Draft of Primary My PAA Screens for Plan Year 2015 Comprehensive Premium Filings (CPF)

The screen mockups are intended to show the expected placement of the 2015 data elements. Please disregard any data reflected on the screens, e.g., inconsistent data and references to 2014 filings.

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Notes:

- 1. The screens are organized based on the above four scenarios to describe how the screens are used for the three premium e-filing options, note that the estimated flat-rate filing for large plans has been eliminated.
- 2. The following screens (and page numbers) reflect the primary changes for 2015, which are also described on the bottom of each of the modified screens:

- Page 8, Enter Plan Sponsor and Administrator Information Screen: The alternative phone number and extension have been added

- Page 16, Report Miscellaneous Information Screen: The Risk Transfer Activity questions have been added

- Page 19 – 20, Data Summary: The alternative phone number and extension, and Risk Transfer Activity questions have been added

- Page 28, Enter Plan Sponsor and Administrator Information Screen: The alternative phone number and extension have been added

- Page 30, Report Miscellaneous Information Screen: The Risk Transfer Activity questions have been added

- Page 33, Data Summary: The alternative phone number and extension, and Risk Transfer Activity questions have been added

3. The remainder of the screens do not have changes for plan year 2015; therefore, the screens are those that are currently in effect.

Login Screen



v.14.2.0.15.01

My PAA Users Manual (PDF)

My PAA Login

Welcome to My Plan Administration Account (My PAA), where you can electronically submit pension plan premium filings and payments to PBGC.

What's New and How to Use My PAA

- 2014 Estimated Flat-Rate Filings: Estimated Flat-Rate Filings for plan years starting 2014 have been eliminated. For more information, see What's New for Practitioners.
- Password Rules
 Other Information (online demos, e-filing options, payment options, FAQ's etc.)

User ID:]
Password:	(Case Sensitive)
Login	
⇒ <u>Forgot your User ID?</u> ⇒ <u>Forgot</u>	your Password?
New users click here to	sign up.

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Home Page

BGC IN PAA	My Acco	v.14.2.0.15.0 j <u>unt</u> <u>Logout</u> <u>My</u>	01 Welcome, Nova T e <u>PAA Users Manual (Pl</u>
lome Page			How to Use My PAA
Add a Plan to your Account There must be at least one plan in your account to	o e-file.	Add a Plan a	> <u>Instructions</u> s Filing Coordinator
In-Process Filings			
Only for filings created using My PAA data entry s	screens and im	ported filings.	Vhere's my filing?
There are no filings in your Inbox.			
Create Filing In My PAA Data Entry & E Plans in Your Account	Editing Scre	ens (for any pla	n in your account) * <u>Instructions</u>
Search by Plan Name OR EIN	Clear Search		
Plan Name (EIN/PN) \$			
Admin (11-1111111/222)	o Plan Page	Invite a Practitio	ner Create Filing
Admin (11-1111114/244)	o Plan Page	Invite a Practitio	ner Create Filing
Import Software-Prepared Filing(s) into Transfer filing data into My PAA editing screens fo plan(s) in your account.	o My PAA E or review and s	diting Screen	S > <u>Instructions</u>
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Import Software-Prepared Filing(s) int Transfer filing data into My PAA editing screens for plan(s) in your account. Upload Software-Prepared Filing(s) Submit fully-completed filing(s) for any plan(s) ond your account. After the file is uploaded, click the I Receipt" to view the receipt(s) showing data subm section's Instructions for details. You have not uploaded any software-prepared filin Helpful Links > About Online Premium Filing > My PAA Users Manual (PDF)	o My PAA E or review and s ce you have at ink (if shown) u itted for each t gs. > <u>Comple</u> > <u>Filing D</u>	i diting Screen ubmission for any least one plan in under "Conf. ID/ iling. View this te Filing Instructio ue Dates for Curre	S > Instructions Import Filing(s) > Instructions Upload Filing(s) ns nt Plan Year

Screen Prepared Comprehensive Single Employer scenario

How to File screen

PBGC My PAA	<u>My Home Page My Account Logout M</u>	v.14.2.0.15.01 I <u>y PAA Users Manual (PDF)</u>
How to File		
Online filing with My PAA is a 4-st	ep process:	⇒ <u>More Details</u>
1 Start a Draft Filing		
2 Edit Draft, Sign Filing, an	d Select Payment Alternative	
3 Submit Filing with Paym	ent (if any)	
4 Receive Filing Confirmat	ion	
Identify Filing Type		
Select the plan year and filing type f	or the filing you wish to create:	
Select o	one 💌	
		Continue Cancel

Identify Filing to be Made screen

PBGC My PAA	<u>My Home Page My Account Logout My PAA Users Manual (PDF)</u>
Step 1: Start a Draft Filing	
Admin - 11-1111111 / 222 Please note: You will be automatically result in a loss of any information you	y logged out of My PAA after 20 minutes of inactivity. This could entered in My PAA.
Eratt Filing For Draft, Sign Filing, and Select Payment Alternative	Submit Filing Receive Filing with Payment (If any) Continuation
	Continue > Cancel
	te <u>Instructions</u>
Premium is for plan year commencing: @x.UNVDDA	Premium is for plan year ending: @x.MM0000000
If the plan year commencement date amendment changing the plan year, @x.WWDD00000	has changed since the most recent PBGC filing as a result of a plan enter the date the plan year change was adopted.
🗖 This is an amended filing	
	> Instructions
O Multiemployer plan	or C Single-employer plan (Includes Multiple-employer plan)
	⊅ <u>Instructions</u>
Comprehensive Premium Filing	
	⊅ <u>Instructions</u>
Proration Check box if plan qualifies to pay (i.e., if plan has less than a full ye	y a prorated premium for this premium payment year ear of coverage).
Plan size For the premium payment year, is t	the plan a "small" plan? O Yes O No
	Continue > Cancel

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Enter Plan Information

dmin - 11-1111111/23	or Plan Year Commencing 1 22	1/1/2014	
	<u> </u>	~ 0	
Starta Edit Draft	Son Filing and Subrit Filing	Bacelue Elling	
Craft Filing Select Pay	ment Aliemative with Payment (if a	ry) Confirmation	
nter Plan Informa	ation		
		Contin	ue > < Back Cancel
			> Instructions
Plan name:	Admin		
Plan effective date:	01/01/2010 ex manager	~~~	
	, , <u>-</u>		
			34 Instructions
Check box if plan i:	s a new or newly covered p	lan and provide the following	information:
Check box if plan i: Adopti	s a new or newly covered p on Date:	lan and provide the following	information:
Check box if plan i: Adopti	s a new or newly covered p on Date:	lan and provide the following	information:
Check box if plan i: Adopti Date coverage bo	s a new or newly covered p on Date:	vonnna Nonnna	information:
Check box if plan is Adopti Date coverage b Is the plan a "continua	s a new or newly covered p on Date: egan on: @x.NW tion plan"? Yes No	lan and provide the following	information:
Check box if plan is Adopti Date coverage be Is the plan a "continua	s a new or newly covered p on Date:@x.100 egan on:@x.100 tion plan"? □_Yes □_ No	lan and provide the following	information:
Check box if plan i: Adopti Date coverage b Is the plan a "continua	s a new or newly covered p on Date:	ilan and provide the following	information: > <u>Instructions</u>
Check box if plan i: Adopti Date coverage b Is the plan a "continua Previous filing EIN:	s a new or newly covered p on Date:	Previous filing PN:	information: > <u>Instructions</u> 222
Check box if plan i: Adopti Date coverage bi Is the plan a "continua Previous filing EIN: Current EIN:	s a new or newly covered p on Date:	Previous filing PN:	information: > <u>Instructions</u> 222 222 (ex. 111)
Check box if plan i: Adopti Date coverage bu Is the plan a "continua Previous filing EIN: Current EIN: Form 5500 EIN and PN	s a new or newly covered p on Date:	Previous filing PN:	information: * <u>Instructions</u> 222 222 (ex. 111)
Check box if plan i: Adopti Date coverage bo Is the plan a "continua Previous filing EIN: Current EIN: Form 5500 EIN and PN	s a new or newly covered p on Date: egan on: tion plan"? 11-1111111 11-1111111 ex. 11-111111 ex. 11-111111 ex. 11-111111 ex. 11-111111 ex. 11-111111 ex. 11-111111	Previous filing PN: Current PN: the 2013 Form 5500, enter EIM	information: * <u>Instructions</u> 222 222 222 (ex. 111) 4 and PN from 2013 Form
Check box if plan i: Adopti Date coverage bu Is the plan a "continua Previous filing EIN: Current EIN: Form 5500 EIN and PN If the EIN and PN 5500 and provide	s a new or newly covered p on Date:	Previous filing PN: Current PN: the 2013 Form 5500, enter EIM	information: > <u>Instructions</u> 222 222 (ex. 111) H and PN from 2013 Form
Check box if plan i: Adopti Date coverage bo Is the plan a "continua Previous filing EIN: Current EIN: Form 5500 EIN and PN If the EIN and PN 5500 and provide	s a new or newly covered p on Date:	Previous filing PN: the 2013 Form 5500, enter EIM PN: (0000000)	information: * <u>Instructions</u> 222 222 (ex. 111) 4 and PN from 2013 Form
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Check box if plan i: Adopti Date coverage bo Is the plan a "continua Previous filing EIN: Current EIN: Form 5500 EIN and PN If the EIN and PN 5500 and provide	s a new or newly covered p on Date:	Previous filing PN: the 2013 Form 5500, enter EIN PN:	information: 222 222 (ex. 111) 4 and PN from 2013 Form
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Check box if plan i: Adopti Date coverage bo Is the plan a "continua Previous filing EIN: Current EIN: Form 5500 EIN and PN If the EIN and PN 5500 and provide	s a new or newly covered p on Date:	Previous filing PN: the 2013 Form 5500, enter EIN (11111) PN: (xx. 111)	Information: Instructions 222 222 (ex. 111) I and PN from 2013 Form
Check box if plan i: Adopti Date coverage bo Is the plan a "continua Previous filing EIN: Current EIN: Form 5500 EIN and PN If the EIN and PN 5500 and provide	s a new or newly covered p on Date:	Previous filing PN: the 2013 Form 5500, enter EIN PN:	Information: Instructions 222 222 (ex. 111) I and PN from 2013 Form

