PBGC My PAA

Webcast
E-Filing 2009 Comprehensive Premium Filing to PBGC via My Plan Administration Account (My PAA)

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Practitioner Problem Resolution Officer
(with Shirley Jones & Jena Higgins)
September 2009

Premium E-Filing to PBGC via My PAA

- **Objective:** To review the My PAA e-filing methods, particularly the data entry and editing screens used for creating and submitting a Comprehensive Filing.

- **Will Briefly Describe Getting Started:**
  - Review My PAA & premium information on our Web site.
  - Set up account (user ID, password, secret Q/A).
  - Identify Filing Coordinator (who will add the plan and create/update the plan's e-filing team as needed).

- **Will Briefly Describe E-Filing and E-Payment Options:**
  - Use My PAA's Data Entry and Editing Screens.
  - Use Compatible Software and then Import or Upload File.
  - Pay Within My PAA or Outside My PAA.

How to Learn About My PAA

- **Go to** www.pbgc.gov **and click on the Practitioners Tab** to see links to My PAA, premium instructions & other info.

- **Review "Online Premium Filing (My PAA)" Page** to see links to e-filing and e-payment options, online demos (including today's Webcast), FAQs, Tips, detailed users manual & much more.

- **Sign up for monthly e-mail filing reminders** to help you remember to file by filing due dates**.**

- **Sign up for "what's new for practitioner" e-mail alerts** to keep current on filing requirements and regulatory developments.

- **Sign up for monthly interest rates** to keep current on updates to interest rates.

How To Get Started in My PAA

- Sign up for a My PAA account via the “Online Premium Filing (My PAA)” Page as soon as you know you will be involved with e-filing. You only need one account for all plans/activities.
- Consider how your company functions, actuary & sponsor preferences, and each person’s willingness to participate.
- Agree upon the most appropriate e-filing & payment methods to be used for each sponsor/plan.
- Identify each plan’s e-filing team members, confirm each person’s role, & verify that each has signed up for an account.
- Identify the Filing Coordinator who will:
  - Add plans as needed (must have at least one plan in account).
  - Set up e-filing team as needed by “inviting practitioners” and “setting permissions”.

E-Filing Options

- **Upload:** if use compatible software & each person is not willing to set up a My PAA account:
  - Only uploader must have an account with one plan in account.
  - Filing(s) must be complete when uploaded (& must be certified).
  - Only uploader sees confirmation -- submitted data not visible.

- **Import:** if use compatible software & each person will set up a My PAA account (with that plan in account):
  - Complete, e-sign & submit filing using My PAA.
  - Receipt with confirmation & submitted filing data on Plan Page.

- **Use My PAA's data entry/editing screens:** if each person will set up a My PAA account (with that plan in account):
  - Create, complete, e-sign & submit filing using My PAA.
  - Receipt with confirmation & submitted filing data on Plan Page.

E-Payment Options

- **Pay Within My PAA:** You select ACH, Internet Check, or Credit Card and provide your account information (for uploads – applies only to single filings).

- **Pay Outside My PAA:** You must initiate an ACH, Fedwire, or Paper Check payment to PBGC (include EIN/PN and Plan Year Commencement date).

- **Use vouchers for paper checks** (helpful but not required):
  - Print when offered during the payment process.
  - Print blank voucher from your Home Page (link at bottom of the page) or from Online Premium Filing (My PAA) Page.

- **Payment must still be timely.**

Home Page

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

Fiona Filer's Inbox (filings requiring your input)

Instructions

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

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)			
Pension Plan for Employees of XYZ Inc. (80-1234567 / 001)	Go to Plan Page	Invite a Practitioner	Create Filing

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

Instructions

Import filing(s) for any plan(s) in your account

Import Filing(s)

Upload Software-Prepared Filing(s)

Instructions

Upload filing(s) for any plan(s) once you have at least one plan in your account.

Upload Filing(s)

You have not uploaded any software-prepared filings.

Helpful Links

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

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 regardless of filing type (i.e., estimated or final).

Note: The file must be in a PBGC-defined XML format. What does this mean?

Select File: [ ] Browse...

Import | Cancel

Upload Software-Prepared Filing(s)

1 Upload Filing(s) → 2 Select Premium Payment Alternative for Single Filings → 3 Receive Confirmation of Filing(s) and Payment (if any)

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: [ ] Browse...

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, type of filing (Estimated or Final). 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.

Next > | Cancel

How to File

Online filing with My PAA is a 3-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)

Identify Filing Type

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

Select one

*Estimated Flat-Rate filings may only be created up until the due date of the comprehensive/final filing for the plan year.

