

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.



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)

[Forgot your User ID?](#) [Forgot your Password?](#)

[New users click here to sign up.](#)

SECURITY NOTICE AND WARNING

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Home Page [How to Use My PAA](#)

Add a Plan to your Account [» Instructions](#)

There must be at least one plan in your account to e-file.

In-Process Filings [» Instructions](#)

Only for filings created using My PAA data entry screens and imported filings. [» Where's my filing?](#)

There are no filings in your Inbox.

Create Filing In My PAA Data Entry & Editing Screens (for any plan in your account)

Plans in Your Account [» Instructions](#)

Plan Name (EIN/PN) ▾

Admin (11-1111111/ 222)	<input type="button" value="Go to Plan Page"/>	<input type="button" value="Invite a Practitioner"/>	<input type="button" value="Create Filing"/>
Admin (11-1111114/ 244)	<input type="button" value="Go to Plan Page"/>	<input type="button" value="Invite a Practitioner"/>	<input type="button" value="Create Filing"/>

Import Software-Prepared Filing(s) into My PAA Editing Screens [» Instructions](#)

Transfer filing data into My PAA editing screens for review and submission for any plan(s) in your account.

Upload Software-Prepared Filing(s) [» Instructions](#)

Submit fully-completed filing(s) for any plan(s) once you have at least one plan in your account. After the file is uploaded, click the link (if shown) under "Conf. ID/ Receipt" to view the receipt(s) showing data submitted for each filing. View this section's Instructions for details.

You have not uploaded any software-prepared filings.

Helpful Links

» About Online Premium Filing	» Complete Filing Instructions
» My PAA Users Manual (PDF)	» Filing Due Dates for Current Plan Year
» Blank Paper Check Voucher (for printing)	» Submit a Premium Filing Question



How to File

Online filing with My PAA is a 4-step process:

[More Details](#)

- 1 Start a Draft Filing
- 2 Edit Draft, Sign Filing, and Select Payment Alternative
- 3 Submit Filing with Payment (if any)
- 4 Receive Filing Confirmation

Identify Filing Type

Select the plan year and filing type for the filing you wish to create:

Select one

Continue

Cancel

Identify Filing to be Made screen

PBGC My PAA [My Home Page](#) | [My Account](#) | [Logout](#) | [My PAA Users Manual \(PDF\)](#)

Step 1: Start a Draft Filing

Admin - 11-1111111 / 222

Please note: You will be automatically logged out of My PAA after 20 minutes of inactivity. This could result in a loss of any information you entered in My PAA.

Identify Filing to be Made Continue > Cancel

[Instructions](#)

Premium is for plan year commencing: (ex. MM/DD/YYYY) Premium is for plan year ending: (ex. MM/DD/YYYY)

If the plan year commencement date has changed since the most recent PBGC filing as a result of a plan amendment changing the plan year, enter the date the plan year change was adopted. (ex. MM/DD/YYYY)

This is an amended filing

[Instructions](#)

Multiemployer plan or Single-employer plan (Includes Multiple-employer plan)

[Instructions](#)

Comprehensive Premium Filing

[Instructions](#)

Proration

Check box if plan qualifies to pay a prorated premium for this premium payment year (i.e., if plan has less than a full year of coverage).

Plan size

For the premium payment year, is the plan a "small" plan? Yes No

Continue > Cancel

Enter Plan Information



v.14.2.0.15.01

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Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-1111111 / 222



Enter Plan Information

Continue > < Back Cancel

[Instructions](#)

Plan name:

Plan effective date: (ex. MM/DD/YYYY)

[Instructions](#)

Check box if plan is a new or newly covered plan and provide the following information:

Adoption Date: (ex. MM/DD/YYYY)

Date coverage began on: (ex. MM/DD/YYYY)

Is the plan a "continuation plan"? Yes No

[Instructions](#)

Previous filing EIN: 11-1111111 Previous filing PN: 222

Current EIN: (ex. 11-1111111) Current PN: (ex. 111)

Form 5500 EIN and PN Information:

If the EIN and PN are not both the same as on the 2013 Form 5500, enter EIN and PN from 2013 Form 5500 and provide explanation:

EIN: (ex. 11-1111111) PN: (ex. 111)

256/256 characters remaining

Character Limit: 256

Continue > < Back Cancel

Enter Filing Information



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Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-1111111 / 222



Enter Filing Information

[Continue >](#) [< Back](#) [Cancel](#)

[Instructions](#)

6-digit business code: (ex. 111111)

[Instructions](#)

First 6 digits of CUSIP number: (ex. 111111)

[Instructions](#)

Disaster Relief (enter code): (ex. >>>>>>)

(For Disaster Relief Announcements, [click 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: (ex. MM/DD/YYYY)

Yes, because the plan has no vested participants.

Yes, because the plan is a 412(e)(3) plan.

[Continue >](#) [< Back](#) [Cancel](#)

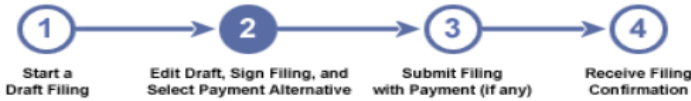
[PBGC.gov](#) | [Privacy Act Notice](#) | [Paperwork Reduction Act Notice](#) | [Contact Us](#) | [About Online Premium Filing](#)

Enter Plan Sponsor and Administrator Information screen



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



Enter Plan Sponsor and Administrator Information

[Continue >](#) [< Back](#) [Cancel](#)

Plan Sponsor Information [Instructions](#)

Name:

Plan Administrator Information [Instructions](#)

Name:

Address:

City: State: Zip:

(ex. 11111 or 11111-1111)

Country:

Contact Person

Name (for "attention" line of mailings):

Phone: (ex. 111-111-1111) Ext: (ex. 111111)

E-mail: (ex. aa@a.com)

Alternative phone number for Insured Plans List on pbgc.gov:

Alternative Phone: (ex. 111-111-1111) Ext: (ex. 111111)

Additional Plan Contact (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 Single Employer – Calculate Premium Due screen


v.14.2.0.15.01

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Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-1111111 / 222



Calculate Premium Due

Continue > < Back Cancel Save & Exit

Flat-rate Premium [Instructions](#)

Participant Count Date: ex. MM/DD/YYYY

Single-employer Flat-rate: \$49.00

Participant Count as of Participant Count Date:

Active: ex. 1,111,111

Terminated Vested: ex. 1,111,111

Retirees and Beneficiaries: ex. 1,111,111

Total Participant Count: =

Flat-rate Premium: = \$0.00

Variable-rate Premium [Instructions](#)

Alternative Premium Funding Target Election or Revocation [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.