Enter Filing Information

PBGC My PAA	v.14.2.0.15.01 <u>My Home Page</u> <u>My Account Logout My PAA Users Manual (PDF</u>
Comprehensive Filing for Plan Year Admin - 11-1111111 / 222	Commencing 1/1/2014
1 → 2	$\rightarrow 3 \rightarrow 4$
Starta Edit Draft, Sign Filing, and Draft Filing Select Payment Alternative	Submit Filing Receive Filing with Payment (if any) Confirmation
Enter Filing Information	
	Continue > < Back Cancel
	⇒ <u>Instructions</u>
R digit business code:	111100
o-argit basiness code.	(x.1111)
	> Instructions
First 6 digits of CUSIP number:	(ex. 111111)
	> <u>Instructions</u>
Disaster Relief (enter code):	(ex. >0<>00)
(For Disaster Relief Announcements,	oliok here)
Is this plan exempt from the Variable-rate Premium?	▼ No ≥ Instructions
	Yes, because the plan is a new or newly covered small plan other than a continuation plan.
	Yes, because the plan is undergoing a standard termination with a final distribution during the premium payment year.
	Yes, because the plan is undergoing a standard termination with a proposed termination date in a prior year
	Proposed termination date: (x.NWVDD/////) (x.NWVDD////)
	Yes, because the plan is a 412(e)(3)plan.
	Continue > < Back Cancel

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Enter Plan Sponsor and Administrator Information screen

V.1 PBGC My PAA My Home Page My Account Logout My PAA Users Manu	14.2.0.15 Jal (PDF)
Step 2: Edit Draft, Sign Filing, and Select Payment Alternative	
Comprehensive Filing for Plan Year Commencing 01/01/2015 PETROL PENSION PLAN - 11-1111112 / 002	
$(1 \longrightarrow 2 \longrightarrow 3 \longrightarrow 4)$	
Start a Edit Draft, Sign Filing, and Submit Filing Receive Filing Draft Filing Select Payment Alternative with Payment (if any) Confirmation	
Enter Plan Sponsor and Administrator Information Continue > < Back Ca	ancel
Plan Sponsor Information * Instruct	<u>ctions</u>
Name: ENERGY COMPANY	
Plan Administrator Information * Instruct	<u>ctions</u>
Name: Andy Randy	
Address: 111 matchbox ave	
City: Windy City State: ME Zip: 21111 (ex. 11111 or 11111-11	(11)
Country: United States	
Contact Person	
Name (for "attention" line of mailings): Reza Meza	
Phone: 333-222-1111 (ex. 111-111-111) Ext: (ex. 111111)	
E-mail: REZA.MEZA@GMAIL.COM (ex. aa@a.com)	
Alternative phone number for Insured Plans List on pbgc.gov:	
Alternative Phone: 111-222-3333 (ex. 111-111-1111) Ext: (ex. 111111)	
Additional Plan Contact (optional) > Instruct	<u>ctions</u>
Name:	
Phone: (ex. 111-111-1111) Ext: (ex. 111111))
E-mail: (ex. aa@a.com)	
Continue > < Back C	ancel

Added Alternative phone number and extension for Insured Plan List on pbgc.gov in the Plan Administrator Information section.

Comprehensive Single Employer – Calculate Premium Due screen

v.14.2.0.15.0 PBGC MV PAA My Home Page My Account Logout My PAA Users Manual (PDF
Step 1: Start a Draft Filing
Comprehensive Filing for Plan Year Commencing 1/1/2014 Admin - 11-1111111 / 222
1 → 2 → 3 → 4 Starta Eraft Filing Edit Draft, Sign Filing, and Submit Filing Receive Filing Select Payment (Ifernative with Payment (Iferny) Confirmation
Calculate Premium Due Continue > < Back Cancel Save & Exit
Flat-rate Premium * Instructions
Participant Count Date: 10/1/2014 @x.MW0000000
Single-employer Flat-rate: \$49.00
Participant Count as of Participant Count Date:
Active: 50 (gr. 1,111,111)
Terminated Vested: 0 (ex. 1,111,111)
Retirees and Beneficiaries: 0 (ex. 1,111,111)
Total Participant Count: =
Flat-rate Premium: = \$0.00 Calorate
Variable-rate Premium
Alternative Premium Funding Target Election or Revocation 3: Instructions
Election - Check box to elect to use the Alternative Premium Funding Target instead of the Standard Premium Funding Target. The election will be effective — and the plan will be required to use the Alternative Premium Funding Target — beginning with this premium payment year and for all subsequent plan years unless and until the election is subsequently revoked. Bevocation - Check box to revoke a prior election to use the Alternative Premium Funding Target The
revocation will be effective — and the plan will be required to use the Standard Premium Funding Target — beginning with this premium payment year and for all subsequent plan years unless and until a new election is subsequently made.
Note - Elections or Revocations must remain in place for at least five years.
Small employer VRP cap qualification 3: Instructions
If this plan qualifies for the small employer cap applicable to certain plans of small employers (those with 25 or fewer employees), select one of the following statements:
The plan is reporting unfunded vested benefits (UVBs), so that My PAA can determine which is less: the VRP based on UVBs or the maximum VRP.
The plan is not reporting UVB information, and instead, will pay the maximum VRP without regard to whether the VRP would be lower if the exact calculation was done.
Continue > < Back Cancel Save & Exit