Continue | Cancel

PBGC My PAA

My Home Page | My Account | Logout | My PAA Users Manual (PDF)

How to File

Online filing with My PAA is a 3-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)

Identify Filing Type

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

Select one

- Select one
- Comprehensive Premium Filing (2008 and later)
- Estimated Flat-rate Premium Filing*
- Final Premium Filing (2004 – 2007)

*Estimated Flat-Rate filings nprehensive/final filing for the plan year.

Continue Cancel

PBGC.gov | Privacy Act Notice | Paperwork Reduction Act Notice | Contact Us | About Online Premium Filing

Step 1: Start a Draft Filing

Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

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.

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

Identify Filing to be Made

Continue > | Cancel

Instructions

Premium is for plan year commencing: 01/01/2009 (ex. MM/DD/YYYY)

Premium is for plan year ending: 12/31/2009 (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 (based on prior year participant count):

○ Small (fewer than 100)   ● Large (500 or more)

○ Mid-size (100-499)   ○ N/A; first year's filing

Continue > | Cancel

PBGC My PAA

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Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

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

Enter Plan and Filing Information

Continue > | < Back | Cancel

Instructions

Plan name: Pension Plan for Employees of XYZ Inc.

Instructions

Previous filing EIN: 80-1234567 **Previous filing PN:** 001

Current EIN: 80-1234567 (ex. 11-1111111) **Current PN:** 001 (ex. 111)

Form 5500 EIN and PN Information:

If the EIN and PN are not both the same as on the 2008 Form 5500, enter EIN and PN from 2008 Form 5500 and provide explanation:

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

Character Limit 256

Business Code Lookup

6-digit business code: 111100 (ex. 111111)

Instructions

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

Instructions

Disaster Relief (enter code): (ex. XX-XX)

(For Disaster Relief Announcements, click here)

Is this plan exempt from the Variable-rate Premium?

Instructions

- (•) No
- ( ) Yes, because the plan has no vested participants
- ( ) Yes, because the plan is a 412(e)(3) plan
- ( ) Yes, because the plan is undergoing a standard plan termination with a proposed termination date of:
  (ex. MM/DD/YYYY)

Continue > | < Back | Cancel

Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

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

Enter Plan Sponsor and Administrator Information

Continue > | < Back | Cancel

Plan Sponsor Information

Instructions

Name: Big Company Sponsor and Trust
Address: 123 Main Street
Suite 23
City: Washington   State: DC   Zip: 20005 (ex. 11111 or 11111-1111)
Country: UNITED STATES OF AMERICA

Plan Administrator Information

Instructions

☑ Check if same as Plan Sponsor   To make changes to the Plan Administrator information, remove the check mark.

Name: Big Company Sponsor and Trust
Address: 123 Main Street
Suite 23
City: Washington   State: DC   Zip: 20005 (ex. 11111 or 11111-1111)
Country: UNITED STATES OF AMERICA

Plan Contact Information

Instructions

Contact Name: Connie Contact
Phone: 202-326-4000 (ex. 111-111-1111)   Ext: (ex. 111111)
E-mail: connie.contact@emailaddress.com (ex. aa@a.com)

Continue > | < Back | Cancel

Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

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

Calculate Premium Due

Continue > | < Back | Cancel | Save & Exit

Flat-rate Premium

Instructions

Participant Count Date:		1/1/2009	(ex. MM/DD/YYYY)
Single-employer Flat-rate:		$34.00	
Participant Count as of Participant Count Date:	x	562	(ex. 1,111,111)
Flat-rate Premium:	=	$19,108.00	Calculate

Variable-rate Premium

Alternative Premium Funding Target Election — Instructions

☐ Check box to indicate that the plan is electing to use the alternative premium funding target instead of the standard premium funding target, effective beginning with this premium payment year and for all subsequent plan years unless and until it is subsequently revoked.

Note that an election cannot be revoked for any plan year that begins less than five calendar years after the date the premium payment year reported in the filing begins. If an election is currently in effect, do not make an election again.

VRP cap qualification — Instructions

If this plan qualifies for the VRP 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

Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

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

Calculate Variable-rate Premium

Continue > | < Back | Cancel | Save & Exit

Instructions

UVB valuation date: 1/1/2009 (ex. MM/DD/YYYY)

Premium Funding Target Information

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

Premium funding target method: ◉ Standard ○ Alternative

Discount rates

◉ Segment rates ○ N/A, full yield curve used

1st segment: 3.2 % (ex. 1.11)

2nd segment: 3.3 % (ex. 1.11)

3rd segment: 3.4 % (ex. 1.11)

Premium funding target as of UVB valuation date: $ 9,999,999 (ex. 1,111)

Market value of assets as of UVB valuation date: $ 888,888 (ex. 1,111)

