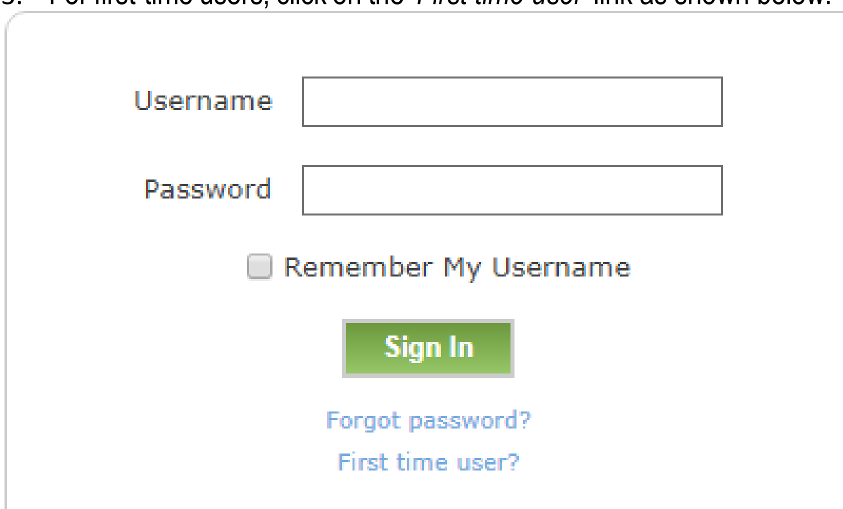
PlanSponsorLink Quick Reference Guide

Accessing the Web Portal

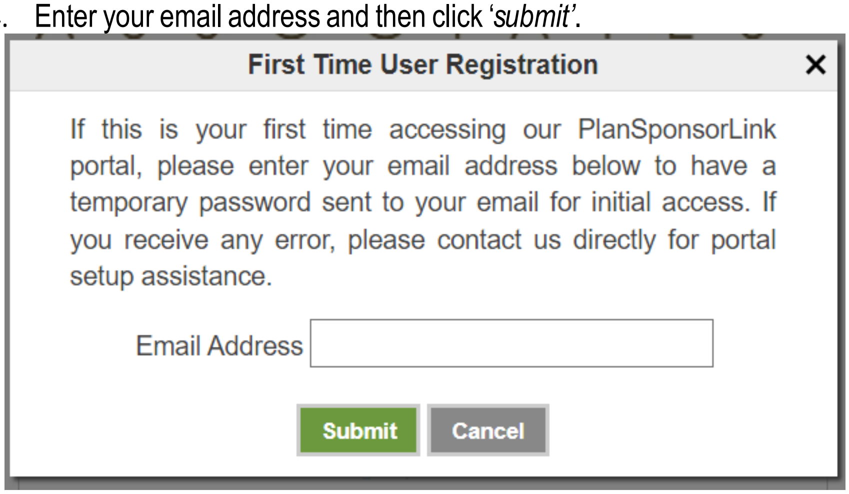
1. Click on the following link: *https://nova401k.plansponsorlink.com/* or paste in your web browser.

2. For returning users, enter your email address and password. Skip steps 3 – 7 below. If you have forgotten your password, refer to step 6.

