



# Plan Setup Form

PREPARE FOR A SMOOTH ONBOARDING PROCESS

## 1: ACCOUNT INFO

Is this a new plan or a transfer of an existing plan?

☐ New

☐ Transfer

Legal company name			
Contact name & phone			
Company address			
Changes to provisions			

Number of employees: All W2 employees, even part-time		Number of participants: If transfer plan	
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## 2: COMPANY INFO

Company EIN		Name of trustee	
NAICS		Trustee phone	
Entity type LLC, S-Corp, C-Corp, etc.		Trustee email	
Payroll provider		State	
Payroll frequency		Fiscal year end	
First payroll date After plan start date		If LLC, how taxed	

Company ownership: Is there a control group?

☐ Yes

☐ No



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## 3: PLAN DESIGN

Auto-enrollment default percentage:

Waive eligibility requirements  
for current employees?

☐

Plan name	
Plan start date	
Service requirements	
Age requirements	
Entry date schedule	
Employer contributions	
Vesting schedule	
Profit-sharing vesting schedule	
Employee welcome date notice	

Plan type:

☐

SH Basic

☐

SH Enhanced

☐

SH QACA

☐

SH Non-elective

☐

Traditional

Upload existing plan document:  
(If transfer plan)

☐

Uploaded

☐

N/A

Upload employee census:  
(Census template provided)

☐

Uploaded

☐

N/A