

AG-385 Form E-Filing User Guide

Municipal Pensions and Fire Relief Programs Unit

VERSION 2025.2

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AG-385 GENERAL INSTRUCTIONS:

- To participate in the Foreign Fire Insurance Tax Distribution and General Municipal Pension System State Aid Programs, Municipalities must complete the online form located on the Department of Community & Economic Development's Municipal Statistics website. The online form entry must be completed by <u>March 31</u> of the current year for the prior year calendar data. If the certification is not submitted through the Municipal Statistics website by the filing deadline, your Municipality may be ineligible to receive state aid. (Please ensure the form is properly completed. Incomplete or inaccurate forms will need to be corrected. The Municipality will be informed regarding this status, and they will need to go back in and make corrections.)
- EVERY MUNICIPALITY MUST COMPLETE Step 1, Step 3*, Step 4, Step 5 and Step 6. If your Municipality does not provide pension coverage for any type of employee (police officers, firefighters, or non-uniformed), then you will not need to do Step 2 or Step 3, otherwise you will need to do Step 2 which automatically populates the fields on Step 3.
- You will be required to submit your Personnel Roster Data through the Municipal Statistics website in the form of an EXCEL spreadsheet, or a comma separated value data text file (.csv). An option to directly enter your data on a grid is available if you choose this option. See Appendix A, B, and C for detailed instructions on how to download the appropriate Personnel Roster Data Template, how to populate the Personnel Roster Data fields, and how to upload your Personnel Roster Data file.

Direct all questions to The Department of the Auditor General's Municipal Pensions and Fire Relief Programs Unit at:

Phone: **1-800-882-5073** Email: <u>Comptroller@PaAuditor.gov</u> Mail: Department of the Auditor General Municipal Pension and Fire Relief Programs Unit 321 Finance Building 613 North Street Harrisburg, PA 17120

AG-385 ONLINE Entry Instructions

To access the Department of Community & Economic Development's Municipal Statistics (MunStats) website, enter the following URL in the address bar of your web browser. It is recommended that you bookmark this page.

https://munstats.pa.gov/forms/login.aspx

	EPARTMENT OF C	OMMUNITY			Mun	icipal Statistics
Home	Tip Sheets	Public Reports	DCED.PA.Gov	Log In		
General	News					
To assist i	new e-filers i					se download the PA Keystone Login Servi 5&refresh=5dbaf090400201572532368
				Use	rname	1
				Pas	sword	2
						Log In
						Powered by
				P	Ак	EYSTONE LOGIN

- 1. Enter your Username.
- 2. Enter your Password.
- 3. Click Log In button.

<u>Note</u>: If you don't have an account set up for the Municipal Statistics website, please see <u>Appendix E</u> on how to register for an account.

Login Issues:

If you are unable to log in to your user account due to a forgotten password, click on the "Forgot Your Password?" link at the bottom of the login page to reset your password. This will take you to Keystone Login, where you will enter your username and can reset the password via email or by answering the security questions. For additional assistance with logging in and/or resetting your password, please contact the Keystone Login Help Desk by phone at 1-877-328-0995 or by email at KeystoneLoginSupport@randstadusa.com. For all other questions relating to the Municipal Statistics website, please contact DCED at 1-888-223-6837.

Once registered for an account, click on the AG-385 Form link in the "Your AG-385 Form Tasks" box for access.

PAPARTMENT OF COMMUNITY & ECONOMIC DEVELOPMENT				Municipal Statist	ics	
Home My Profile Tip Sl	neets Public Reports DCE	D.PA.Gov Log Out				
General News You may obtain a blank copy	of the 2015 Annual Audit and Fin	ancial Report (DCED-CLGS-	30) by clicking the link below:			
http://dced.pa.gov/dowpload	/dced-clos-30-2015-municipal-an	nual-audit-and-financial-re	port/			
Note that this is a working	copy only- All municipalities	are required to e-file the	ir Report with DCED.			
Your Pending Tasks					History	
Your 2017 Tax Information Form	3 due on 1/15/2017.				Municipal Annual Fin	ancial Report
					Municipal AG-385 Fo	rm
Your Editable Tasks					Municipal Elected an	d Appointed Officials
Your 2016 Elected and Appointed	Officials was updated on 1/8/2016.				Municipal Survey of	
Your 2015 Annual Financial Report	was updated on 9/13/2016.					
					Municipal Tax Inform	nation Form
Your Overdue Tasks						
Your 2016 Tax Information Fo	m was due on 1/16/2016.					
Your AG-385 Form Tas	ke					Click on AG-385 Form
"Your AG-385 Form is due on 3/3						link to begin the online
	ions to Municipal Pensions & Fire Relie			P.	_	entry for the AG-385 form
"For AG-385 Form, direct all ques	ons to Municipal Pensions & Fire Relie	er Programs Unit at 1-800-882	-5073 or email to Comptroller@PaAl	ditor.gov		
Pennsylvania Department of Commu Governor's Center for Local Governn 400 North Street, 4th Floor Harrisburg, PA 17120-0235		Phone: 888-223-6837 Fax: 717-783-1402 Email: RA-munistats@p	a.gov			

Upon entering the application, **Step 1** displays.

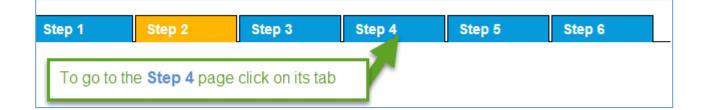
<u>Note</u>:

• Each page displays the following page header:

Pernsylvania pennsylvania penastrukt or comunity s economic development	Link to AG-385 E-filer Instructions Certification for	Municipal Statistics Department of the Auditor General Municipal Pensions and Fire Relief Programs Unit Poreign Fire Insurance Tax Distribution & General Pension System State Aid AG-385 Form for January 1, 2016 - December 31, 2016 Calenda	Municipality's Name & DCA Code BORO - 3 Submission Status of AG-385 Form Current Status :
Home My Profile Tip Sheets Public Report	s DCED.PA.Gov AG-385 User Guide Log Out		
	this certification. ble under 18 P S § 4904 (relating to unsworn falsification to authorities Fire Relief Programs Unit at <u>1.800-882-5073</u> or email to Comptroller@		

• To access this Guide on-line, click on the *AG-385 User Guide* link in the header section.

- If you need to <u>exit the application before completing Steps 1 thru 6</u> and want to save what you have entered so far, go to **Step 6** and click **Save & Exit**.
- To go to a particular page quickly, click on the tab for the page you want to view.



Step 1 Page – Certification of Fire Protection & Pension Data Questions

Step 1	Step 2	Step 3	Step 4	Step 5	Step 6		
						CERTIFICATION OF FIRE PROTECTION	
The response	s provided in thi	s section must b	e validated by su	pporting docume	ntation which mu	ist be maintained by the municipality and will be subject to audit by the department.	
1. 🗆 Our n	nunicipality is s	serviced SOLE	LY by Volunte	eer Firefighte	rs.		
2. 🗆 Our n	nunicipality is s	serviced SOLE	LY by Paid Fu	III-Time Firefi	ghters.		
3. 🗆 Our n	nunicipality is s	serviced by BO	TH Paid Full-T	Time Firefighters	and Volunteer	r Firefighters.	
	ı	Paid Protectio	on *	%	(You must ir	ndicate the proportion of the actual fire protection provided by each on a percentage basis.) Volunteer Protection *%	Total * Must equal 100%.
						PENSION DATA QUESTIONS	
4. Do you h employees)	ave Personnel	Rosters to sub	omit (police, fir	refighter, non-u	niformed 。	Yes ONo	
employees,							
L							

Certification of Fire Protection

Select the option that applies to your Municipality:

- 1. Municipality serviced Solely by Volunteer Firefighters:
 - a. Check this box.
 - b. The Volunteer Protection box is automatically populated with 100%.
- 2. Municipality is serviced **Solely by Paid Firefighters**:
 - a. Check this box.
 - b. The *Paid Protection* box is automatically populated with 100%.
- 3. Municipality is serviced by **BOTH** Paid Firefighters and Volunteer Firefighters:
 - a. Check this box.
 - b. You must enter the proportion on a percentage basis for the actual fire protection provided by <u>paid firefighters</u> in the **Paid Protection** box.
 - c. You must enter the proportion on a percentage basis for the actual fire protection provided by volunteer firefighters in the **Volunteer Protection** box.
 - d. The 2 percentages entered must add up to 100%. This is validated when the form is submitted.

