

Guide to the census and 5500 reporting tools

Use this document for assistance in completing your annual census and 5500-SF filing.

Before getting started you will need:

Your user ID and password for the Members Retirement Program employer website.

The user ID for this part of the website starts with ASC and is followed by five numbers and/or letters (e.g., ASC00000).

If you are having trouble accessing the employer website, please contact your retirement plan account manager at (800) 526-2701.

Your 5500-SF filing credentials, user ID and PIN, as a filing signer, that you previously obtained from the Department of Labor.

If you filed your 5500 through the program website last year, your credentials are maintained on the site.

If you don't have credentials or lost the ones assigned to you, go to efast.dol.gov for assistance. You will not be able to sign and transmit your 5500 without these credentials. You will need a valid email address to obtain credentials.

There are three components to completing the annual 5500 process:

1

Complete plan questionnaire.

2

Complete participant census information.

3

After you receive your email invitation, follow the instructions to review, electronically sign and file your Annual 5500 form through the program website.

Step 2



Complete plan census information

From the main page on the employer site, select **Compliance** and then **E-Compliance**.

The screenshot shows a web interface for plan management. At the top, there are fields for Plan Name, Plan ID, Plan Type (401K), and a date (01/09/2019). There is also a Participant Search field with a 'Go' button. Below these fields is a horizontal menu with several tabs: SUMMARY, CALENDAR, ONLINE CONTRIBUTIONS, PARTICIPANTS, LOANS, PLAN ASSETS, PLAN INFORMATION, COMPLIANCE, and RESEARCH INVESTMENTS. The 'COMPLIANCE' tab is highlighted. Below the menu, there is a section titled 'Compliance Testing' with a paragraph of text explaining the process. To the right of this text are two buttons: 'E-COMPLIANCE' and 'GO TO 5500 REPORT'. Two blue lines with numbers 1 and 2 point to the 'COMPLIANCE' tab and the 'E-COMPLIANCE' button, respectively.

To complete the **Plan Questionnaire**, click **Yes** to perform compliance testing unless you have another party performing your compliance testing.

Click **Yes** to perform 5500 reporting and click **Save and Continue**.

The screenshot shows a 'Welcome to Compliance Testing' screen. The title is 'Welcome to Compliance Testing, what would you like to do?'. Below the title, there is a section for the period '01/01/2018 - 12/31/2018 | Resume Compliance Testing and Form 5500 Reporting'. There are two main options, each with a 'Learn More' link. The first option is 'Perform Compliance Testing' with a radio button selected for 'Yes, I would like to perform Compliance Testing for the 2018 plan year'. The second option is 'Perform Form 5500 Reporting' with a radio button selected for 'Yes, I would like to answer for Form 5500 Reporting questions and have Fund Company perform this service for the 2018 plan year'. At the bottom, there are two buttons: 'Save and Continue' and 'Exit'. A blue line points from the 'Save and Continue' button to the text 'Save and continue' below the screenshot. Another blue line points from the 'Yes' radio button for 'Perform Compliance Testing' to the text 'Plan questionnaire' to the right. A third blue line points from the 'Yes' radio button for 'Perform Form 5500 Reporting' to the text '5500 reporting' to the right.

On the next page, **read the terms and conditions** and click **accept** to move to the **next step**.

Test Year: 01/01/2018 thru 12/31/2

Terms & Conditions

I elect to perform Compliance Testing online and request Fund Company to prepare a Form 5500 for this plan for the applicable plan year, subject to the terms and conditions set forth by the Administration Services Agreement.

I also understand and agree to the following:

I am authorized by the Plan Sponsor to manage the Plan's relationship with Fund Company and to convey information and provide instructions and directions.

I must complete all the remaining steps under the Compliance module before Fund Company will consider the plan data and my instructions as received in good order.

I understand and acknowledge that the failure to timely complete all applicable compliance tests may result in the imposition of excise taxes by the IRS and may jeopardize the qualified status of the Plan.

I understand and acknowledge that the failure to timely file a complete and accurate Form 5500 may result in the imposition of fines and penalties.

If the plan is subject to 401(k) and/or 401(m) nondiscrimination testing, I understand that, in the event excess contributions and/or excess aggregate contributions are to be distributed, this Compliance transaction must be completed within 2 months following the applicable plan year end so that the amounts may be distributed before the excise tax deadline (2.5 months following plan year end).

I understand that Fund Company will perform compliance tests, as applicable, and prepare a Form 5500 based upon and in reliance on the information in its records and the information I provide via this Compliance transaction.

