

Your Name		Practice Name		
Address	City	Zip Code		
Business Phone		E-mail		

**Employee Census**

Name	Age	Ownership %	Date of Hire	Part-Time Employee* (✓)	Total Compensation**	Salary Deferral Amount

\* Considered a part-time employee, if employee works under 1,000 hours a year.

\*\* Estimate compensation if necessary for current business year.

Questions? Call a Retirement Program Specialist at 1-800-523-1125