Note:

Do not include in the percentage attributable to paid firefighters, the service of volunteer firefighters who receive a token payment for their services. (Example – payment of \$10 for responding to a fire call).

For options 1, 2, and 3 you can only check one of them.

If you choose Option 3, the highlighted statement will appear and the check box will need to be filled in. In addition to completing the fire roster, as noted in the statement.

Step 1	Step 2	Step 3	Step 4	Step 5	Step 6		
CERTIFICAT	TION OF FIRE P	ROTECTION					
The response	s provided in this	s section must be	validated by sur	porting documer	ntation which mus	be maintained by the municipality and will be subject to audit by the department.	
	unicipality is servi						
		-		-			
	unicipality is servi			-			
3. 🖬 Our mi	unicipality is servi	iced by BOTH Pa	id Full-Time Fire	fighters and Volur	nteer Firefighters.		
		Paid Prot	ection *	%		(You must indicate the proportion of the actual fire protection provided by each on a percentage basis.) Volunteer Protection * %	Total * Must equal 100%.
By checki	ng this box you u	inderstand your	form will not be a	approved until you	u email the comp	ted AG 385 Fire Roster Form to Comptroller@paauditor.gov. This is to support the Paid and Volunteer Protection Percentages entered.	Here is the link to the Form to be filled out and emailed: AG 385 Fire Roster Form
PENSION D	ATA QUESTION	IS					
4. Do you ha	ve Pension Perso	nnel Rosters to s	ubmit (police, fin	efighter, non-unif	ormed employees	•	
							Next Page »

Pension Data Questions

- 4. Do you have Personnel Rosters to submit (police, firefighter, non-uniformed employees)?
 - Click the **Yes** button when you have Personnel Roster Data for employees who are members of a pension plan.
 - Click the **No** button ONLY when you <u>do not</u> have any Personnel Roster Data to submit. This occurs when you have no employees who are members of a pension plan.

Note: You must select either Yes or No.



REMINDER: If you need to exit the application before completing Steps 1 thru 6 and want to save what you have entered so far, go to **Step 6** and click **Save & Exit**.

Step 2 Page – Personnel Roster Data

Note: Once saved, the Personnel Roster Data populates the fields on Step 3.

Step 1	Step 2	Step 3	Step 4	Step 5	Step 6		
						PERSONNEL ROSTER DATA	
						Does your municipality employ more than 1000 employees?	
						Yes (Or) No	
« Prev Pag	•					Next	Page »

Does your Municipality employ more than 1000 employees?

Click **Yes** if you employ more than a thousand employees.

The following screen displays:

Step 1	Step 2	Step 3	Step 4	Step 5	Step 6
					PERSONNEL ROSTER DATA
				Ste	p 1: Download the appropriate Personnel Roster Data file template
				Dow	AG-385 Roster Import Template (Excel file) <u>Download</u> AG-385 Roster Import Template (CSV/Text file) <u>Download</u>
				Ste	p 2: Enter the roster data into the downloaded file and save it
				Ste	p 3: Upload the saved roster file
				Att	ch the roster by clicking on the "Browse" button and click "Upload" button:* Browse
					Upload Cancel

You <u>must</u> provide your Personnel Roster Data in an electronic format. Follow the steps in **Appendix A**, **B**, **and C** for further instructions on filing your Personnel Roster Data file electronically.

Click **No** if you employ 1,000 employees or less.

The following screen displays:

Step 1	Step 2	Step 3	Step 4	Step 5	Step 6		
						PERSONNEL ROSTER DATA	
						Your data entry choices are: 1. Direct entry into a filiable online grid - click Direct Entry button 2. Download Exeld or SV file template - click File Upload button	
						Direct Entry (Or) File Upload	
« Prev Page							Next Page »

Click **Direct Entry** to manually enter your Personnel Roster Data online using a fillable grid page.

Click **File Upload** to submit your Personnel Roster Data electronically. Follow the steps in **Appendix A**, **B**, **and C** for further instructions on filing your Personnel Roster Data file electronically.

When **Direct Entry** is clicked the following screen displays.

Step 1	Step 2	Step 3	Step 4 Ste	ep 5 Step 6								
						PERSONNEL ROS	TER DATA					
				You n	nust click the Submit	Roster Data button at the	bottom of this p	age before leavi	ng this page			
Row	lo Roster Ty	e Type of Plar	Date Plan Established	Pol/Fir Member of Non-U Plan	Employee Name (Last, First)	Employee W-2 Full Time Wages	Date of Birth	Date of Hire	Date of Release	Release Status	Employee Accumulate Contributions Contribution	
1	Select	Select N		Select V						Not Applicat ~		Delete
											Add New	Row
											Click to insert a row of	Click to remove a row
											data	of data
						Submit Roster Data	Cancel					
« Prev Pa	le											Next Page »

- Each row represents an employee. Select from the drop down menu for roster type, type of plan, date plan established, and if police or fire member of a non-uniform plan. Enter employee name, *last name followed by first name*, wages, date of birth, data of hire, date of release (if applicable), release status (if applicable), employee contributions and accumulated employee contributions. Note: See *Appendix B* for a detailed explanation of each of these fields.
- Then click Add New Row if you have additional data/employees to enter. Note: To delete a row, click Delete to the right of the row to be deleted.
- 3. Once you have entered all the employees for your Municipality, click **Submit Roster Data** at the bottom of the grid. This updates the fields on **Step 3**.

Note:

Validations are in place when you submit the Personnel Roster Data file. Each error message/warning will indicate where the correction needs to take place. See <u>Appendix D</u> for a list of possible errors you could receive when uploading or entering the Personnel Roster Data.

Step 1	Step 2	Step 3	Step 4	Step 5	Step 6									
					Downloa	ad Roster ———	UPLOAD THE F	ROSTER						
						AG-385 Roster Imp	ort Template (Excel file) ort Template (CSV/Text file)		vnload vnload					
				At	tach the roster by	y clicking on the "Bro	wse" button and click "Upload				Browse			
Row No	Roster Type Typ Non-Uniforr DB		Date Plan Established 12/08/1986	Pol/Fir Memb Pla Not Appl	n	Employee Name bert Frost	Employee W-2 Full Tim Wages 74618.43	e Date of Birth 09/08/1951	Date of Hire 06/26/2001	Date of Release	Release Status Not Applical	Employee Contributions	Accumulated Employee Contributions	Delete
2	Non-Uniforr DB		12/08/1986	Not Appl		bert Wave	4423.04	07/25/1972		04/28/2015	Retirement V			Delete
4	Non-Uniforr DB		12/08/1986	Not Appl		an Stapelton	47389.69	05/22/1965			Not Applical			Delete
													Add New Ro	w
							Submit Roste	r Data						
« Prev P	age													Next Page »

Review the data in the grid. You can update the data in the grid if you find any incorrect data.

Once the data has been reviewed:

Click **Submit Roster Data** to save the data to the system. You are taken to **Step 3** automatically. The saved data is used to populate fields on **Step 3**.

This dialog box is displayed when your Personnel Roster Data is successfully saved.

1 Attention
Your values are calculated and pre-populated on Step3

REMINDER: If you need to exit the application before completing Steps 1 thru 6 and want to save what you have entered so far, go to **Step 6** and click **Save & Exit**.

Step 3 Page – Certification of Municipal Pension Plans

<u>Certification of Full-Time Employees Participating in Municipal Pension Plans</u> is for review/display only.

Please review Step 3 for accuracy. **Data entry is NOT available on this page.** This data was populated from the Personnel Roster Data submitted on **Step 2**.

Please review the values populated in all the fields. If a mistake is noticed:

- 1. Return to Step 2.
- 2. Update/Add/Remove the appropriate Personnel Roster Data record.
- 3. Click **Submit Roster Data** to save the change and update the fields on **Step 3**.