Unfunded Vested Benefits before rounding up to the next $1,000: $9,111,111

Unfunded Vested Benefits rounded to the next $1,000: $9,112,000 Calculate

Continue > | < Back | Cancel | Save & Exit

Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

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

Variable-rate Premium Due

Continue > | < Back | Cancel | Save & Exit

Instructions

Variable-rate premium: $82,008.00

Continue > | < Back | Cancel | Save & Exit

Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

1 → 2 → 3

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

Calculate Total Premium Payment

Continue > | < Back | Cancel | Save & Exit

Instructions

Flat-rate Premium:		$19,108.00
Variable-rate Premium:	+	$82,008.00
Total Premium:	=	$101,116.00
Premium credit (including any payments already made for this premium payment year and any overpayment from the prior plan year unless refund was requested):	–	$ (ex. 1,111,111.11)
Amount Due:	=	$101,116.00 Calculate

Continue > | < Back | Cancel | Save & Exit

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Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

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

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
- Distribution pursuant to termination
- Trusteeship
- Cessation of covered status

New and Newly Covered Plans

If this filing is for a new plan or a newly-covered plan, report the:

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

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

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

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

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)

Character Limit 4,000

Continue > | < Back | Cancel | Save & Exit

Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

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

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	
			○ Merger ○ Consolidation ○ Spinoff ○ Other	Clear
			○ Merger ○ Consolidation ○ Spinoff ○ Other	Clear
			○ Merger ○ Consolidation ○ Spinoff ○ Other	Clear
			○ Merger ○ Consolidation ○ Spinoff ○ Other	Clear
			○ Merger ○ Consolidation ○ Spinoff ○ Other	Clear

Add more rows

Continue > | < Back | Cancel | Save & Exit

Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

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

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	
			○ Merger ○ Consolidation ○ Spinoff ○ Other	Clear
			○ Merger ○ Consolidation ○ Spinoff ○ Other	Clear
			○ Merger ○ Consolidation ○ Spinoff ○ Other	Clear
			○ Merger ○ Consolidation ○ Spinoff ○ Other	Clear
			○ Merger ○ Consolidation ○ Spinoff ○ Other	Clear

Add more rows

Continue > | < Back | Cancel | Save & Exit

Step 1: Start a Draft Filing

Comprehensive Filing for Plan Year Commencing 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

Print

1 → 2 → 3

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

Save Filing and Proceed to Step 2

Continue > | Cancel

Please verify that all information is correct. To change information, click 'Edit'. If you are satisfied and do not need to make any changes, click 'Continue'.
Note: N/A indicates that this item was not answered or is not applicable.

Identify Filing to be Made	Edit
Plan Year Commencement Date:	1/1/2009
Plan Year Ending Date:	12/31/2009
Date plan year change adopted (if any):	N/A
Plan Type:	Single-employer
Filing Type:	Comprehensive
Plan qualifies for proration:	Not Checked
Plan size (based on prior year participant count):	Large (500 or more)

Enter Plan and Filing Information	Edit
Plan Name:	Pension Plan for Employees of XYZ Inc.
Previous EIN / PN:	80-1234567 / 001
Current EIN / PN:	80-1234567 / 001
EIN/PN from 2008 Form 5500 (if different):	N/A
Explanation as to why EIN/PN does not match entry on 2008 Form 5500:	N/A
6-digit business code:	111100
First 6 digits of CUSIP number:	N/A
Disaster Relief Code:	N/A
Variable-rate Exempt:	No
Reason for Exemption:	N/A

Enter Plan Sponsor and Administrator Information   Edit

Name of Plan Sponsor:	Big Company Sponsor and Trust
Plan Sponsor Address:	123 Main Street Suite 23 Washington, DC 20005 US
Name of Plan Administrator:	Big Company Sponsor and Trust
Plan Administrator Address:	123 Main Street Suite 23 Washington, DC 20005 US
Name of Plan Contact:	Connie Contact
Phone:	202-326-4000
Ext:	N/A
E-mail:	connie.contact@emailaddress.com

Calculate Premium Due   Edit

Flat-rate Premium

Participant Count Date:	1/1/2009
Single-employer Flat Rate:	$34.00
Participant Count for this Plan Year:	562
Flat-rate Premium:	$19,108.00

Variable-rate Premium

Alternative premium funding target election:	Not Checked
Plan qualifies for the small-employer VRP cap and is reporting UVBs:	Not Checked
Plan qualifies for the small-employer VRP cap and is not reporting UVBs:	Not Checked

Calculate Variable-rate Premium   Edit

UVB Valuation Date:	1/1/2009
Premium Funding Target Information	
Premium funding target is an estimate:	Not Checked
Premium funding target method:	N/A
Discount Rates:	Segment rates
Segment Rates:	
1st Segment:	3.20%
2nd Segment:	3.30%
3rd Segment:	3.40%
Premium funding target:	$9,999,999.00
Market value of assets:	$888,888.00
Unfunded Vested Benefits before rounding:	$9,111,111.00
Unfunded Vested benefits rounded to the next $1,000:	$9,112,000.00

