

Survey of Consumer Finances
Employer Sponsored Pension Benefit Plans

For Office Use Only



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1. SEQ. #:

4. Recorder's I.D.:

2. PP ID:

3. PLAN #:

PART III
DEFINED CONTRIBUTION PENSION PLANS

SECTION L

DEFINED CONTRIBUTION PLANS: PLAN IDENTIFICATION

- L1. Identify the specific pension plan cover sheet (SEQ #), the pension provider (PP ID), and the plan number (PLAN #) that is coded below:

SEQ #: _____ PP ID: _____ PLAN #: _____

NOTE: ALL QUESTIONS IN THIS DOCUMENT REFER TO THE DEFINED CONTRIBUTION PROVISIONS OF THE ABOVE SPECIFIED PENSION PLAN, AND ONLY TO THE DEFINED CONTRIBUTION PROVISIONS OF THIS ONE PLAN.

L2. Do any of the contribution formulas or eligibility requirements depend on the number of actual years of credited service the employee has accumulated?

1. YES



5. NO

→ TURN TO P. 6, SECTION M

L2A. How is the number of actual years of credited service (ASY) determined for use in the contribution formulas or for eligibility requirements? (USE MORE THAN ONE COLUMN IF NECESSARY.)

ASY16 ASY17 ASY18

- a a a ALL YEARS OF EMPLOYMENT ARE CREDITED.
- b b b ONLY COUNT YEARS AFTER AGE: (16) _____ (17) _____ (18) _____
- c c c ONLY COUNT YEARS AFTER FIRST # YEARS: (16) _____ (17) _____ (18) _____
- d d d ONLY COUNT YEARS AFTER AGE: (16) _____ (17) _____ (18) _____
OR AFTER FIRST # YEARS: (16) _____ (17) _____ (18) _____
- e e e ONLY COUNT YEARS AFTER AGE: (16) _____ (17) _____ (18) _____
AND AFTER FIRST # YEARS: (16) _____ (17) _____ (18) _____
- f f f ONLY COUNT YEARS DURING FINAL # YRS: (16) _____ (17) _____ (18) _____

z z z OTHER (SPECIFY BELOW):

ASY16: _____

ASY17: _____

ASY18: _____

L2C. Is there a maximum number of actual years of credited service that can be used in the contribution formulas or a maximum age after which service years can no longer be credited? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

ASY16 ASY17 ASY18

a a a YES, MAXIMUM AGE: (16) _____ (17) _____ (18) _____

b b b YES, MAXIMUM ASY: (16) _____ (17) _____ (18) _____

c c c YES, MAXIMUM AGE PLUS ASY: (16) _____ (17) _____ (18) _____

d d d YES, WHEN OVER MAXIMUM AGE: (16) _____ (17) _____ (18) _____
OR OVER MAXIMUM ASY: (16) _____ (17) _____ (18) _____

e e e YES, WHEN OVER MAXIMUM AGE: (16) _____ (17) _____ (18) _____
AND OVER MAXIMUM ASY: (16) _____ (17) _____ (18) _____

f f f NO

z z z OTHER (SPECIFY BELOW):

ASY16: _____

ASY17: _____

ASY18: _____

L2D. Are participants credited one service year for each year they meet minimum employment requirements, or does the amount of credited service depend on the actual number of hours worked each year? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

ASY16 ASY17 ASY18

a a a CREDITED ONE ASY FOR EACH YEAR EMPLOYED; NO MINIMUM WORK REQUIREMENTS

b b b CREDITED WITH EITHER ZERO OR ONE ASY; ONE ASY IS CREDITED FOR EACH YEAR WORKED A MINIMUM OF:

(16) _____ (17) _____ (18) _____ #HOURS PER YEAR

OR

c c c (16) _____ (17) _____ (18) _____ #WEEKS PER YEAR, AND
(16) _____ (17) _____ (18) _____ #HOURS PER WEEK

OR

d d d (16) _____ (17) _____ (18) _____ #MONTHS PER YEAR, AND
(16) _____ (17) _____ (18) _____ #HOURS PER MONTH

e e e CREDITED WITH A PRORATED FRACTION FROM ZERO TO ONE ASY; ONE FULL ASY IS CREDITED FOR EACH YEAR WORKED A MINIMUM OF:

(16) _____ (17) _____ (18) _____ #HOURS PER YEAR

OR

f f f (16) _____ (17) _____ (18) _____ #WEEKS PER YEAR, AND
(16) _____ (17) _____ (18) _____ #HOURS PER WEEK

OR

g g g (16) _____ (17) _____ (18) _____ #MONTHS PER YEAR, AND
(16) _____ (17) _____ (18) _____ #HOURS PER MONTH

h h h CREDITED EACH YEAR WITH A PRORATED FRACTION FROM ZERO TO MORE THAN ONE ASY; ONE FULL ASY IS CREDITED FOR EVERY:

(16) _____ (17) _____ (18) _____ #HOUR PER YEAR

OR

i i i (16) _____ (17) _____ (18) _____ #WEEK PER YEAR, AND
(16) _____ (17) _____ (18) _____ #HOURS PER WEEK

OR

j j j (16) _____ (17) _____ (18) _____ #MONTHS PER YEAR, AND
(16) _____ (17) _____ (18) _____ #HOURS PER MONTH

z z z OTHER (SPECIFY BELOW);

ASY16: _____

ASY17: _____

ASY18: _____

SECTION M

DEFINED CONTRIBUTION PLANS: PARTICIPANT CONTRIBUTIONS

M1. Are employees required to make contributions in order to participate in this defined contribution plan?

1. YES

TURN TO P. 7, M2

5. NO



M1A. Can the participants make any voluntary contributions to this defined contribution pension plan?

1. YES

TURN TO P. 14, M3

5. NO

→ TURN TO P. 22, SECTION R

M2. On an annual basis, how is the mandatory (MAN) contribution calculated?
 (USE MORE THAN ONE COLUMN IF NECESSARY.)

CHECK:	(1) <input type="checkbox"/> PRE TAX <input type="checkbox"/> POST TAX <input type="checkbox"/> NOT CITED	(2) <input type="checkbox"/> PRE TAX <input type="checkbox"/> POST TAX <input type="checkbox"/> NOT CITED	(3) <input type="checkbox"/> PRE TAX <input type="checkbox"/> POST TAX <input type="checkbox"/> NOT CITED
DEFINE ASY:	(1) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED	(2) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED	(3) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED

MAN1 MAN2 MAN3

<input type="checkbox"/> b	<input type="checkbox"/> b	<input type="checkbox"/> b	FIXED DOLLAR AMOUNT:	(1) \$ _____	(2) \$ _____	(3) \$ _____
<input type="checkbox"/> c	<input type="checkbox"/> c	<input type="checkbox"/> c	FIXED PERCENTAGE OF PAY:	(1) _____ %	(2) _____ %	(3) _____ %
			UP TO MAXIMUM CONTRIBUTION:	(1) \$ _____	(2) \$ _____	(3) \$ _____
<input type="checkbox"/> d	<input type="checkbox"/> d	<input type="checkbox"/> d	FIXED PERCENTAGE PAY AT OR BELOW SWB:	(1) _____ %	(2) _____ %	(3) _____ %
<input type="checkbox"/> e	<input type="checkbox"/> e	<input type="checkbox"/> e	FIXED PERCENTAGE PAY ABOVE SWB:	(1) _____ %	(2) _____ %	(3) _____ %
<input type="checkbox"/> f	<input type="checkbox"/> f	<input type="checkbox"/> f	FIXED PERCENTAGE PAY ABOVE SWB:	(1) _____ %	(2) _____ %	(3) _____ %
			UP TO MAXIMUM CONTRIBUTION:	(1) \$ _____	(2) \$ _____	(3) \$ _____
<input type="checkbox"/> g	<input type="checkbox"/> g	<input type="checkbox"/> g	VARYING DOLLAR OR PERCENTAGE:			

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

(1) _____	(2) _____	(3) _____	UNDER (NO MIN):	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	FROM (MIN):	(1) _____	(2) _____	(3) _____
			TO:	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	FROM:	(1) _____	(2) _____	(3) _____
			TO:	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	FROM:	(1) _____	(2) _____	(3) _____
			TO (MAX):	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	OVER (NO MAX):	(1) _____	(2) _____	(3) _____

z z z OTHER (SPECIFY BELOW):

MAN1: _____

MAN2: _____

MAN3: _____

M2A. Do any of the above mandatory contribution formulas depend on the Social Security taxable wage base (SWB)? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

MAN1 MAN2 MAN3

a a a YES, ACTUAL SWB IN EFFECT EACH YEAR

b b b YES, CAREER AVERAGE SWB CALCULATED EACH YEAR

c c c YES, CAREER AVERAGE SWB ESTIMATED IN YEAR:

d d d NO (1) 19__ (2) 19__ (3) 19__

z z z OTHER (SPECIFY BELOW):

MAN1: _____

MAN2: _____

MAN3: _____

M2B. Are the mandatory contribution formulas based on wages and salaries earned during specific calendar time periods, or during all years covered by this pension plan? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

MAN1 MAN2 MAN3

a a a COVERS ALL YEARS: NO SPECIFIC DATES CITED.

b b b BEFORE: (1) ____, 19__ (2) ____, 19__ (3) ____, 19__

c c c AFTER: (1) ____, 19__ (2) ____, 19__ (3) ____, 19__

d d d FROM: (1) ____, 19__ (2) ____, 19__ (3) ____, 19__

TO: (1) ____, 19__ (2) ____, 19__ (3) ____, 19__

z z z OTHER SPECIFY BELOW):