Revocation - 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 [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

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Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-11111111 / 222



Calculate Variable-rate Premium

Continue > < Back Cancel Save & Exit

Assumptions and methods used to determine premium funding target [Instructions](#)

Premium funding target method: Standard Alternative

Discount rates

Segment rates N/A, full yield curve used

1st segment: % (ex. 1.1%)

2nd segment: % (ex. 1.1%)

3rd segment: % (ex. 1.1%)

UVB valuation date: (ex. MM/DD/YYYY)

Premium funding target as of UVB valuation date [Instructions](#)

Check box if the reported premium funding target information is an estimate.

Attributable to active participants:	\$	<input type="text" value="5"/>	(ex. 1.1%)
Attributable to terminated vested participants:	\$	<input type="text" value="5"/>	(ex. 1.1%)
Attributable to retirees and beneficiaries receiving payment:	\$	<input type="text" value="0"/>	(ex. 1.1%)
Total premium funding target:	\$0		Calculate

Market value of assets as of UVB valuation date:	\$	<input type="text" value="10000"/>	(ex. 1.1%)
Unfunded Vested Benefits before rounding up to the next \$1,000:	\$0		
Unfunded Vested Benefits rounded to the next \$1,000:	\$0		Calculate

Continue > < Back Cancel Save & Exit

Comprehensive Single Employer – Variable rate Premium Due section

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

v.14.2.0.15.01

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Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-1111111 / 222

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 YRP:	\$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."

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Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-1111111 / 222

1 → **2** → **3** → **4**

Start a Draft Filing Edit Draft, Sign Filing, and Select Payment Alternative Submit Filing with Payment (if any) Receive Filing Confirmation

Variable-rate Premium Due

[Continue >](#) [< Back](#) [Cancel](#) [Save & Exit](#)

[» Instructions](#)

MAP-21 cap:	\$2,060.00
Small employer cap:	\$125.00
Variable-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.

Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-1111111 / 222



Variable-rate Premium Due

[Continue >](#) [< Back](#) [Cancel](#) [Save & Exit](#)

[Instructions](#)

Uncapped variable-rate premium:	\$0.00
MAP-21 cap:	\$20,600.00
Variable-rate premium:	\$0.00

[Continue >](#) [< Back](#) [Cancel](#) [Save & Exit](#)



Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-1111111 / 222



Calculate Total Premium Payment

[Continue >](#) [< Back](#) [Cancel](#) [Save & Exit](#)

[Instructions](#)

Flat-rate Premium:	\$2,450.00
Variable-rate Premium: +	\$0.00
Total Premium: =	\$2,450.00

Premium Credit

Payments made previously for this premium payment year:	\$	<input type="text" value="3000"/>	<small>(ex. 1,111,111.11)</small>
Outstanding credit from the plan year immediately preceding the premium payment year: +	\$	<input type="text" value="0.00"/>	<small>(ex. 1,111,111.11)</small>
Total Premium Credit: -		\$3,000.00	Calculate
Amount Due: =		\$0.00	Calculate

[Continue >](#) [< Back](#) [Cancel](#) [Save & Exit](#)

Overpayment screen

v.14.2.0.15.01

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Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-1111111 / 222

Overpayment [Instructions](#)

Total Premium:	\$2,450.00
Premium Credit:	\$3,000.00
Overpayment:	\$550.00

An overpayment may be refunded or credited towards next year's premium.

If you want to take a credit, select the "Premium Credit" option below. If you want a refund, select one of the "refund" options.

Premium Credit:

I want to take a credit towards next year's premium

Refund Options:

I want a refund by mailed check (sent to Plan at Plan Administrator address)

I want a refund by electronic funds transfer (preferred refund option)

Account Type:


Bank Routing Number: (9 digits)

Account Number:

Sub-Account Number: (if any)

[Continue >](#) [< Back](#) [Cancel](#) [Save & Exit](#)


Report Miscellaneous Information screen



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Step 2: Edit Draft, Sign Filing, and Select Payment Alternative

Comprehensive Filing for Plan Year Commencing 01/01/2015
MUSEUM PENSION PLAN - 11-1111111 / 007



Report Miscellaneous Information

Continue > | < Back | Cancel | Save & Exit

[-> Instructions](#)

Final Filing [-> Clear information](#)

If this is the last filing for this plan, enter the date of event and select the reason that best describes why filing obligation is ceasing:

(ex. MM/DD/YYYY)

Merger/Consolidation

Trusteeship

Distribution pursuant to termination

Cessation of covered status

Participation Freeze

If, as of the beginning of the premium 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 payment year, benefit accruals under this plan are partially or totally frozen, enter the date the freeze became effective and select the reason that best describes the nature of the freeze:

(ex. MM/DD/YYYY)

For all participants, both pay and service are frozen

For some participants, both pay and service are frozen

For all participants, service is frozen, pay is not

For some participants, service is frozen, pay is not

Other (enter explanation)

4000/4000 characters remaining

Limit 4,000

Risk Transfer Activity

Skip this item if this is the last filing for this plan

a. Lump sum windows: If the plan provided one or more Lump Sum Windows during the time period described in the instructions, report the number of persons eligible to elect a lump sum under any such window and the number who elected a lump sum:

(1) Persons not in pay status when lump sum was offered:

Eligible to elect lump sum

Elected lump sum

(2) Persons in pay status when lump sum was offered:

Eligible to elect lump sum

Elected lump sum

b. Annuity purchases: If, during the time period described in the instructions, the plan purchased annuities for a group of people, report the number 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

Added Risk Transfer Activity questions.

Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-1111111 / 222



Report Transfers From Other Plans

[Continue >](#) [< Back](#) [Cancel](#) [Save & Exit](#)

[Instructions](#)

Transfers from other plans — If another plan transferred assets or liabilities to this plan since the most recent comprehensive premium filing, provide the following information with respect to each plan from which the assets or liabilities were transferred (if transfer involved a new or newly-covered plan, see instructions).

[Clear all rows](#)

EIN (ex. 11-1111111)	PN (ex. 111)	Date of transfer (ex. MM/DD/YYYY)	Type of transfer	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other	Clear
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other	Clear
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other	Clear
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other	Clear
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other	Clear

[Add more rows](#)

[Continue >](#) [< Back](#) [Cancel](#) [Save & Exit](#)

Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-1111111 / 222



Report Transfers To Other Plans

[Continue >](#) [< Back](#) [Cancel](#) [Save & Exit](#)

[Instructions](#)

Transfers to other plans — If this plan transferred assets or liabilities to another plan since the most recent comprehensive premium filing, provide the following information with respect to each plan to which the assets or liabilities were transferred (if transfer involved a new or newly-covered plan, see instructions).

