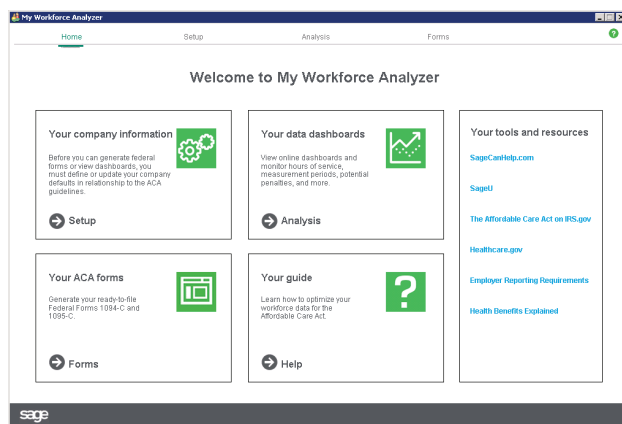


# My Workforce Analyzer

## Manage your ACA responsibilities.

When the Affordable Care Act (ACA) went into effect, life got more complicated for your company and your HR staff. Which of the new IRS forms will you need to file? What are forms 1094-C and 1095-C? How many full-time employees do you really have? Will you face fines for failing to provide affordable healthcare coverage?

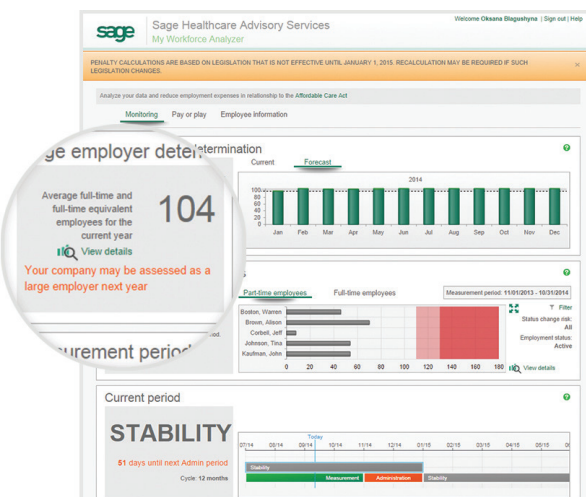
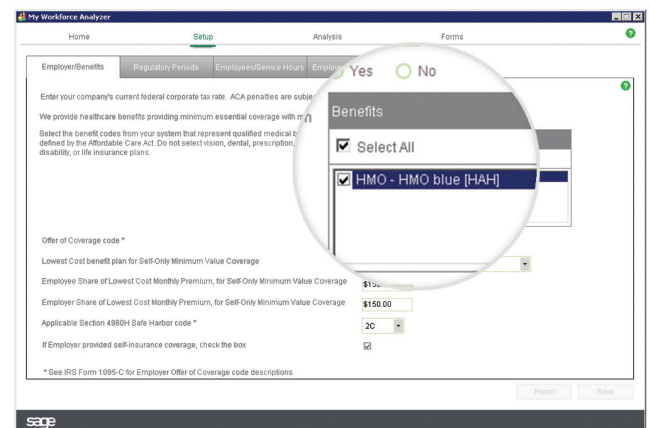
With My Workforce Analyzer, you can conveniently and affordably abide by ACA reporting requirements and make decisions with confidence.



**My Workforce Analyzer** uses data from your company to address specific questions and concerns, produce online dashboards, generate required forms, and help keep you compliant well ahead of deadlines so you can avoid stress and penalties.

### Get started quickly

Although much of the data is imported from your HR or payroll product, simple setup screens make it easy to enter missing information about your company's employees, benefits, and healthcare plans, so you can use My Workforce Analyzer as a system of record for ACA responsibilities moving forward.