Variable-rate Premium Due	Edit
Variable-rate Premium:	$82,008.00

Calculate Total Premium Payment	Edit
Flat-rate Premium:	$19,108.00
Variable-rate Premium:	$82,008.00
Total Premium:	$101,116.00
Premium Credit:	N/A
Amount Due:	$101,116.00

Report Miscellaneous Information	Edit
Final Filing	
Date of Event:	N/A
Filing obligation is ceasing due to:	N/A
New and Newly Covered Plans	
Plan effective date:	N/A
Plan adoption date:	N/A
Plan coverage date:	N/A
Participation Freeze Date:	N/A
Accrual Freeze	
Date:	N/A
Nature of the accrual freeze:	N/A

Report Transfers From Other Plans	Edit
Transferor plan(s):	N/A

Report Transfers To Other Plans	Edit
Transferee plan(s):	N/A

Continue > Cancel

Draft Filing Saved but not Submitted

You have completed step 1 of the 3 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 Pension Plan for Employees of XYZ Inc., 80-1234567 / 001 -- this completes step 1 of the filing process.

You must complete step 2 (edit, sign, and select payment alternative) and step 3 (submit filing and payment) 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

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

Comprehensive Filing for Plan Year Commencing 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

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

Filing Manager

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.**	Delete Filing
Sign	Sign as Plan Administrator	
	Route for Actuary Signature (select from Filing Team below)	
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 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	
Fiona Filer	Preparer, Paying Agent, Plan Administrator, View Account History, Actuary, Filing Coordinator	202-326-4000	dirxxd35@dpn.dev.pbgc.gov	Holding
Eddy Actuary	Actuary, View Account History, Preparer	202-326-4000	eddy@pbgc.comx	Route To

Approval for Comprehensive Filing

Comprehensive Filing for Plan Year Commencing 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

Certification of Single-Employer Plan Administrator

Instructions

I certify under penalty of perjury, to the best of my knowledge and belief, 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.

Your Personal Information (To update this information, select the My Account link at the top of this page.)

First Name:	Fiona		
Last Name:	Filer		
Work Phone:	202-326-4000	**Ext.**	5544
Work E-mail:	DIRXXD35@DPN.DEV.PBGC.GOV		

As an extra security precaution, we ask that you enter below the answer to your secret question before clicking Approve Filing

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:** ●●●●●

Approve Filing | Cancel

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 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

Filing Manager

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.** Delete Filing

✓ **Plan Administrator e-signature completed**
9:58 AM. 8/12/2009 Eastern Time

Route for Actuary Signature (select from Filing Team below)

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:

Comprehensive Filing for Plan Year Commencing 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

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

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:

Pay Online using My PAA

Pay via Electronic Funds Transfer (outside of My PAA)

Pay using a Paper Check

PBGC My PAA

My Home Page | My Account | Logout | My PAA Users Manual (PDF)

Approve Payment for Comprehensive Filing

Comprehensive Filing for Plan Year Commencing 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

1 → 2 → 3

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

Authorize E-Payment

Flat-rate Premium:	$19,108.00	Instructions
Variable-rate Premium:	$82,008.00	
Premium Credit:	$0.00	
Premium Amount Due:	$101,116.00	
Payment Amount:	$ 101,116.00	(ex 1,111.11)

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

Note: If you are paying by credit card, the maximum Payment Amount is $96,909.00

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

Required fields for each payment method are marked with an asterisk

Automated Clearing House (ACH)

Instructions

*Bank Routing Code: 123456780 (9 digits)

*Bank Account Number: 123450

*Account Type: Checking Account

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

*Bank Name: Bank of USA

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

Electronic Check

Instructions

Bank Name:

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

◯ **Electronic Check** Instructions

*Check Number:

*Bank Routing Code: (9 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.

◯ **Credit Card**

Note: If you pay by credit card, you will be charged a credit card convenience fee of approximately 3.19% of the Payment Amount. Instructions

*Credit Card Type --Select One --

*Card Number

*Card Expiration Date: -- ----

Card Security Code:

*Name on Card:
(as it appears on the credit card)

*Billing Address

*City:

*State < select a state >

*Zip:

Internal Accounting Code
(optional)

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 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

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

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:	$19,108.00
Variable-rate Premium:	$82,008.00
Premium Credit:	N/A
Premium Amount Due:	$101,116.00
Amount Paid:	$101,116.00
Credit Card Convenience Fee:	N/A
Total Amount Paid:	$101,116.00
Method Selected:	Automated Clearing House (ACH)
Bank Routing Code:	*****6780
Bank Account Number:	****50
Account Type:	Checking Account
Account Holder Name:	James Smith
Bank Name:	Bank of USA