3. For first-time users, click on the '*First time user*' link as shown below:

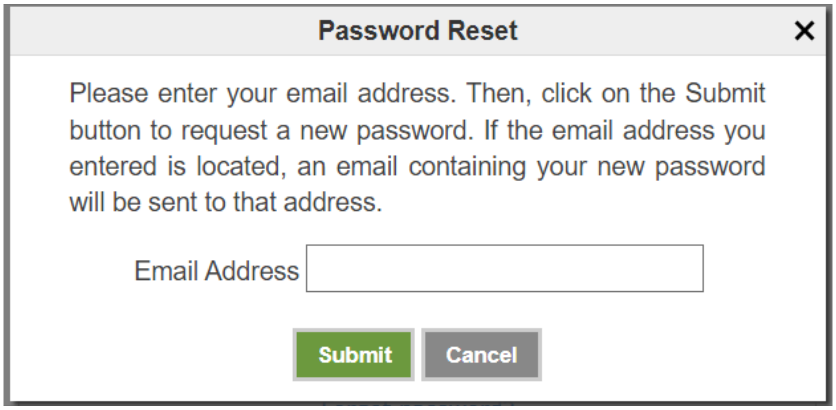


4. Enter your email address and then click '*submit*'.



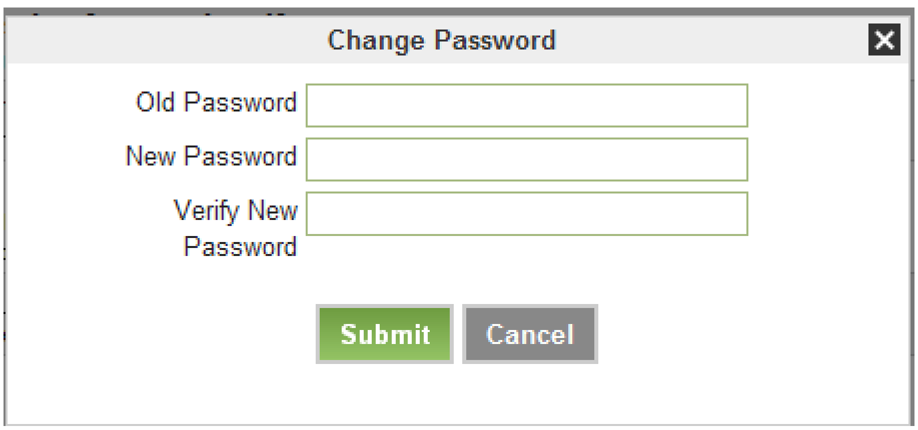
5. A password will be emailed to you. Check your spam folder in case it does not recognize the sender.

6. If you have previously logged on but have forgotten your password, click on the '*Forgot Password*?' link as shown below, enter your email address, then click '*Submit*'.



7. Once your password is received, return to the site and enter your email address as the username and the password you were emailed in the password field. Click '*Sign In.*'

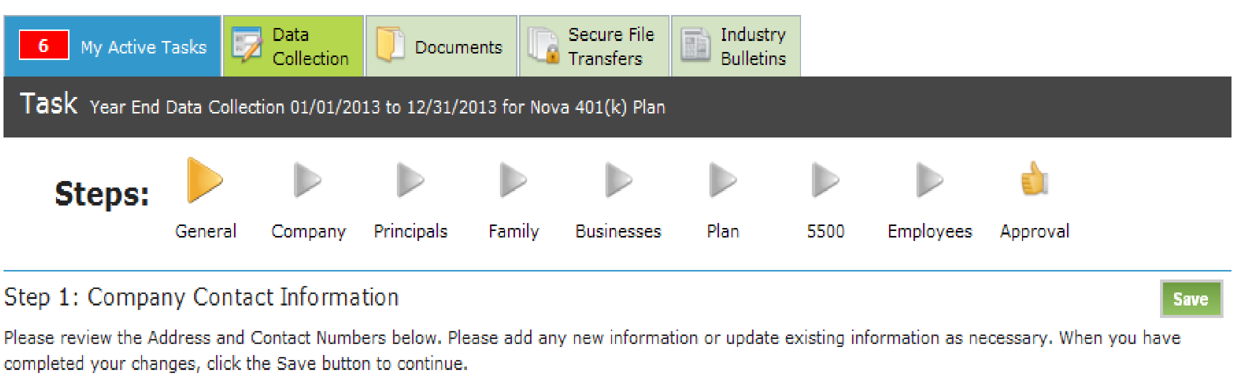
8. Once you are in the web portal, click on the drop-down arrow at the top right corner of the screen and select '*Change Password'* to customize your password.



Beginning The Online Year End Census Request

1. Select '*Year End Data Collection XX/XX/201X to XX/XX/201X'* from the '*My Active Tasks*' tab and click on the green '*Begin Task*' button to the far right.

2. Each of the nine (9) steps you see in this task MUST BE COMPLETED before approving your census request. Once approved, information is securely submitted to Nova 401(k) Associates for processing.

