RETIREMENT PLAN CATCH-UP CONTRIBUTIONS FOR 2010

January 2010

For 2010, employees age 50 or older will again be allowed to make additional “catch-up” contributions to various retirement plans (401K, 403B, SARSEP, 457). An individual may make an additional pre-tax catch-up contribution up to $5,500 in 2010 (this is the same limitation amount as 2009). In the case of a SIMPLE IRA Plan, the “catch-up” amount is $2,500. Additionally, if there is a company match in place, the employer is allowed to, but not required to, match the additional amount.

Check with your retirement plan advisor to determine who is eligible. If an eligible employee will be taking advantage of this regulation, PayChoice Online and Connection clients need to enter the employee information. All other clients must email or fax the completed form to the Client Service Department preferably before the first payroll of 2010.

Thank you,

PAYROLL NETWORK, INC.

Company ID # __________

Company Name ____

Employee #: ____

Employee Name ____

Employee Birth Date ____

Type of Plan ____

Total Amount of Deduction ____

Amount per Pay ____

Date to Begin Taking Deduction ____

Company Match? (Yes or No) ____

Submitted by: ____

Phone Number: ____

Email: ____

____

Employee Signature Date

SPECIAL REQUEST FORM

Instructions: If applicable, please complete and submit this form to the Client Service Department.

Name____

Company Name ____ Client # _______

Address____

City, State, Zip Code____

ORDER	PRODUCT & DESCRIPTION	COST	
☐	***Employee W-4's for 2010***	Up to 20 Employees 21 – 50 Over 50	$15.00 $20.00 $25.00
☐	***Employee Attendance Records for 2010*** (Provides easy way to track time off)	Up to 20 Employees 21 – 50 Over 50	$15.00 $20.00 $25.00
☐	***Employee Name and Address Labels*** (Preprinted labels for communication with employees)		$.42 each

As long as the above items are ordered to coincide with normal payroll delivery, there will be no extra delivery charges.

TERMINATED EMPLOYEE REQUEST FORM

PayChoice Online and Connection clients should review the new options available for terminated employee data retention.

NOTE: Your existing data retention will remain unchanged, unless you submit this *Terminated Employee Request Form* to the Client Service Department.

How long should your terminated employee data be readily available?

- ☐ Keep on file permanently.
- ☐ Drop at the end of 2009.
- ☐ Keep for one year, then delete at the end of 2010.
- ☐ Keep for two years, then delete at the end of 2011.
- ☐ Keep for three years, then delete at the end of 2012.
- ☐ Keep for four years, then delete at the end of 2013.
- ☐ Keep for five years, then delete at the end of 2014.

Name____

Company Name_______________________________ Client #_________________

Address ____

City, State, Zip Code ____

Security Information Release Authorization Form

Client Four Digit ID: ________ 2nd ID ________ 3rd ID ________ 4th ID ________ 5th ID________

Client Name: ____

Authorized Contact Name:____

Authorized Contact Title:____

Authorized Contact E-mail: ____

Phone Number:______________________________ Fax Number:__________________________

Signature:____Date____________________
(Client authorized contact only)

Change existing user level access:

☐ None ☐ From "User" to "Company Level"* ☐ From "Company Level" to User" ☐ From Employee to Administrator

☐ From Administrator to Employee ☐ Add Admin to Employee Services ☐ Allow Access to ViewChoice reports

☐ No longer allow access to ViewChoice reports ☐ Reset password ☐ Delete user

☐ Other:____

***This option requires making an employee an administrator**

Add New User:

Payroll: ☐ None ☐ Administrator ☐ Data Entry ☐ Hours only

Employee Services: ☐ None ☐ Administrator ☐ Employee

View Choice: ☐ None ☐ Full Access

Online Employer: ☐ None ☐ Company Level Access (Allows User to Change Settings for Any User)

Tax Browser: ☐ None ☐ Full Access

HR Resource Center: ☐ None ☐ Online Access ☐ Telephone Consult

User Name:____

User E-mail:____

Fax form to the attention of the IT Department at 301-770-4666

PREPARING FOR YEAR-END AND 2010 REPLY FORM

Company Name ______________________________

Company Number ______________________________

Date ______________________________

Completed By ______________________________

Signature ______________________________

ACTION ITEM: To avoid tax and penalties, please complete and return no later than:

Friday, December 18, 2009

Fax to (301)770-4666

Verifying W-2 Information

A. Please verify your **Company legal** name, address and Account #'s

☐ My Company's **Legal** Name & Address	☐ Are correct	☐ Are incorrect
☐ My Federal ID #	☐ Is correct	☐ Is incorrect
☐ My State ID #'s	☐ Are correct	☐ Are incorrect
☐ My Local ID #'s	☐ Are correct	☐ Are incorrect

B. I have reviewed my **Employee Information** including W-2 Pension Status. I understand the IRS may assess penalties for inaccurate information:

ACTION ITEM: Have you verified that the name and social security number on every employee's paycheck matches his/her Social Security card exactly? DO NOT use shortened or nick names (ex. Betsy for Elizabeth).

The IRS may assess penalties against employers whose Forms W-2 have mismatched employee names and social security numbers. The penalty for W-2's with incorrect information is $50.00 (maximum $250,000).

☐ I have keyed all necessary changes in my Payroll Network software OR

☐ You input my payroll – I have reviewed my payroll and notified you of all necessary changes.

☐ No changes are required – my employee information is correct as shown.

Year End Adjustments

A. Outstanding **VOID/MANUAL** CHECKS

☐ I **DO NOT** have any unprocessed 2009 manual or void checks.

☐ I **DO** have unprocessed manual/void checks. I will forward all void/manual checks to Payroll Network, Inc. before my last scheduled payroll.

******Remember – checks issued in 2009 cannot be voided 2010******

B. Third Party Sick Pay

☐ I **WILL** report Third Party Sick Pay for 2009. All third party sick pay amounts should be reported to us before your last payroll of 2009. For those clients who are concerned about receiving timely information from their providers, please be aware that interim statements are available and can be used. Please contact your third-party provider to obtain this information.

Note: We will produce and file all Employee Third Party Sick Pay W2's unless you notify us in writing that you or your third party administrator will be responsible for these forms.

☐ I will **NOT** report Third Party Sick Pay for 2009.

I understand that if I need to make any changes **AFTER MY LAST PAYROLL**, I must call Client Service **IMMEDIATELY** to request that the processing of my W2s be put on **HOLD**. Otherwise, Payroll Network, Inc. will begin processing my 4th quarter reports and W2s within 48 hours of my last payroll of 2009. **Submitting changes or additional information after this period will result in additional charges.**