MAN1: _____

MAN2: _____

MAN3: _____

M2C. When are participants required to start making these mandatory contributions? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

MAN1	MAN2	MAN3		(1)	(2)	(3)
<input type="checkbox"/> a	<input type="checkbox"/> a	<input type="checkbox"/> a	AT ONSET OF EMPLOYMENT			
<input type="checkbox"/> b	<input type="checkbox"/> b	<input type="checkbox"/> b	AFTER EMPLOYEE REACHES AGE:	_____	_____	_____
<input type="checkbox"/> c	<input type="checkbox"/> c	<input type="checkbox"/> c	AFTER EMPLOYEE COMPLETES FIRST # YRS:	_____	_____	_____
<input type="checkbox"/> d	<input type="checkbox"/> d	<input type="checkbox"/> d	AFTER EMPLOYEE REACHES AGE:	_____	_____	_____
			<u>OR</u> AFTER COMPLETES FIRST # YRS:	_____	_____	_____
<input type="checkbox"/> e	<input type="checkbox"/> e	<input type="checkbox"/> e	AFTER EMPLOYEE REACHES AGE:	_____	_____	_____
			<u>AND</u> AFTER COMPLETES FIRST # YRS:	_____	_____	_____
<input type="checkbox"/> z	<input type="checkbox"/> z	<input type="checkbox"/> z	OTHER (SPECIFY):			

MAN1: _____

MAN2: _____

MAN3: _____

M2D. Is there a maximum age or service years after which participants are no longer required to make these contributions? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

MAN1	MAN2	MAN3		(1)	(2)	(3)
			DEFINE ASY: (1) <input type="checkbox"/> ASY: _____ (2) <input type="checkbox"/> ASY: _____ (3) <input type="checkbox"/> ASY: _____			
			<input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED			
<input type="checkbox"/> a	<input type="checkbox"/> a	<input type="checkbox"/> a	YES, MAXIMUM AGE:	_____	_____	_____
<input type="checkbox"/> b	<input type="checkbox"/> b	<input type="checkbox"/> b	YES, MAXIMUM ASY:	_____	_____	_____
<input type="checkbox"/> c	<input type="checkbox"/> c	<input type="checkbox"/> c	YES, MAXIMUM AGE PLUS ASY:	_____	_____	_____
<input type="checkbox"/> d	<input type="checkbox"/> d	<input type="checkbox"/> d	YES, WHEN OVER MAXIMUM AGE:	_____	_____	_____
			<u>OR</u> OVER MAXIMUM ASY:	_____	_____	_____
<input type="checkbox"/> e	<input type="checkbox"/> e	<input type="checkbox"/> e	YES, WHEN OVER MAXIMUM AGE:	_____	_____	_____
			<u>AND</u> OVER MAXIMUM ASY:	_____	_____	_____
<input type="checkbox"/> f	<input type="checkbox"/> f	<input type="checkbox"/> f	NO			
<input type="checkbox"/> z	<input type="checkbox"/> z	<input type="checkbox"/> z	OTHER (SPECIFY BELOW):			

MAN1: _____

MAN2: _____

MAN3: _____

M2E. Does this defined contribution pension plan include a provision that the employer automatically matches all or part of each participant's mandatory contribution? (EXCLUDE PROVISIONS THAT FIRST DETERMINE TOTAL EMPLOYER CONTRIBUTIONS.)

1. YES

5. NO

TURN TO P. 13 , M2K

M2F. For each dollar or percentage point of pay the participant contributes, how much does the employer contribute in matching funds (MMAN)? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

MMAN1	MMAN2	MMAN3	DEFINE ASY: (1) <input type="checkbox"/> ASY: _____ (2) <input type="checkbox"/> ASY: _____ (3) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED
-------	-------	-------	--

a a a

FIXED MATCH RATE:

(1) _____% (2) _____% (3) _____%

b b b

VARYING MATCH RATE:

<input type="checkbox"/> S/c <input type="checkbox"/> % PAY <input type="checkbox"/> _____	<input type="checkbox"/> S/c <input type="checkbox"/> % PAY <input type="checkbox"/> _____	<input type="checkbox"/> S/c <input type="checkbox"/> % PAY <input type="checkbox"/> _____
--	--	--

<input type="checkbox"/> PAY <input type="checkbox"/> AGE <input type="checkbox"/> ASY <input type="checkbox"/> AGE+ASY <input type="checkbox"/> % CONTRIB <input type="checkbox"/> _____	<input type="checkbox"/> PAY <input type="checkbox"/> AGE <input type="checkbox"/> ASY <input type="checkbox"/> AGE+ASY <input type="checkbox"/> % CONTRIB <input type="checkbox"/> _____	<input type="checkbox"/> PAY <input type="checkbox"/> AGE <input type="checkbox"/> ASY <input type="checkbox"/> AGE+ASY <input type="checkbox"/> % CONTRIB <input type="checkbox"/> _____
--	--	--