Comprehensive Single Employer - Calculate Variable Rate Premium screen

	v:14.2.0.15.01 / Home Page <u>My Account</u> <u>Logout My PAA Users Manual (PDF)</u>
Step 1: Start a Draft Filing	
Comprehensive Filing for Plan Year Commen Admin - 11-1111111 / 222	cing 1/1/2014
1 → 2 → (3 Starta Edit Draft, Sign Filing, and Submi	I Filing Beccive Filing
Craft Hung Select Payment Anerhanive with Paym	евт(пталу) Соотзиналоз
Calculate Variable-rate Premium	Continue S. K. Bark, Cancel Save & Evit
	Continue > Shack Canter State & Exit
Assumptions and methods used to determin	e premium funding target 20 <u>Instructions</u>
Premium funding target method:	Standard C Alternative
Discount rates	
Segment rates	O N/A, full yield curve used
1st segment: 1 % (ex. 1.1)	,
2nd segment: 2 % (ex. 1.11	D
3rd segment: 3 % (ex. 1.11	D
UVB valuation date: 01/01/2014 @x.WM/D	DAMMY
Premium funding target as of UVB valuation	date * <u>Instructions</u>
Check box if the reported premium funding	target information is an estimate.
Attributable to a	ctive participants: \$ 5 (ex. 1,111)
Attributable to terminated v	ested participants: \$ 5 (ex. 1,111)
Attributable to retirees and beneficiaries re	ceiving payment: \$ 0 (ex. 1,111)
Total premiu	m funding target: \$0 Calculate
Market value of assets as of UVB va	aluation date: \$ 10000 (ex. 1,111)
Unfunded Ves	ted Benefits \$0
Unfunded Ves	ted Benefits \$0 Cabulate
rounded to the	next φ1,000:
	Continue > < Back Cancel Save & Exit

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Comprehensive Single Employer – Varaible rate Premium Due section

Single employer plans reporting eligibility for the small employer cap choosing to report the data in items 7c - 7g.

PBGC: My PAA	<u>My Home Page My Accoun</u>	nt Logout My PAA L	v.14.2.0.15.01 Jsers Manual (PDF)
Step 1: Start a Draft Filing	g		
Comprehensive Filing for Plan Yea Admin - 11-1111111 / 222	r Commencing 1/1/2014		
Start o Draft Filing Edit Draft Sign Filing, and Select Payment Alternative	Submit Filing with Fayment (f any)	ng r	
Variable-rate Premium Due	Continue >	< Back Cancel	Save & Exit
			> Instructions
Uncapped	variable-rate premium:	\$0.00	
	MAP-21 cap:	\$2,060.00	
	Small employer cap:	\$125.00	
	Maximum VRP:	\$125.00	
	Variable-rate premium:	\$0.00	
	Continue >	< Back Cancel	Save & Exit

Single employer plans eligible for the small employer cap choosing not to report the data in items 7c-7g must omit items 7c " Assumptions" through 7g "Uncapped variable rate premium."

PBGC: My PAA	My Home Page My Accoun	it Logout My PAA I	v.14.2.0.15.01 Users Manual (PDF)
Step 1: Start a Draft Filing	g		
Comprehensive Filing for Plan Yea Admin - 11-1111111 / 222	r Commencing 1/1/2014		
Starts Draft Filing Edit Draft Sign Filing, and Selest Payment Alternative	Submit Filing with Fayment (f any)	ig r	
Variable-rate Premium Due	Continue >	< Back Cancel	Save & Exit
			» Instructions
	MAP-21 cap:	\$2,060.00	
	Small employer cap:	\$125.00	
Va	ariable-rate premium:	\$125.00	
	Continue >	< Back Cancel	Save & Exit

All plans except multiemployer plans, single-employer plans exempt from the VRP, and single employer plans reporting eligibility for the small employer cap.

PBGC My PAA	<u>My Home Page My Accoun</u>	<u>t Logout My PAA L</u>	v.14.2.0.15.01 Jsers Manual (PDF)
Step 1: Start a Draft Filing			
Comprehensive Filing for Plan Year Cor Admin - 11-1111111/222	nmencing 1/1/2014		
Edit Draft, Sign Filing, and Craft Filing Select Payment Alternative wit	Submit Filing Payment (if any)		
Variable-rate Premium Due	Continue >	< Back Cancel	Save & Exit
			> Instructions
Uncapped v	ariable-rate premium:	\$0.00	
	MAP-21 cap:	\$20,600.00	
V	ariable-rate premium:	\$0.00	
	Continue >	< Back Cancel	Save & Exit

Single Employer Calculate Total Premium Payment



Overpayment screen

BCC My PAA	v.14.2.0.15.0 <u>My Home Page My Account Logout My PAA Users Manual (PD</u>
Step 1: Start a Draft Filing	
Comprehensive Filing for Plan Year Com Admin - 11-1111111 / 222	nmencing 1/1/2014
Start a Edit Draft, Sign Filing, and Craft Filing Select Payment Alternative with	Submit Filing Receive Filing Payment (if any) Confirmation
Overpayment	Continue > < Back Cancel Save & Exit
Overpayment	> <u>Instructions</u>
Total Premium: \$2,450.00 Premium Credit: \$3,000.00 Overpayment: \$550.00	
An overpayment may be refunded or crea	dited towards next year's premium.
lf you want to take a credit, select the "Pr "refund" options.	emium Credit" option below. If you want a refund, select one of the
● I want to take a credit towards next ye	ar's premium
Refund Options:	
O I want a refund by mailed check (sent	to Plan at Plan Administrator address)
C I want a refund by electronic funds tra	ansfer (preferred refund option)
Account Type:	select one 🗸
Bank Routing Number:	(B digi 6)
Account Number: Sub-Account Number: (if any)	
	Continue > < Back Cancel Save & Exit

Report Miscellaneous Information screen

	My Home Page My Account Logout My PAA Users Manual (PDF
Step 2: Edit Draft, Sign Fil	ling, and Select Payment Alternative
Comprehensive Filing for Plan Yea MUSEUM PENSION PLAN - 11-111	r Commencing 01/01/2015 1111 / 007
	$\rightarrow 3 \rightarrow 4$
Start a Edit Draft, Sign Filing, and	Submit Filing Receive Filing
Draft Filing Select Payment Alternative	with Payment (if any) Confirmation
Report Miscellaneous Infor	mation
	Continue > < Back Cancel Save & Exit
	* Instructions
Final Filing	Clear information
obligation is ceasing:	ter the date of event and select the reason that best describes why hing
(ex. MM/DD/////)	
C Merger/Consolidation	 Distribution pursuant to termination
C Trusteeship	Cessation of covered status
Participation Freeze	
If, as of the beginning of the premium	n payment year, this plan is closed to new entrants, enter the date the plan
became closed to new entrants:	
(ex. MM/DD/YYYY)	
Accrual Freeze	* Clear information
If, as of the beginning of the premium frozen, enter the date the freeze beca freeze:	n payment year, benefit accruals under this plan are partially or totally ame effective and select the reason that best describes the nature of the
(ex. MM/DD/YYYY)	
C For all participants, both pay and	d service are frozen
C For some participants, both pay	and service are frozen
C For all participants, service is fro	ozen, pay is not
C For some participants, service is	s frozen, pay is not
Other (enter explanation)	
4000/4000 characters remaining	
Limit 4,000	_
Risk Transfer Activity	
Skin this itom if this is the last filing for	this plan
 a. Lump sum windows: If the plan pro the instructions, report the number 	this plan ovided one or more Lump Sum Windows during the time period described in of persons elicible to elect a lump sum under any such window and the
number who elected a lump sum: (1) Persons not in pay status whe	n lump sum was offered:
Eligible to elect lump sum	Elected lump sum
(2) Persons in pay status when lur	mp sum was offered:
Eligible to elect lump sum	Elected lump sum
 Annuity purchases: If, during the til group of people, report the number 	me period described in the instructions, the plan purchased annuities for a r of persons for whom an annuity was purchased:
(1) Persons not in pay status when annuity was purchased	(2) Persons in pay status when annuity was purchased
	Continue > < Back Cancel Save & Exit

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Added Risk Transfer Activity questions.