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

Premium Payment

Comprehensive Filing for Plan Year Commencing 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

1 → 2 → 3

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

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:	$19,108.00
Variable-rate Premium:	$82,008.00
Premium Credit:	N/A
Premium Amount Due:	$101,116.00
Amount Paid:	$101,116.00
Credit Card Convenience Fee:	N/A
Total Amount Paid:	$101,116.00
Method Selected:	Automated Clearing House (ACH)
Bank Routing Code:	*****6780
Bank Account Number:	****50
Account Type:	Checking Account
Account Holder Name:	James Smith
Bank Name:	Bank of USA

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

Comprehensive Filing for Plan Year Commencing 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

1 → 2 → 3

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

Filing Manager

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.** Delete Filing

✓ **Plan Administrator e-signature completed 11:32 AM. 8/12/2009 Eastern Time**

Route for Actuary Signature (select from Filing Team below)

Edit E-Payment ✓ **E-payment authorization completed 11:34 AM. 8/12/2009 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 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	
Fiona Filer	Preparer, Paying Agent, Plan Administrator, View Account History, Filing Coordinator	202-326-4000	dirxxd35@dpn.dev.pbgc.gov	Holding
Eddy Actuary	Actuary, View Account History, Preparer	202-326-4000	eddy@pbgc.comx	Route To

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

Comprehensive Filing for Plan Year Commencing 1/1/2009
Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

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

Filing Manager

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.**	Delete Filing
	✓ **Plan Administrator e-signature completed 11:32 AM. 8/12/2009 Eastern Time**	
	✓ **Enrolled Actuary e-signature completed 11:38 AM. 8/12/2009 Eastern Time**	
Edit E-Payment	✓ **E-payment authorization completed 11:34 AM. 8/12/2009 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 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	
Fiona Filer	Preparer, Paying Agent, Plan Administrator, View Account History, Filing Coordinator	202-326-4000	dirxxd35@dpn.dev.pbgc.gov	Holding
Eddy Actuary	Actuary, View Account History, Preparer	202-326-4000	eddy@pbgc.comx	Route To

Submit Confirmation

Are you sure you are ready to submit the 2009 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

My Home Page

Receipt for Comprehensive Premium Filing

Print

Date/Time Filing Received: 8/12/2009 11:40 AM Eastern Time

Your reference number for this transaction is **829923**

Please print this receipt for your records and refer to it for customer service inquiries regarding this transaction.

Please note that this transaction is subject to further verification and does not guarantee satisfaction of filing requirement or premium liability. If this filing is late or the premium paid insufficient, PBGC will subsequently send the Plan Administrator a Statement of Account (Premium Invoice) that shows the amount owed PBGC.

Payment Alternative:	Paid online via My PAA
Flat-rate Premium:	$19,108.00
Variable-rate Premium:	$82,008.00
Premium Credit:	N/A
Premium Amount Due:	$101,116.00
Amount Paid:	$101,116.00
Credit Card Convenience Fee:	N/A
Total Amount Paid:	$101,116.00
Method Selected:	Automated Clearing House (ACH)
Bank Routing Code:	*****6780
Bank Account Number:	***************80
Account Type:	Checking Account
Account Holder Name:	James Smith
Bank Name:	Bank of USA

Amended Filing ☐ **2009 PBGC Comprehensive Premium Filing Receipt** Disaster Relief (enter code) ____

DO NOT MAIL TO PBGC

Part I - General Plan Information

1 Plan sponsor information

a Name: Big Company Sponsor and Trust

b Address line 1: 123 Main Street

c Address line 2: Suite 23

d City: Washington **e** State: DC **f** Zip: 20005 **g** Country (if not US): ______

h Six-digit business code: 111100 **i** First six digits of CUSIP number: ________

2 Plan administrator information

a Name: Big Company Sponsor and Trust

b Address line 1: 123 Main Street

c Address line 2: Suite 23

d City: Washington **e** State: DC **f** Zip: 20005 **g** Country (if not US): ______

3 Plan information

a Plan name: Pension Plan for Employees of XYZ Inc.

b Premium payment year information:

(1) This filing is for the premium payment year commencing 01 / 01 / 2009 and ending 12/ 31/ 2009.

(2) 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 __/__/____.

(3) 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). ☐

c Employer Identification Number and Plan Number information:

(1) EIN and PN: EIN 80-1234567 PN 001

(2) If the EIN and PN are not **both** the same as on the most recent premium filing, enter EIN and PN from most recent premium filing: EIN ________ PN ___. Otherwise, skip to item 3c(3).