I represent that, for this Plan:

- There were no prohibited transactions by a party-in-interest.
- There was no instance of fraud or dishonesty in the administration of the Plan and
- There had not been a termination in the appointment of the Plan's accountant.

☒ I accept the terms and conditions as described above.

Save and Continue Back

For first-time users only

Terms and conditions

Accept

Save and continue

Helpful Documents ▼

- Plan Documents
- Business Codes
- Import Guide
- Contribution Limits
- User Guide

Additional information, including contribution limits, a user guide for completing the census and business codes used for the 5500 filing.

Step 2



Review plan information

- After agreeing with the terms and conditions, you will enter the **Plan Information** section and answer a series of questions about your plan. The answers to the questions on these pages will help ensure the accuracy of your 5500.
- After answering the questions on each page, you should select **Save and Continue**.
- At the end of this section, there will be a list of plan-specific items to confirm for accuracy.

Your employer identification number, plan number, business code and mailing address should be pre-populated. After that, there are a series of questions over a number of screens which must be answered. The questions and their explanations are below. If you have completed the census in the previous year, many of the questions may already be completed. Please verify that the answer is still accurate.

Plan questions

Q

A

Was there a change in sponsorship of this plan?

Click No if there were no ownership changes in the 2024 plan year. If Yes, please ensure that the program has been notified of the change. If the program has not been notified, please contact a retirement plan account manager at (800) 223-5790.

Is the employer covered by a fidelity bond?

If you have provided an answer to this question in the past, it will be completed. If not, please provide a response. If the response is Yes, you will be asked to insert the fidelity bond amount. If the answer is No, please see the Learn More link for information on why your plan most likely should be covered by a fidelity bond.

Does the plan require an Accountant’s Opinion Letter?

The answer for a large majority of plans in the program will be No. This only applies to plans that have 100 or more participants with account balances at the beginning of the plan year.

Were any participant contributions transmitted outside of the time described in Department of Labor regulation 29-CFR2510-102?

If you have made your 401(k) contributions, deducted from employees’ accounts in a timely manner, please check No. You can check the timing requirements by clicking the Learn More link.

Did the employer provide direct or indirect compensation, including gifts and entertainment, to a service provider totaling \$5,000 or more?

Generally no, as fees for services provided for your retirement plan with the Members Retirement Program are paid by the participant.

Were any plan assets maintained outside of the plan’s contract with Equitable during 2024 plan year?

Since plans in the program cannot maintain plan assets outside of the plan’s contract with Equitable, the answer should be No.

Q

Does the employer maintain another qualified plan other than this plan?*

Is the employer a member of a controlled group of corporations or businesses under common control?*

Is the employer a member of an affiliated service group?*

Is this plan pursuant to a collective bargaining agreement?*

If your plan is designated as a Safe Harbor, was a timely Safe Harbor Notice provided to eligible employees?

During 1/1/2024 – 12/31/2024 (calendar year plans), what is the percentage of company ownership outside of the plan's employee population?*

During 1/1/2024 – 12/31/2024 (calendar year plans), how many employees worked for the employer, regardless of plan participation?

Does Plan allow for match calculations on Qualified Student Loan Payments?

Did the employer close or sell any companies, subsidiaries or locations during the plan year ending in **2024**?

Was there a plan merger, spin-off, transfer or termination during the plan year ending 12/31/**2024** and assets were transferred to another plan?

Did the employer or the owners of the employer acquire any new companies during 1/1/**2024** – 12/31/**2024**?

A

Only click Yes if you sponsor another employer-sponsored retirement plan outside of the Member's Retirement Program

May only apply if you own or have ownership in another business. Contact a retirement plan account manager if you are unsure of how to answer this question.

May only apply if you own or have ownership in another business. Contact a retirement plan account manager if you are unsure of how to answer this question.

This only impacts plans that cover union employees.

This only applies if your plan has a Safe Harbor 401(k) feature.

Only applies if there is an owner of the business who is not an employee of the business.

Enter the total number of employees, regardless of whether they participated in the plan.

Generally, No. Most plan do not offer this feature. If you have added this feature to your plan, check Yes.

Generally, No. If the answer is Yes, please contact a retirement plan account manager at (800) 223-5790.

Answer No, unless you merged, transferred or terminated your plan and moved the assets to another plan.

Answer No, unless there has been an acquisition of a new company. If so, please contact a retirement plan account manager at (800) 223-5790.

Step 2

Was the plan terminated during **2024** plan year?