(1) _____ (2) _____ (3) _____

UNDER (NO MIN): (1) _____ (2) _____ (3) _____

(1) _____ (2) _____ (3) _____

FROM (MIN): (1) _____ (2) _____ (3) _____

(1) _____ (2) _____ (3) _____

TO: (1) _____ (2) _____ (3) _____

(1) _____ (2) _____ (3) _____

FROM: (1) _____ (2) _____ (3) _____

(1) _____ (2) _____ (3) _____

TO: (1) _____ (2) _____ (3) _____

FROM: (1) _____ (2) _____ (3) _____

TO (MAX): (1) _____ (2) _____ (3) _____

OVER (NO MAX): (1) _____ (2) _____ (3) _____

z z z OTHER (SPECIFY BELOW):

MMAN1: _____

MMAN2: _____

MMAN3: _____

M2G. Is there a maximum on the amount the employer will contribute in matching funds? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

MMAN1 MMAN2 MMAN3

a a a YES, MAXIMUM DOLLAR CONTRIBUTION:
(1)\$ _____ (2)\$ _____ (3)\$ _____

b b b YES, MAXIMUM PERCENTAGE PAY:
(1) ____ . ____ % (2) ____ . ____ % (3) ____ . ____ %

c c c NO (ADDITIONAL) MAXIMUMS ON MATCHING MANDATORY CONTRIBUTIONS

z z z OTHER (SPECIFY BELOW):

MMAN1: _____
MMAN2: _____
MMAN3: _____

M2H. To receive any of the matching employer contributions, are there any other special requirements? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

MMAN1 MMAN2 MMAN3

a a a NO OTHER SPECIAL REQUIREMENTS (EXCEPT MATCHING AMOUNTS)

b b b EMPLOYER APPROVAL REQUIRED

c c c PAST SERVICE REQUIRED

d d d IF PLAN PARTICIPANT ON: (1) ____ 19 ____ (2) ____ 19 ____ (3) ____ 19 ____

e e e IF PLAN PARTICIPANT BEFORE: (1) ____ 19 ____ (2) ____ 19 ____ (3) ____ 19 ____

f f f IF PLAN PARTICIPANT AFTER: (1) ____ 19 ____ (2) ____ 19 ____ (3) ____ 19 ____

g g g IF PLAN PARTICIPANT FROM: (1) ____ 19 ____ (2) ____ 19 ____ (3) ____ 19 ____
TO: (1) ____ 19 ____ (2) ____ 19 ____ (3) ____ 19 ____

z z z OTHER (SPECIFY BELOW):

MMAN1: _____
MMAN2: _____
MMAN3: _____

M2J. What is the vesting schedule that applies to these matching employer contributions? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

MMAN1 MMAN2 MMAN3 →

DEFINE ASY: (1) <input type="checkbox"/> ASY: _____ (2) <input type="checkbox"/> ASY: _____ (3) <input type="checkbox"/> ASY: _____
<input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED

a a a

SAME AS: (1) _____ (2) _____ (3) _____

b b b

IMMEDIATE 100% VESTING FROM THE TIME OF INITIAL PARTICIPATION

c c c

CLIFF VESTING: VESTING INCREASES FROM 0% TO 100% WHEN:

AGE: (1) _____ (2) _____ (3) _____

ASY: (1) _____ (2) _____ (3) _____

AGE+ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ OR ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ AND ASY: (1) _____ (2) _____ (3) _____

d d d

STEP VESTING: VESTING BEGINS AT: (1) _____ % (2) _____ % (3) _____ %, WHEN:

AGE: (1) _____ (2) _____ (3) _____

ASY: (1) _____ (2) _____ (3) _____

AGE+ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ OR ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ AND ASY: (1) _____ (2) _____ (3) _____

VESTING REACHES: (1) _____ % (2) _____ % (3) _____ %, WHEN:

AGE: (1) _____ (2) _____ (3) _____

ASY: (1) _____ (2) _____ (3) _____

AGE+ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ OR ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ AND ASY: (1) _____ (2) _____ (3) _____

VESTING REACHES 100% WHEN:

AGE: (1) _____ (2) _____ (3) _____

ASY: (1) _____ (2) _____ (3) _____

AGE+ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ OR ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ AND ASY: (1) _____ (2) _____ (3) _____

e e e

NO VESTING SCHEDULE CITED

z z z

OTHER (SPECIFY BELOW):

MMAN1: _____

MMAN2: _____

MMAN3: _____

M2K. Can the participant make any voluntary contributions to this defined contribution pension plan?