Report Transfers From Other plans screen

	M	v.14.2.0.15.01 (<u>Home Page</u> <u>My Account</u> <u>Logout</u> <u>My PAA Users Manual (PDF)</u>
Step 1: Start a D	Draft Filing	
Comprehensive Filing f Admin - 11-1111111/2	for Plan Year Commenc 22	ing 1/1/2014
	2 → (3)→)
Start a Edit Draft Draft Filing Select Pay	, Sign Filing, and Submit ymant Alternative with Payme	Fling Receive Filing nt (if any) Confirmation
Report Transfers	From Other Plans	Destinant and Destination of the
		Continue > < Back Cancel Save & Exit
		to <u>Instructions</u>
Transfers from other p comprehensive premin assets or liabilities we	lans — If another plan tr um filing, provide the fol re transferred (if transfer i	ansferred assets or liabilities to this plan since the most recent lowing information with respect to each plan from which the nvolved a new or newly-covered plan, see instructions).
EIN (ex. 11-111111) (e	PN Date x. 111) of transfer (x. MM0000000)	Type of transfer
		O Merger O Consolidation O Spinoff O Other ⇒ <u>Clear</u>
		O Merger O Consolidation O Spinoff O Other * <u>Clear</u>
		O Merger O Consolidation O Spinoff O Other Declear
		O Merger O Consolidation O Spinoff O Other ⇒ <u>Clear</u>
		O Merger O Consolidation O Spinoff O Other ⇒ <u>Clear</u>
24 Add more rows		
		Continue > < Back Cancel Save & Exit

Report Transfers To Other plans screen

	v.14.2.0.15.01 <u>v Home Page My Account Logout My PAA Users Manual (PDF)</u>
Step 1: Start a Draft Filing	
Comprehensive Filing for Plan Year Commend Admin - 11-1111111 / 222	ving 1/1/2014
Start a Craft Filing Select Payment Alternative with Payment	Filing Beceive Filing int (if any) Confirmation
Report Transfers To Other Plans	Continue > < Back Cancel Save & Exit
	* <u>Instructions</u>
Transfers to other plans — If this plan transferr comprehensive premium filing, provide the fo assets or liabilities were transferred (if transfer	ed assets or liabilities to another plan since the most recent llowing information with respect to each plan to which the involved a new or newly-covered plan, see instructions). Type of transfer
	O Merger O Consolidation O Spinoff O Other ⇒ <u>Clear</u>
	○ Merger ○ Consolidation ○ Spinoff ○ Other > <u>Clear</u>
	○ Merger ○ Consolidation ○ Spinoff ○ Other ⇒ <u>Clear</u>
	O Merger O Consolidation O Spinoff O Other D Clear
te <u>Add more rows</u>	C Merger C Consolidation C Spinoff C Other ⇒ <u>Clear</u>
	Continue > < Back Cancel Save & Exit

Comprehensive Single Employer – Data Summary

ote: N/A indicates that this item was not answere	Save Changes Cancel ed or is not applicable.
Identify Filing to be Made	Edit
Plan Year Commencement Date:	01/01/2015
Plan Year Ending Date:	12/31/2015
Date plan year change adopted (if any):	N/A
Plan Type:	Single-employer
"ling Type: Plan gualifies for proration;	Not Checked
Plan size (small plan):	No
Inter Plan Information	Edit
Nan Nama:	MUSEUM RENSION RUAN
	MUSEOM PENSION PLAN
New or Newly Covered Plan:	Not Checked
Adoption date:	N/A
Date coverage began:	N/A
Continuation Plan:	N/A
Surrent EIN / PN:	11-111111/007
IN/PN from 2013 Form 5500 (if different):	N/A
Explanation as to why EIN/PN does not match entry on 2013 Form 5500:	N/A
Inter Filing Information	Edit
-digit business code:	524290
first 6 digits of CUSIP number:	N/A
Disaster Relief Code:	N/A
rariable-rate Exempt: Reason for Exemption:	Yes, because the plan is a 412(e)(3)plan
lame of Plan Sponsor	Randy Sandy
Name of Plan Administrator:	Libra Debra
Plan Administrator Address:	111 East West
	GA 22222
ame of Contact person:	Leo Melo
Phone:	222-333-0000
int:	
I-mail:	leo.melo@gmail.com
list on pbgc.gov:	
Alternative Phone:	406-555-9877
Ext:	N/A
hone:	NA
Ixt:	N/A
E-mail:	N/A
Calculate Total Premium Payment	Edit
flat-rate Premium	
Participant Count Date:	01/01/2015
Single-employer Flat Rate:	\$57.00
Participant count for this plan year:	2
Terminated Vested:	6
Retirees and Beneficiaries:	4
Total Participant Count:	12
Flat-rate Premium:	\$588.00
Payments made previously for this premium pay	ment year: \$0.00
Outstanding credit from the plan year immediate	ly preceding the so oo
premium payment year:	40.00
Total Freiham Credit.	80.00
Amount Due:	\$588.00
Amount Due: Alternative Fremium Funding Target Election or	80.00 8588.00 Revocation
Amount Due: Alternative Premium Funding Target Election or No Election Previously Made Alternative premium funding target election o	so.oo \$588.00 Revocation
Amount Due: Alternative Premium Funding Target Election or No Election Previously Made Alternative premium funding target election o revocation made on this filing:	30.00 S588.00 Revocation
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Amount Due: Alternative Premium Funding Target Election or No Election Previously Made Alternative premium funding target election of revocation made on this filing: Report Miscellaneous Information Final Filing Date of Event: Filing obligation is ceasing due to: Fartisipa-on Freeze Date:	S0.00 S588.00 Pr Not Checked Cdit N/A N/A
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Amount Due: Alternative Premium Funding Target Election or No Election Previously Made Alternative premium funding target election of revocation made on this filing: Seport Miscellaneous Information Vinal Filing Date of Event: Filing Obligation is ceasing due to: Vinal Filing	S5.00 S588.00 Revocation Pr Not Checked Lett N/A N/A N/A N/A
Amount Due: Alternative Premium Funding Target Election or No Election Previously Made Alternative premium funding target election or revocation made on this filing: Report Miscellaneous Information Trinal Filing Date of Event: Filing obligation is ceasing due to: 'articipation Freeze Date: Isorral Freeze Date: Nature of the accrual freeze: Nature of the ac	N/A N/A
Amount Due: Alternative Premium Funding Target Election or Alternative Premium Funding Target Election or Alternative premium funding target election of revocation made on this filing: Report Miscellaneous Information Trainal Filing Date of Event: Filing obligation is ceasing due to: 'articipation Freeze Date: Varticipation Freeze Date: Nature of the accrual freeze: Nature of the accrual freeze: Class Tanafer Activity Lump sum windows: Persons not in pay status Eligible to elect lump sum Deceded lump sum	Revocation Revocation Provember Not Checked Cdit N/A N/A N/A N/A N/A
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Amount Due: Atternative Premium Funding Target Election or No Election Previously Made Atternative premium funding target election or revocation made on this filing: Report Miscellaneous Information Tendo of Event: Filing obligation is ceasing due to: 'anticipation Freeze Date: Variticipation Freeze Date: Nature of the accrual freeze: Nature of the accrual freeze: Eligible to elect tump sum Elected tump sum Elected tump sum Elected tump sum Annuity Purchases:	B30.00 SS88.00 Ferrocation F N/A N/A N/A N/A N/A N/A N/A N/A N/A
Amount Due: Alternative Premium Funding Target Election or No Election Previously Made Alternative premium funding target election of revocation Previously Made Alternative premium funding target election of the second second formation Final Filing Date of Event: Filing obligation is ceasing due to: Farticipation Freeze Date: Notice of the accrual freeze: Nature of the accrual freeze: Eligible to elect hump sum Elicited hump sum Annualty Purchases: Persons not hump sum Annualty Purchases: Persons not hump sum	Bo DO B568 00 Revocation Protochecked N/A N/A N/A N/A N/A N/A N/A N/A
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Amount Due: Amount Due: Alternative Premium Funding Target Election or No Election Previously Made Alternative premium funding target election of revocation made on this filling: Report Miscellaneous Information final Filling Date of Event: Filling obligation is ceasing due to: 'anticipation Freeze Date: Nature of the accrual freeze: Nature of the accruate freeze: Na	Bit and the second s
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Amount Due: Alternative Premium Funding Target Election on No Election Previously Made Alternative premium funding target election of Provide the second of this filling: Seport Miscellaneous Information Final Filling Date of Event: Filling obligation is ceasing due to: Second Miscellaneous Information Final Filling Date of Event: Filling tobiligation freeze: Second Miscellaneous Information Tendolpathon Freeze Date: Second Miscellaneous Information Date of Event: Filling tobiligation freeze: Second Miscellaneous Information Date: Nature of the accrual freeze: Second In pay status Eligible to elect tump sum Elected tump sum Annualty Purchases: Persons not in pay status Persons not in pay status Persons not in pay status Persons not in pay status Persons for pay sta	B00 00 B00 Revocation Provestion Pr
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Amount Due: Alternative Premium Funding Target Election or No Election Previously Made Alternative Premium funding target election of revocation Previously Made Alternative premium funding target election of revocation Previously Made Alternative premium funding target election of final Filing Date of Event: Filing obligation is ceasing due to: 'articipation Freeze Date: Voccual Preeze Date: Nature of the accrual freeze: Nature of the accrual freeze: Persons not in pay status Persons in pay stat	B0000 5508.00 Fevecation Not Checked F dit Not Checked N/A N/A

Updated the Data Summary to include the new alternative phone number and risk transfer activity questions for screen prepared and imported filings only.

