

Obtaining EFAST2 Credentials

How to obtain your EFAST2 filing signer credentials: The Department of Labor's EFAST2 Form 5500 filing program

The EFAST2 electronic filing requirements for Form 5500 require that you sign the Form 5500 electronically. The Department of Labor (DOL) will not permit us to obtain the credentials on your behalf.

To obtain the filing signer credentials, you must register on [Login.gov](https://www.login.gov) for secure private access to participating government agencies. You will then register on the DOL's website.

GETTING STARTED

1. Visit www.login.gov and select Sign in with Login.gov.
2. Select *Create an account*.
3. Enter your email address, select your language and accept the rules of use. Click *Submit*
 - A confirmation email will be sent to the email address entered. Use this email to confirm your email address.
 - Create a strong password.

The image displays two screenshots from the Login.gov website. The left screenshot shows the 'Create your account' form. It includes a 'LOG IN.GOV' header, a 'Create your account' title, an 'Enter your email address' input field, and a 'Select your email language preference' section with radio buttons for 'English (default)', 'Español', and 'Français'. There is also a checkbox for 'I read and accept the Login.gov Rules of Use' and a 'Submit' button. The right screenshot shows the 'Confirm your email' page. It includes a 'LOG IN.GOV' header, a 'Confirm your email' title, a message: 'Thanks for submitting your email address. Please click the link below or copy and paste the entire link into your browser. This link will expire in 24 hours.', a large blue 'Confirm email address' button, a long confirmation link, a 'Please do not reply to this message. If you need help, visit login.gov/help/' message, and links for 'About Login.gov' and 'Privacy policy'. It also shows the timestamp 'Sent at 2023-03-30T12:58:51.020133Z'.

EFAST2 REGISTRATION

Select *Agree* and continue to continue on EFAST2 Registration page. Once you've read the registration details, select *Continue*.

Filings

- Form 5500/5500-SF Search

EFFAST2 Filing - Welcome

EFFAST2 is an all-electronic system designed by the Department of Labor, Internal Revenue Service, and Pension Benefit Guaranty Corporation to simplify and expedite the submission, receipt, and processing of the Form 5500 and Form 5500-SF. These forms must be electronically filed each year by employee benefit plans to satisfy annual reporting requirements under the Employee Retirement Income Security Act (ERISA) and the Internal Revenue Code. Under EFAST2, filers choose between using EFAST2-approved vendor software or this website (IFILE) to prepare and submit the Form 5500 or Form 5500-SF. Completed forms are submitted via the Internet to EFAST2 for processing.

If you filed a Form 5500/5500-SF last year and are returning to EFAST2, login and go to User Profile to review your PIN and other registration information.

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EFFAST2 Registration

You need to register through this website if you wish to sign or submit Form 5500 or Form 5500-SF filings.

When your registration is complete, you will be provided with EFAST2 credentials:

- User ID (used to identify you)
- PIN (used for your Form 5500 or Form 5500-SF electronic signature)
- Password (used to login to EFAST2 website applications such as [IFILE](#))

Click Continue and then follow the prompts to complete the seven-step registration process.



PRIVACY STATEMENT

Review the Privacy Statement and then check the box indicating you have read the agreement. Select *Accept Agreement*.

Register - Privacy Statement (Step 1 of 7)

Please read and accept the following privacy statement to continue.

Thank you for visiting the Department of Labor (DOL) Web site and reviewing our privacy and security statement. DOL is strongly committed to maintaining the privacy of your personal information and the security of DOL computer systems. With respect to the collection, use and disclosure of personal information, DOL makes every effort to ensure compliance with applicable federal law, including, but not limited to, [The Privacy Act of 1974](#), [The Paperwork Reduction Act of 1996](#), and [The Freedom of Information Act](#).

As a general rule, DOL does not collect personally-identifying information about you when you visit our site, unless you choose to provide such information to us. The information we receive depends upon what you do when visiting our site.

If you respond to an online request for personal information:

Generally, DOL will use the information requested to respond to your inquiry or to provide you with the service associated with the request. However, when we request this information, we fully describe in a customized "Privacy Notice" the reasons for collecting it and DOL's intended use of the information. This Privacy Notice will either appear on the Web page collecting the information or be accessible through a link prominently displayed immediately preceding the information request.