Step 1	Step 2	Step 3	Step 4	Step 5	Step 6		
				u U	CERT	IFICATION OF FULL-TIME EMPLOYEES PARTICIPATING IN MUNICIPAL PENSION PI (Totals must agree with personnel roster.)	lans
			POLICE			FIREFIGHTER	NON-UNIFORMED
1a. Number of working, active, full-time police officers who are members of a police pension plan(s).* IF NONE, ENTER "0"					ers of a police	2a. Number of working, active, full-time firefighters who are members of a paid firefighters pension plan(s).* IF NONE, ENTER "0"	3a. Number of working, active, full-time non-uniformed employees who are members of a non-uniformed pension plan(s).* I NONE, ENTER "0"
indica	/as this police per te date police pe s ○ No	sion plan(s) nsion plan(s)	established on or b was established	before 12/31/8 I:*	44? If no, please	2b. Was this paid firefighters pension plan(s) established on or before 12/31/84? If no, please indicate date firefighters plan(s) was established: \otimes Yes \bigcirc No Date:	3b. Was this non-uniformed pension plan(s) established on or before 12/31/84? If no, please indicate date non-uniformed pension plan(s) was established:* @ Yes ○ No Date:
1c. To \$	otal full-time pay	roll for calenda	r year 2016 for p	olice officers rep	oorted in 1a.*	2c. Total full-time payroll for calendar year 2016 for firefighters reported in 2a.*	3c. Number of working, active, full-time police officers or firefighters who are members of this pension plan(s) and NOT reported in 1a., 2a., or 3a. ^a Police Firefighters
							3d. Total number of working, active, full-time non-uniformed employees, police officers or firefighters for calender year 2016, who are members of this pension plan(s). 3a. + 3c. = 3d.* Total
							3e. Total full-time payroll for calendar year 2016 for non-uniformed members reported in 3a. and 3c.* \$
« Prev Pag	ae l						Next Page
Click		Page	• »				

REMINDER: If you need to exit the application before completing Steps 1 thru 6 and want to save what you have entered so far, go to **Step 6** and click **Save & Exit**.

Step 4 Page – Municipality Contact Information Municipal Officials Contact Information

Complete the contact information for your Municipal Officials.

The astericked fields are required.

Step 1	Step 2	Step 3	Step 4	Step 5	Step 6				
						м	IUNICIPAL OFFICIALS CONTACT INFORMATION		
Secretary I Prefix* Last Name* Address Line Zip Code*		(Copy From Tre	asurer) (Clea	<mark>ar Secretary)</mark>]]]	(<u>Clear All</u>)	First Name* Suffix City* Phone Number*		Middle Initial Address Line1* State*	
Treasurer I Prefix* Last Name* Address Line Zip Code*		(Copy From Sec	retary) (Clea	<mark>ar Treasurer)</mark>]]]		First Name* Suffix City* Phone Number*		Middle Initial Address Line1* State*	
Form Filled Prefix* Last Name* Address Line Zip Code*		(Copy From Sec	retary) (Copy	<u>y From Treasu</u>]]]	ırer) (Clear Form f	illed by) First Name* Suffix City* Phone Number*		Middle Initial Address Line1* State* Title*	
Tax ID No.* Municipal En Verify Munici Address*]		DCA Number*		Township/Boro Name*	
« Prev Page									Next Page »

If the existing information is incorrect, you can: Click on the (Clear All) link to clear the data in the Secretary Information, Treasurer Information and Form Filled By sections.

- Click on the (Clear Secretary) link to just clear the Secretary Information sections data.
- Click on the (Clear Treasurer) link to just clear the Treasurer Information sections data.
- Click on the (Clear Form Filled by) link to just clear the Form Filled by section.

You can copy fields from one section to another by clicking on the **(Copy From Secretary)** link or the **(Copy From Treasurer)** depending on what section's information you'd like to copy and then change the fields that aren't the same.

- Prefix max 6 characters (Mr., Mrs., Miss, Dr...)
- First Name max 20 characters
- Middle Initial 1 character
- Last Name max 20 characters
- Suffix max 4 characters (Jr, Sr, II, III...)

- Address Line1 max 36 characters
- Address Line2 max 36 characters
- City max 21 characters
- State 2 characters
- Zip Code Must enter the 5 digit zip, the 4 digit plus 4 zip is optional.
- Phone Number Must enter 10 digits with no dashes.
- Title (Form Filled by section only) max 10 characters

In the last section, the DCA Number and Township/Boro Name is automatically filled in. You must provide:

- Tax ID No 9 digits
- Email Address max 50 characters

Click Next Page »

REMINDER: If you need to exit the application before completing Steps 1 thru 6 and want to save what you have entered so far, go to **Step 6** and click **Save & Exit**.

Step 5 Page – EFT Account Information

Electronic Funds Transfer Account Information

Your banking information is carried forward from the prior year. If there have been changes made to the account, you will need to change it to the current account information prior to submission.

<u>Note</u>: The account entered on this screen **must be set up** for your Municipality with the Commonwealth of PA's Vendor Data Management Unit (VDMU). VDMU information is provided in the highlighted section below.

The asterisked fields are required.

Step 1	Step 2	Step 3	Step 4	Step 5	Step 6		
						ELECTRONIC FUNDS TR	ANSFER ACCOUNT INFORMATION
Your state ai	d will be direct de	eposited into a fir	nancial institution	of your choice. F	Please review/cor	nplete the fields below to indicate the financial institutio	n. Please note if this account is not currently set up or needs to be modified in the Commonwealth of PA's database, you will need to contact the Vendor Data
-		ave this account	modified or adde	ed to your vendor	number. See ins	tructions below on how to do this.	
Name of the Account Nur							Routing Number*
							(Only enter your PLGIT Account Number if you want your funds directly deposited to this account, otherwise leave the field blank.)
VDMU Con							
 Email 	- ra-psc_supplier	requests@pa.go	v or by		mation, you mus	contact the Vendor Management Unit (VDMU) at:	
	e - <u>1-877-435-736</u> te - <u>Non-Procure</u>				a		
« Prev Page							Next Page »

- Name of the Bank max 40 characters
- Routing Number must enter a valid 9 digit routing number.
- Account Number max 17 digits
- PLGIT Account Number max 7 digits **Only enter** your PLIGIT Account Number if you want your funds directly deposited to this account, otherwise leave the field blank.

	Next Dece
Click	Next Page »

REMINDER: If you need to exit the application before completing Steps 1 thru 6 and want to save what you have entered so far, go to **Step 6** and click **Save & Exit**.

Step 6 Page – Municipality Certification **Certification by Municipal Officials**

This is the final step to certify the information provided on Steps 1 thru 5. If you would like to view a draft version of the AG-385 form prior to submission, you can click on the highlighted link shown below.

The asterisked fields are required.

Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	
						CERTIFICATION BY MUNICIPAL OFFICIALS
and I also ce	By checking this box and typing my name in the below text box, I hereby certify that all information contained in the AG-385 Certification form and supporting materials submitted to DCED via the Internet are all true and correct and accurately represent the status and economic condition of the Municipality, and I also certify that, if certifying on behalf of the Municipality, I also understand that if I knowingly make a false statement, I may be subject to criminal procession in accurate with an authorized representative of the Municipality and I also certify that, if certifying on behalf of the Municipality, I also understand that if I knowingly make a false statement, I may be subject to criminal procession in accurate.					
Signature of	Secretary/City Cle	erk*				Signature of Chief Administrative Official*
View Draft A	G-385 Form	—				
						Submit Save & Exit Cancel Close
The informat	ion certified and s	submitted by you	r municipality is	subject to review	and verification	by the Department of The Auditor General.
« Prev Page						

- Check Box This box must be checked along with the entry of the 2 signatures (type name in ٠ appropriate box) to complete the online submission process.
- Signature of Secretary/City Clerk Type in the appropriate name.
- Signature of Chief Administrative Official Type in the appropriate name. •
- Submit to submit the online form for approval, there are multiple validation checks that Click occur before the data is saved. If it passes all the validations, your form is saved and the status is updated to Submitted.
 - Save & Exit Click

if you haven't entered all the required data but need to exit the system. This will save what you've entered so far so you don't have to re-enter it.

- Cancel Click if you want to remove all changes entered. If you haven't previously submitted or saved the data, all data entered is lost, if you did submit or save the data, the updated fields are set back to their saved/submitted values.
- Close discards any changes not submitted and closes the form returning you to your Click home page.