Answer No, unless the plan did terminate during the plan year. If Yes, has the program been informed of the plan termination? If No, please provide a letter of termination to the program so the plan's status can be updated.

Was the plan top heavy on the determination date of 12/31/**2024**?

For most program clients the answer will be yes. A plan is considered top heavy if the account balances of the key employees in the plan (generally owners) is equal or greater than 60% of the total plan account balance.

After you answer all of the questions, you should click **Save and Continue** and go to a page where you review and verify plan features for accuracy, including general plan information, employee counts and ownership, eligibility conditions, contribution rules and formulas, and test rule information. Generally, if you have completed the census before, you should be able to answer Yes to the question "Is the information correct for each of the sections?". If you are not in agreement with the information, you can click No and provide the reason for your disagreement. A retirement plan account manager will receive and review your response and be in contact with you on resolving the issue.

*Questions only asked if the plan chose **Yes** on performing compliance tests.



Update participant census information

After answering the **Plan Information** questions, you enter the **Update Census** section where you will be able to edit participant information as necessary. The census information can be updated on the grid or by selecting each individual participant's name on the grid. You can also add employees in your plan census by selecting **Additional Actions** and **Add Employee**.

Review Census Information for Accuracy and Update as Necessary

This is what we know about the employees in your plan. Review the information carefully to ensure it is accurate. [Learn More](#)

Employee Messages

| | |
|---------------|---|
| Error(s) | 0 |
| Warning(s) | 0 |
| Total: | 0 |

Total Employee Counts

| | | | | | | | |
|------------------|---|----------------------|----|-------|---|--------|---|
| Total Employees: | 8 | Employees On Census: | 11 | HCEs: | 2 | NHCEs: | 9 |
|------------------|---|----------------------|----|-------|---|--------|---|

Viewable Columns: Compensation and Hours

Additional Actions

Find Employee: Enter Last Name or SSN

Expand Grid

Save To File

| Employee Name | SSN | Limitation Compensation | Limitation Compensation | Plan Year Compensation | Hours | Hours | On |
|---------------|-------------|-------------------------|-------------------------|------------------------|----------|----------|----|
| | XXX-XX-5351 | | \$37,138.12 | \$37,138.12 | 533.00 | 320.00 | |
| | XXX-XX-5757 | | \$150,000.00 | \$150,000.00 | 2,000.00 | 2,000.00 | |
| | XXX-XX-7025 | | \$150,000.00 | \$150,000.00 | 2,000.00 | 2,000.00 | |
| | XXX-XX-4406 | | \$45,822.08 | \$45,822.08 | 1,664.00 | 1,664.00 | |
| | XXX-XX-2238 | | \$55,860.80 | \$55,860.80 | 1,664.00 | 1,664.00 | |
| | XXX-XX-7350 | | \$98,316.50 | \$98,316.50 | 1,664.00 | 1,664.00 | |
| | XXX-XX-6388 | | \$23,864.06 | \$23,864.06 | 320.00 | 320.00 | |
| | XXX-XX-8330 | | \$948.00 | \$948.00 | 24.00 | 0.00 | |

Save and Continue

Back

Important note:

When you first get to this page, there will be errors listed that will be eliminated as you enter participant demographic information. If you miss any required information, you will continue to see the error message until it is corrected.

- Go to viewable columns and select Compensation and Hours.
- Enter the participant's compensation for **2024** under the **2024** Limitation Year and **2024** Plan Year Compensation columns. See below for an explanation of when the compensation amounts can be different.
- Enter the hours the participant worked in **2024** under the **2024** Hours column.
- Enter the **2024** Ownership Percentage. If this is your first plan year with the program also enter the **2023** Ownership Percentage.
- Click Save and Continue.

Under the **2024 Limitation Year Compensation**, enter the participant's compensation for 2024. Enter the same amount or copy and paste the same amount in **2024 Plan Year Compensation**. If a participant was only eligible for part of the year, enter their full-year compensation under **Limitation Year** and their part-year salary from their plan entry date forward in the Plan Year column. For example, if a full-time participant's hire date was March 1, 2023 and your plan has a 1-year service requirement and two entry dates, they would be eligible to participate on July 1, 2024. If the participant's W-2 for 2024 was \$30,000 and their compensation from July 1, 2024 forward was \$15,000, then you would enter \$30,000 under 2024 Limitation Year Compensation and \$15,000 under 2024 Plan Year Compensation.

Step 2

Enter hours worked in the appropriate year column(s). If you have previously completed census information, that prior year information should be displayed on the table already.