Filing Manager screen

- Ctop 2: Edit Droft, Cian Eiling, and Colost Downsont Altornat		
Step 2: Euli Drait, Sign Filing, and Select Payment Alternat	live	
Comprehensive Filing for Plan Year Commencing 1/1/2014 Admin - 11-1111111 / 222		
$(1 \longrightarrow 2 \longrightarrow 3 \longrightarrow 4)$		
Start a Edit Draft, Sign Filing, and Submit Filing Receive Filing Draft Filing Select Payment Alternative with Payment (if any) Confirmation		
Filing Manager		
This Filing Has <u>NOT</u> Been Submitted	Go to Plan Page	
Filing Status		
Filing is: not ready for submission (refer to To submit this filing' below)		
You are holding the filing		
Filing Task List	* Instructions	
View/Edit Filing This filing contains all the required information; however, a complete filing does not necessarily indicate that there are no errors. To review warning messages related to commor mistakes, click the View button.	Delete Filing e n	
Sign as Plan Administrator or PA Representative		
SignSign as Actuary		
Authorize Authorize as Paying Agent		
 To take action on this filing: You must be holding the filing (otherwise, only "View Filing' is available). Tasks listed reflect your permissions for this plan. Permissions are listed in the Filing Team section below. Note: If a change is made that affects the amount due or variable-rate premium information, any signatures/authorizations will be removed. The filing will need to be re-signed/authorized. To submit this filing: You must be holding the filing and must have the Plan Administrator, PA Representative or Filing Coordinator permission. 		
- Each required signature/authorization on the task list must be completed.		
Filing Team	* Instructions	
The filing coordinator can change permissions from the plan name	* <u>instructions</u>	
Name Permissions Phone Final		
Nova Actuary, Paying Agent, Filing 202-346- Toot Coordinator, Preparer, Plan 4000	<u>aov</u> Holding	
Jessica Actuary, Paying Agent, View Account 111-111-	Boute To	
Test History, Plan Administrator, Preparer 1111 Jessical Com	- Notice 10	
James Plan Administrator, View Account E History, Preparer, Actuary, Paying 111-111- Test Agent 1111	Route To	

Filing Manager

Step 3:	Submit Filing (with payme	ent, if du	9)	
Compreh Admin - 1	ensive Filing for Plan Year Commend 1-1111111 / 222	cing 1/1/201	4	
1-	→2→3-	→(4	
Start a Draft Filing	Edit Draft, Sign Filing, and Submit Filing Select Payment Alternative with Payment (if	any) Recei	ve Filing irmation	
Filing M	anager This Filing Has <u>N(</u>	<u>) T</u> Been S	Submitted	Go to Plan Page
Filing S	status			
_	Filing is: 🗸 ready for submission	(refer to To	submit this filing' below)	
	Submit Now	Submit	Later	
	Note: Click the "submit now" butt	on only once	or you may encounter an e	rror.
Filing T	ask List			* Instructions
	View/Edit Filing This filing contains a complete filing does no errors. To review mistakes, click the '	II the require not necessa warning mes √iew button.	d information; however, a rily indicate that there are sages related to common	Delete Filing
	Plan Administrator 10:29 AM, 10/15/20	r or PA Rep 14 Eastern 1	resentative e-signature co Time	ompleted
	Enrolled Actuary e	-signature (14 Eastern 1	completed	
	Edit E-Payment 4uthorization for p Payment alternativ 10:29 AM. 10/15/20	ayment alto ve selected: 14 Eastern 1	ernative completed Paper Check Time	
To take a - You mu permiss - Note: If signatur To subm - You mu Coordin: - The tasl - Each re	action on this filing: st be holding the filing (otherwise, only "∖ ions for this plan. Permissions are listed a change is made that affects the amour es/authorizations will be removed. The fil it this filing: st be holding the filing and must have the ator permission. < list must indicate that the filing contain quired signature/authorization on the tas	/iew Filing' is in the Filing it due or varia ing will need Plan Admin s all required k list must b	available). Tasks listed refl Team section below. able-rate premium informatic to be re-signed/authorized. istrator, PA Representative information. e completed.	ect your m, any or Filing
Filing T The filing	eam	n the plan pa	08	⇒ Instructions
Name	Permissions	Phone	E-mail	
Nova Test	Actuary, Paying Agent, Filing Coordinator, Preparer, Plan Administrator, View Account History	202-346- 4000	snowden.renita@pbgc.gov	Holding

_



Are you sure you are ready to submit the 2014 Comprehensive Premium Filing to PBGC? Selecting the "Submit" button will send the filing to PBGC. Selecting the "Return" button will return you to the Filing Manager page.

> Submit Return

PBGC My PAA	v.14.2.0.15.01 <u>My Home Page</u> <u>My Account</u> <u>Logout</u> <u>My PAA Users Manual (PDF)</u>
Step 4: Confirmation of I	Premium Filing Submission
Comprehensive Filing for Plan Ye Admin - 11-1111111 / 222	ear Commencing 1/1/2014
1 Start a Draft Filing Edit Draft, Sign Filing, and Select Payment Alternative	Submit Filing with Payment (if any) Receive Filing Confirmation
Confirmation of Premium F	iling Submission
This confirms that the premium if "submit later" was selected). T	filing was successfully submitted to PBGC (or will be submitted The e-filing process is now complete.
The filing receipt can be accessed on the Plan Page. In addition, the filing and payment (if any) will typically be posted within a few days to the plan's Account History, which reflects the plan's premium filing history by plan year. The Account History can be viewed on the Plan Page if you have the "view account history permission", which is assigned by the plan's Filing coordinator.	
	Return to Home Page

Screen Prepared Comprehensive Multi Employer scenario

Identify Filing to be Made screen

PBGC: My PAA	<u>My Home Page M</u>	ly Account Logout My PA	v.14.2.0.15.01 AA Users Manual (PDF)
Step 1: Start a Draft Filir	ıg		
Comprehensive Filing for Plan Ye Admin - 11-1111114 / 244	ar Commencing 1/1/2	2014	
Please note: You will be automati could result in a loss of any inform	cally logged out of My nation you entered in	y PAA after 20 minutes of i My PAA.	nactivity. This
3tart a Edit Draft Sign Filing, and	Submit Filing	► 4 Receive Fling	
Draft Filing Select Payment Alternative	with Fayment (f any)	Confirmation	
Identify Filing to be Made		Con	ntinue > Cancel
			te <u>Instructions</u>
Premium is for plan year 1/1/2 commencing:	014	Premium is for plan year ending:	12/31/2014 @x. MWDD00000
If the plan year commencement plan amendment changing the p adopted.	date has changed sinc lan year, enter the dat ຠາ	e the most recent PBGC fil te the plan year change wa	ing as a result of a s
This is an amended filing			
			: Instructions
Multiemployer plan	or	 Single-employer plan (Includes Multiple-emp 	ployer plan)
			- Instructions
Comprehensive Premium Filing			
			: Instructions
Proration			
Check box if plan qualifies to (i.e., if plan has less than a full	pay a prorated premi Il year of coverage).	um for this premium payme	ent year
Plan size			
For the premium payment year	is the plan a "small"	plan? 🔿 Yes 🖲 No	
		Con	ntinue > Cancel