After your <u>form is submitted successfully</u>, **Step 6** redisplays with just the Cancel and Close buttons displayed. At this point, you can't change any of the data entered, if you need to make a change, please contact the Department of the Auditor General's Municipal Pensions and Fire Relief Programs Unit at 1-800-882-5073 or email <u>Comptroller@PaAuditor.gov</u> to reset the form so you can go in and make the change.

Click **Close** to return to your home page.

What happens after your form is submitted

The Auditor General's Municipal Pensions and Fire Relief Programs Unit performs an initial review of your submitted form data. If there are errors or questions, your form will be electronically returned, which means you will receive an email explaining the issue. This issue can be an error on your behalf or a question that needs addressed by you.

Also on your AG-385 Form Tasks box on the Munstats home page, you can see the status of your form. The status will be one of the following: Submitted for Approval, Reopened (Sent Back), or Approved.

Submitted for Approval



Reopened (Sent Back)

Your AG-385 Form Tasks (Direct all questions to PA Auditor General's Municipal Pensions & Fire Relief Programs Unit at 1-800-882-5073 or email to Comptroller@PaAuditor.gov) Your AG-385 Form has been reopened by the PA Auditor General's Municipal Pensions & Fire Relief Unit on 12/27/2017 – make the appropriate corrections and resubmit your form. Sent Back Comments: Please contact the VDMU to have the bank account you submitted on the form setup.

Approved

Your AG-385 Form Tasks (Direct all questions to PA Auditor General's Municipal Pensions & Fire Relief Programs Unit at 1-800-882-50)73 or email to Comptroller@PaAuditor.gov)
Your AG-385 Form has been approved by the PA Auditor General's Municipal Pensions & Fire Relief Unit on 12/27/2017.	

The information provided by your Municipality on the certification AG–385 FORM and the corresponding **PERSONNEL ROSTER DATA** will be subject to review and verification during a routine pension plan audit by the Department of the Auditor General. YOUR MUNICIPALITY MUST MAINTAIN SUPPORTING DOCUMENTATION FOR DATA SUBMITTED THAT SHOWS HOW THE INFORMATION FOR CERTIFYING PERCENTAGES OF FIRE PROTECTION WAS OBTAINED AND HOW THE NUMBER OF EMPLOYEES CERTIFIED AND THE PAYROLL AMOUNT CERTIFIED WERE DETERMINED.

FALSE STATEMENTS MADE HEREIN ARE PUNISHABLE UNDER 18 P.S. § 4904 (RELATING TO UNSWORN FALSIFICATION TO AUTHORITIES).

IF A MUNICIPAL PENSION SYSTEM OR A VOLUNTEER FIREFIGHTER RELIEF ASSOCIATION RECEIVES AN OVERPAYMENT OF STATE AID BECAUSE OF INCORRECT DATA ON THE AG-385 FORM, THE OVERPAYMENT, PLUS INTEREST MUST BE RETURNED TO THE COMMONWEALTH.

To Print The AG-385 Form:

- 1. Go to the Municipal Statistics Start Page.
- 2. Click on <u>AG-385 Form</u> link in the <u>Your AG-385 Form Tasks</u> box.
- 3. Click on Step 2.

Step 1	Step 2	Step 3	Step 4	Step 5	Step 6		
						PERSONNEL	ROSTER DATA
					-	 View AG-385 Form	View existing Roster

4. Click <u>View AG-385 Form</u> link.

<u>Note</u>: Depending on your computer's operating system the following window may display:

				-
Do you want to open or save AGForm191.pdf from munstats.beta.pa.gov?	Open	Save 🔻	Cancel	×
				- I

Select **Open** to view the form.

- 5. The AG-385 Form displays in PDF format.
- 6. To print :
 - a. Select File from the tool bar.
 - b. Select **Print** from the drop down list.
 - c. Click **Print** button.

If your current year's form has been approved or you want to print a prior years form:

1. In your home page's History box, click on the + beside Municipal AG-385 Form to see the list.



2. Click on yyyy AG-385 link to print that year's AG-385 form.

<u>Note</u>: Depending on your computer's operating system the following window may display:

Do you want to open or save AGForm191.pdf from munstats.beta.pa.gov?

Select **Open** to view the form.

- 3. The AG-385 Form displays in PDF format.
- 4. To print:
 - a. Select **File** from the tool bar.
 - b. Select **Print** from the drop down list.
 - c. Click **Print** button.

To Print The Personnel Roster Data:

- 1. Go to the Municipal Statistics Start Page.
- 2. Click AG-385 Form link in the Your AG-385 Form Tasks box.
- 3. Click Step 2.

Step 1 Step 2 Step 3 Step 4 Step 5 Step 6						
	Step 1	Step 2	Step 3	Step 4	Step 5	Step 6

4. Click the <u>View existing Roster</u> link.

<u>Note</u>: Depending on your computer's operating system the following window may display:

Do you want to open or save PersonnelRoster286.pdf from munstats.beta.pa.gov?	Open	Save 🔻	Cancel	×

Select **Open** to view the roster.

- 5. The Personnel Roster displays in PDF format with each Roster Type starting on a separate page.
- 6. To print:
 - a. Select File from the tool bar.
 - b. Select **Print** from the drop down list.
 - c. Click Print button.

If your roster has been approved or you want to print a prior year's Roster:

1. In your home pages History box click on the + beside Municipal AG-385 Form to see the list.



2. Click on <u>yyyy Roster</u> link to print that years Personnel Roster form.

<u>Note</u>: Depending on your computer's operating system the following window may display:

Do you want to open or save PersonnelRoster286.pdf from munstats.beta.pa.gov?	Open	Save 🔻	Cancel	×

Select **Open** to view the Roster.

- 3. The Personnel Roster displays in PDF format with each Roster Type starting on a separate page.
- 4. To print:
 - a. Select **File** from the tool bar.
 - b. Select **Print** from the drop down list.
 - c. Click Print button.

Appendix A

Downloading the Personnel Roster Data Template Files

Any extra data, alterations to the form/file or blank rows may result in an unexpected error when uploading your file to the system. Please only use the template form/file as intended.

1. Download the EXCEL Template.

On Step 2:

- 1. To report your Personnel Roster Data as an EXCEL spreadsheet:
 - a. Click **Download** link by the **AG-385 Roster Import Template (Excel file).**
- 2. Click **Open** to open up the file in Microsoft Excel.

Step 1	Step 2	Step 3	Step 4	Step 5	Step 6			
					UPLOAD TI	IE ROSTER		
		Dov		oster Import Tem oster Import Tem	plate (Excel file) plate (CSV/Text fi	le) Download Download		
		Attach the rost	ter by clicking on	the "Browse" bu	tton and click "Up			
	2							
	Do yo	u want to open or sa	ve Roster Import T	emplate.xlsx from	munstats.beta.pa.go	v? Open Save ▼ Cancel × ⊕		

Note:

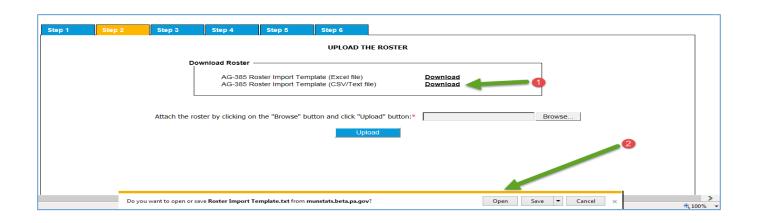
Depending on the version of Microsoft Office Excel you are using, you may get the following pop up window PROTECTED VIEW Be careful—files from the Internet can contain viruses. Unless you need to edit, it's safer to stay in Protected View. Enable Editing

Click Enable Editing button

2. Download the CSV/Text File Template.

On Step 2:

- 1. To report your Personnel Roster as a CSV/Text file:
 - a. Click Download link by the AG-385 Roster Import Template (CSV/Text file).
- 2. Click **Open** to open the file in your text editor.



Appendix B

Filling out the Personnel Roster Data Template Files

You MAY NOT CERTIFY employees participating in:

- a. Individual Retirement Accounts (IRA) Ineligible
- b. Deferred Compensation Plans Ineligible

Municipal Authority Employees are not eligible unless the employees meet certain conditions in the Third Class City Code (see Section 3 of Act 362 of 1992).