1. YES

TURN TO P. 14, M3

5. NO



TURN TO P. 22, SECTION R

M3. What annual minimums apply to the voluntary contributions? (USE MORE THAN ONE COLUMN IF NECESSARY.)

CHECK:	(1) <input type="checkbox"/> PRE TAX <input type="checkbox"/> POST TAX <input type="checkbox"/> NOT CITED	(2) <input type="checkbox"/> PRE TAX <input type="checkbox"/> POST TAX <input type="checkbox"/> NOT CITED	(3) <input type="checkbox"/> PRE TAX <input type="checkbox"/> POST TAX <input type="checkbox"/> NOT CITED
DEFINE ASY:	(1) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED	(2) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED	(3) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED

VOL1 VOL2 VOL3 →

- a a a NO MINIMUM AMOUNT
- b b b FIXED DOLLAR AMOUNT: (1)\$____(2)\$____(3)\$____
- c c c FIXED PERCENTAGE OF PAY: (1)____%(2)____%(3)____%
UP TO MAXIMUM AMOUNT: (1)\$____(2)\$____(3)\$____
- d d d FIXED PERCENTAGE PAY AT OR BELOW SWB: (1)____%(2)____%(3)____%
- e e e FIXED PERCENTAGE PAY ABOVE SWB: (1)____%(2)____%(3)____%
- f f f FIXED PERCENTAGE PAY ABOVE SWB: (1)____%(2)____%(3)____%
WITH MINIMUM CONTRIBUTION: (1)\$____(2)\$____(3)\$____
- g g g VARYING DOLLAR OR PERCENTAGE:

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

(1) _____	(2) _____	(3) _____	UNDER (NO MIN):	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	FROM (MIN):	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	TO:	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	FROM:	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	TO:	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	FROM:	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	TO (MAX):	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	OVER (NO MAX):	(1) _____	(2) _____	(3) _____

z z z OTHER (SPECIFY BELOW):

VOL1: _____

VOL2: _____

VOL3: _____

M3A. Aside from IRS maximums, what annual or career average maximums apply to the voluntary (VOL) contributions? (USE SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

CHECK:	(1) <input type="checkbox"/> ANNUAL <input type="checkbox"/> CAREER <input type="checkbox"/> NOT CITED	(2) <input type="checkbox"/> PRE. VAL <input type="checkbox"/> CAREER <input type="checkbox"/> NOT CITED	(3) <input type="checkbox"/> ANNUAL <input type="checkbox"/> CAREER <input type="checkbox"/> NOT CITED
DEFINE ASY:	(1) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED	(2) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED	(3) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED

VOL1 VOL2 VOL3 →

- a a a NO MAXIMUM AMOUNT
- b b b FIXED DOLLAR AMOUNT: (1)\$____(2)\$____(3)\$____
- c c c FIXED PERCENTAGE OF PAY: (1)____%(2)____%(3)____%
UP TO MAXIMUM AMOUNT: (1)\$____(2)\$____(3)\$____
- d d d FIXED PERCENTAGE PAY AT OR BELOW SWB: (1)____%(2)____%(3)____%
- e e e FIXED PERCENTAGE PAY ABOVE SWB: (1)____%(2)____%(3)____%
- f f f FIXED PERCENTAGE PAY ABOVE SWB: (1)____%(2)____%(3)____%
UP TO MAXIMUM CONTRIBUTION: (1)\$____(2)\$____(3)\$____
- g g g VARYING DOLLAR OR PERCENTAGE:

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

(1) _____	(2) _____	(3) _____	UNDER (NO MIN):	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	FROM (MIN):	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	TO:	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	FROM:	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	TO:	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	FROM:	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	TO (MAX):	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	OVER (NO MAX):	(1) _____	(2) _____	(3) _____

z z z OTHER (SPECIFY BELOW):

VOL1: _____

VOL2: _____

VOL3: _____

M3B. Do any of the above voluntary contribution formulas depend on the Social Security taxable wage base (SWB)? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

VOL1 VOL2 VOL3

a a a YES, ACTUAL SWB IN EFFECT EACH YEAR

b b b YES, CAREER AVERAGE SWB CALCULATED EACH YEAR

c c c YES, CAREER AVERAGE SWB ESTIMATED IN YEAR:
(1) 19__ (2) 19__ (3) 19__

d d d NO

z z z OTHER (SPECIFY BELOW):

VOL1: _____

VOL2: _____

VOL3: _____

M3C. Are the above voluntary contribution formulas based only on specific calendar time periods, or on all years covered by this pension plan? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

VOL1 VOL2 VOL3

a a a COVERS ALL YEARS: NO SPECIFIC DATES CITED.