If you prefer to use the individual participant census page, select the name of the participant and complete the missing information (compensation, hours, etc.) and edit any other information (dates, employee attributes, etc.) that needs to be corrected.

Review and Make Changes to the Employee Details

Personal Information

EmploymentField Definitions

Name: Lebowski, Jeffrey D.

SSN: XXX-XX-6351

Anticipated Eligibility Date: 01/01/1998

Learn More

Predecessor Hire Date:

Hire Date: 01/01/1989

Birthdate: 12/04/1949

Rehire

1 Year of Service

Status: Active

Job Classification:

Employee ID:

2022 Limitation: \$0.00

2023 Limitation:

2023 Plan Year:

Affiliate: Hollywood Star Lanes

Location: Hollywood Star Lanes

HoursField Definitions

Employee AttributesField Definitions

2022: 0

2023: 0

Highest Hours Worked: 2000

HCE

Key

Officer

Part-time Employee (Prior Year)

Seasonal

Non-Resident Alien

Part-time Employee

Long-Term Part-Time Employee

Union

Contractor/Leased

Hourly

On the next screen you will be asked to verify the highly compensated employees (HCE)/key employees in your plan. These are generally the owners of the business, however, they can also be non-owners depending on compensation. If you have any questions on who the HCEs are in your plan, please contact a retirement plan account manager. Remember, that if your spouse is also an employee in the business, they are considered an HCE/key employee as well because of family attribution rules.

Verify HCE/Key Employees

During a review of the plan, the following employees were determined to be HCE/Key employees based on the data provided. No differences were identified therefore, no action required.

Find Employee:

Enter Last Name or SSN

Save to File

| Name | SSN | Value on Census | | Suggested Value | | Details |
|------|---------|-----------------|-----|-----------------|-----|---------------------------|
| | | HCE | Key | HCE | Key | |
| | XXX-XX- | ✓ | ✓ | ✓ | ✓ | No difference identified. |

Why this is important

Having proper HCE/Key designations for your employees is critical to the accuracy of evaluating plan limits and completing non-discrimination testing.

Providing this information now will greatly reduce the likelihood of having to make costly adjustments in the future.

If there are any limits failures, they will be displayed on the screen below. If you have no action required, click **Save and Continue**. Most plans will not have limits failures, but if yours does, please contact a retirement plan account manager to determine next steps to correct the issue.

Review Limit Failures

During a review of the plan, no Limit Failures were identified. No action required.

Find Employee:

[Save to File](#)

| ↓ Employee Name | SSN | HCE | Excess Contributions | | | Plan Year Compensation |
|-----------------|---------|-----|----------------------|--------|---------------|------------------------|
| | | | 402(g) | 415 | Plan Deferral | |
| | XXX-XX- | | \$0.00 | \$0.00 | \$0.00 | \$25,000.00 |
| | XXX-XX- | ✓ | \$0.00 | \$0.00 | \$0.00 | \$100,000.00 |
| | XXX-XX- | | \$0.00 | \$0.00 | \$0.00 | \$40,000.00 |
| | XXX-XX- | | \$0.00 | \$0.00 | \$0.00 | \$65,000.00 |
| Totals: | | | \$0.00 | \$0.00 | \$0.00 | \$230,000.00 |