Complete the Personnel Roster Data for all plans, <u>use 1 form for all roster types</u>. They will sort and populate by roster type in the upload process.

Your Municipality must maintain its pension plan for three (3) years before it qualifies for state aid.

<u>Note</u>: Municipalities may not retroactively establish a pension plan to qualify.

- a. A Municipality pension plan is "maintained" by the Municipality. "<u>Maintained</u>" means financial support for 3 consecutive years by means of municipal contributions.
- b. The plan may be administered by the Municipality or by a trustee, such as a bank, insurance company union or the Pennsylvania Municipal Retirement System.

Who to include in the Personnel Roster Data File:

• Working, Active Full-Time Police Officers:

Each police officer MUST meet each of these conditions anytime between January 1st and December 31st of the *prior calendar year*:

- a. Be an ACTIVE, FULL-TIME POLICE OFFICER employed by the Municipality.
- b. Be EMPLOYED FOR ANY SIX (6) CONSECUTIVE MONTHS during the prior calendar year.
- c. WORK NOT LESS THAN 35 HOURS PER WEEK.
 - a. Disability Benefits You may report Police Officers receiving TEMPORARY SERVICE RELATED DISABILITY BENEFITS.
- d. Be a MEMBER OF A POLICE PENSION PLAN and meet all of its requirements.

Police Pension Plan Established:

Your plan must have been established on or before 1/1/ (current year – 3) to be eligible for state aid. Example: if current year is 2016 (2016 – 3 =2013) 1/1/2013

Payroll for Police Pension Plan:

Use W-2 tax form earnings pertaining to only full-time employees for the *prior calendar year*. Include any Heart and Lung benefits as part of the employee W-2 wages.

Working, Active Full-Time, Paid Firefighters:

Each Paid Firefighter MUST meet each of these conditions anytime between January 1st and December 31st of the *prior calendar year*:

- a. Be an ACTIVE, FULL-TIME PAID FIREFIGHTER employed by the Municipality.
- b. Be <u>EMPLOYED FOR ANY SIX (6) CONSECUTIVE MONTHS</u> during the *prior calendar year*.
- c. WORK NOT LESS THAN 35 HOURS PER WEEK.
- d. Be a MEMBER OF A FIREFIGHTER PENSION PLAN and meet all of its requirements.

Firefighter Pension Plan Established:

Your plan must have been established on or before 1/1/ (current year – 3) to be eligible for state aid. Example: if current year is 2016 (2016 – 3 =2013) 1/1/2013

Payroll for Firefighter Pension Plan:

Use W-2 tax form earnings pertaining to only full-time employees for the *prior calendar year*. Include any Heart and Lung benefits as part of the employee W-2 wages.

• Working, Active Full-Time, Non-Uniformed Employees:

Each Non-Uniformed Employee MUST meet each of these conditions anytime between January 1st and December 31st of the *prior calendar year*:

- a. Be an ACTIVE, FULL-TIME NON-UNIFORMED employee employed by the Municipality.
- b. Be <u>EMPLOYED FOR ANY SIX (6) CONSECUTIVE MONTHS</u> during the *prior calendar year*.
- c. WORK NOT LESS THAN 35 HOURS PER WEEK.
- d. Be a MEMBER OF A NON-UNIFORMED EMPLOYEE PENSION PLAN and meet all of its requirements.

Non-Uniformed Employee Pension Plan Established:

Your plan must have been established on or before 1/1/ (current year – 3) to be eligible for state aid. Example: if current year is 2016 (2016 – 3 = 2013) 1/1/2013

Uniformed Employee who is a Member of a Non-Uniformed Employee Plan:

- a. A paid firefighter or police officer who is a member of a non-uniformed plan must be reported under the Non-Uniformed Plan Type.
- b. The firefighter or police officer need to meet requirements a, b and c under the Working, Active Full-Time Police Officers section or the Working, Active Full-Time, Paid Firefighters section above, and requirement d under the Working, Active Full-Time, Non-Uniformed Employees section above.

Payroll for Non-Uniformed Employee Pension Plan:

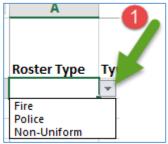
Use W-2 tax form earnings pertaining to only full-time employees for the *prior calendar year*. Supervisor meeting pay **SHOULD NOT** be included on the certification form.

Using the EXCEL Template

Highlighted fields are required

A2	Ŧ	$X \swarrow f_x$,
1	A	B Type of Plan		D Pol/Fir Member of Non-U Plan	E Employee Name	F Employee W-2 Full Time Wages	G Date of Birth	H Date of Hire	I Date of Release	Release Status	K Employee	L Accumulated Employee Contributions
2		-										
3 4		2	3	4	5	6	7	8	9	10	11	12
5												
6												
7												
8 9												
9 10												
11												
12												
13												
14												
15												
16 17												
18												
18 19												
20												
	• •	Roster Data Validatio	ons 🕂			: 4		1		1	1	•

1. Roster Type – Click arrow and select appropriate option.



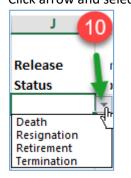
2. Type of Plan – Click arrow and select appropriate option.

В	0
	Dat 🥒
Type of Plan	Est
DB - Defined Benefit	
DC - Defined Contribution	-
Union	

- 3. Date Plan Established –enter date using mm/dd/yyyy format.
- Pol/Fir Member of Non-U Plan <u>Only enter</u> if Roster Type is Non-Uniform and employee is a Police Officer or Firefighter not covered under a Fire or Police pension plan. The firefighter or police officer must meet all the requirements outlined to be included on the roster. Click the arrow and select the appropriate value.

D Pol/Fir Member of Non-U Plan Fire Police

- 5. Employee Name enter last name, first name.
- 6. Employee W-2 Full Time Wages
- 7. Date of Birth enter date using mm/dd/yyyy format.
- 8. Date of Hire enter date using mm/dd/yyyy format.
- 9. Date of Release if applicable, enter date using mm/dd/yyyy format.
- Release Status <u>Only entered</u> if a Date of Release is entered. Click arrow and select the appropriate value



- 11. Employee Contributions
- 12. Accumulated Employee Contributions
 - a. The Employee Contributions column is for the contributions made by the employee in the reporting year, and the Accumulated Employee Contributions column is for total contributions made by the employee since they enrolled in the plan, as of the reporting year.
 - b. Please note that the employee contributions columns are for informational purposes only and do not factor into the calculation of the municipality's annual state aid allocation.

After all the data is entered, Save the file (Excel Template) and Close EXCEL.

Sample Excel Template:

		Date Plan	Pol/Fir Member of		Employee W-2 Full Time	Date of	Date of	Date of	Release	Employee	Accumulated Employee
Roster Type	Type of Plan	Established	Non-U Plan	Employee Name	Wages	Birth	Hire	Release	Status	Contributions	Contributions
Non-Uniform	DB - Defined Benefit	6/1/1970	Police	Timothy Hutton	\$36,469.27	12/28/1967	12/31/2012	12/1/2016	Death	\$2,500.00	\$4,500.00
Police	DB - Defined Benefit	12/13/1976		Johnny Depp	\$84,021.47	1/13/1974	8/27/2007				
Fire	DB - Defined Benefit	4/30/1970		David Brook	\$104,022.24	1/22/1955	11/19/1985				
Non-Uniform	DB - Defined Benefit	6/1/1970		Theodore Roosevelt	\$49,543.14	8/29/1974	3/21/2011	7/15/2016	Retirement		
Police	DB - Defined Benefit	12/13/1976		Zoe Doe	\$81,353.34	4/30/1978	4/27/2007				
Police	DB - Defined Benefit	12/13/1976		Brian Piccalo	\$96,079.84	7/6/1973	12/26/1995				

Using CSV/Text Template

The first line of data in the template contains the field names separated by a semi-colon (;). **DO NOT** change this line.