[Clear all rows](#)

EIN (ex. 11-1111111)	PN (ex. 111)	Date of Transfer (ex. MM/DD/YYYY)	Type of transfer	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other	Clear
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other	Clear
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other	Clear
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other	Clear
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other	Clear

[Add more rows](#)

[Continue >](#) [< Back](#) [Cancel](#) [Save & Exit](#)

Comprehensive Single Employer – Data Summary

Data Summary		Save Changes	Cancel
Note: N/A indicates that this item was not answered 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		
Filing Type:	Comprehensive		
Plan qualifies for proration:	Not Checked		
Plan size (small plan):	No		
Enter Plan Information		Edit	
Plan Name:	MUSEUM PENSION PLAN		
Plan effective date:	11/16/1961		
New or Newly Covered Plan:	Not Checked		
Adoption date:	N/A		
Date coverage began:	N/A		
Continuation Plan:	N/A		
Previous EIN / PN:	11-1111111 / 007		
Current EIN / PN:	11-1111111 / 007		
EIN/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		
Enter Filing Information		Edit	
6-digit business code:	524290		
First 6 digits of CUSIP number:	N/A		
Disaster Relief Code:	N/A		
Variable-rate Exempt:	Yes		
Reason for Exemption:	Yes, because the plan is a 412(e)(3)plan		
Enter Plan Sponsor and Administrator Information		Edit	
Name of Plan Sponsor:	Randy Sandy		
Name of Plan Administrator:	Libra Debra		
Plan Administrator Address:	111 East West Orange City GA 32229 US		
Name of Contact person: (for "attention" line of mailings)	Leo Melo		
Phone:	222-333-8888		
EXT:			
E-mail:	leo.melo@gmail.com		
Alternative phone number for Insured Plans List on pbsc.gov:	406-595-9877		
Ext:	N/A		
Name of Additional Plan Contact:	N/A		
Phone:	N/A		
Ext:	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:			
Active:	2		
Terminated Vested:	6		
Retirees and Beneficiaries:	4		
Total Participant Count:	12		
Flat-rate Premium:	\$588.00		
Total Premium:	\$588.00		
Payments made previously for this premium payment year:	\$0.00		
Outstanding credit from the plan year immediately preceding the premium payment year:	\$0.00		
Total Premium Credit:	\$0.00		
Amount Due:	\$588.00		
Alternative Premium Funding Target Election or Revocation			
No Election Previously Made			
Alternative premium funding target election or revocation made on this filing:	Not Checked		
Report Miscellaneous Information		Edit	
Final Filing			
Date of Event:	N/A		
Filing obligation is ceasing due to:	N/A		
Participation Freeze Date:	N/A		
Accrual Freeze			
Date:	N/A		
Nature of the accrual freeze:	N/A		
Risk Transfer Activity			
Lump sum windows:			
Persons 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		
Elected lump sum	N/A		
Annuity Purchases:			
Persons not in pay status			
Persons in pay status	N/A		
Report Transfers From Other Plans		Edit	
Transferor plan(s):	N/A		
Report Transfers To Other Plans		Edit	
Transferee plan(s):	N/A		
Payment Summary			
Payment Alternative:	N/A		
Flat-rate Premium:	\$588.00		
Premium Credit:	\$0.00		
Premium Amount Due:	\$588.00		
		Save Changes	Cancel

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

Step 2: Edit Draft, Sign Filing, and Select Payment Alternative

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-1111111 / 222

Filing Manager [Go to Plan Page](#)

This Filing Has NOT Been Submitted

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 common mistakes, click the View button.	Delete Filing
Sign	Sign as Plan Administrator or PA Representative	
Sign	Sign 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.
- The task list must indicate that the filing contains all required information.
- Each required signature/authorization on the task list must be completed.

Filing Team [Instructions](#)

The filing coordinator can change permissions from the [plan page](#)

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
Jessica Test	Actuary, Paying Agent, View Account History, Plan Administrator, Preparer	111-111-1111	jessica@test.com	Route To
James E Test	Plan Administrator, View Account History, Preparer, Actuary, Paying Agent	111-111-1111	james@test.com	Route To

Step 3: Submit Filing (with payment, if due)

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-1111111 / 222



Filing Manager

This Filing Has **NOT** Been Submitted

[Go to Plan Page](#)

Filing Status

Filing is: ✓ ready for submission (refer to 'To submit this filing' below)

[Submit Now](#)

[Submit Later](#)

Note: Click the "submit now" button only once or you may encounter an error.

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 common mistakes, click the View button.

[Delete Filing](#)

✓ **Plan Administrator or PA Representative e-signature completed**
10:29 AM. 10/15/2014 Eastern Time

✓ **Enrolled Actuary e-signature completed**
10:29 AM. 10/15/2014 Eastern Time

[Edit E-Payment](#)

✓ **Authorization for payment alternative completed**
Payment alternative selected: Paper Check
10:29 AM. 10/15/2014 Eastern Time

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.
- The task list must indicate that the filing contains all required information.
- Each required signature/authorization on the task list must be completed.

Filing Team

[Instructions](#)

The filing coordinator can change permissions from the [plan page](#)

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
Jessica	Actuary, Paying Agent, View Account	111-111-	jessica@test.com Route To

Submit Confirmation

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.

Step 4: Confirmation of Premium Filing Submission

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-1111111 / 222



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](#)

Screen Prepared Comprehensive Multi Employer scenario

Identify Filing to be Made screen

v.14.2.0.15.01

PBGC My 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 - 11-1111114 / 244

Please note: You will be automatically logged out of My PAA after 20 minutes of inactivity. This could result in a loss of any information you entered in My PAA.

Identify Filing to be Made

[Instructions](#)

Premium is for plan year commencing: (ex. MM/DD/YYYY) Premium is for plan year ending: (ex. MM/DD/YYYY)

If the plan year commencement date has changed since the most recent PBGC filing as a result of a plan amendment changing the plan year, enter the date the plan year change was adopted. (ex. MM/DD/YYYY)

This is an amended filing

[Instructions](#)

Multiemployer plan or Single-employer plan
(Includes Multiple-employer plan)

[Instructions](#)

Comprehensive Premium Filing

[Instructions](#)

Proration

Check box if plan qualifies to pay a prorated premium for this premium payment year (i.e., if plan has less than a full year of coverage).