(3) If the EIN and PN are not **both** the same as on the 2008 Form 5500, enter EIN and PN from 2008 Form 5500 and provide explanation. Otherwise, skip to item 3d.
EIN ________ PN ___. Explanation ________________

d Plan type: ☐ Multiemployer ☑ Single-employer (including multiple-employer plans)

e Plan size (based on prior year participant count): ☐ Small (fewer than 100) ☐ Mid-size (100-499) ☑ Large (500 or more) ☐ N/A; first year's filing

4 Plan contact Name: Connie Contact Phone number: 202- 326- 4000 ext ______

E-mail address: connie.contact@emailaddress.com

Part II— Alternative Premium Funding Target Election

Single-employer plans only. Multiemployer plans – skip to Part III

5 ☐ Check box to indicate that the plan is electing to use the alternative premium funding target instead of the standard premium funding target, effective beginning with this premium payment year and for all subsequent plan years unless and until it is subsequently revoked.

Note that an election cannot be revoked for any plan year that begins less than five calendar years after the date the premium payment year reported in this filing begins. If an election is currently in effect, do not make an election again.

Part III — Premium Information

6 Flat-rate premium

a Participant count date: Month 01 Day 01 Year 2009

b Flat-rate premium calculation

(1) Applicable rate (Single-employer plans enter $34; Multiemployer plans, enter $9) $34.00

(2) Participant count as of participant count date 562

(3) Flat-rate premium (item 6b(1) x item 6b(2)) $19,108.00

7 Variable-rate premium (VRP) - Single-employer plans only (Multiemployer plans – skip to item 8)

a Exemptions — If an exemption applies, check applicable box and skip to item 8.

☐ No vested participants ☐ 412(e)(3) plan ☐ Standard termination with a proposed termination date of __/__/____

b VRP cap qualification — If this plan qualifies for the VRP cap applicable to certain plans of small employers (those with 25 or fewer employees), check box ☐. If box is checked, items 7c through 7g(1) may, but need not, be omitted.

c UVB Valuation date: Month 01 Day 01 Year 2009

d Premium funding target information — ☐ Check box if the reported premium funding target information is an estimate.

(1) Premium funding target method: ☐ Standard ☑ Alternative

(2) Discount rate(s) 1st segment 3.2% 2nd segment 3.3% 3rd segment 3.4% ☐ N/A, full yield curve used

(3) Premium funding target as of UVB valuation date $9,999,999.00

e Market value of assets as of UVB valuation date $888,888.00

f Unfunded vested benefits (excess, if any, of item 7d(3) over item 7e, rounded up to the next $1,000) $9,112,000.00

g Variable-rate premium calculation

If the plan does not qualify for the VRP cap, omit the following two items and skip to item 7g(3).

(1) Variable-rate premium before reflecting the cap (item 7f x 0.009) __________

(2) Maximum VRP ($5 x item 6b(2) x item 6b(2)) __________

(3) Variable-rate premium

If the plan does not qualify for the VRP cap, item 7f x 0.009.

If the plan qualifies for the VRP cap, the lesser of item 7g(1) and 7g(2) or, if item 7g(1) was omitted, item 7g(2). $82,008.00

8 **Premium proration (If the plan does not qualify for premium proration, skip to item 9)**

a Number of months (complete and partial) in the short plan year __________

b Total premium before reflecting proration (item 6b(3) + item 7g(3), if applicable) __________

9 **Total premium**

If the plan does not qualify for premium proration, item 6b(3) + item 7g(3), if applicable

If the plan qualifies for premium proration, item 8b x item 8a ÷ 12. $101,116.00

10 **Premium credit** (including any payments already made for this premium payment year and any overpayment from prior plan year unless refund was requested) __________

11 **Amount due** (excess, if any, of item 9 over item 10) $101,116.00

12 **Treatment of overpayment**

a Excess, if any, of item 10 over item 9 __________

b Treatment of balance (select one):

☐ Credit towards next year's premium ☐ Refund by check ☐ Refund by electronic funds transfer (preferred refund option)

If you select a refund by electronic funds transfer, complete the following information:

Type of account ☐ Checking ☐ Savings Bank routing number _________

Account number _____________ Sub-account number (if any) _____________

Part IV — Miscellaneous Information

Items that do not apply should be left blank

13 **Final filing** — If this is the last filing for this plan, enter the date of event __/__/____ and check box that best describes why filing obligation is ceasing:
☐ Merger/Consolidation ☐ Trusteeship ☐ Distribution pursuant to termination ☐ Cessation of covered status

14 **New and newly covered plans** — If this filing is for a new plan or a newly-covered plan, report the plan effective date __/__/____ , the adoption date __/__/____ and the plan coverage date __/__/____ .

15 **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 assets or liabilities were transferred (if transfer involved a new or newly-covered plan, see instructions).