"Roster Type"; "Type of Plan"; "Date Plan Established"; "Pol/Fin Henber of Non-U Plan"; "Employee Name"; "Employee N-2 Full Time Nages"; "Date of Birth"; "Date of Hine"; "Date of Release"; "Release Status"; "Employee Contributions"; "Accumulated Employee Contributions"

The field names are:

"Roster Type";"Type of Plan";"Date Plan Established";"Pol/Fir Member of Non-U Plan";"Employee Name";"Employee W-2 Full Time Wages";"Date of Birth";"Date of Hire";"Date of Release";"Release Status";"Employee Contributions";"Accumulated Employee Contributions"

You must account for every field listed in every record entered. Every piece of data must begin with a double quote (") and end with a double quote (") and a semi-colon (;).

- 1. Roster Type required valid values are:
 - Fire Police Non-Uniform
- Type of Plan required valid values are: DB - Defined Benefit DC – Defined Contribution Union
- 3. Date Plan Established required date format is mm/dd/yyyy.
- 4. Pol/Fir Member of Non-U Plan required <u>Only</u> if Roster Type is Non-Uniform and employee is a Police Officer or Firefighter not covered under a Fire or Police pension plan. The firefighter or police officer must meet all the requirements outlined to be included on the roster. When appropriate valid values are: Fire
 - Police
- 5. Employee Name required.
- 6. Employee W-2 Full Time Wages required.
- 7. Date of Birth required date format is mm/dd/yyyy.
- 8. Date of Hire required date format is mm/dd/yyyy.
- 9. Date of Release if applicable date format is mm/dd/yyyy.
- 10. Release Status <u>Only entered</u> if a Date of Release is entered When appropriate valid values are: Death
 - Resignation

Retirement

Termination

- 11. Employee Contributions
- 12. Accumulated Employee Contributions DO NOT put a semi-colon after this field.

<u>Sample File</u>: Every field has a value "Non-Uniform";"Union";"01/01/2010";"Fire";"John Smith";"15800.00";"08/11/1969";"01/01/2011";"11/17/2016";"Death";"1245.75";"4500.00"

Every field has a value <u>EXCEPT</u> Pol/Fir Member of Non-U Plan "Fire";"DC - Defined Contribution";"01/01/2010";<mark>""</mark>;"Jane Doe";"15500.00";"04/18/1965";"02/01/2012";"04/17/2016";"Retirement";"545.75";"2500.00"

Only required fields have a value

"Police";"DB - Defined Benefit";"12/13/1976"<mark>;""</mark>;"Johnny Depp";"84021.47";"1/13/1974";"8/27/2007";<mark>""</mark>;"";"" "Non-Uniform";"DB - Defined Benefit";"6/1/1970";<mark>""</mark>;"Theodore Roosevelt";"49543.14";"8/29/1974";"3/21/2011";<mark>""</mark>;"";""

Appendix C

Browse for Personnel Roster Data File to Upload

On Step 2:

Click Browse (C).

Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	
					DOWNLOAD/UPLOAD THE PERSONNEL ROSTER DATA Step 1: Download the appropriate Personnel Roster Data file template	
					Step 1: Download the appropriate resolution known of the template Download Roster AG-385 Roster Import Template (CSV/Text Tile) Download Step 2: Enter the roster data into the downloaded file and save it B Step 3: Upload the saved roster file Attach the roster by clicking on the "Browse" button and click "Upload" button:* Browse C	
« Prev Page					Next P:	age »

Note: The below screen shot is what appears when working on a computer that uses Windows operating system.

	Choose File to Upload	* 1.0.1	<u> </u>
	Coo ♥ ↓ Libraries ▶ Doct	uments My Documents My SpreadSheets ang testing	✓ 4y Search ang testing
	Organize 🔻 New folder		i≡ • □ 0
Navigate to where you	ጵ Favorites 📃 Desktop	Documents library ang testing	Arrange by: Folder 🔻
saved the	Downloads	E Name	Date modified Type
Roster Data file to upload	🖳 Recent Places	Townrville Boro Roster Data 2016.xlsx	11/7/2016 11:26 AM Microsoft Excel W
to aproud	📃 Desktop		E
	Documents		
	My Documents		
	Public Documents Music		
	 Pictures Videos 		*
		m	•
	File name: T	ownrville Boro Roster Data 2016.xlsx	 ✓ All Files (*.*)
			Open Cancel
			al

- <u>AA</u> Navigate to where you saved the Personnel Roster Data File.
- <u>BB</u> Click once on the file name you want to select and it will appear in the File Name box.

<u>CC</u> Click **Open** button to select the file. **Step 2** redisplays showing the selected file name.

DD Click **Upload** to load the data to the Municipal Statistics website. The data displays in a grid on **Step 2**.

Note:

Validations are in place when you submit the Personnel Roster Data file. Each error message/warning will indicate where the correction needs to take place. See <u>Appendix D</u> for a list of possible errors you could receive when uploading the Personnel Roster Data File.

	UPLOAD THE ROSTER											
Download Roster AG-385 Roster Import Template (Excet file) AG-385 Roster Import Template (CSV/Text file) Download Download												
			Attach the ros	ter by clicking on the "Bro	wse" button and click "Upload"	button:*			Browse			
					Upload							
1	Roster Type Type of Plan	Date Plan Established	Pol/Fir Member of Non-I Plan	U Employee Name	Employee W-2 Full Time Wages	Date of Birth	Date of Hire	Date of Release	Release Status	Employee Contributions	Accumulated Employee Contributions	
	Non-Uniforr V DB - Define V	12/08/1986	Not Applica 🗸	Robert Frost	74618.43	09/08/1951			Not Applical 🗸			Delete
	Non-Uniforr V DB - Define V	12/08/1986	Not Applica 🔽	Robert Wave	4423.04	07/25/1972	11/25/2011	04/28/2015	Retirement 🔽			Delete
	Non-Uniforr V DB - Define V	12/08/1986	Not Applica	Michael Jordan	32373.33	01/17/1968	11/26/2012		Not Applical			Delete
	Non-Uniforr V DB - Define V	12/08/1986	Not Applica 🗸	Jean Stapelton	47389.69	05/22/1965	07/14/2014		Not Applical			Delete
											Add New Ro	
					Submit Roster I	Data						

Review the data in the grid. You can update the data in the grid if you find any incorrect data.

<u>EE</u> Once the data has been reviewed, click **Submit Roster Data** to save the data to the system. The saved data is used to populate fields on **Step 3**. You are taken to **Step 3** automatically. Please review it for accuracy.

This dialog box is displayed when your Personnel Roster Data is successfully saved.

[Attention	
l	Your values are calculated and pre-populated on Step3	

Continue with the instructions for **Step 3 Page...** found on page 10 of this document.

Appendix D

Error/Warning Messages for Roster Data

Below is a sample error message. Each error message/warning will indicate where the correction needs to be done.

Please review the following warnings:

🗥 If the information provided is correct, you may ignore these warnings.

(1) Employee has not been employed for 6 consecutive months or more in Row 2, Column 8

										oved the row that c ployee who worked		
Row No	Roster Type Type of Plan	Date Plan Established	Pol/Fir Member of Non-U Plan	Employee Name	Employee W-2 Full Time Wages	Date of Birth	Date of Hire	Date of Release	Release Status	Employee Contributions	Accumulated Employee Contributions	
1	Non-Uniforr V DB - Define V	12/08/1986	Not Applica	Robert Frost	74618.43	09/08/1951	06/26/2001		Not Applical 🗸			Delete
2	Non-Uniforr V DB - Define V	12/08/1986	Not Applica	Michael Jordan	32373.33	01/17/1968	11/26/2012		Not Applical			Delete
3	Non-Uniforr V DB - Define V	12/08/1986	Not Applica	Jean Stapelton	47389.69	05/22/1965	07/14/2014		Not Applical			Delete
											Add New Ro	ow
					Submit Roster [Data						