Plan size

For the premium payment year, is the plan a "small" plan? Yes No

Enter Plan Information



v.14.2.0.15.01

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Step 1: Start a Draft Filing

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



Enter Plan Information

[Continue >](#) [< Back](#) [Cancel](#)

[Instructions](#)

Plan name:

Plan effective date: (ex. MM/DD/YYYY)

[Instructions](#)

Check box if plan is a new or newly covered plan and provide the following information:

Adoption Date: (ex. MM/DD/YYYY)

Date coverage began on: (ex. MM/DD/YYYY)

Is the plan a "continuation plan"? Yes No

[Instructions](#)

Previous filing EIN: 11-1111114 Previous filing PN: 244

Current EIN: (ex. 11-1111111) Current PN: (ex. 111)

Form 5500 EIN and PN Information:

If the EIN and PN are not both the same as on the 2013 Form 5500, enter EIN and PN from 2013 Form 5500 and provide explanation:

EIN: (ex. 11-1111111) PN: (ex. 111)

Character Limit 255

[Continue >](#) [< Back](#) [Cancel](#)

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



Enter Filing Information

[Continue >](#) [< Back](#) [Cancel](#)

[Instructions](#)

6-digit business code: (ex. 111111)

[Instructions](#)

First 6 digits of CUSIP number: (ex. 111111)

[Instructions](#)

Disaster Relief (enter code): (ex. XXXXXX)

(For Disaster Relief Announcements, [click here](#))

[Continue >](#) [< Back](#) [Cancel](#)

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



Enter Plan Sponsor and Administrator Information

[Continue >](#) [< Back](#) [Cancel](#)

Plan Sponsor Information [Instructions](#)

Name:

Plan Administrator Information [Instructions](#)

Name:

Address:

City: State: Zip:

(ex. 11111 or 11111-1111)

Country:

Contact Person

Name (for "attention" line of mailings):

Phone: (ex. 111-111-1111) Ext: (ex. 111111)

E-mail: (ex. aa@a.com)

Alternative phone number for Insured Plans List on pbgc.gov:

Alternative Phone: (ex. 111-111-1111) Ext: (ex. 111111)

Additional Plan Contact (optional) [Instructions](#)

Name:

Phone: (ex. 111-111-1111) Ext: (ex. 111111)

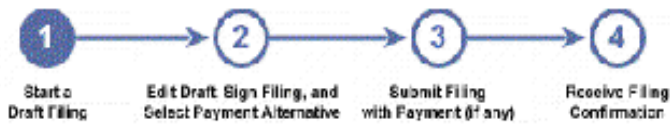
E-mail: (ex. aa@a.com)

[Continue >](#) [< Back](#) [Cancel](#)

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

Step 1: Start a Draft Filing

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



Calculate Total Premium Payment

[Continue >](#) [< Back](#) [Cancel](#) [Save & Exit](#)

[Instructions](#)


Participant Count Date:	<input type="text" value="01/01/2014"/>	(ex. MM/DD/YYYY)
Multiemployer Flat-rate:	<input type="text" value="\$12.00"/>	
Participant Count as of Participant Count Date:		
Active:	<input type="text" value="100"/>	(ex. 1,111,111)
Terminated Vested:	<input type="text" value="0"/>	(ex. 1,111,111)
Retirees and Beneficiaries:	<input type="text" value="0"/>	(ex. 1,111,111)
Total Participant Count: =	<input type="text" value="0"/>	
Total Premium: =	<input type="text" value="\$0.00"/>	Calculate

Premium Credit

Payments made previously for this premium payment year:	\$ <input type="text" value="12.00"/>	(ex. 1,111,111.11)
Outstanding credit from the plan year immediately preceding the premium payment year: +	\$ <input type="text" value="0.00"/>	(ex. 1,111,111.11)
Total Premium Credit: -	<input type="text" value="\$0.00"/>	Calculate
Amount Due: =	<input type="text" value="\$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 Filing, and Select Payment Alternative

Comprehensive Filing for Plan Year Commencing 01/01/2015
 MUSEUM PENSION PLAN - 11-1111111 / 007



Report Miscellaneous Information

Continue >
< Back
Cancel
Save & Exit

[-> Instructions](#)
[-> Clear information](#)

Final Filing

If this is the last filing for this plan, enter the date of event and select the reason that best describes why filing obligation is ceasing:

(ex. MM/DD/YYYY)

Merger/Consolidation
 Distribution pursuant to termination

Trusteeship
 Cessation of covered status

Participation Freeze

If, as of the beginning of the premium payment year, this plan is closed to new entrants, enter the date the plan became closed to new entrants:

 (ex. MM/DD/YYYY)

[-> Clear information](#)

Accrual Freeze

If, as of the beginning of the premium payment year, benefit accruals under this plan are partially or totally frozen, enter the date the freeze became effective and select the reason that best describes the nature of the freeze:

 (ex. MM/DD/YYYY)

4000/4000 characters remaining

Limit 4,000

Risk Transfer Activity

Skip this item if this is the last filing for this plan

a. Lump sum windows: If the plan provided one or more Lump Sum Windows during the time period described in the instructions, report the number of persons eligible to elect a lump sum under any such window and the number who elected a lump sum:

(1) Persons not in pay status when lump sum was offered:

Eligible to elect lump sum

Elected lump sum

(2) Persons in pay status when lump sum was offered:

Eligible to elect lump sum

Elected lump sum

b. Annuity purchases: If, during the time period described in the instructions, the plan purchased annuities for a group of people, report the number 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

[PBGC.gov](#) | [Privacy Act Notice](#) | [Paperwork Reduction Act Notice](#) | [Contact Us](#) | [About Online Premium Filing](#)

Added Risk Transfer Activity questions.




v.14.2.0.15.01

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Step 1: Start a Draft Filing

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



Report Transfers From Other Plans

Continue > < Back Cancel Save & Exit

[Instructions](#)

Transfers from other plans — If another plan transferred assets or liabilities to this plan since the most recent comprehensive premium filing, provide the following information with respect to each plan from which the assets or liabilities were transferred (if transfer involved a new or newly-covered plan, see instructions).

[Clear all rows](#)

EIN <small>(ex. 11-1111111)</small>	PN <small>(ex. 11)</small>	Date of transfer <small>(ex. MM/DD/YYYY)</small>	Type of transfer
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other Clear
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other Clear
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other Clear
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other Clear
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other Clear

[Add more rows](#)

Continue > < Back Cancel Save & Exit

Step 1: Start a Draft Filing

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



Report Transfers To Other Plans

[Continue >](#) [< Back](#) [Cancel](#) [Save & Exit](#)

[Instructions](#)

Transfers to other plans — If this plan transferred assets or liabilities to another plan since the most recent comprehensive premium filing, provide the following information with respect to each plan to which the assets or liabilities were transferred (if transfer involved a new or newly-covered plan, see instructions).

