Column	Column Heading	Format Requirements	Instructions
Α	SOCIAL SECURITY	9-digit numeric field with or without dashes (xxx-xx-xxxx or xxxxxxxxxx)	Required
В	LAST NAME	Up to 30 alpha characters	Required
С	FIRST NAME	Up to 15 alpha characters	Required
D	MI	Up to 2 alpha characters	Optional
E	DIVISIONAL CODE	5 alpha/numeric characters	Optional: Used for divisional contributions, statements, reporting, or testing (if applicable)
			Please Note: If you'd like to utilize this feature, please be sure to coordinate this with us prior to reporting data in this field.
F	TOTAL COMPENSATION	Numeric with 2 decimals (XXXXX.XX)	Required: For year-end testing and/or employer contribution calculations (if applicable)
			Your plan can submit compensation either Per Pay Period or Year to Date.
			If supplying compensation <i>Per Pay Period</i> , the values provided per payroll will be accumulated to calculate the year-to-date value.
			If supplying compensation <i>Year to Date</i> , the values provided per payroll will <i>replace</i> the latest year-to-date value.
			Compensation values will be based on the definition of compensation in your plan document.
G	EMPLOYEE 401(K)	Numeric with 2 decimals (XXXXX.XX)	Participant's Pre Tax deferral contribution for the payroll period (if applicable)
Н	ROTH 401(K)	Numeric with 2 decimals (XXXXX.XX)	Participant's ROTH deferral contribution for the payroll period (if applicable)
I	LOAN PAYMENT AMOUNT	Numeric with 2 decimals (XXXXX.XX)	Participant's loan payment for the payroll period (if applicable)
			Please Note: * Exact scheduled loan payments should be withheld and reported. * Loan payments can be paid ahead; however, extra payments should be made in even multiples of the scheduled payment amount. * If a participant has multiple loans, please combine all payments and report as one payment amount.
J	MATCH	Numeric with 2 decimals (XXXXX.XX)	Employer Match contribution for the payroll period (if applicable)
K	PROFIT SHARING	Numeric with 2 decimals (XXXXX.XX)	Profit Sharing contribution for the payroll period (if applicable)
L	SAFE HARBOR MATCH	Numeric with 2 decimals (XXXXX.XX)	Safe Harbor Match for the payroll period (if applicable)
M	SAFE HARBOR NEC	Numeric with 2 decimals (XXXXX.XX)	Safe Harbor Non-Elective for the payroll period (if applicable)

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N	CLIENT SPECIFIC	Numeric with 2 decimals (XXXXX.XX)	This is an additional financial column if your plan has a unique contribution type (if applicable)
			Please Note: To ensure that we're tracking to the correct contribution type, please validate with your Client Service
	OLIENT OPEOIEIO	Normania viitta O danimala	Team in advance of using this field.
0	CLIENT SPECIFIC	Numeric with 2 decimals (XXXXX.XX)	This is an additional financial column if your plan has a unique contribution type (if applicable)
			Please Note: To ensure that we're tracking to the correct contribution type, please validate with your Client Service Team in advance of using this field.
P	CLIENT SPECIFIC	Numeric with 2 decimals (XXXXX.XX)	This is an additional financial column if your plan has a unique contribution type (if applicable)
			Please Note: To ensure that we're tracking to the correct contribution type, please validate with your Client Service Team in advance of using this field.
Q	HOURS	Numeric field. Whole hours only; please round accordingly.	Required for plans using Actual Hours for eligibility, vesting, the preparation of employer contribution calculations, and/or year-end testing (if applicable)
			Your plan can submit hours either Per Pay Period or Year to Date.
			If supplying hours <i>Per Pay Period</i> , the values provided per payroll will be accumulated to calculate the year-to-date value.
			If supplying hours <i>Year to Date</i> , the values provided per payroll will replace the latest year-to-date value.
R	ADDRESS 1	Up to 30 alpha/numeric characters	Required for distributions, statements, and participant account access
S	ADDRESS 2	Up to 30 alpha/numeric characters	Required for distributions, statements, and participant account access
Т	CITY	Up to 23 alpha/numeric characters	Required for distributions, statements, and participant account access
U	STATE	2 alpha characters	Required for distributions, statements, and participant account access
V	ZIP	5- or 9-digit numeric field (a 'dash' separator is acceptable)	Required for distributions, statements, and participant account access
W	DATE OF BIRTH	Date Field with or without slashes (mmddyyyy or mm/dd/yyyy)	Required for online enrollment and online distributions as well as eligibility, year-end testing, and RMDs (if applicable)
X	CURRENT DATE OF HIRE	Date Field with or without slashes (mmddyyyy or mm/dd/yyyy)	Required for vesting, eligibility, and year- end testing (if applicable)
			Please Note: If the employee was terminated and re-hired, list their most recent hire date.