b b b BEFORE: (1) ____, 19__ (2) ____, 19__ (3) ____, 19__

c c c AFTER: (1) ____, 19__ (2) ____, 19__ (3) ____, 19__

d d d FROM: (1) ____, 19__ (2) ____, 19__ (3) ____, 19__

TO: (1) ____, 19__ (2) ____, 19__ (3) ____, 19__

z z z OTHER (SPECIFY BELOW):

VOL1: _____

VOL2: _____

VOL3: _____

M3D. When are participants eligible to make these voluntary contributions?
(ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

VOL1	VOL2	VOL3		(1)	(2)	(3)
<input type="checkbox"/> a	<input type="checkbox"/> a	<input type="checkbox"/> a	AT ONSET OF EMPLOYMENT			
<input type="checkbox"/> b	<input type="checkbox"/> b	<input type="checkbox"/> b	AFTER EMPLOYEE REACHES AGE:	_____	_____	_____
<input type="checkbox"/> c	<input type="checkbox"/> c	<input type="checkbox"/> c	AFTER EMPLOYEE COMPLETES FIRST # YRS:	_____	_____	_____
<input type="checkbox"/> d	<input type="checkbox"/> d	<input type="checkbox"/> d	AFTER EMPLOYEE REACHES AGE:	_____	_____	_____
			<u>OR</u> AFTER COMPLETES FIRST # YRS:	_____	_____	_____
<input type="checkbox"/> e	<input type="checkbox"/> e	<input type="checkbox"/> e	AFTER EMPLOYEE REACHES AGE:	_____	_____	_____
			<u>AND</u> AFTER COMPLETES FIRST # YRS:	_____	_____	_____
<input type="checkbox"/> z	<input type="checkbox"/> z	<input type="checkbox"/> z	OTHER (SPECIFY):			

VOL1: _____

VOL2: _____

VOL3: _____

M3E. Is there a maximum age or service years after which participants can no longer make voluntary contributions? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

VOL1	VOL2	VOL3	DEFINE ASY:	(1)	(2)	(3)
			<input type="checkbox"/> ASY: _____			
			<input type="checkbox"/> NOT USED			
			<input type="checkbox"/> ASY: _____			
			<input type="checkbox"/> NOT USED			
			<input type="checkbox"/> ASY: _____			
			<input type="checkbox"/> NOT USED			
<input type="checkbox"/> a	<input type="checkbox"/> a	<input type="checkbox"/> a	YES, MAXIMUM AGE:	_____	_____	_____
<input type="checkbox"/> b	<input type="checkbox"/> b	<input type="checkbox"/> b	YES, MAXIMUM ASY:	_____	_____	_____
<input type="checkbox"/> c	<input type="checkbox"/> c	<input type="checkbox"/> c	YES, MAXIMUM AGE PLUS ASY:	_____	_____	_____
<input type="checkbox"/> d	<input type="checkbox"/> d	<input type="checkbox"/> d	YES, WHEN OVER MAXIMUM AGE:	_____	_____	_____
			<u>OR</u> OVER MAXIMUM ASY:	_____	_____	_____
<input type="checkbox"/> e	<input type="checkbox"/> e	<input type="checkbox"/> e	YES, WHEN OVER MAXIMUM AGE:	_____	_____	_____
			<u>AND</u> OVER MAXIMUM ASY:	_____	_____	_____
<input type="checkbox"/> f	<input type="checkbox"/> f	<input type="checkbox"/> f	NO			
<input type="checkbox"/> z	<input type="checkbox"/> z	<input type="checkbox"/> z	OTHER (SPECIFY BELOW):			

VOL1: _____

VOL2: _____

VOL3: _____

M3F Can vested participants at their own discretion withdraw any of their voluntary contributions while still employed? (USE SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

VOL1

VOL2

VOL3

DEFINE ASY: (1) <input type="checkbox"/> ASY: _____ (2) <input type="checkbox"/> ASY: _____ (3) <input type="checkbox"/> ASY: _____
<input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED

a a a

YES

b b b

YES, AFTER AGE: (1) _____ (2) _____ (3) _____

c c c

YES, AFTER ASY: (1) _____ (2) _____ (3) _____

d d d

YES, AFTER AGE: (1) _____ (2) _____ (3) _____ OR ASY: (1) _____ (2) _____ (3) _____

e e e

YES, AFTER AGE: (1) _____ (2) _____ (3) _____ AND ASY: (1) _____ (2) _____ (3) _____

f f f

YES, AFTER AGE PLUS ASY EQUALS: (1) _____ (2) _____ (3) _____

g g g

NO, CANNOT WITHDRAW UNTIL RETIRE OR TERMINATE EMPLOYMENT

z z z

OTHER (SPECIFY BELOW):

VOL1

VOL2:

VOL3:

M3G. Does this defined contribution pension plan include a provision that the employer automatically matches all or part of each participant's annual voluntary contributions? (EXCLUDE PROVISIONS THAT FIRST DETERMINE TOTAL EMPLOYER CONTRIBUTION.)