[Clear all rows](#)

EIN (ex. 11-1111111)	PN (ex. 111)	Date of Transfer (ex. MM/DD/YYYY)	Type of transfer
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other Clear
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other Clear
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other Clear
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other Clear
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Merger <input type="radio"/> Consolidation <input type="radio"/> Spinoff <input type="radio"/> Other Clear

[Add more rows](#)

[Continue >](#) [< Back](#) [Cancel](#) [Save & Exit](#)

Comprehensive Multi Employer – Data Summary

Data Summary		Save Changes	Cancel
Note: N/A indicates that this item was not answered or is not applicable.			
Identify Filing to be Made		Edit	
Plan Year Commencement Date:	1/1/2015		
Plan Year Ending Date:	12/31/2015		
Date plan year change adopted (if any):	N/A		
Plan Type:	Multiemployer		
Filing Type:	Comprehensive		
Plan qualifies for proration:	Not Checked		
Plan size (small plan):	Yes		
Enter Plan Information		Edit	
Plan Name:	PETROL PENSION PLAN		
Plan effective date:	6/1/1972		
New or Newly Covered Plan:	Not Checked		
Adoption date:	N/A		
Date coverage began:	N/A		
Continuation Plan:	N/A		
Previous EIN / PN:	11-1111112 / 002		
Current EIN / PN:	11-1111112 / 002		
EIN/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		
Enter Filing Information		Edit	
6-digit business code:	111210		
First 6 digits of CUSIP number:	N/A		
Disaster Relief Code:	N/A		
Enter Plan Sponsor and Administrator Information		Edit	
Name of Plan Sponsor:	Randy Ram		
Name of Plan Administrator:	Susan Sam		
Plan Administrator Address:	11221 All Parklane Reston, MI 25631 US		
Name of Contact person: (for "attention" line of mailings)	Test S. Stepieton		
Phone:	456-789-4561		
Ext:	N/A		
E-mail:	N/A		
Alternative phone number for Insured Plans List on pbpc.gov:	406-555-9877		
Alternative Phone:	406-555-9877		
Ext:	N/A		
Name of Additional Plan Contact:	N/A		
Phone:	N/A		
Ext:	N/A		
E-mail:	N/A		
Calculate Total Premium Payment		Edit	
Flat-rate Premium			
Participant Count Date:	1/1/2015		
Multiemployer Flat Rate:	\$26.00		
Participant count for this plan year:			
Active:	6		
Terminated Vested:	6		
Retirees and Beneficiaries:	6		
Total Participant Count:	18		
Flat-rate Premium:	\$216.00		
Total Premium:	\$216.00		
Payments made previously for this premium payment year:	\$0.00		
Outstanding credit from the plan year immediately preceding the premium payment year:	\$0.00		
Total Premium Credit:	\$0.00		
Amount Due:	\$216.00		
Report Miscellaneous Information		Edit	
Final Filing			
Date of Event:	N/A		
Filing obligation is ceasing due to:	N/A		
Participation Freeze Date:	N/A		
Accrual Freeze			
Date:	N/A		
Nature of the accrual freeze:	N/A		
Risk Transfer Activity			
Lump sum windows:			
Persons 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		
Elected lump sum	N/A		
Annuity Purchases:			
Persons not in pay status	N/A		
Persons in pay status	N/A		
Report Transfers From Other Plans		Edit	
Transferor plan(s):	N/A		
Report Transfers To Other Plans		Edit	
Transferee plan(s):	N/A		
Payment Summary			
Payment Alternative:	N/A		
Flat-rate Premium:	\$216.00		
Premium Credit:	\$0.00		
Premium Amount Due:	\$216.00		
		Save Changes	Cancel

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, 11-1111114 / 244 -- this completes step 1 of the filing process.

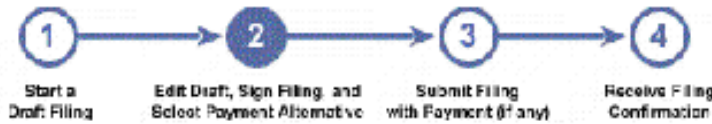
You must complete all 4 steps to finish the submission process. These steps are initiated from the Filing Manager Page.

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](#)

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



Payment Alternatives

Important: For your filing to be considered timely, you must submit both the filing information and any premium payment due by the filing due date.

You have the following payment alternatives; please select one:

- If you want PBGC to "pull" the payment from your account, select the following option (and ensure the account is not blocked):

Pay Online using My PAA

- If you want to make the payment yourself, select one of the following options which describes how you expect to pay PBGC:

Pay via Pay.gov (outside of My PAA)

Pay via Electronic Funds Transfer (outside of My PAA)

Pay using a Paper Check

Other

Back to Filing Manager Page

Back to Home Page

Premium Payment

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



Confirm Payment Alternative Selection

Payment Alternative Selected: Pay using a Paper Check

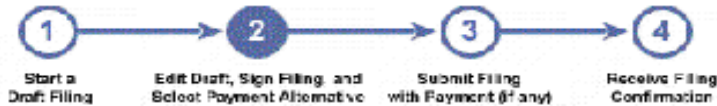
If you need to change the payment alternative selected, click the "< Back" button.

To continue with this alternative selection, click the "Next>" button.

Premium Payment

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

 [Print](#)



You selected "Pay using a paper check" as the payment alternative that you plan to use. To complete the filing process:

1. 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:

1. Click the "Display Voucher" button before leaving this page. My PAA will display the payment voucher in a printable format.
2. 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" x 11" paper.
3. Close the window that displays the voucher.
4. 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:

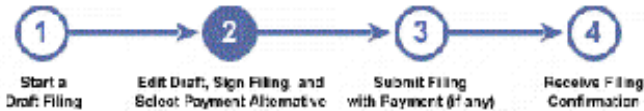
- By United States Postal Service:
Pension Benefit Guaranty Corporation
P.O. Box 105758
Atlanta, GA 30348-5758
 - By Overnight Delivery Services (e.g., FedEx, UPS, DHL):
Bank of America
1075 Inner Loop Road (2nd Floor)
Atlanta, GA 30337
ATTN: PBGC Box 105758
- Phone: 404-209-6322

[Display Voucher](#)

[Approve](#) | [< Back](#) | [Cancel](#)

Step 2: Edit Draft, Sign Filing, and Select Payment Alternative

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



Filing Manager

This Filing Has NOT 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 does not contain all the required information. To see details, click the View button.	Delete Filing
Sign	Sign as Plan Administrator or PA Representative No Actuary Signature Required	
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.
- The task list must indicate that the filing contains all required information.
- Each required signature/authorization on the task list must be completed.