Privacy Notice:

The Department of Labor requires that when we ask you for information we tell you our legal right to ask for the information, why

I have read this agreement

Accept Agreement Decline Agreement

PROFILE INFORMATION

Input your profile information. **Note: Your email address is the most important piece of information– the system will use it to send a confirmation email, and for all EFAST2 filing purpose.**

Register - Profile Information (Step 2 of 7)

Enter your profile information below then select Next to continue. Fields marked with an "*" are required.

You must provide accurate and reliable contact details below so we can correspond with you.

Note that the first three user types require registration by an individual person. The credentials for this account may not be shared with others.

OMB Control Number: 1210-0117 Exp. Date: 11/30/2021

* First Name:

* Last Name:

* Address:

Address 2:

* City/Town:

* State:

* Country:

* ZIP:

* Daytime Phone: [Do not include dashes and do not begin with "1"]

Fax:

* Email:

* Company Name:

USER TYPE

Check box for *Filing Signer* and then select *Next*.

You must choose at least one User Type, but you may choose more.

I want to:	User Type	Definition
Create, import, or amend a filing in IFILE	<input type="checkbox"/> Filing Author	The person who initiates the filing in IFILE and is responsible for submitting it. This user type has no signature authority.
Sign a Form 5500/5500-SF	<input checked="" type="checkbox"/> Filing Signer	Filing signers are Plan Administrators, Employers/Plan Sponsors, or Direct Filing Entities who electronically sign the Form 5500/5500-SF. This role should also be selected by plan service providers that have written authorization to file on behalf of the plan administrator under the EFAST2 e-signature option. No other filing-related functions may be performed by selecting this user role alone.
Create a schedule but not a Form 5500/5500-SF in IFILE	<input type="checkbox"/> Schedule Author	A person who has been asked, by the Filing Author, to complete one of the Schedules for the filing. This user type cannot initiate, sign or submit a filing. This is rare.
Submit a filing on behalf of an individual or company	<input type="checkbox"/> Transmitter	An individual or company/organization authorized by the plan sponsor or plan administrator to submit electronic returns for the plan. This is rare.
Develop and certify third party software	<input type="checkbox"/> Third Party Software Developer	A company, trade, business, or other person applying for authorization to be an EFAST2 Software Developer. This is rare.

CHALLENGE INFORMATION

Select a challenge question and provide an answer. Select *Next*.

Register - Challenge Information (Step 3 of 7)

Please select a Challenge Question, and provide an answer, then select Next to continue. Your Challenge Answer is required to complete your profile setup so please remember it.

* Challenge Question:

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SUMMARY

Review your profile information. *Edit* if necessary or select *Submit* if correct.

Register - Summary (Step 4 of 7)

Please review the information you provided. Select the Edit option to go back and make correct your registration.

* Last Name: Test
* First Name: Sample
* Address: 100 Quannapowitt Parkway
Address 2:
* City/Town: Wakefield
* State: Massachusetts
* Country: US - United States
* ZIP: 01880
* Daytime Phone: (781) 914-1200
Fax:
* Email:
* Company Name: Sentinel Benefits and Financial Group
* User Type:
 Filing Author
 Filing Signer
 Schedule Author
 Transmitter
 Third Party Software Developer
* Challenge Question: Where is your place of birth?
* Challenge Answer: Sample

COMPLETE ONLINE REGISTRATION PROCESS

Select *OK* to complete the online registration process.



CHECK YOUR EMAIL

You will receive a confirmation email. Review the information and select *OK*. (See sample confirmation email below). Click the link provided in the email. *Note: If you do not see the confirmation email within a reasonable amount of time, check your "junk" folder.*

Register - Check Email

Please check the e-mail address you provided for a link into this system to acknowledge and complete the creation of your profile. You will also need the answer to your challenge question in order to complete the next step.



CHALLENGE QUESTION VERIFICATION

Upon following the link provided, you will be prompted to answer your challenge question. Select *Next* to continue.

Register - Challenge Question Verification

Please answer your challenge question, and then select Next to continue.