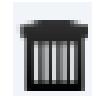


3. As you get started, below are some helpful buttons you may need to utilize:


Add More


Modify/Edit

Submit and Save


Delete

Understanding the Steps

Step 1 – General – Company Contact Information: Please confirm your company information. If the information displayed is incorrect, incomplete, or outdated, please update this information before proceeding to the next step.

Step 2 – Company – Employer Company Data: Please confirm the company EIN, Fiscal Year End, Entity Type, and Business Code. Payroll Provider information is optional but can be helpful as we work toward including more payroll platforms in our automated solutions.

Step 3 – Principals: Please confirm principals employed by the Plan Sponsor. Information from the prior year is displayed here which may no longer be accurate. To make changes, you will need to click on the '*Edit*' icon to revise existing information as necessary. You can also click on the green plus sign to add principals (President, Vice President, Secretary, Treasurer, etc.). For each Principal, please be sure to provide ALL of the following, as applicable:

- Name
- Social Security Number (SSN)
- Officer (Yes/No)
- Title
- Ownership (Percentage)

Ownership is very important to testing, so validation is required within this step, and must equal at least 100%.

Step 4 – Family – Family Relationships: Please confirm family members of the principals (as listed in Step 3 above) who are also employed by the Plan Sponsor. Information from the prior year is displayed here which may no longer be accurate. click on the '*Edit*' icon to revise existing information as necessary. You can also click on the green plus sign to add family members (child, grandchild, grandparent, parent, sibling, spouse, etc.). For each Principal, please be sure to provide ALL of the following, as applicable:

- Name
- Social Security Number (SSN)
- Relationship
- To Whom they are Related (Related To)

Family Relationships are very important to testing, so please be sure to include ALL family members of owners who worked for the company during the plan year being tested.

Step 5 – Business – Other Businesses Owned/Controlled: Please confirm and/or add all businesses owned by any of the principals listed in Step 3 above – regardless of whether or not they are an adopting employer for purposes of the Plan. Information from the prior year is displayed here which may no longer be accurate. Click on the '*Edit*' icon to revise existing information as necessary. You can also click on the green plus sign to add any businesses not shown.

Once you have entered the company name, contact information, and EIN, you will also need to answer whether or not a qualified plan is sponsored by this employer (*Qualified Plan Sponsored?*). If the other business owned offers a retirement plan (i.e., 401(k), Profit Sharing, Money Purchase, SEP, Defined Benefit, etc.), please mark this question '*Yes*.'

Next you will be asked to provide the entity type of the business and the ownership of each business listed. Please provide the name of the owners for each entity listed in this section - ownership percentages should total at least 100%.

Step 6 – Plan – Annual Employer Questionnaire: Please complete all questions listed. Validation checks require that you complete all questions, so you will not be able to submit if any question is left unanswered.

Step 7 – 5500 – 5500 Questionnaire: Please complete all questions listed. These questions will be used to complete your annual Form 5500. Validation checks require that you complete all questions, so you will not be able to submit if any question is left unanswered.

Step 8 – Employees – Employees Census: Please provide census data and compensation paid to your employees in this step. If your firm issues one or more W-2 forms, you can complete this step in one of two ways:

1. Enter the information directly onto the web page. Click on the green add button (generally used by small employers with very few employees).
2. Securely download a prefilled Excel spreadsheet template by clicking on the '*Export*' icon. Once the file is updated, you can then securely upload the completed spreadsheet by clicking on '*Import*' icon.

<u>A Few Important Reminders:</u>

1. When completing the **EMPLOYEES SECTION**, please be sure to ***<u>report ALL employees paid via Form W-2</u>*** regardless of whether or not they participated or were eligible to participate in the plan.

2. For plans with Schedule K-1 or Schedule C income, these employee/owners must also be reported on the census- enter $1 for the compensation columns if the Schedule income is not yet available. Copies of these Schedules will also need to be provided to Nova in order to proceed with the annual testing. Please reach out to your Nova Account Manager if the K1s and/or Schedule Cs will be delayed.

3. Enter FULL GROSS COMPENSATION in the Gross Compensation column (Gross = W-2 Box 1 + pre-tax 401(k) deferrals + pre-tax 125 cafeteria deferrals). DO NOT ROUND compensation.