Enter Plan Information

	<u>My Home Page M</u>	ly Account Logout My	v.14.2.0.15.01 PAA Users Manual (PDF)
Step 1: Start a Dr	aft Filing		
Comprehensive Filing fo Admin - 11-1111114 / 24	r Plan Year Commencing 1/1/2 4	014	
Start a Draft Filing Select Payme	an Filing, and Submit Fling nt Alternative with Fayment (fany)	Receive Filing Confirmation	
Enter Plan Informatio	n	Continue >	- Sack Cancel
			to <u>Instructions</u>
Plan name:	Admin		
Plan effective date:	01/01/2010 (ex. NNVD D/////)		
			. Instructions
			* <u>msudenons</u>
🗖 Check box if plan is	a new or newly covered plan	and provide the followir	ng information:
Adoption	Diate: @x. NUMD Dromo	o	
Date coverage bega	an on: @x.MMVDD/////	n	
Is the plan a "continuat	ion plan"? 🗖 Yes 🗖 No		
			* Instructions
Previous filing EIN:	11-111114	Previous filing PN:	244
Current EIN:	11-1111114 (ex. 11-111111)	Current PN:	244 _(ex. 111)
Form 5500 EIN and PN	Information:		
If the EIN and PN a 2013 Form 5500 a	are not both the same as on the nd provide explanation:	2013 Form 5500, enter E	IN and PN from
	EIN: (ex. 11-111111)	PN: (ex. 111)	
	296/296 characters remaining		
	Character Umil 296	¥.	

Enter Filing Information

PBGC: My PAA	v.14.2.0.15. <u>My Home Page</u> <u>My Account</u> <u>Logout</u> <u>My PAA Users Manual (PC</u>
Comprehensive Filing for Plan Yea Admin - 11-1111114 / 244	r Commencing 1/1/2014
Start a Draft Filing Edit Draft Sign Filing, and Select Payment Alternative	Submit Filing With Fayment (f any)
Enter Filing Information	Continue > < Back Cancel
	te <u>Instructions</u>
6-digit business code:	111100 gex. 111110
	* Instructions
First 6 digits of CUSIP number:	(ex. 111111)
	te <u>Instructions</u>
Disaster Relief (enter code): (For Disaster Relief Announcement	(ex.)0000 5, <u>click here</u>)
	Continue > < Back Cancel

Enter Plan Sponsor and Administrator Information screen

	My Home Page My Acc	v.14.2.0.15 count Logout My PAA Users Manual (PDF)
Step 2: Edit Draft, Sign	Filing, and Select Payme	nt Alternative
Comprehensive Filing for Plar PETROL PENSION PLAN - 11	1 Year Commencing 01/01/2015 -1111112 / 002	
1 → 2 -	→ 3 → 4	
Start a Edit Draft, Sign Filing Draft Filing Select Payment Alter), and Submit Filing Receive Fili native with Payment (if any) Confirmation	ing on
Enter Plan Sponsor and	Administrator Information	Continue > < Back Cancel
Plan Sponsor Informati	on	* Instructions
Name: ENERGY COMPAN	Y	
Plan Administrator Info	rmation	* Instructions
Name: Andy Randy		
Address: 111 matchbox ave		
City: Windy City	State: ME	Zip: 21111 (ex. 11111 or 11111-1111)
Country: United States	v	
Contact Person		
Name (for "attention" line of	mailings): Reza Meza	
Phone: 333-222-1111 (ex.	111-111-1111) Ext: (ex. 111	111)
E-mail: REZA.MEZA@GMA	IL.COM (ex	. aa@a.com)
Alternative phone num	ber for Insured Plans List on	pbgc.gov:
Alternative Phone: 111-22	22-3333 (ex. 111-111-1111) Ext:	(ex. 11111)
Additional Plan Contact	t (optional)	* Instructions
Name:		
Phone:	(ex. 111-111-1111)	Ext: (ex. 111111)
E-mail:		(ex. aa@a.com)
		Continue > < Back Cancel

Added Alternative phone number and extension for Insured Plan List on pbgc.gov in the Plan Administrator Information section.

Comprehensive Multi Employer – Calculate Total Premium Payment screen

	lome Page <u>My Accou</u>	int Logout My PAA	v.14.2.0.15.01 Users Manual (PDF)
Step 1: Start a Draft Filing			
Comprehensive Filing for Plan Year Com Admin - 11-1111114 / 244	mencing 1/1/2014		
Starts Edit Draft Size Elling and Sub		na.	
Draft Filing Select Payment Alternative with Far	yment (if any) Confirmati	an	
Calculate Total Premium Payment	Continue >	< Back Cancel	Save & Exit
			1
			> Instructions
Parti	cipant Count Date:	01/01/2014	@x. MM/DD000000
Multi	employer Flat-rate:	\$12.00	1
Participant Count as of Parti	cipant Count Date:		
Active:	100 gex. 1,111,	111)	
Terminated Vested:	0 (ex. 1,111,	111)	
Retirees and Beneficiaries:	0 (ex. 1,111,	111)	
Total	Participant Count: =	o	L
	Total Premium: =	\$0.00	Calculate
Premium Credit			
Payments made previous	y for this premium payment year:	\$ 12.00	@x. 1,111,111.11)
Outstanding credit from the plan preceding the prem	n year immediately ium payment year:	\$ 0.00	@x. 1,111,111.11)
Tot	al Premium Credit: -	\$0.00	Calculate
	Amount Due: =	\$0.00	Calculate
	Continue >	< Back Cancel	Save & Exit

Report Miscellaneous Information screen

	My Home Page My Account Logout My PAA Users Manual (PDF
Step 2: Edit Draft, Sign Filir	ng, and Select Payment Alternative
Comprehensive Filing for Plan Year 0 MUSEUM PENSION PLAN - 11-11111	Commencing 01/01/2015 11 / 007
1 → 2	→3→4
Start a Edit Draft, Sign Filing, and Draft Filing Select Payment Alternative v	Submit Filing Receive Filing with Payment (if any) Confirmation
Report Miscellaneous Inform	ation
	Continue > < Back Cancel Save & Exit
	- Instructions
Final Filing	⇒ Clear information
If this is the last filing for this plan, enter obligation is ceasing:	the date of event and select the reason that best describes why filing
(ex. MM/DD//////)	
C Merger/Consolidation	C Distribution pursuant to termination
C Trusteeship	C Cessation of covered status
Participation Freeze	
If, as of the beginning of the premium p became closed to new entrants:	ayment year, this plan is closed to new entrants, enter the date the plan
(ex. MM/DD/YYYY)	
Accrual Freeze	* <u>Clear information</u>
If, as of the beginning of the premium p frozen, enter the date the freeze becan freeze:	ayment year, benefit accruals under this plan are partially or totally be effective and select the reason that best describes the nature of the
(ex. MM/DD/YYYY)	
C For all participants, both pay and s	ervice are frozen
C For some participants, both pay an	nd service are frozen
C For some participants, service is for	rozen, pay is not
C Other (enter explanation)	
4000/4000 characters remaining	
Limit 4,000	_
Risk Transfer Activity	
Skip this item if this is the last filing for th	is plan
 Lump sum windows: If the plan provi the instructions, report the number of number who elected a lump sum: 	ded one or more Lump Sum Windows during the time period described in f persons eligible to elect a lump sum under any such window and the
(1) Persons not in pay status when I	ump sum was offered:
Eligible to elect lump sum	Elected lump sum
(2) Persons in pay status when lump	Elected lump sum
b. Annuity purchases: If, during the time group of people, report the number of	e period described in the instructions, the plan purchased annuities for a f persons for whom an annuity was purchased.
group of people, report the number of	profitione in wheth an among was purchased.
(1) Persons not in pay status when annuity was purchased	(2) Persons in pay status when annuity was purchased
	Continue > < Back Cancel Save & Exit

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Added Risk Transfer Activity questions.