1. YES

5. NO

TURN TO P. 22, SECTION P

MVOL1 MVOL2 MVOL3

DEFINE ASY: (1) ASY: _____ (2) ASY: _____ (3) ASY: _____
 NOT USED NOT USED NOT USED

a a a

FIXED MATCH RATE:

(1) _____% (2) _____% (3) _____%

b b b

VARYING MATCH RATE:

<input type="checkbox"/> S/c	<input type="checkbox"/> S/c	<input type="checkbox"/> S/c
<input type="checkbox"/> % PAY	<input type="checkbox"/> % PAY	<input type="checkbox"/> % PAY
<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____

(1) _____ (2) _____ (3) _____
 (1) _____ (2) _____ (3) _____
 (1) _____ (2) _____ (3) _____
 (1) _____ (2) _____ (3) _____
 (1) _____ (2) _____ (3) _____

<input type="checkbox"/> PAY	<input type="checkbox"/> PAY	<input type="checkbox"/> PAY
<input type="checkbox"/> AGE	<input type="checkbox"/> AGE	<input type="checkbox"/> AGE
<input type="checkbox"/> ASY	<input type="checkbox"/> ASY	<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY	<input type="checkbox"/> AGE+ASY	<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> % CONTRIB	<input type="checkbox"/> % CONTRIB	<input type="checkbox"/> % CONTRIB
<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____

UNDER (NO MIN): (1) _____ (2) _____ (3) _____
 FROM (MIN): (1) _____ (2) _____ (3) _____
 TO: (1) _____ (2) _____ (3) _____
 FROM: (1) _____ (2) _____ (3) _____
 TO: (1) _____ (2) _____ (3) _____
 FROM: (1) _____ (2) _____ (3) _____
 TO (MAX): (1) _____ (2) _____ (3) _____
 OVER (NO MAX): (1) _____ (2) _____ (3) _____

z z z OTHER (SPECIFY BELOW):

MVOL1: _____

MVOL2: _____

MVOL3: _____

M3K. What is the vesting schedule that applies to these matching employer contributions? (USE SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

MVOL1 MVOL2 MVOL3

DEFINE ASY: (1) <input type="checkbox"/> ASY: _____ (2) <input type="checkbox"/> ASY: _____ (3) <input type="checkbox"/> ASY: _____
<input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED

a a a

SAME AS: (1) _____ (2) _____ (3) _____

b b b

IMMEDIATE 100% VESTING FROM THE TIME OF INITIAL PARTICIPATION

c c c

CLIFF VESTING: VESTING INCREASES FROM 0% TO 100% WHEN:

AGE: (1) _____ (2) _____ (3) _____

ASY: (1) _____ (2) _____ (3) _____

AGE+ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ OR ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ AND ASY: (1) _____ (2) _____ (3) _____

d d d

STEP VESTING: VESTING BEGINS AT: (1) _____%(2) _____%(3) _____, WHEN:

AGE: (1) _____ (2) _____ (3) _____

ASY: (1) _____ (2) _____ (3) _____

AGE+ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ OR ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ AND ASY: (1) _____ (2) _____ (3) _____

VESTING REACHES: (1) _____%(2) _____%(3) _____%, WHEN:

AGE: (1) _____ (2) _____ (3) _____

ASY: (1) _____ (2) _____ (3) _____

AGE+ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ OR ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ AND ASY: (1) _____ (2) _____ (3) _____

VESTING REACHES 100% WHEN:

AGE: (1) _____ (2) _____ (3) _____

ASY: (1) _____ (2) _____ (3) _____

AGE+ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ OR ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ AND ASY: (1) _____ (2) _____ (3) _____

e e e

NO VESTING SCHEDULE CITED

z z z

OTHER (SPECIFY BELOW):

MVOL1: _____

MVOL2: _____

MVOL3: _____

SECTION R

DEFINED CONTRIBUTION PLANS: EMPLOYER CONTRIBUTIONS

R1. Aside from the above matching contributions, does the employer make any (other) regular annual contributions to each participants account?

1. YES



5. NO



TURN TO P. 39, SECTION S

RIA. Does this pension plan include any provisions that determine the total amount of the employer's annual contribution by company revenues, profits, assets, or other measures of company performance (this total is then allocated among participants, which may be based on the participant's PAY, AGE, ASY, hours worked, or other participant characteristics)?

1. YES

TURN TO P. 23, R2

5. NO

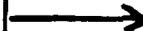


RIB. Does this pension plan include any provisions that calculate the total amount of the employer's annual contribution as the sum of the contributions due each participant, as determined by the participant's PAY, AGE, ASY, hours worked, or other participant characteristics?

1. YES

TURN TO P. 32, R3

5. NO



SEE SUPERVISOR

R2. On what basis is the total annual employer contribution (CTE) calculated?
(USE MORE THAN ONE COLUMN IF NECESSARY.)

