

# ATTEBERRY/SEARLE, INCORPORATED

Third Party Retirement Plan Administrators

## CLIENT INFORMATION FACT FINDER

1. Business Name: \_\_\_\_\_

2. Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

3. Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

4. Internal Contacts:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

5. Client Attorney: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

6. Client CPA: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

7. Employer Identification Number (EIN): \_\_\_\_\_

8. Accounting Year End: \_\_\_\_\_

9. Business Structure: *(check one)*

C-Corporation

S-Corporation

Partnership

LLP taxed as \_\_\_\_\_

Sole Proprietor

Non-Profit

LLC taxed as \_\_\_\_\_

Other: \_\_\_\_\_

10. Payroll Provider:  In-House

Other: \_\_\_\_\_

Payroll Frequency: \_\_\_\_\_

Payroll Contact Person: \_\_\_\_\_

11. Owner Profile:

<u>Name of Principal</u>	<u>Date of Hire</u>	<u>Ownership %</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do any of the principals own, control or manage any other business?

No       Yes (if yes, please complete the included Schedule A)

11. Affiliated Companies:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**SCHEDULE A – RELATED BUSINESS INFORMATION**

<b>NAME</b>	<b>BUSINESS #1</b>	<b>BUSINESS #2</b>	<b>BUSINESS #3</b>	<b>BUSINESS #4</b>
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

**Example:**

1. John Smith	100%	50%	none	none
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Please enter the name of the owners in column 1 and the percentage of ownership in each of the commonly owned businesses. In the area below, please name the business, provide the tax identification number, and list the type of business entity (C-corp, Sole Prop, Partnership, etc.).

**Business #1:**

Name: \_\_\_\_\_

EIN: \_\_\_\_\_ Type of Entity: \_\_\_\_\_

**Business #2:**

Name: \_\_\_\_\_

EIN: \_\_\_\_\_ Type of Entity: \_\_\_\_\_

**Business #3:**

Name: \_\_\_\_\_

EIN: \_\_\_\_\_ Type of Entity: \_\_\_\_\_

**Business #4:**

Name: \_\_\_\_\_

EIN: \_\_\_\_\_ Type of Entity: \_\_\_\_\_