Cycle 3 Restatement Checklist

Below is the information we will need to restate your plan document.

Basic Client Information:

Company Name:____

Contact: _____________________________ Phone: ____________________

Address: ____

Fiscal Yearend: ______________ Plan Yearend: _______________

Type of Entity: ☐ C-Corp ☐ S-Corp ☐ Partnership ☐ Sole Proprietor

☐ LLC (taxed as ☐ Corp ☐ Partnership) ☐ Other: _______________

Plan Name: ____

Are you interested in specific changes? ☐ No ☐ Yes Specify: ___________________

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Do you have an active defined benefit plan? ☐ No ☐ Yes (we may need more information)

Documentation:

______ Most Recent Adoption Agreement

______ Master Plan Document

______ Trust Document

______ All Amendments since adoption of plan document above

______ IRS Determination or Opinion Letter

______ Loan Policy, if applicable

______ Most recent Yearend Administration Report