Report Transfers From Other plans screen

	v.14.2.0.15.01 <u>me Page</u> <u>My Account</u> <u>Logout</u> <u>My PAA Users Manual (PDF)</u>
Step 1: Start a Draft Filing	
Comprehensive Filing for Plan Year Comme Admin - 11-1111114 / 244	encing 1/1/2014
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Start a Edit Draft Sign Filing, and Submit Draft Filing Select Payment Alternative with Payme	Filing Receive Filing nt (fany) Confirmation
Report Transfers From Other Plans	Continue > < Back Cancel Save & Exit
	te <u>Instructions</u>
Transfers from other plans — If another pla recent comprehensive premium filing, prov from which the assets or liabilities were tran see instructions).	n transferred assets or liabilities to this plan since the most ide the following information with respect to each plan sferred (if transfer involved a new or newly-covered plan,
: <u>Clear all rows</u> EIN PN Date (ex. 11-111111) (ex. 111) of transfer (ex. 110000000000)	Type of transfer
	○ Merger ○ Consolidation ○ Spinoff ○ Other ≫ <u>Clear</u>
	\bigcirc Merger \bigcirc Consolidation \bigcirc Spinoff \bigcirc Other \times <u>Clear</u>
	○ Merger ○ Consolidation ○ Spinoff ○ Other > <u>Clear</u>
	○ Merger ○ Consolidation ○ Spinoff ○ Other > <u>Clear</u>
	\mathbb{C} Merger \mathbb{C} Consolidation \mathbb{C} Spinoff \mathbb{C} Other » <u>Clear</u>
	Continue > < Back Cancel Save & Exit

Report Transfers To Other plans screen

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Step 1: Start a Draft Filing	
Comprehensive Filing for Plan Year Co Admin - 11-1111114 / 244	mmencing 1/1/2014
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Start a Edit Draft Sign Filing, and Si Draft Filing Select Payment Alternative with F	ubnit Filing Roseivo Filing fayment (if any) Confirmation
Report Transfers To Other Plans	Continue > < Back Cancel Save & Exit
	to <u>Instructions</u>
Transfers to other plans — If this plan to recent comprehensive premium filing, which the assets or liabilities were trans instructions).	ransferred assets or liabilities to another plan since the most provide the following information with respect to each plan to sferred (if transfer involved a new or newly-covered plan, see
: <u>Clear all rows</u> EIN PN Date (ex. 11-111111) (ex. 111) of Transfe (ex. 111) (ex. 111)	er Type of transfer
	O Merger O Consolidation O Spinoff O Other > <u>Clear</u>
	○ Merger ○ Consolidation ○ Spinoff ○ Other » <u>Clear</u>
	○ Merger ○ Consolidation ○ Spinoff ○ Other ≫ <u>Clear</u>
	O Merger O Consolidation O Spinoff O Other > Clear
- Add more rows	○ Merger ○ Consolidation ○ Spinoff ○ Other » <u>Clear</u>
	Continue > < Back Cancel Save & Exit

Comprehensive Multi Employer – Data Summary

Data Summary		
		Save Changes Cancel
lote: N/A indicates that this item was not answered c	r is not applicable.	
Identify Filing to be Made	Edit	
Plan Year Commencement Date:	1/1/2015	
Plan Year Ending Date: Date plan year change adopted (if any):	12/31/2015 N/A	
Plan Type:	Multiemployer	
Filing Type: Plan qualifies for proration;	Comprehensive Not Checked	
Plan size (small plan):	Yes	
Enter Plan Information	Edit	
Plan Name:	PETROL PENSI	ON PLAN
Plan effective date:	6/1/1972	
New or Newly Covered Plan: Adoption date:	Not Checked	
Date coverage began:	N/A	
Continuation Plan: Previous EIN / PN:	N/A 11-1111112/00	2
Current EIN / PN:	11-1111112/00	2
EIN/PN from 2013 Form 6600 (if different): Explanation as to why EIN/PN does not match	N/A	
entry on 2013 Form 6500:		
Enter Filing Information	Edit	
6-digit business code:	111210	
First 6 digits of CUSIP number: Disaster Relief Code:	N/A N/A	
Enter Plan Sponsor and Administrator Information	Edit	
Name of Plan Sponsor: Name of Plan Administrator:	Randy Ram Susan Sam	
Plan Administrator Address:	11221 All Parkla	ne 1
Name of Contact person:	US US	
(for "attention" line of mailings)	Test S. Stepletor	r
Ext:	456-789-4561 N/A	
E-mail:	N/A	
List on pbgc.gov:		
Alternative Phone:	406-555-9877	
Name of Additional Plan Contact:	N/A	
Phone:	N/A	
E-mail:	N/A	
Colouiste Total Bremium Baument	Echt	
Flat-rate Premium	Lun	
Participant Count Date:		1/1/2015
Multiemployer Flat Rate: Participant count for this plan year:		\$26.00
Active:		6
Terminated Vested: Retirees and Beneficiaries:		6
Total Participant Count:		18
Total Premium:		\$216.00
Payments made previously for this premium payme	int year:	\$0.00
premium payment year:	breceding the	\$0.00
Amount Due:		\$216.00
Report Miscellapeous Information	Edu	
Final Filing		
Date of Event:	N/A	
Filing obligation is ceasing due to: Participation Freeze Date:	N/A N/A	
Accrual Freeze		
Date: Nature of the accrual freeze:	N/A N/A	
Risk Transfer Activity		
Lump sum windows:		
Fersons not in pay status Eligible to elect lump sum	N/A	
Elected lump sum	N/A	
Persons in pay status		
Eligible to elect lump sum	N/A	
Annuity Purchases:	N/A	
Persons not in pay status	N/A	
Persons in pay status	N/A	
Report Transfers From Other Blans	Edit	
Transferor plan(s):	N/A	
manater or plan(s):	DI/A	
Report Transfers To Other Plans	Edit	
Transferee plan(s):	N/A	
Payment Summary		
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Payment Summary Payment Alternative: Flat-rate Premium: Premium Credit: Premium Amount Due:		N/A \$216.00 \$0.00 \$216.00
Payment Summary Payment Alternative: Flat-rate Premium: Premium Credit: Premium Amount Due:		N/A \$216.00 \$0.00 \$216.00

Updated the Data Summary to include the new alternative phone number and risk transfer activity questions for screen prepared and imported filings only.



Draft Filing Saved but not Submitted

You have completed step 1 of the 4 step filing process Click the 'Go to Filing Manager Page' button to continue with step 2.

You have created and saved a DRAFT	filing for Admin,	11-111114/244	this completes step 1 of
the filing process.			

You must complete all 4 steps to finish the submission process. These steps are initiated from the Filing Manager Page.

Click the 'Go to Filing Manager Page' button to continue.

Note: For a premium filing to be considered timely, both the filing and the payment of any associated premium must be filed by the due date.

Go to Filing Manager

Payment Alternatives screen



PBGC: My PAA	v.14.2.0.15.01 My Home Page My Account Logout My PAA Users Manual (PDF)
Premium Payment	
Comprehensive Filing for Plan Year Admin - 11-1111114 / 244	Commencing 1/1/2014
1 Start a Draft Filing Edit Draft, Sign Filing, and Scloot Payment Alternative	Submit Filing Receive Filing with Fayment (fany) Confirmation
Confirm Payment Alternative S	Selection
Payment Alternative Selected: Pay (using a Paper Check
If you need to change the payment a	alternative selected, click the "< Back" button.
To continue with this alternative sele	ection, click the "Next>" button.
	Next > < Back Cancel