Υ	EMPLOYEE ELIGIBILITY DATE	Date Field with or without slashes (mmddyyyy or mm/dd/yyyy)	Used for producing enrollment materials and for year-end testing (if applicable)
	DATE	(initiadyyyy or initiadyyyyy)	
			Please Note: Based on your plan's eligibility rules, we
			may calculate this date if left blank.
			The Eligibility Date is the plan's next
			available entry date after the employee has satisfied the plan's
7	CURRENT DATE OF	D (F: 11 'd	eligibility requirements.
Z	CURRENT DATE OF TERM	Date Field with or without slashes (mmddyyyy or mm/dd/yyyy)	Required for certain distributions and year- end testing (if applicable)
			Please Note: If the employee was terminated and re-hired—and they're still
			employed— leave this field blank. If the employee was terminated, re-hired, and
			terminated again, list the most recent termination date.
AA	PRIOR DATE OF HIRE	Date Field with or without slashes (mmddyyyy or mm/dd/yyyy)	Required for vesting, eligibility, and yearend testing (if applicable)
		(mindayyyy or min/dd/yyyy)	end testing (ii applicable)
			Please Note: If the employee was terminated and re-hired, list their original hire date.
AB	PRIOR DATE OF TERM	Date Field with or without slashes	Required for vesting, eligibility, and year-
		(mmddyyyy or mm/dd/yyyy)	end testing (if applicable)
			Please Note: If the employee was
			terminated and re-hired, list their prior termination date.
AC	ESTIMATED ANNUAL	12-digit numeric field with 2	Optional: Used to build savings examples
	COMPENSATION	decimals (XXXXXXXXXXXX)	on the participant website as well as certain enrollment materials
			If left blank, the value will default to \$35,000.
AD	EMPLOYMENT STATUS	3-digit numeric field no decimal (See Instructions for Codes)	Optional:
		(coo mondonomo rei codos)	Codes/Definitions:
			001: Terminated with less than 500 hours in the current plan year
			002: Terminated with more than 500
			hours in the current plan year
			003: Active 004: Deceased
			005: Disabled
			006: On Unpaid leave 007: Retired
			oor. Neureu

ΛE	HCE CODE	1 digit numeria field (Cas	Optional: Hood for year and tasting /:f
AE	HCE CODE	1-digit numeric field (See Instructions for Codes)	Optional: Used for year-end testing (if applicable)
			Codes/Definitions for an HCE:
			0: Not an HCE.
			1: Is more than 5% owner. Family attribution rules apply.
			3: HCE based on compensation only. (The
			participant exceeded the compensation
			threshold in in the preceding year.)
			Note that HCE Threshold is reviewed and
			adjusted annually and can be obtained at
			www.irs.gov in the COLA limits.
			SPECIAL NOTE: This field will update the
			recordkeeping system with the initial
			census file submission. Any future updates must be made manually via the website or
			by contacting your Client Service Team.
AF	KEY EE CODE	1-digit numeric field	Optional: Used for year-end top heavy
		(See Instructions for Codes)	testing (if applicable)
			Codes/Definitions for a KEY Employee:
			0: Not a KEY Employee.
			1: An Officer of the company whose compensation exceeds the Key Employee
			threshold (adjusted annually).
			3: Is more than 5% owner. Family
			attribution rules apply. 4: Is more than 1% owner whose
			compensation exceeds \$150,000.
			Note that Key Employee compensation
			level is reviewed and adjusted annually
			and can be obtained at www.irs.gov in the COLA limits.
			the COLA IIIIIIS.
			SPECIAL NOTE: This field will update the
			recordkeeping system with the initial census file submission. Any future updates
			must be made manually via the website or
			by contacting your Client Service Team.
AG	ENROLLMENT ELIGIBILITY	1 alpha character, no decimal (See Instructions for Codes)	Optional: This field is only used if your plan calculates eligibility using the
	LLIGIDILITI	(CCC Mondono for Codos)	Equivalency method for tracking hours
			Codes/Definitions
			Codes/Definitions: Y = Employee has met eligibility
			requirements to enter the plan.
			N = Employee has not met eligibility
			requirement to enter the plan.
			If your plan doesn't use the Equivalency
			method for hours, this field can be left blank.
AH	UNION STATUS CODE	1 alpha character, no decimal	Optional: Used for eligibility and year-end
		(See Instructions for Codes)	testing (if applicable)
			Codes/Definitions:
			Y = Union
			N = Non Union

Al	EMPLOYEE WORK EMAIL	Alpha/numeric characters plus @ symbol (someone@example.com)	Required for employers who elect to deliver certain plan documents electronically.
			Include each employee's designated work email address. This is the email address provided by your company to the employee – not the employee's personal email address.