Where is your place of birth?



PIN AGREEMENT

Review the PIN agreement. Check the box indicating you have read this agreement.

Register - PIN Agreement (Step 5 of 7)

Please read and accept the following PIN Agreement to continue.

By activating your PIN, you agree not to share your PIN with anyone. The security of your PIN is important because it can be used to:

- Electronically sign documents, and
- Access your personal records

If your PIN is lost or stolen, you also agree to:

- Contact the EFAST2 Contact Center at 1-866-463-3278, (1-866-GO-EFAST), or
- Request a new PIN by selecting User Profile from the EFAST2 Web site

I have read this agreement



SIGNATURE AGREEMENT

Review the signature agreement. Check the box indicating you have read this agreement.

Register - Signature Agreement (Step 5a of 7)

Please read and accept the following Signature Agreement to continue.

Form 5500 or Form 5500-SF return/report filed in electronic form shall have the same legal force and effect as my hand written signature. If I am not the Transmitter, I also agree that my electronic signature on a Form 5500 or Form 5500-SF constitutes consent for EFAST2 personnel to send my Transmitter an acknowledgment of receipt of transmission and to communicate with my Transmitter about the success or failure of the transmission and specific reason(s) for any failure(s).

If I am an EFAST2 Software Developer or EFAST2 Transmitter, I declare that I am authorized to make and sign this statement on behalf of the applicant. The applicant agrees that it and its employees will comply with all provisions of the EFAST2 procedures for the electronic filing of Form 5500 or Form 5500-SF for each year in which the applicant participates. Noncompliance will result in the applicant no longer being allowed to participate as an EFAST2 Software Developer or Transmitter. The applicant understands that acceptance as an EFAST2 Software Developer or Transmitter is not transferable. If applying to be an EFAST2 Transmitter, the applicant further agrees that a copy of all returns/reports that the applicant transmits electronically to the Department of Labor will be provided to the plan administrator, employer or direct filing entity on whose behalf the return/report was transmitted.

Under penalties of perjury, I declare that I have examined this agreement, and to the best of my knowledge and belief the information provided in my request for access to the EFAST2 system is true, correct, and complete. I agree that this application can be made public information.

I declare that I am authorized to make and sign this statement.

I have read this agreement



PASSWORD

Create a password following the requirements. Select Save.

Register - Password (Step 6 of 7)

When you create your password, it must be between 8 and 16 characters long and must not contain spaces. You must use at least one uppercase letter, one lower case letter at least one number and at least one of the following special characters [!, @, #, \$, %, ^, &, *, (,), (,)] No other special characters are allowed. Your new password must be different from your last 12 previous passwords. This field is case-sensitive.

New Password:	<input type="password"/>
Confirm New Password:	<input type="password"/>

Password Requirements

- Must be between 8 and 16 characters long
- At least 1 upper case alpha character
- At least 1 lower case alpha character
- At least 1 numeric character
- At least 1 of the following special characters [!, @, #, \$, %, ^, &, *, (,)]

CONFIRMATION

Confirm your information is correct. Select *Login*.

Register - Confirmation (Step 7 of 7)

Successful Account Activation!

Here is your EFAST2 profile information. Your account setup is now complete. Please retain your User ID and password to access the site in the future. Transmitters should also note their ETIN.

IMPORTANT: Please print this page for your records. Failure to recall your PIN or correctly answer your challenge question may require you to register for a new account with EFAST2.

User ID:
PIN:
ETIN:
* Last Name: Test
* First Name: Sample
* Address: 100 Quannapowitt Parkway
Address 2:
* City/Town: Wakefield
* State: Massachusetts
* Country: US - United States
* ZIP: 01880
* Daytime Phone: (781) 914-1200
Fax:
* Email: ip.com
* Comp: Financial Group
* User Type:
 Filing Author
 Filing Signer
 Schedule Author
 Transmitter
 Third Party Software Developer
* Challenge Question: Where is your place of birth?
* Challenge Answer: Sample

COMPLETED!

You now have your credentials to file your Form 5500 electronically via EFAST2. Note: You will access your 5500 filing through Sentinel's Employer Portal website.