Step 9 – Approval – Approval & Census Submission: Please confirm all information provided is true and accurate before signing and submitting the Year End Data Collection for the Plan. Click on the blue '*Sign and Submit*' button.

Step 10 – Optional – Printing Copy for Your Records: You may access an Adobe PDF copy of the Year End Data submitted for the Plan by going to the '*Data Collection*' tab and clicking on the blue '*View Report*' button. If desired, you may save or print a copy for your plan records.

More info below ...

Employee Census Field Descriptions

Click on FIELD DESCRIPTIONS for a description of each of the fields requested with the employee census.

A more detailed description of each field can be found here: https://nova401k.com/census-instructions/

Display Name	Format	Description
First Name	Text characters	*This field is required* Enter the employee's first name and a middle initial, if appropriate. Additional information can be found at https://nova401k.com/census-instructions/
Last Name	Text characters	*This field is required* Enter the employee's last name and any suffix (Jr., Sr., etc.). Additional information can be found at https://nova401k.com/census-instructions/
SSN	###-##-#### or #########	*This field is required" Enter the employee's Social Security number. Additional information can be found at https://nova401k.com/census-instructions/
Gender	Male or Female	Choose Male (M) or Female (F) from the dropdown list. Additional information can be found at https://nova401k.com/census-instructions/
Date of Birth	MM/DD/YYYY	*This field is required" Enter the employee's date of birth. Additional information can be found at https://nova401k.com/census-instructions/
Original Date of Hire	MM/DD/YYYY	*This field is required" Enter the employee's original date of hire. Additional information can be found at https://nova401k.com/census-instructions/
Date of Separation	MM/DD/YYYY	Enter the employee's date of separation. Additional information can be found at https://nova401k.com/census-instructions/
Separation Due to Death, Disability, or Retirement	Yes/No	Choose the applicable dropdown option if separation of service was due to death, disability, or retirement. Additional information can be found at https://nova401k.com/census-instructions/
Date of Rehire	MM/DD/YYYY	Enter the employee's date of rehire. Additional information can be found at https://nova401k.com/census-instructions/

Employee Involuntarily separated?	Checkbox	Check this box for a terminated employee that was separated involuntarily (fired, layed off, etc.) Additional information can be found at https://nova401k.com/census-instructions/
Hours	Number Field (####)	For employees working 1000 hours or more in the plan year, enter 1000; otherwise enter actual hours worked. If hours are not provided, Nova will assume hours are not being maintained and use the equivalency hour method defined in your plan document.
Gross Compensation	Number Field (#####.##)	*This field is required" Enter the amount that is considered as Gross compensation within your payroll reports for the plan year. Do not round compensation. Additional information can be found at https://nova401k.com/census-instructions/
W-2 Box 1 Compensation	Number Field (#####.##) or (#,###.##)	*This field is required" Enter Compensation that is used to complete Box 1 of the W-2. DO NOT round compensation. Additional information can be found at https://nova401k.com/census-instructions/
Pre-Entry Compensation	Number Field (#####.##) or (#,###.##)	For newly eligible employees this year only, if your plan excludes compensation prior to the date a participant initially became eligible, please enter the participant's compensation prior to their entry date. Do not round. Additional information can be found at https://nova401k.com/census-instructions/
Pre-Tax Health/125 & Qual. Transportation/132f4	Number Field (#####.##) or (#,###.##)	Enter the total of all employee paid pre-tax deductions under Section 125. This includes qualified transportation contributions from dependent care, insurance premiums, medical reimbursement accounts or HSAs. Do not round. Additional information can be found at https://nova401k.com/census-instructions/
Reimbursements, Allowances and Fringe Benefits	Number Field (#####.##) or (#,###.##)	Not required for plans who do not exclude allowances, reimbursements, or fringe benefits when applying employee salary reduction elections. Otherwise, total these amounts and enter in this column. Additional information can be found at https://nova401k.com/census-instructions/
Bonus	Number Field (#####.##) or (#,###.##)	Not required for plans who do not exclude bonuses when applying employee salary reduction elections. Otherwise, list the amount of any bonuses. Additional information can be found at https://nova401k.com/census-instructions/