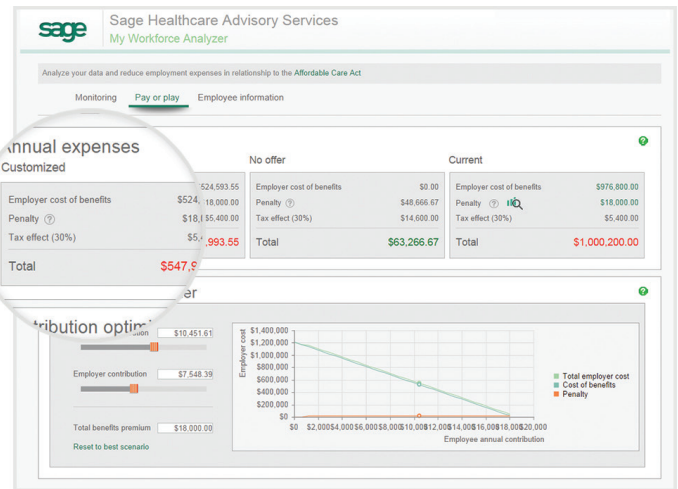


### Track the details

Monitor important information such as full-time and full-time equivalent employee counts, your company's status as a large employer for the current and upcoming years, employee hours of service, employees approaching part-time or full-time thresholds, and the countdown to the next administrative period in which changes can be made.

## Pay or play

Model different healthcare scenarios to decide whether to pay penalties for noncompliance or provide affordable healthcare. View a summary of your annual expenses, including the cost of benefits, penalties, and taxes. And compare your expenses based on three different scenarios.



**Employee Information Table:**

Employee	Employee ID	Employee name	Health plan	Employer contribution	Employee contribution
HAN - Test Company	HAN07	Allen, Hugh	IO Blue	\$3,600.00	\$14,400.00
HAN - Test Company	HAN12	Allen, John	IO Blue	\$3,600.00	\$14,400.00
HAN - Test Company	HAN11	Alpha, Drew	IO Blue	\$3,600.00	\$14,400.00
HAN - Test Company	HAN179	Amami, Jade	IO Blue	\$3,600.00	\$14,400.00
HAN - Test Company	HAN180	Ario, Ariel	HMO Blue	\$3,600.00	\$14,400.00
HAN - Test Company	HAN153	Arnold, Linda	PPO Blue 1	\$2,400.00	\$13,200.00
HAN - Test Company	HAN148	Baird, John	HMO Blue	\$3,600.00	\$14,400.00
HAN - Test Company	HAN149	Barnes, Shannon	HMO Blue	\$3,600.00	\$14,400.00
HAN - Test Company	HAN150	Bass, Rhonda	HMO Blue	\$3,600.00	\$14,400.00
HAN - Test Company	HAN151	Brown, Michelle	HMO Blue	\$3,600.00	\$14,400.00
HAN - Test Company	HAN152	Brown, Mike	HMO Blue	\$3,600.00	\$14,400.00
HAN - Test Company	HAN153	Brown, Jeff	HMO Blue	\$3,600.00	\$14,400.00
HAN - Test Company	HAN154	Carr, Cate	HMO Blue	\$3,600.00	\$14,400.00
HAN - Test Company	HAN155	Cornell, Jeff	HMO Blue	\$3,600.00	\$14,400.00
HAN - Test Company	HAN156	Craig, Tom	HMO Blue	\$3,600.00	\$14,400.00
HAN - Test Company	HAN157	Denny, Jo	HMO Blue	\$3,600.00	\$14,400.00
HAN - Test Company	HAN158	Doran, Naran	HMO Blue	\$3,600.00	\$14,400.00
HAN - Test Company	HAN159	Edwards, Eliza	HMO Blue	\$3,600.00	\$14,400.00
HAN - Test Company	HAN160	Ginger, Donna	HMO Blue	\$3,600.00	\$14,400.00

## Get employee information at a glance

Show a summary of employees with and without healthcare coverage, including employee and employer contributions listed by employee. Reveal a monthly breakdown of healthcare coverage affordability by employee. Create a list of employees who receive subsidized healthcare coverage through a state health insurance exchange. Or view the regulatory period timeframes and employees who have been identified as variable hour.

## File with ease

Generate ready-to-file forms 1094-C and 1095-C, which report information about covered employees, with data imported from your HR or payroll system. All you have to do is review, edit, and print.

**1094-C / 1095-C Form - Part I: Applicable Large Employer**

- Name of ALE Member (Employer): **Dunedin Enterprises**
- Employer Identification Number (EIN): **1234567890**
- Street Address (including room or suite): **123 Main Street**
- City or town: **Tempe, IL**
- State or province: **FL**
- Country and ZIP or foreign postal code: **USA 33737**
- Contact telephone number: **(999) 887-5309**
- Employer Identification Number (EIN): **1234567890**
- Name of person to contact: **[Blank]**
- Contact telephone number: **[Blank]**
- Resend: ☐
- Total number of Forms 1095-C submitted with this transmittal: **0**

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