Filing Team

[Instructions](#)

The filing coordinator can change permissions from the [plan page](#)

Name	Permissions	Phone	E-mail	
James E Test	View Account History, Paying Agent, Preparer, Actuary, Plan Administrator	111-111-1111	james@test.com	Route To
Nova Test	Filing Coordinator, View Account History, Plan Administrator, Preparer, Paying Agent, Actuary	202-346-4000	snowden.renita@pbgc.gov	Holding
Jessica Test	View Account History, Plan Administrator, Preparer, Actuary, Paying Agent	111-111-1111	jessica@test.com	Route To

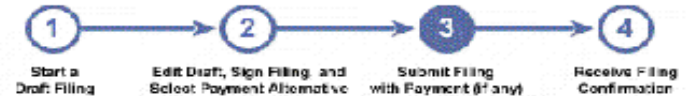


v.14.2.0.15.01

[My Home Page](#) | [My Account](#) | [Logout](#) | [My PAA Users Manual \(PDF\)](#)

Step 3: Submit Filing (with payment, if due)

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



Filing Manager
This Filing Has NOT Been Submitted
[Go to Plan Page](#)

Filing Status

Filing is: ready for submission (refer to 'To submit this filing' below)

Submit Now
Submit Later

Note: Click the "submit now" button only once or you may encounter an error.

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 common mistakes, click the View button.	Delete Filing
	<input checked="" type="checkbox"/> Plan Administrator or PA Representative e-signature completed 11:15 AM, 10/15/2014 Eastern Time No Actuary Signature Required	
Bill E-Payment	<input checked="" type="checkbox"/> Authorization for payment alternative completed Payment alternative selected: Paper Check 11:13 AM, 10/15/2014 Eastern Time	

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.
- The task list must indicate that the filing contains all required information.
- Each required signature/authorization on the task list must be completed.

Filing Team [» Instructions](#)

The filing coordinator can change permissions from the [plan page](#)

Name	Permissions	Phone	E-mail
James E Test	View Account History, Paying Agent, Preparer, Actuary, Plan Administrator	111-111-1111	james@test.com Route To
Nova Test	Filing Coordinator, View Account History, Plan Administrator, Preparer, Paying Agent, Actuary	202-346-4000	snowden.renita@pbgc.gov Holding
Jessica Test	View Account History, Plan Administrator, Preparer, Actuary, Paying Agent	111-111-1111	jessica@test.com Route To

[PBGC.gov](#) | [Privacy Act Notice](#) | [Paperwork Reduction Act Notice](#) | [Contact Us](#) | [About Online Premium Filing](#)

Submit Confirmation

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.

Step 4: Confirmation of Premium Filing Submission

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



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 Software-Prepared Filing(s)

Select the electronic file you created with your private-sector software that contains one or more premium filings to be imported into the My PAA editing screens for routing, editing (if necessary), signature, and submission to PBGC. Please note that if the electronic file includes filing information for the EIN/PN and Plan Year of a filing currently in progress in the My PAA data entry and editing screens, including a filing that has been scheduled for a future submission, that filing will be overwritten with the one from the electronic file.

Note: The file must be in a PBGC-defined XML format. [What does this mean?](#)

Select File:

Import Software-Prepared Filing

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.

[Go to My PAA Home Page](#)

Home Page
[How to Use My PAA](#)

Add a Plan to your Account [» Instructions](#)

There must be at least one plan in your account to e-file.

In-Process Filings [» Instructions](#)

Only for filings created using My PAA data entry screens and imported filings. [» Where's my filing?](#)

Filing	Last Routed	Plan Name (EIN/PN)	Held By	<input type="button" value="Clear Sort"/>
2014 Comprehensive		Admin (11-1111111/ 222)	Nova Test	<input type="button" value="View/Manage Filing"/>

Create Filing In My PAA Data Entry & Editing Screens (for any plan in your account)

Plans in Your Account [» Instructions](#)

Plan Name (EIN/PN)			
Admin (11-1111111/ 222)	<input type="button" value="Go to Plan Page"/>	<input type="button" value="Initiate Practitioner"/>	<input type="button" value="Create Filing"/>
Admin (11-1111114/ 244)	<input type="button" value="Go to Plan Page"/>	<input type="button" value="Initiate Practitioner"/>	<input type="button" value="Create Filing"/>

Import Software-Prepared Filing(s) into My PAA Editing Screens [» Instructions](#)

Transfer filing data into My PAA editing screens for review and submission for any plan(s) in your account.

Upload Software-Prepared Filing(s) [» Instructions](#)

Submit fully-completed filing(s) for any plan(s) once you have at least one plan in your account. After the file is uploaded, click the link (if shown) under "Conf. ID/ Receipt" to view the receipt(s) showing data submitted for each filing. View this section's Instructions for details.

You have not uploaded any software-prepared filings.

Helpful Links

» About Online Premium Filing	» Complete Filing Instructions
» My PAA Users Manual (PDF)	» Filing Due Dates for Current Plan Year
» Blank Paper Check Voucher (for printing)	» Submit a Premium Filing Question

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PBGC My PAA [My Home Page](#) | [My Account](#) | [Logout](#) | [My PAA Users Manual \(PDF\)](#)

Step 2: Edit Draft, Sign Filing, and Select Payment Alternative

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-1111111 / 222

Filing Manager [Go to Plan Page](#)

This Filing Has NOT Been Submitted

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 does not contain all the required information. To see details, click the View button.	Delete Filing
Sign	Sign as Plan Administrator or PA Representative	
Sign	Sign 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:

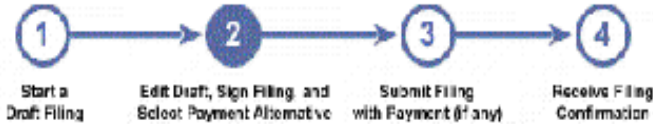
- You must be holding the filing and must have the Plan Administrator, PA Representative or Filing Coordinator permission.
- The task list must indicate that the filing contains all required information.
- Each required signature/authorization on the task list must be completed.