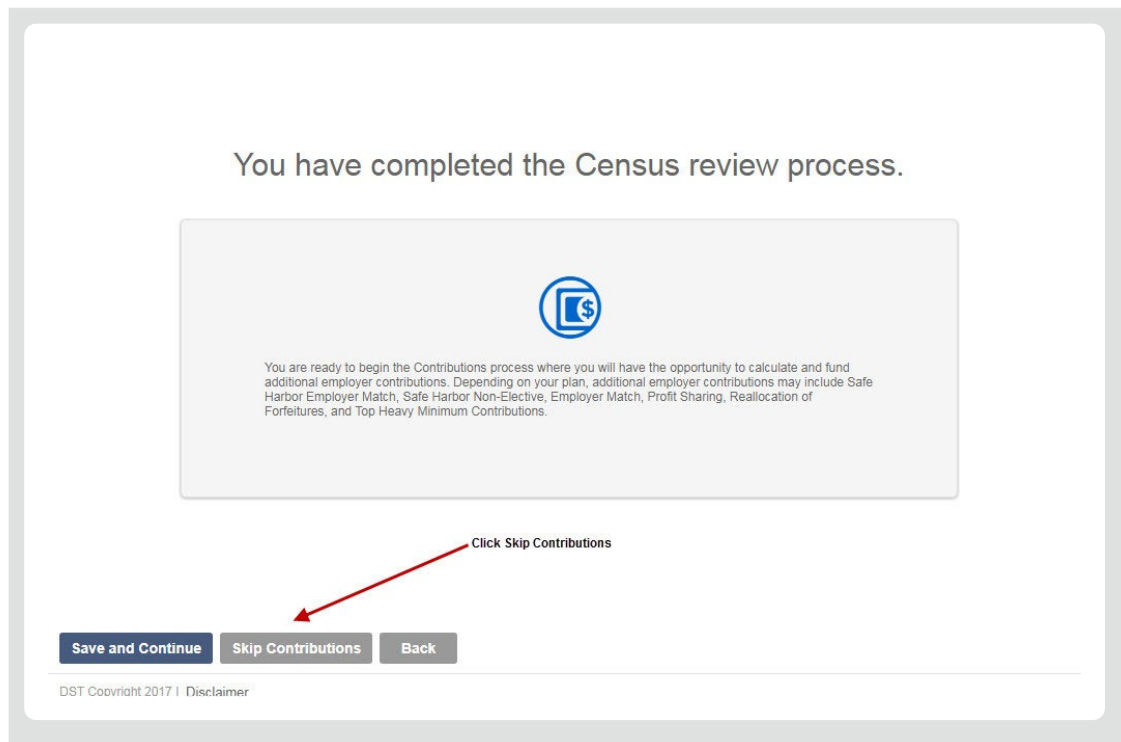
Success!

If you have no issues with limits failures, you are now done with your census. Click **Skip Contributions**. For most plans in the program, except those that decide to run their own compliance tests, your census work is complete.

Traditional 401(k) plans

(or other plans that choose to run compliance tests)

If you have a traditional 401(k), an ADP and/or ACP test will need to be run to determine if your plan is in compliance with the nondiscrimination rules. You can choose to run your own tests (see following pages) otherwise, a retirement plan account manager should be in contact with you with results of your tests within a couple of weeks after completing your census for the most recent plan year end. It is important that census information be complete at least 2 weeks before the correction deadline to allow for time to perform the test and correction processing, if necessary. Keep in mind that if your plan fails the test(s), corrective measures must be taken within 2½ months after the plan year-end to avoid penalties.



Run tests

If you chose to run your own compliance tests, you will click Run Tests on the next screen and see the results, and if your plan fails any of the tests, except for the top heavy test, please contact a retirement plan account manager. Please note the top heavy test may display as failed as a reminder that non-key employees must receive at least 3% minimum employer contribution. Most plans in the program satisfy this requirement by design.

Census/testing complete

Whether you choose to run compliance tests yourself or not, your census information will be processed and you will be notified via email when your plan's 5500 form is ready to be filed.

If you have any questions about completing the census, please contact a retirement plan account manager at (800) 223-5790.

Following are the instructions on reviewing and filing your annual 5500 with the Department of Labor.

5500 Filing Instructions

- 1 You will receive an invitation email inviting you to visit the employer site to review and file your 5500 report.

Your 2024 5500-SF* is ready for filing.

Log on at: adaemp.equitable.com

Next: Go to the Compliance tab and click the Go To 5500 Report button.

Next: Click the button for E-signing.

Next: View/Print the 5500 and then enter your DOL credentials to electronically sign and submit the 5500 to the DOL. **If you filed your 5500 through the Program website last year, then your credentials are securely stored for you on the site.**

Additionally: You must also print and distribute to your participants the Summary Annual Report (SAR), which is available in the Documents section. **Not required for 5500-EZ Filers.**

FILING DEADLINE: The deadline for the 2024 plan year filing for calendar year plans is July 31, 2025, unless you (the business) has a tax filing extension or an IRS Form 5558 is filed before the filing deadline. The penalties for late filing can be more than \$2,400 a day.

Important note:

For the 2024 plan year, you should expect your invitation within 4-6 months after the close of your plan year.

- 2 Go to mrpemp.equitable.com and enter your user ID and password.

- 3 Click on **Compliance** tab.

Plan Name: As of 01/15/2019 Participant Search: Search by last name or SSN Go Print

Plan ID: Plan Type: 401K

SUMMARY CALENDAR ONLINE CONTRIBUTIONS PARTICIPANTS LOANS PLAN ASSETS PLAN INFORMATION COMPLIANCE RESEARCH INVESTMENTS

Compliance

- 4 Click on **Go To 5500 Report** button and you will be taken to a screen to e-sign your form.

