

Adding a New Employee to Empower

This form should be completed by new employees who will receive benefits from your organization. Below lists the required fields for adding a new participant through the Empower Plan Service Center.

If you have questions, please contact the Church Benefits Board at helpdesk@churchbenefits.org or (770) 220-1672

•	First name
•	Middle Initial
•	Last name
•	Social Security Number
•	Birth Date
•	Marital Status
•	Gender
•	Preferred Language
•	Address
•	City
•	State
•	Zip
•	Home Phone
•	Work Email
•	Personal Email (Required)
•	Participation Date (date eligible for benefits)
•	Hire date
•	Annual Salary Amount

This form is for your records and does not need to be returned to CBB.

Step by Step Instructions are below.

Step-by-Step instructions to Add/Enroll Employee into CBB 403(b)9 Plan

Screen 1

- 1. Login to Empower Plan Service Center (plan.empower-retirement.com)
- 2. Click "Participants" in left menu
- 3. Click "Add Employee"
- 4. Complete All Fields using information from "Adding New Employee" Form
- 5. Click Continue

Add a New Employee:	
Enter SSN:	000-00-1234
Re-Enter SSN:	000-00-1234
Participant Date of Birth:	01/01/2000 mm/dd/yyyy
Participant Last Name:	SMITH
	Continue

Screen 2

1. Complete all applicable information.

2. Be sure to include personal email AND work email. At the very least, you must include a personal email address.

3. Click Continue

Employee Basic Informat	ion:	
*Last Name:	TEST	
*First Name:		
Middle Name:		
Suffix:		
	01/01/1968 (mm/d	id/yyyyy)
Marital Status:		
Gender:		
Language Preference:		
Non Resident Alien:		
Employee Contact Inform		
*Address:	1111 SAMPLE WAY	
*0.4	MIDLOTHIAN	
	VIRGINIA	v
	23112	
	UNITED STATES	~
Home Phone:		
Work Phone:	540 867-5329	Work number recommended to provide a
Extension:		more accurate reporting and website experience.
Mobile Phone:	540 555-5555	
Fax:		
Work Email:	TEST@FBCSAMPLE.ORC	Email recommended to provide a more accurate reporting and website experience.
Personal Email:	TEST.SAMPLE@GMAIL.C	reporting and hobolic experience.
Confirm:	TEST.SAMPLE@GMAIL.C	
		* Mandatory Fields
	** Mandatory	Fields for the United States and Canada only
		tinue Exit without adding employee

Screen 3

- 1. Eligibility Code = Yes
- 2. Participation Date = Date Employee was eligible to receive benefits
- 3. Leave Participant Date Source & Ineligibility Reason Code Blank
- 4. Click Continue

Eligibility Information:					
Eligibility Code: Yes 🗸					
Participation Date: 05/01/2023 (mm/dd/yyyy)					
Participation Date Source:					
Ineligibility Reason Code:					
Previous Page Continue Exit without adding employee					

Screen 4

- 1. Salary Amount = Annual Salary + Housing Amount
- 2. Frequency = Annual
- 3. Click Continue

Enter Income Data:
*Salary Amount: 80000
*Frequency: ANNUAL * 1
Previous Page Continue Exit without adding employee

Screen 5

- 1. Hire Date = The Employee's First Day
- 2. Leave the remaining items blank
- 3. Click Continue

1: 000-00-5555			Name: JANE SMITH
new employment information:			
new employment mormation.			
Hire Date	05/01/2023	(mm/dd/yyyy)	
Term Date		(mm/dd/yyyy)	
Term Reason	~]	
Employee Id			
Insider?			
Officer?			
Super Officer?			
Highly Compensated?			
Ownership Percentage			
Trade Monitoring Indicator?			
FT/PT Employee			
Overseas Employee?			
Overseas Date		(mm/dd/yyyy)	

Screen 6

1. Confirm the Division/Account listed is your employer

*If you manage multiple employer accounts, be sure you select the one applicable to this employee. 2. Click Continue

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Select Division: D 5000 5000 GPP Training Division		
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Previous Page	Continue Exit without adding employ	/ee
_		
reen 7		
Click "Continue Using Default Allo	cation"	
o not change any percentages.		
SEN: C00-00-5555		Mame: SALLY SMITH
Imployee Allocation Information as of: 05/25/2023	ned for this pericipant	
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Add/Chang	c Aliceationa	
iota: Funds may impose redemption fees on cartain transfers, recemptiona or		od stated in the fund s
rospectus or other disclosure documents. For more information, please refer t		
inter New allocations for future contributions:	Fund Short Name	Enter Parcontage
Swaranteed Lifetime Income		
Empower Seauro Foundation Bai Insti Asset Allecation	V3/BL2 1	L %
Nrguaid Target Retirement Income Inv	VTIND 1	E 16
kerguard Target Retirement 2020 inv	VTWNX 1	E 95
languard Target Retirement 2025 Inv	VTTVK 1	c %
Arguard Tarjet Bellament 2000 inc	VTHEK 1	C 95
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	VFORM 1	C %
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Screen 8

1. Click "Continue without deferrals"

Percent	Dollar	Enter deferral election	Select target payroll	
erral inform	nation for Roth			
Percent	Dollar	Enter deferral election	Select target payroll	

That's it! When complete, the system will bring you back to the first screen.

Important Notes:

1. **Existing Employee Error**: If an employee has an account within the CBB 403(b)9 plan but is associated with another employer, you will not be able to get through this entire process. You will receive an error that says this individual already exists in the system. If that happens, email Jenny Clore, Director of Benefits, <u>jclore@cbf.net</u>.

2. **Employee Deferrals**: Deferrals or Employee Voluntary Contributions should be managed by the administrator/billing contact.

Employees are required to complete a <u>Salary Reduction Agreement</u> and submit to the employer's financial administrator.