Commissions	Number Field (#####.##) or (#,###.##)	Not required for plans who do not exclude commissions when applying employee salary reduction elections. Otherwise, list the amount of any commissions. Additional information can be found at https://nova401k.com/census-instructions/
Overtime Compensation	Number Field (#####.##) or (#,###.##)	Not required for plans who do not exclude Overtime Pay when applying employee salary reduction elections. Otherwise, list the amount of any Overtime Compensation. Additional information can be found at https://nova401k.com/census-instructions/
Custom Excluded Compensation	Number Field (#####.##) or (#,###.##)	If your plan excludes certain types of compensation that is not categorized as one of the prior compensation types, please enter the total of all other excluded compensation for the plan year. Do not round. Additional information can be found at https://nova401k.com/census-instructions/
Severance Compensation	Number Field (#####.##) or (#,###.##)	Please list any true Severance Compensation paid to terminated employees; this does not include final paycheck compensation after termination date. Additional information can be found at https://nova401k.com/census-instructions/
Pre-Tax Salary Deferral	Number Field (#####.##) or (#,###.##)	Enter the salary deferral amount shown in Box 12 of Form W-2 for codes D, E or G. INCLUDE CATCH-UP CONTRIBUTIONS. Do not round salary deferral amount. Additional information can be found at https://nova401k.com/census-instructions/
Roth Salary Deferral	Number Field (#####.##) or (#,###.##)	Enter the salary deferral amount shown in Box 12 of Form W-2 for codes AA, BB or EE. INCLUDE CATCH-UP CONTRIBUTIONS. Do not round. Additional information can be found at https://nova401k.com/census-instructions/
Employer Match	Number Field (#####.##) or (#,###.##)	For 401(k), 403(b) and 457 Plans enter the total matching contributions made for the plan year. Do not round. Additional information can be found at https://nova401k.com/census-instructions/
Safe Harbor Contribution	Number Field (#####.##) or (#,###.##)	For Safe Harbor plans only. Please enter the dollar amount of any employer safe harbor contributions made during the year. Do not round. Additional information can be found at https://nova401k.com/census-instructions/
Employer Contribution	Number Field (#####.##) or (#,###.##)	For plans that contribute employer contributions, other than match and safe harbor, during the plan year, please enter the amount contributed that is applicable to the current plan year. Do not round.

After-Tax Contribution	Number Field (#####.##) or (#,###.##)	Enter after-tax employee contributions. Do not round. Do not include Roth deferral amounts. Additional information can be found at https://nova401k.com/census-instructions/
Ownership Percent	Number Field (#####.##) or (#,###.##)	Ownership Percent (ex. 25.5% owner enter 25.5) Additional information can be found at https://nova401k.com/census-instructions/
Officer	Checkbox	Check the box to mark the employee as an officer of the company. If you are using the Excel exported file, input a 'Y' for those individuals who were officers during the plan year. Additional information can be found at https://nova401k.com/census-instructions/
Excluded Employee	Checkbox	Check box if employee is excluded from the plan based off of plan provisions. If you are using the Excel exported file, input a 'Y' for those individuals who were excluded employees during the plan year. Additional information can be found at https://nova401k.com/census-instructions/
Job Classification	Text characters	Your plan may exclude certain classes of employees or allocate contributions to different classes of employees. *If your plan excludes any classes of employees, this field is required and must be completed.* Additional information can be found at https://nova401k.com/census-instructions/
Company Division	Text characters	If you track a location for employees, please add here. Divisions can be any combination of letters and/or numbers. Additional information can be found at https://nova401k.com/census-instructions/
Union Employee	Checkbox	Check the box to mark the employee as a union member. Additional information can be found at https://nova401k.com/census-instructions/
Address 1	Text field	Enter the first line of the employee's address.
Address 2	Text field	Enter the second line of the employee's address, if applicable.
City	Text field	Enter the city of the employee's current address.
State	Text field (XX)- max 3 characters	Enter the state initials of the employee's current address.
Zip Code	Text field (#####)	Enter the 5 digit Zip Code of the employee's current address.
Personal Email	#####@####.###	Personal email address of employee
Work Email	#####@####.###	Description
Phone Number	Text	Enter the personal phone number for the employee. Do not include dashes or parenthesis.