Roster Data Errors/Warnings

Business rule	Error message	Error type
If check box 2 or 3 is checked on Step 1 and	Checkbox 2/Check box 3 is checked on	Warning
Question 2a on Step 3 is less than 1.00	Step 1 but Firefighter employees	
	information is not entered on the uploaded file	
Roster is required	An attachment on Step 2 is required	Error
If the uploaded file is not a Microsoft Excel	The document is not a Microsoft Excel	Error
file or CSV file	document or Text file or CSV file, and	
	cannot be used as a Roster	
If Roster type is blank on the uploaded file	Roster Type is required in Row @@	Error
	Column 1. Please correct the data in your	
	file and try uploading it again	
If Checkbox 1 is checked on Step 1 and	Our Municipality is serviced SOLELY by	Error
'Fire' is selected for the Roster Type on the	Volunteer Firefighters is checked on Step	
uploaded file	1, but the roster uploaded has a record	
	for Fire in Row @@, Column 1. Please	
	correct the data in your file and try	
	uploading it again	
If Type of Plan is blank on the uploaded file	Type of Plan is required in Row @@,	Error
	Column 2. Please correct the data in your	
	file and try uploading it again	

	1
	Error
/	
-	Error
Please correct the data in your file and try	
uploading it again	
Date Plan Established cannot be in future	Error
in Row @@, Column 3. Please correct the	
Pol/Fir Member of Non-U Plan should be	Error
empty for Roster types, Fire and Police in	
Row @@, Column 4. Please correct the	
data in your file and try uploading it again	
Employee Name, enter last name, first	Error
name is required in Row @@, Column 5.	
Please correct the data in your file and try	
uploading it again	
Employee W-2 Full Time Wage is	Error
required in Row @@, Column 6. Please	
correct the data in your file and try	
uploading it again	
Employee W-2 Full Time Wage is not a	Error
valid number in Row @@, Column 6.	
Please correct the data in your file and try	
uploading it again	
Date of Birth is required in Row @@,	Error
Column 7. Please correct the data in your	
file and try uploading it again	
Wrong Date format for Date of Birth in	Error
Row @@, Column 7. Please correct the	
data in your file and try uploading it again	
Date of Birth cannot be in future in Row	Error
@@, Column 7. Please correct the data in	
your file and try uploading it again	
Date of Hire is required in Row @@,	Error
Column 8. Please correct the data in your	
file and try uploading it again	
Wrong Date format for Date of Hire in	Error
Row @@, Column 8. Please correct the	
data in your file and try uploading it again	
Date of Hire cannot be before Date of	Error
Birth in Row @@, Column 8. Please	
	Date Plan Established cannot be in future in Row @@, Column 3. Please correct the data in your file and try uploading it again Pol/Fir Member of Non-U Plan should be empty for Roster types, Fire and Police in Row @@, Column 4. Please correct the data in your file and try uploading it again Employee Name, enter last name, first name is required in Row @@, Column 5. Please correct the data in your file and try uploading it again Employee W-2 Full Time Wage is required in Row @@, Column 6. Please correct the data in your file and try uploading it again Employee W-2 Full Time Wage is not a valid number in Row @@, Column 6. Please correct the data in your file and try uploading it again Date of Birth is required in Row @@, Column 7. Please correct the data in your file and try uploading it again Wrong Date format for Date of Birth in Row @@, Column 7. Please correct the data in your file and try uploading it again Date of Birth cannot be in future in Row @@, Column 7. Please correct the data in your file and try uploading it again Date of Birth cannot be in future in Row @@, Column 7. Please correct the data in your file and try uploading it again Date of Hire is required in Row @@, Column 8. Please correct the data in your file and try uploading it again Date of Hire is required in Row @@, Column 8. Please correct the data in your file and try uploading it again Date of Hire is required in Row @@, Column 8. Please correct the data in your file and try uploading it again Date of Hire is required in Row @@, Column 8. Please correct the data in your file and try uploading it again

If future date is selected for Date of Hire on the uploaded file	Date of Hire cannot be in future in Row @@, Column 8. Please correct the data in your file and try uploading it again	Error
If Release Status is selected and Date of Release is blank on the uploaded file	Date of Release is required in Row @@, Column 9 as Release Status is selected. Please correct the data in your file and try uploading it again	Error
If Date of Release is in wrong format on the uploaded file	Wrong Date format for Date of Release in Row @@, Column 9. Please correct the data in your file and try uploading it again	Error
If Date of Release is before Date of Birth or Date of Hire on the uploaded file	Date of Release cannot be before Date of Birth/Date of Hire in Row @@, Column 9. Please correct the data in your file and try uploading it again	Error
If future date is selected for Date of Release on the uploaded file	Date of Release cannot be in future in Row @@, Column 9. Please correct the data in your file and try uploading it again	Error
If Date of release is not blank and Release Status is blank on the uploaded file	Release Status is required in Row @@, Column 10 as Date of Release is entered. Please correct the data in your file and try uploading it again	Error
If Employee Contribution is not a valid number on the uploaded file	Employee Contribution is not a valid number in Row @@, Column 11. Please correct the data in your file and try uploading it again	Error
If Accumulated Employee Contribution is not a valid number on the uploaded file	Accumulated Employee Contribution is not a valid number in Row @@, Column 12. Please correct the data in your file and try uploading it again	Error
If Employee is hired for less than 180 days and Employee W-2 Full Time Wage is equal to 0.00 on the uploaded file	Employee has not been employed for 6 consecutive months or more in Row @@, Column 8. Please correct the data in your file and try uploading it again	Error
If Employee is hired for less than 180 days and Employee W-2 Full Time Wage is not equal to 0.00 on the uploaded file	Employee has not been employed for 6 consecutive months or more in Row @@, Column 8	Warning
If Roster type is equal to 'Select' in the Grid	Roster Type is required in Row @@ Column 1. Please correct the data in the grid and try submitting it again	Error
If Checkbox 1 is checked on Step 1 and 'Fire' is selected for the Roster Type in the Grid	Our Municipality is serviced SOLELY by Volunteer Firefighters is checked on Step 1, but the Grid has a record for Fire in Row @@, Column 1. Please correct the data in the grid and try submitting it again	Error

If Type of Plan is equal to 'Select' in the Grid	Type of Plan is required in Row @@, Column 2. Please correct the data in the grid and try submitting it again	Error
If Date Plan Established is blank in the Grid	Date Plan Established is required in Row @@, Column 3. Please correct the data in the grid and try submitting it again	Error
If Date Plan Established is in wrong format in the Grid	Wrong Date format for Date Plan Established in Row @@, Column 3. Please correct the data in the grid and try submitting it again	Error
If future date is selected for Date Plan Established in the Grid	Date Plan Established cannot be in future in Row @@, Column 3. Please correct the data in the grid and try submitting it again	Error
If Roster Type is Fire or Police and Pol/Fir Member of Non-U plan is Fire or Police in the Grid	Select 'Not Applicable' from Pol/Fir Member of Non-U Plan dropdown for Roster types, Police and Fire in Row @@, Column 4. Please correct the data in the grid and try submitting it again	Error
If Pol/Fir Member of Non-U plan is equal to 'Select' on the Grid in the Grid	Pol/Fir Member of Non-U Plan is required in Row @@, Column 4. Please correct the data in the grid and try submitting it again	Error
If Employee Name is blank in the Grid	Employee Name, enter last name, first name is required in Row @@, Column 5. Please correct the data in your file and try uploading it again	Error
If Employee W-2 Full Time Wage is blank in the Grid	Employee W-2 Full Time Wage is required in Row @@, Column 6. Please correct the data in the grid and try submitting it again	Error
If Employee W-2 Full Time Wage is not a valid number in the Grid	Employee W-2 Full Time Wage is not a valid number in Row @@, Column 6. Please correct the data in the grid and try submitting it again	Error
If Date of Birth is blank in the Grid	Date of Birth is required in Row @@, Column 7. Please correct the data in the grid and try submitting it again	Error
If Date of Birth is in wrong format in the Grid	Wrong Date format for Date of Birth in Row @@, Column 7. Please correct the data in the grid and try submitting it again	Error
If future date is selected for Date of Birth in the Grid	Date of Birth cannot be in future in Row @@, Column 7. Please correct the data in the grid and try submitting it again	Error