Filing Team [Instructions](#)

The filing coordinator can change permissions from the [plan page](#)

Name	Permissions	Phone	E-mail	
James E Test	Plan Administrator, View Account History, Preparer, Actuary, Paying Agent	111-111-1111	james@test.com	Route To
Jessica Test	Actuary, Paying Agent, View Account History, Plan Administrator, Preparer	111-111-1111	jessica@test.com	Route To
Nova Test	Actuary, Paying Agent, Filing Coordinator, Preparer, Plan Administrator, View Account History	202-346-4000	snowden.renita@pbgc.gov	Holding

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-1111111 / 222



Payment Alternatives

Important: For your filing to be considered timely, you must submit both the filing information and any premium payment due by the filing due date.

You have the following payment alternatives; please select one:

- If you want PBGC to "pull" the payment from your account, select the following option (and ensure the account is not blocked):

Pay Online using My PAA

- If you want to make the payment yourself, select one of the following options which describes how you expect to pay PBGC:

Pay via Pay.gov (outside of My PAA)

Pay via Electronic Funds Transfer (outside of My PAA)

Pay using a Paper Check

Other

Back to Filing Manager Page

Back to Home Page

Approve Payment for Comprehensive Filing

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-1111111 / 222



Note: My PAA has recalculated the filing based on the imported data.

Authorize E-Payment

Flat-rate Premium:	\$168.00	Instructions
Variable-rate Premium:	\$80.00	
Premium Credit:	\$0.00	
Premium Amount Due:	\$276.00	
Payment Amount:	\$ <input type="text" value="276.00"/> ex 1,111.10	

Payment Amount must be at least equal to the Premium Amount Due.

I wish to pay using the following method (select one):

Required fields for each payment method are marked with an asterisk. Please ensure that your account will allow PBGC to "pull" funds from it (i.e., that your account is not blocked).

Automated Clearing House (ACH) [Instructions](#)

*Bank Routing Code: @ digits

*Bank Account Number:

*Account Type:

*Account Holder Name:
(as it appears on the account)

*Bank Name:

I authorize to have my bank account electronically debited for the Payment Amount.

Electronic Check [Instructions](#)

*Check Number:

*Bank Routing Code: @ digits

*Bank Account Number:

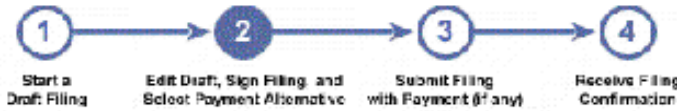
*Account Holder Name:
(as it appears on the account)

*Bank Name:

I authorize to have my bank account electronically debited for the Payment Amount.

Premium Payment

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-1111111 / 222



Confirm Premium Payment Information

Payment Summary

[Edit](#)

Below is the payment information you are submitting. If you need to make changes to this information, click the "Edit" button.

Payment Alternative:	Paid online via My PAA
Flat-rate Premium:	\$196.00
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)
Bank Routing Code:	*****1633
Bank Account Number:	*****80
Account Type:	Checking Account
Account Holder Name:	Account Holder
Bank Name:	Bank of A

As an added security precaution, enter below the answer to your Secret Question.

I understand that under the Government Paperwork Elimination Act ("GPEA") (Title XVII of Public Law No. 105-277), my answer to my secret question will be deemed the equivalent of my handwritten signature and as binding under 18 U.S.C. 1001 (dealing with false statements) as an inked signature.

Secret Question: In what city were you born?

* Secret Answer:

[Authorize Payment](#)

[Cancel](#)

Step 3: Submit Filing (with payment, if due)

Comprehensive Filing for Plan Year Commencing 1/1/2014
Admin - 11-11111111 / 222



Filing Manager

This Filing Has **NOT** Been Submitted

[Go to Plan Page](#)

Filing Status

Filing is: ready for submission (refer to 'To submit this filing' below)

[Submit Now](#)

[Submit Later](#)

Note: Click the "submit now" button only once or you may encounter an error.

Filing Task List

[Instructions](#)

View/Edit Filing	<input checked="" type="checkbox"/> This filing contains all the required information.	Delete Filing
	<input checked="" type="checkbox"/> Plan Administrator or PA Representative e-signature completed 11:54 AM, 10/15/2014 Eastern Time	
	<input checked="" type="checkbox"/> Enrolled Actuary e-signature completed 11:54 AM, 10/15/2014 Eastern Time	
	<input checked="" type="checkbox"/> Authorization for payment alternative completed	
Bill E-Payment	<input checked="" type="checkbox"/> Payment alternative selected: Paper Check 11:54 AM, 10/15/2014 Eastern Time	

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.
- The task list must indicate that the filing contains all required information.
- Each required signature/authorization on the task list must be completed.

Filing Team

[Instructions](#)

The filing coordinator can change permissions from the [plan page](#)

Name	Permissions	Phone	E-mail	
James E Test	Plan Administrator, View Account History, Preparer, Actuary, Paying Agent	111-111-1111	james@test.com	Route To
Jessica Test	Actuary, Paying Agent, View Account History, Plan Administrator, Preparer	111-111-1111	jessica@test.com	Route To
Nova Test	Actuary, Paying Agent, Filing Coordinator, Preparer, Plan Administrator, View Account History	202-346-4000	snowden.renita@pbgc.gov	Holding

Submit Confirmation

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.

Step 4: Confirmation of Premium Filing Submission

Comprehensive Filing for Plan Year Commencing 1/1/2014

Admin - 11-1111111 / 222



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](#)

Upload Software-Prepared Filing(s)



Select the file you created with your private-sector software that contains the premium filing to be submitted.

Note: The file must be in a PBGC-defined XML format. [What does this mean?](#)

Select File:

The file you upload can contain one or more premium filings for one or more plans. Select one of the following statements about the file you selected above:

- This file contains one premium filing.
- This file contains more than one premium filing.

Enter Comments (optional)

Enter any comments that will help you to identify this filing, e.g., plan name. You will be able to access these comments from the list of uploaded filings on your Home Page. This field is provided for your convenience; it is not intended for correspondence with PBGC. (Maximum number of characters: 1,000)

Indicate E-mail Preference

- I would like to receive an e-mail confirmation when the e-filing process is complete.

Note: The e-mail will be sent to the address on record for you in My PAA. (To view this e-mail address and make any necessary changes, click the "My Account" link at the top of the page.) Whether or not this box is checked, a confirmation screen will be provided for all fully completed transactions, and you can print the confirmation screen for your records.