EIN __________ PN _____ Date of transfer __/__/____
Type of transfer: ☐ Merger ☐ Consolidation ☐ Spinoff ☐ Other

16 **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).

EIN __________ PN _____ Date of transfer __/__/____
Type of transfer: ☐ Merger ☐ Consolidation ☐ Spinoff ☐ Other

17 **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 __/__/____ .

18 **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 check box that best describes the nature of the freeze:

☐ For all participants, both pay and service are frozen ☐ For all participants, service is frozen, pay is not

☐ For some participants, both pay and service are frozen ☐ For some participants, service is frozen, pay is not

☐ Other (enter explanation) ________________________________.

19 **Amended filing** — Complete this item only if this is an amended filing

a If either the first or last day of the premium payment year reported in this amended filing (item 3b(1)) differs from what was reported in the filing that is being amended, provide the dates that were reported in the original filing:

Date premium payment year commenced __/__/_____ Date premium payment year ended __/__/_____.

b If the EIN and PN reported in this amended filing (item 3c(1)) are not **both** the same as what was reported in the filing that is being amended, enter the EIN and PN from the original filing: EIN __________ PN ____.

c If the reason for amending the filing is other than reconciling an estimated Variable-rate Premium and the total premium reported in this amended filing (item 9) is less than the amount reported in the filing that is being amended, provide an explanation of why an amended filing is necessary: __________________________.

20 **Attachments (paper filers only)** - N/A

Part V — Certifications

21 Certification of Plan Administrator — The plan administrator must sign and complete this item.

I certify under penalty of perjury, to the best of my knowledge and belief, 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.

Name of person signing: First name Fiona Last name Filer

DIRXXD35@DPN.DEV.PBGC.GOV E-mail address	202- 326- 4000 ext 5544 Telephone
ELECTRONICALLY SIGNED Signature	08/ 12/ 2009 Date

22 Certification of Enrolled Actuary — An enrolled actuary must sign and complete this item unless the plan is a multiemployer plan, is exempt from the variable-rate premium, or is eligible for and paying the maximum VRP and not reporting the uncapped VRP.

I certify under penalty of perjury, to the best of my knowledge and belief, that the variable-rate premium information in the filing is true, correct and complete and has been determined in accordance with PBGC's premium regulations and instructions; except that if the premium funding target is estimated, 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.

Name of person signing: First name Eddy Last name Actuary

Hamilton, Berman and Berman Firm	202- 326- 4000 ext 5544 Telephone
EDDY@PBGC.COMX E-mail address	123456 Enrollment number
ELECTRONICALLY SIGNED Signature	08/ 12/ 2009 Date

Return to My PAA Home

Home Page

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

Fiona Filer's Inbox (filings requiring your input)

Instructions

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

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)			
Pension Plan for Employees of XYZ Inc. (80-1234567 / 001)	Go to Plan Page	Invite a Practitioner	Create Filing

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

Instructions

Import filing(s) for any plan(s) in your account

Import Filing(s)

Upload Software-Prepared Filing(s)

Instructions

Upload filing(s) for any plan(s) once you have at least one plan in your account.

Upload Filing(s)

You have not uploaded any software-prepared filings.

Helpful Links

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

Plan Page

Instructions

Pension Plan for Employees of XYZ Inc. - 80-1234567 / 001

Plan Sponsor:

Plan Administrator:

Plan Contact:

Note: The information displayed here is the most up-to-date information that PBGC has on record for this plan. For instructions on how to update this information (outside the premium filing process) call the PBGC Contact Center at 1-800-736-2444. TTY/TDD users may call the Federal relay service toll-free at 1-800-877-8339 and ask to be connected.

Premium Filings In Process Online

This section shows filings that are being prepared using My PAA's data entry and editing screens - prior to submission to PBGC. See section below to view submitted filings.

Create Filing

No filing currently in process

Premium Filing Practitioners

Invite a Practitioner

Name	Permissions	Phone	Email	
Fiona Filer	Preparer, Paying Agent, Plan Administrator, View Account History, Filing Coordinator	202-326-4000	DIRXXD35@DPN.DEV.PBGC.GOV	Remove
Eddy Actuary	Actuary, View Account History, Preparer	202-326-4000	EDDY@PBGC.COMX	Remove

Premium Filings Received Online By PBGC

Filing	ID	Received
2009 COMPREHENSIVE	829923	8/12/2009 11:40:11 AM
2008 COMPREHENSIVE	824812	1/23/2009 4:06:53 PM

Account History

About Account Histories

There will be a delay between when the filing is submitted and when it shows in the Account History. Due to the delay, this Account History may not include your most recent filing.