PBGC: My PAA My Home Page My Account Logout My PAA Users Manual (PDF)
Premium Payment
Comprehensive Filing for Plan Year Commencing 1/1/2014 Print Admin - 11-1111114 / 244
1 Start a Edit Dioft, Sign Filing and Submit Filing Receive Filing Draft Filing Scleat Payment Alternative with Payment (if any) Confirmation
You selected "Pay using a paper check" as the payment alternative that you plan to use. To complete the filing process:
 Read and follow the Payment Instructions to help ensure your payment is posted correctly to the plan's account.
2. Select the "Approve" button. 3. Be sure to send the check to PBGC using one of the addresses below.
Payment Instructions
When you send the PBGC a paper check to pay the premium reported in the filing, we must match your paper check with your electronic filing to make sure your payment is posted correctly to the plan's account. To do this, we provide you with a payment voucher to print out and submit with your check.
To help ensure your payment is accurately posted to the plan's account, follow these steps:
 Click the "Display Voucher" button before leaving this page. My PAA will display the payment voucher in a printable format.
 When the voucher is displayed, select File/Print from your browser's menu to send the voucher to your selected printer. Be sure to print the voucher on 8.5 " × 11" paper. Clease the using domain to display the surgebox
 Close the Window that displays the voucher. Write the plan's EIN/PN and the date the premium payment year commenced (PYC) on your check in case the check becomes separated from the voucher.
5. Send your check and voucher to one of the following addresses:
 By United States Postal Service: Pension Benefit Guaranty Corporation P.O. Box 105758 Atlanta, GA 30348-5758 By Overnight Delivery Services (e.g., FedEx, UPS, DHL): Bank of America 1075 Inner Loop Road (2nd Floor) Atlanta, GA 30337 ATTN: PBGC Box 105758
Phone: 404-209-6322
Display Voucher
Approve < Back Cancel

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Filing Manager screen

	My PRA	My Home P	age I My A	ccount Logout My PAA U	lsers Manual (PI
Step 2:	Edit Draft, S	Sign Filing, and	Select	Payment Alternativ	'e
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	Filing is: N	ot ready for submissior	n (refer to 'T	o submit this filing' below)	
	You are h	olding the filing			
Filing Ta	isk List				to Instructions
	View/Edit Filing	This filing does not To see details, click	contain all the View b	the required information. utton.	Dele le Filling
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	Autor days	No Actuary Signatur	re Required		
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Filing Manager screen

Step 3: Submit Filing (with payment, if due) Comprehensive Filing for Plan Year Commencing 1/1/2014 Admin - 11-1111114 / 244 Image: Step 3: Submit Filing for Plan Year Commencing 1/1/2014 Image: Step 3: Submit Filing for Plan Year Commencing 1/1/2014 Image: Step 3: Submit Filing for Plan Year Commencing 1/1/2014 Image: Step 3: Submit Step 2: Step 3: Ste	RCC	My DRA My Hon	ne Page I My A	ccount I Logout I My PAA U	v.14.2.0.15.01 Isers Manual (PDF	
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Admin - 11-1111114 / 244	Compreh	ensive Filing for Plan Year Comme	encina 1/1/201	1		
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This Filing Has NOT Been Submitted Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2" Filing Status Submit Now Submit Later Note: Click the "submit now! button only once or you may encounter an error. Filing Task List Instructions This filing contains all the required information; however, errors. To review warning messages related to common mistakes, click the View button. Plan Administrator or PA Representative e-signature completed Note: Frameri Plan Administrator or PA Representative e-signature completed Note: Click the "submit now! button only once or you may encounter an error. Plan Administrator or PA Representative e-signature completed Note: Click the "submit now! button only once or you may encounter an error. Plan Administrator or PA Representative e-signature completed Administrator or PA Representative e-signature completed Authorization for payment alternative completed Payment alternative selected: Paper Check 11:13 AM 10/16/2014 Eastern Time To take action on this filing: <td co<="" td=""><td>Filing M</td><td>anager</td><td></td><td>·</td><td></td></td>	<td>Filing M</td> <td>anager</td> <td></td> <td>·</td> <td></td>	Filing M	anager		·	
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v.14.2.0.15.01 My Home Page | My Account | Logout | My PAA Users Manual (PDF)

Step 4: Confirmation of Premium Filing Submission

Comprehensive Filing for Plan Year Commencing 1/1/2014 Admin - 11-1111114 / 244

PBGC: My PAA



Confirmation of Premium Filing Submission

This confirms that the premium filing was successfully submitted to PBGC (or will be submitted if "submit later" was selected). The e-filing process is now complete.

The filing receipt can be accessed on the Plan Page. In addition, the filing and payment (if any) will typically be posted within a few days to the plan's Account History, which reflects the plan's premium filing history by plan year. The Account History can be viewed on the Plan Page if you have the "view account history permission", which is assigned by the plan's Filing coordinator.

Return to Home Page

Import Comprehensive Single Employer Scenario

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PBGC: MY PAA	My Home Page My Account Logour My PAR Oseis Manual (PDP
Import Software-Prepare	d Filing(s)
Select the electronic file you create premium filings to be imported into signature, and submission to PBG for the EIN/PN and Plan Year of a fi screens, including a filing that has overwritten with the one from the e	ed with your private-sector software that contains one or more the My PAA editing screens for routing, editing (if necessary), C. Please note that if the electronic file includes filing information ling currently in progress in the My PAA data entry and editing been scheduled for a future submission, that filing will be electronic file.
Select File:	Browse
	Import Cancel

V14.2.0.15.01 <u>My Home Page | My Account | Logout | My PAA Users Manual (PDF)</u> <u>Import Software-Prepared Filing</u> You have successfully imported an electronic file that contains premium filing information for one or more plans in your account. Select the "Go to My PAA Home Page" button. The filing(s) you imported will be listed on that page in your "Inbox" section. From there, you can open a filing to edit it (if necessary), route it to another person on your "filing team," or provide the necessary signatures for submission to PBGC. <u>Go to My PAA Home Page</u>

Home Page

BGC: My PAA	My Accou	int Logout My PAA Users Manual (PD
lome Page		How to Use My PAA
Add a Plan to your Account There must be at least one plan	t 1 in your account to e-file.	> <u>Instructions</u> Add a Planas filling Coordinator
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Only for filings created using My	y PAA data entry screens and im	ported filings. <u>b</u> \ <u>Where's my filing?</u>
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Filing Manager screen

PBGC	My PAA	My Home P	age <u>My A</u>	ccount Logout My PAA U	v.14.2.0.16.01 sers Manual (PDF
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Jessica Test	Actuary, Paying History, Plan Adı	Agent, View Account ministrator, Preparer	111-111- 1111	jessica@test.com	Route To
Nova Test	Actuary, Paying Coordinator, Pre Administrator, Vi	Agent, Filing parer, Plan ew Account History	202-346- 4000	snowden.renita@pbgc.gov	Holding

Payment Alternatives



Pay online via My PAA

	<u>My Home Page My Account Logout My PAA</u>	v.14.2.0.15.01 Users Manual (PDF
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Authorize E-Payment		
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Variable-rate Premium:	\$80.00	
Premium Credit:	\$0.00	
Premium Amount Due:	\$276.00	
Payment Amount:	\$ 276.00 @x 1,111.11)	
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Premium Payment	
Comprehensive Filing for Plan Ye Admin - 11-1111111 / 222	ar Commencing 1/1/2014
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Payment Summary	Edit
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Variable-rate Premium:	\$80.00
Premium Credit:	\$0.00
Premium Amount Due:	\$276.00
Amount Paid:	\$276.00
Total Amount Paid:	\$276.00
Method Selected:	Automated Clearing House (ACH)
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Bank Account Number:	*******80
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PBGC	My PBA	My Home Pa	age My A	ccount	Logout My PAA U	v.14.2.0.15.01 sers Manual (PDF)
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James E Test	Plan Administrator, View / History, Preparer, Actuary, Agent	Account Paying	111-111- 1111	james@	<u>test.com</u>	Rouiz To
Jessica Test	Actuary, Paying Agent, Vi History, Plan Administrato	ew Account r, Preparer	111-111- 1111	jessica@	<u>@test.com</u>	Roule To
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Upload Comprehensive Single Employer scenario

BGC: My PAA	v.14.2.0.15. <u>My Home Page My Account Logout My PAA Users Manual (PI</u>
Upload Software-Prep	ared Filing(s)
Upload Filing(s) Select Premium Payment Alternative for Single Filings	Receive Confirmation of Filing(s) and Payment (if any)
Select the file you created with be submitted. Note: The file must be in a PBC	n your private-sector software that contains the premium filing to 9C-defined XML format. <u>What does this mean?</u>
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Note: The e-mail will be sent to and make any necessary chang this box is checked, a confirmati you can print the confirmation s	the address on record for you in My PAA. (To view this e-mail address es, click the "My Account" link at the top of the page.) Whether or not ion screen will be provided for all fully completed transactions, and screen for your records.
	Next > Cancel

Filing Certification

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