Filing Certification



Filing Summary

Listed below is information you entered regarding the file you selected to submit to PBGC. If any of this information is not correct, click the "Edit" button. If this information is correct and you are ready to submit the filing, click the "Submit" button.

File Name: 4074874.xml
of Filings: This file contains one premium filing.
Comments:
E-mail Confirmation: You opted to not receive an e-mail confirmation

Edit

Certification of Filing

[Certification Rules](#)

To upload a file containing one or more premium filings, you must place a check in the checkbox to indicate that you understand the certification you are making, enter your Secret Answer, and click the "Certify Filing(s) and Submit" button.

- For each premium filing in the file I am uploading, I certify under penalty of perjury, to the best of my knowledge and belief, that I am authorized to submit the premium filing to the PBGC and:

If I am the enrolled actuary, that the variable-rate premium information in the filing is true, correct and complete and has been determined in accordance with the PBGC's premium regulations and instructions, except that if the filing reports an estimated premium funding target, the estimate is reasonable, takes into account the most current information available to me, and has been determined in accordance with generally accepted actuarial principles and practices; or

If I am the Plan Administrator, that all the information in the filing is true, correct and complete and has been determined in accordance with the PBGC's premium regulations and instructions, except that if the filing reports an estimated premium funding target, the estimate is reasonable, takes into account the most current information available to the enrolled actuary, and has been determined in accordance with generally accepted actuarial principles and practices, and that if I received variable-rate premium information certified by an enrolled actuary for this filing, the variable-rate premium information in the filing is the same as the variable-rate premium information certified by the enrolled actuary.

As an extra security precaution, enter below the answer to your Secret Question before clicking the "Certify Filing(s) and Submit" button.

I understand that under the Government Paperwork Elimination Act ("GPEA") (Title XVII of Public Law No. 105-277), my answer to my secret question will be deemed the equivalent of my handwritten signature and as binding under 18 U.S.C. 1001 (dealing with false statements) as an inked signature.

Secret Question: In what city were you born?

* Secret Answer:

Certify Filing(s) and Submit

< Back

Cancel



Payment Alternatives

You have uploaded an XML file that contains your filing information. You must still select one of the payment alternatives below to complete the e-filing process.

Important: A complete premium filing has two parts:

- (1) The information you just uploaded in your XML file, and
- (2) The payment of any premium due.

For your filing to be considered timely, you must submit both of these items by the filing due date.

- If you want PBGC to "pull" the payment from your account, select the following option (and ensure the account is not blocked):

Pay Online using My PAA

- If you want to make the payment yourself, select one of the following options which describes how you expect to pay PBGC:

Pay via Pay.gov (outside of My PAA)

Pay via Electronic Funds Transfer (outside of My PAA)

Pay using a Paper Check

- Other:

No Payment Due

Other

Back to Home Page

Selected Payment Method: Other

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PBGC My PAA [My Home Page](#) | [My Account](#) | [Logout](#) | [My PAA Users Manual \(PDF\)](#)


Premium Payment


Confirm Payment Alternative Selection
Payment Alternative Selected: Other


If you need to change the payment alternative selected, click the "< Back" button.
To submit your payment alternative selection to PBGC, click the "Submit" button.


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 v.14.2.0.15.01
[My Home Page](#) | [My Account](#) | [Logout](#) | [My PAA Users Manual \(PDF\)](#)


1
Upload Filing(s)


2
Select Premium Payment Alternative for Single Filings


3
Receive Confirmation of Filing(s) and Payment (if any)

 [Print](#)

Your Confirmation ID for this transaction is 4091993.
You have submitted your filing information online to PBGC and selected "Other" as the payment alternative. A summary of the filing information is provided below. Thank you for using My PAA.

File Summary

Date/Time Received:	10/15/2014, 12:54 PM, Eastern Time
File Name:	4074874.xml
# of Filings:	This file contains one premium filing.
Comments:	
E-mail Confirmation:	You opted to not receive an e-mail confirmation

Click the "Return to Home Page" button. Your Home Page will be displayed and the file you uploaded (including the confirmation ID) will now be listed there in the section labeled "Uploaded Software-Prepared Filings."

Note: My PAA includes some features that you can take advantage of for each plan for which you are responsible for submitting a premium filing. To use these features, a plan must be included in your account. [What does this mean?](#)

[Return to Home Page](#)



Home Page

[How to Use My PAA](#)

Add a Plan to your Account

[» Instructions](#)

There must be at least one plan in your account to e-file.

[Add a Plan as Filing Coordinator](#)

In-Process Filings

[» Instructions](#)

Only for filings created using My PAA data entry screens and imported filings.

[» Where's my filing?](#)

There are no filings in your Inbox.

Create Filing In My PAA Data Entry & Editing Screens (for any plan in your account)

Plans in Your Account

[» Instructions](#)

[Search by Plan Name OR EIN](#)
[Clear Search](#)

Plan Name (EIN/PN)

Admin (11-1111111/222)	Go to Plan Page	Initiate a Practitioner	Create Filing
Admin (11-1111114/244)	Go to Plan Page	Initiate a Practitioner	Create Filing

Import Software-Prepared Filing(s) into My PAA Editing Screens

[» Instructions](#)

Transfer filing data into My PAA editing screens for review and submission for any plan(s) in your account.

[Import Filing\(s\)](#)

Upload Software-Prepared Filing(s)

[» Instructions](#)

Submit fully-completed filing(s) for any plan(s) once you have at least one plan in your account. After the file is uploaded, click the link (if shown) under "Conf. ID/ Receipt" to view the receipt(s) showing data submitted for each filing. View this section's Instructions for details.

[Upload Filing\(s\)](#)

File Name	Conf. ID/Receipt	Received	Filing Status	Payment Status
4074874.xml	4091993	10/15/2014 12:56:13 PM	Completed	Other
Comments:				

Helpful Links

- [» About Online Premium Filing](#) - [Complete Filing Instructions](#)
- [» My PAA Users Manual \(PDF\)](#) - [Filing Due Dates for Current Plan Year](#)
- [» Blank Paper Check Voucher \(for printing\)](#) - [Submit a Premium Filing Question](#)

Uploaded file details



V. 12.5.0.13

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Uploaded Software-Prepared Filing Details

Below are the filings submitted within the File Name shown. Click each link shown to view the receipt showing data submitted on the plan's filing.

[Back to Home Page](#)

File Name: Bethtest.xml

Confirmation ID: 856250

[View uploaded filing receipts](#)

Filing	Plan Name (EIN/PN)	Uploaded ID
2012 Comprehensive	Test Plan Name Test Plan Name Test Plan Name (111222333/111)	856250

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