Account History

Account Management Tips

- When setting up your user ID, password, and secret question & answer, remember:
  - You can’t change the user ID or secret Q&A once set.
  - Your password is case sensitive.
  - Don’t have extra spaces or caps lock on.

- In a secure location, note your user ID, password, secret Q&A – you will need them again next year (if not before).

- Verify ahead of time (at least a few days before you need to file) that you have the correct User ID and Password by logging into My PAA.

- If you forget your user ID or password, select the links on right side of Log In Screen. If you are locked out (after three wrong tries), contact PBGC’s premium representatives.

Filing Coordinator Tips

- **To become a plan's Filing Coordinator:**
  - If there is already a Filing Coordinator, ask the person to invite you to be part of the e-filing team and assign you the Filing Coordinator permission.
  - If you are starting up the e-filing team, select the "Add a Plan as Filing Coordinator" button on your Home Page:
    - Have last premium filing information ready for entry on screen (will be verified by PBGC).
    - Be careful when entering plan name (you cannot edit the name via your Homepage).
- **If you are the plan's Filing Coordinator:**
  - Identify and assign multiple people for all roles including Filing Coordinator.
  - Periodically verify your e-filing team and permissions and make changes via Plan Page.
  - Be sure to add other Filing Coordinators before you remove yourself.

E-Filing Tips

- **Screen & Imported Filings** -- Use Filing Manager Page to complete and submit filing:
  - Only one person can work on a filing at a time so you need to route the filing to each other (via the Filing Team section).
  - You will only see “sign” and “pay” buttons (in the Filing Task List section) if you have been given those permissions.
  - Only the Filing Coordinator or Plan Administrator will see “Submit” button(s) – and only if he/she is holding a complete filing that is ready for submission (e.g., with all required signatures).

- **Uploaded Filings:**
  - Once a file is uploaded, the filing(s) in it are submitted to PBGC.
  - If you indicate that there are multiple filings, you will not see the payment option screen (all filings must be paid outside My PAA).

- **All Filings:**
  - Use filings to update names and addresses.
  - To correct a submitted fling, you must amend filing (cannot delete).
  - Be sure to receive confirmation of date/time that PBGC received your filing to verify that filing was submitted.
  - Review online Account History to confirm posting of filing/payment.

My PAA Usage Tips

- **If you don’t receive an expected e-mail**, see if your company’s spam filter is blocking it:
  - If so, request that it be unblocked & that “@pbgc.gov” be added as a “trusted site”.
  - If not, contact PBGC’s premium representatives.

- **Use only My PAA navigation buttons** (not your browser buttons) and only select buttons once (be patient).

- **Be sure to “save” your data regularly** (e.g., save draft to Filing Manager Page) so you are not “timed out” after 20 minutes of inactivity.

- **Use PBGC supported browsers** (shown in one of our My PAA Tips). We currently support Internet Explorer 6.0 and Firefox 1.5 and 2.0.

- **If you receive import or upload XML file errors**, correct errors or resolve with software vendors.

Premium Filing Reminders

- Start e-filing process early!
- Instructions (with illustrative forms) are on our Web site.
- You cannot use My PAA to:
  - Pay invoices (Statements of Account).
  - Send a payment without submitting a filing.
  - Update a name or address without submitting a filing.
- PBGC will send letters if there are data discrepancies or invoices if amounts are owed.
- If questions, send an e-mail to “premiums@pbgc.gov” or call 1-800-736-2444 & select “2” for premiums (8:00am to 5:00pm Eastern Time Mon through Fri, except holidays).

2010 Premium Filings

- **The inflation-adjusted flat premium rates** will be included in the premium instructions and communicated via “what’s new for practitioners”.
- **There will only be one set of instructions** to cover both the Comprehensive Filing and the Estimated Flat-rate Filing.
- **There will be minor changes** in the data requirements for the Estimated Flat-rate Filing for large plans to create consistency with the Comprehensive Filing (e.g., reporting premium proration and amended filing information).
- **The earliest filing due dates are for calendar year plans:**
  - Estimated Flat-rate Filing is due 03/01/2010 for large plans.
  - Comprehensive Filing is due 10/15/2010 for large and mid-size plans.
  - Comprehensive Filing is due 05/02/2011 for small plans

Premium E-Filing Benefits

- **Provides immediate confirmation of receipt** by PBGC (date/time).
- **Contributes to more accurate filings/invoices** and **speeds up refund processing.**
- **Offers online access to a plan's account history** (on Plan Page) to confirm the status of each plan year -- paid in full, underpaid, or overpaid (must have plan in account and account history permission.)
- **For My PAA screen filings and imported filings:**
  - Provides online instructions (e.g., easy access to relevant sections of each years premium instructions).
  - Provides online access to a plan's prior e-filing receipts (on Plan Page) that reflect the data that was submitted, method of payment, and date/time received.