If Date of Hire is blank in the Grid	Date of Hire is required in Row @@, Column 8. Please correct the data in the grid and try submitting it again	Error
If Date of Hire is in wrong format in the Grid	Wrong Date format for Date of Hire in Row @@, Column 8. Please correct the data in the grid and try submitting it again	Error
If Date of Hire is before Date of Birth in the Grid	Date of Hire cannot be before Date of Birth in Row @@, Column 8. Please correct the data in the grid and try submitting it again	Error
If future date is selected for Date of Hire in the Grid	Date of Hire cannot be in future in Row @@, Column 8 Please correct the data in the grid and try submitting it again	Error
If Date of Release is blank and Release Status is Death or Resignation or Retirement or Termination or Select in the Grid	Date of Release is required in Row @@, Column 9 as Release Status is selected. Please correct the data in the grid and try submitting it again	Error
If Date of Release is in wrong format and Release Status is Death or Resignation or Retirement or Termination or Select in the Grid	Wrong Date format for Date of Release in Row @@, Column 9. Please correct the data in the grid and try submitting it again	Error
If Date of Release is before Date of Birth or Date of Hire in the Grid	Date of Release cannot be before Date of Birth/Date of Hire in Row @@, Column 9. Please correct the data in the grid and try submitting it again	Error
If future date is selected for Date of Release in the Grid	Date of Release cannot be in future in Row @@, Column 9. Please correct the data in the grid and try submitting it again	Error
If Date of release is not blank and Release Status is blank in the Grid	Release Status is required in Row @@, Column 10 as Date of Release is entered. Please correct the data in the grid and try submitting it again	Error
If Date of release is before the filing year start date	Date of Release is prior to filing year, please remove employee from roster	Error
If Employee Contribution is not a valid number in the Grid	Employee Contribution is not a valid number in Row @@, Column 11. Please correct the data in the grid and try submitting it again	Error
If Accumulated Employee Contribution is not a valid number in the Grid	Accumulated Employee Contribution is not a valid number in Row @@, Column 12. Please correct the data in the grid and try submitting it again	Error

If Employee is hired for less than 180 days and Employee W-2 Full Time Wage is equal to 0.00 in the Grid	Employee has not been employed for 6 consecutive months or more in Row @@, Column 8. Please correct the data in the	Error
	grid and try submitting it again	
If Employee is hired for less than 180 days	Employee has not been employed for 6	Warning
and Employee W-2 Full Time Wage is not	consecutive months or more in Row @@,	
equal to 0.00 in the Grid	Column 8	
If Employee Name, Date of Birth and Date	Please check the highlighted records for	Error
of Hire are same for multiple records in the	possible duplication and either fix or	
Grid	remove one of the records	
On button 'Continue' click, if the grid values	Your values are calculated and pre-	Notification
are valid, the system takes the user to the	populated on Step 3	
Step 3		

Appendix E

Registering for a Municipal Statistics Account

If you do not have a Municipal Statistics user account, go to <u>https://munstats.pa.gov/forms/LogIn.aspx</u> and select "New User Registration" button.



Step 1. Obtain a PA Keystone Login account

Complete all fields with an asterisk. Note: An email address is not required for a PA Keystone Login account.

Register				
Personal Information:				
First Name •				
Last Name •		Security Questions:		
Date Of Birth	mm/dd/yyyy	Security Question 1 +	Select a security question	~
Contact Information:		Security Answer 1 •		
Email		Security Question 2 +	Select a security question	~
Mobile Phone Number	8083-8884-88888	Security Answer 2 *		
Login Information:		Security Question 3 *	Select a security question	~
Username *		Security Answer 3 •		
Password •				-
Confirm Password •			I'm not a robot	INCAPTONA Phag-Terra
			Register Cancel	

After completing all required fields and clicking Register, you will see the following message. Do not click the "Please proceed to Login" link, just return to the Municipal Statistics login page <u>https://munstats.pa.gov/forms</u> and follow step 2.

Account Management Success

Your account has been created successfully. Please proceed to Login.

Step 2. Register for Municipal Statistics e-filing privileges.

Log into Municipal Statistics with your Keystone Login username and password, and you will be directed to the Municipal Statistics registration page, which will import your Keystone Login information. (**Note:** This information cannot be changed- if it is incorrect, you must return to PA Keystone Login to correct).

Municipalities- complete the required fields for the Municipal Statistics registration and follow the steps on the next page.

Regionals- skip to page 40 for your registration instructions.

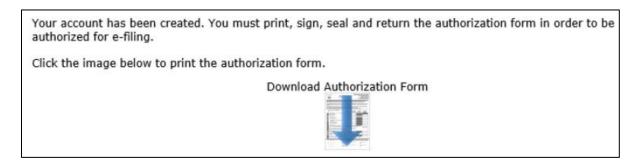
Domain*	SRPROD	
User Name*	PsatsTest1	
First Name*	Test	
Last Name*	User	
Organization*	Select	
Address 1*		
Address 2		
City*		
State*	PA	
Zip*		
Phone*		
Fax		
E-mail address*	PsatsTest1@abc.com	
	Submit	

If you are a Municipality:

<u>Organization</u> - Select "Municipality" from the drop-down box. <u>County</u> – Select your County from the dropdown box. <u>Municipality</u> – Select your Municipality from the dropdown box.

Domain*		
User Name*		
First Name*		
Last Name*		
Organization*	Municipality 🗸	
County	ADAMS	Municipality Search:
Municipality	Select 3	Select a specific Mu
Title*	Select	exact name and clic
Address 1* Address 2 City* State* Zip* Phone* Fax E-mail address*	ABBOTTSTOWN BORO ARENDTSVILLE BORO BENDERSVILLE BORO BERWICK TWP BIGLERVILLE BORO BUTLER TWP CARROLL VALLEY BORO CONEWAGO TWP CUMBERLAND TWP EAST BERLIN BORO FAIRFIELD BORO FRANKLIN TWP FREEDOM TWP GERMANY TWP	
* Required fields	GETTYSBURG BORO HAMILTON TWP HAMILTONBAN TWP HIGHLAND TWP	

Click **Submit** after completing all the required fields. Then click the "Download Authorization Form" link. Print, sign and fax/email the Authorization Form to DCED. As soon as DCED receives and approves it, you will receive an email indicating your e-filing privileges have been activated.



If you are a Regional:

Regionals are not visible in the Municipality dropdown list. Click on the link in red at the top of the Registration page.

Note: If you are an Authority/Regional/Actuary/Third Party Administrator that DOES NOT currently file with DCED and ONLY files Act 205 and/or AG-385, please <u>click here</u>.

<u>Organization</u> - Select "Regional" from the drop-down box. <u>County</u> – Select your County from the dropdown box. <u>Municipality</u> – Select your Regional from the dropdown box.

User Name*	
First Name*	
Last Name*	
Organization*	Regional V
previous registration	on is not on the list, please check there. If it is not, contact Municipal 800-882-5073 or email
County*	ALLEGHENY V
Municipality	Select 3
Title*	Select Steel Rivers Council of Governments
Address 1*	Tri-Community S EMS Nonuniform Northern Regional Police
Address 2	Allegheny County Police Fund Allegheny County Deputy Sheriffs Fund
City*	Allegheny County District Attorney Detectives Fund
State*	Allegheny Valley Regional Police Department Allegheny Valley North Council Of Governments
Zip*	Char-West Council Of Governments North Hills Council Of Governments
Phone*	Quaker Valley Council Of Governments
Fax	South Hills Area Council Of Governments Turtle Creek Valley Council Of Governments
E-mail address*	Southwest Regional Dispatch Center
	Submit
* Required fields	

Click **Submit** after completing all the required fields.

You will receive an email from <u>Comptroller@PaAuditor.gov</u> letting you know your e-filing privileges have been granted. You can now log in to the Municipal Statistics website using the username and password you set up in the registration form.

Version Changes

Date	Version #	Description
01/23/2017	2017-01.1	Updated DCED's URL http to https
		Added mailing address to General Instructions section
		Updated Step 1 header to include Pension Data Questions
		Updated screen shot for Step 1
		Added Reminder about Save and Exit under each Step 1 – 6 section
		Added additional information to Registering for a Municipal Statistics
		Account section for Regionals.
		Changed cover page version from 2017-01 to 2017-01.1
02/13/2017	2017-01.2	Added Note to Step 2 about adding additional information to templates
		Added Instructions on how to print the AG-385 Form and the Personnel
		Roster Data.
12/27/2017	2018.0	Updated to included requested changes for 2 nd year.
01/02/2018	2018.1	Added examples for prefix & suffix fields on contact page.
12/23/19	2019.1	Removed references to former paper docs, revised/updated frequent
		phone call concerns/questions