SUMMARY CALENDAR PARTICIPANTS LOANS PLAN ASSETS PLAN INFORMATION COMPLIANCE RESEARCH INVESTMENTS

Compliance Testing

To perform year end or interim compliance testing, access the eCompliance application by clicking the eCompliance button. To view or file the Form 5500, access the Form 5500 application by clicking Go To 5500 Report. To view or file the Form 5500, access the Form 5500 application by clicking View 5500 Report.

IMPORTANT: The Go To 5500 Report button may not be available if you do not have a current year 5500 to file at this time. If you need to file a Form 5500 and the Go To 5500 Report button is not available, please call a Retirement Plan Account Manager at 1-800-223-5790 to make your request. Please allow at least two weeks before the filing deadline to fulfill your request.

Go to 5500 Report

- 5 Click on **E-Sign 5500** button on left.

ADA American Dental Association®

Members Retirement Program

Sign 5500 - 2015

Step 1: Print Paper Copy of Form 5500
You must print your 5500 before you will be allowed to sign. Print a hard copy of your 5500 by clicking on "Print 5500" below:

[Print 5500](#)

Step 2: Review and Sign Paper Copy before Filing
Once you have read through the filing and find it acceptable, sign the printed copy with a "wet" signature. Keep your signed copy in a safe place. A paper copy will not be sent to the Department of Labor but an electronic version will be sent once you electronically sign below.

Step 3: Enter/Review EFAST Credentials
Verify that Name, User ID, and PIN exactly match (including punctuation and spacing) what you entered/received from the DOL registration process. If it does not exactly match click the button "Change Name" below to change the name on this 5500.

Administrator/Sponsor Name: [Change Name](#)

Administrator/Sponsor DOL User ID:

Administrator/Sponsor DOL PIN:

Step 4: Sign and File Electronically
Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct and complete.

[Sign 5500](#)

If you do not have your signing credentials you will need to obtain them by going to <http://www.efast.dol.gov> and registering as a signer. Click [here](#) for detailed instructions on how to obtain signing credentials.

If you have lost your User ID or PIN contact DOL EFAST2 support at 866-463-3275 or visit the website <http://www.efast.dol.gov> (click on "Login" and then "Forgot UserID" or "Forgot Password").

E-sign 5500

- 6 Follow instructions to view and print the form, enter your DOL filing credentials and sign the 5500.

If you have not already established your credentials with the DOL (first-time filer), see the instructions for getting your DOL credentials on the website under **Plan Education Center** or in the compliance section under **Helpful Documents**.

- 7 Once you electronically sign the 5500, then you are taken to a status screen to view the status of your filing. Please contact a retirement plan account manager if the acceptance status for your plan is rejected/not accepted or anything besides Accepted. If there is no status, please follow the same path above within 48 hours after you have filed and check the status of your return by clicking the Check 5500 Status button.

| Status | |
|---------------------------|-----------------------------------|
| Acceptance Status: | Accepted |
| Plan Name: | FAMILY DENTAL PROFIT SHARING PLAN |
| Plan Number: | 001 |
| Plan Year: | 2024: |
| Plan Year Begin/End Date: | 01/01/2024 - 12/31/2024 |
| Signer: | |
| Date Signed: | 07/29/2024 |
| Date Submitted: | 07/29/2025 |
| Date Accepted: | 07/29/2025 |
| AckID: | 20240729130728NAL0032034032001 |

The Members Retirement Program (contract form #6059) is funded by a group variable annuity contract issued and distributed by Equitable Financial Life Insurance Company (NY, NY 10104, (212) 314-4600). Equitable is the brand name of Equitable Holdings, Inc. and its family of companies, including Equitable Financial Life Insurance Company (Equitable Financial) (NY, NY); Equitable Financial Life Insurance Company of America (Equitable America), an AZ stock company with an

administrative office in Charlotte, NC; Equitable Advisors, LLC (member FINRA, SIPC) (Equitable Financial Advisors in MI & TN); and Equitable Distributors, LLC. This content is provided for your informational purposes only. Equitable Financial Life Insurance Company (NY, NY) and its affiliates does not provide legal or tax advice. The obligations of Equitable Financial and Equitable America are backed solely by their claims-paying abilities.

© 2024 Equitable Holdings, Inc. All rights reserved. GE-7368858.1 MRP (11/24) (Exp. 11/28) | G1149187 | Cat. #155626 (12/22)

