+
5. (Not applicable to tax-exempt organizations)
Number of business owners:
☐ Publicly traded ☐ 1 ☐ 2 ☐ 3 ☐ 4+
6. (Not applicable to tax-exempt organizations)
Is there a written continuity plan in the event of owner's death, disability, or retirement?
☐ Yes ☐ No
7. (Not applicable to tax-exempt organizations)
Business tax rate (or owner's tax rate if business is a pass-through tax entity): _____ %

Existing plan information

1. How long has your plan been in place? _____
2. Who is the current plan administrator?

3. Annual plan administrative services fees: \$ _____
4. Amount of total current plan liabilities: \$ _____
5. Are any liabilities considered pre-409A benefits?
☐ Yes ☐ No If yes, what portion? _____ %
6. Total plan assets informally financing the plan:
\$ _____ Corporate-owned life insurance (COLI)
\$ _____ Mutual Funds \$ _____ Other
7. Are the plan assets held in a rabbi trust?
☐ Yes, with _____ ☐ No
8. Amount of new annual plan contributions: \$ _____
9. Amount of the employer contributions: \$ _____
10. What do you and your employees:
Like about your plan?

Not like about your plan?

11. What employee and employer reports are provided?

To help complete the review process of your current benefits plan, please provide copies of the following:

- Nonqualified plan documents (agreement)
- Trust (if applicable)
- Adoption agreement
- Total plan assets and liabilities
- Asset information (mutual funds or life insurance policies)
- Latest employer statement
- Sample employee statement

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