- | <u>CTE1</u> | <u>CTE2</u> | <u>CTE3</u> | |
|----------------------------|----------------------------|----------------------------|---|
| <input type="checkbox"/> a | <input type="checkbox"/> a | <input type="checkbox"/> a | PRE TAX PROFITS |
| <input type="checkbox"/> b | <input type="checkbox"/> b | <input type="checkbox"/> b | POST TAX PROFITS |
| <input type="checkbox"/> c | <input type="checkbox"/> c | <input type="checkbox"/> c | PROFITS--PRE TAX OR POST TAX NOT CITED |
| <input type="checkbox"/> d | <input type="checkbox"/> d | <input type="checkbox"/> d | AGGREGATE PAYROLL |
| <input type="checkbox"/> e | <input type="checkbox"/> e | <input type="checkbox"/> e | REVENUES |
| <input type="checkbox"/> f | <input type="checkbox"/> f | <input type="checkbox"/> f | NET FINANCIAL ASSETS |
| <input type="checkbox"/> g | <input type="checkbox"/> g | <input type="checkbox"/> g | CAPITAL INVESTMENTS |
| <input type="checkbox"/> h | <input type="checkbox"/> h | <input type="checkbox"/> h | COMPANY NET WORTH |
| <input type="checkbox"/> i | <input type="checkbox"/> i | <input type="checkbox"/> i | CHANGE IN COMPANY NET WORTH |
| <input type="checkbox"/> j | <input type="checkbox"/> j | <input type="checkbox"/> j | CHANGE IN VALUE OF COMPANY STOCK |
| <input type="checkbox"/> k | <input type="checkbox"/> k | <input type="checkbox"/> k | FORFEITURES (SEPARATE ADDITIONAL CONTRIBUTIONS) |
| <input type="checkbox"/> z | <input type="checkbox"/> z | <input type="checkbox"/> z | OTHER (SPECIFY BELOW): |

CTE1: _____

CTE2: _____

CTE3: _____

R2A. Is the total employer contribution calculated at a fixed dollar or percentage rate set in advance, or is the amount or rate of contribution determined on a yearly basis? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

- | <u>CTE1</u> | <u>CTE2</u> | <u>CTE3</u> | |
|----------------------------|----------------------------|----------------------------|--|
| <input type="checkbox"/> a | <input type="checkbox"/> a | <input type="checkbox"/> a | FIXED DOLLAR AMOUNT: (1)\$ _____ (2)\$ _____ (3)\$ _____ |
| <input type="checkbox"/> b | <input type="checkbox"/> b | <input type="checkbox"/> b | FIXED PERCENTAGE RATE: (1) _____ % (2) _____ % (3) _____ % |
| <input type="checkbox"/> c | <input type="checkbox"/> c | <input type="checkbox"/> c | AMOUNT OF CONTRIBUTION DETERMINED YEARLY |
| <input type="checkbox"/> z | <input type="checkbox"/> z | <input type="checkbox"/> z | OTHER (SPECIFY BELOW): |

CTE1: _____

CTE2: _____

CTE3: _____

R2B. What annual minimums apply to the total employer contributions? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

CTE1 CTE2 CTE3

- a a a NO MINIMUM; DOES NOT APPLY--FIXED CONTRIBUTION RATE
- b b b MINIMUM TOTAL DOLLARS: (1)\$ _____ (2)\$ _____ (3)\$ _____
- c c c MINIMUM PERCENTAGE: (1) _____% (2) _____% (3) _____%
- z z z OTHER (SPECIFY BELOW):

CTE1: _____

CTE2: _____

CTE3: _____

R2C. Aside from IRS maximums, what annual maximums apply to the total employer contribution? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

CTE1 CTE2 CTE3

- a a a NO MAXIMUM; DOES NOT APPLY--FIXED CONTRIBUTION RATE
- b b b MAXIMUM TOTAL DOLLARS: (1)\$ _____ (2)\$ _____ (3)\$ _____
- c c c MAXIMUM PERCENTAGE: (1) _____% (2) _____% (3) _____%
- z z z OTHER (SPECIFY BELOW):

CTE1: _____

CTE2: _____

CTE3: _____

R2D. How is the total annual employer contribution allocated among the participants?
(ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

CTE1 CTE2 CTE3

- a a a EQUALLY DIVIDED AMONG ALL PARTICIPANTS
- b b b PROPORTIONAL TO HOURS WORKED,
NO MAXIMUM HOURS
- c c c PROPORTIONAL TO HOURS WORKED DURING YEAR,
WITH MAXIMUM HOURS PER YEAR: (1) _____ (2) _____ (3) _____
- d d d PROPORTIONAL TO CREDITED SERVICE YEARS, NO MAXIMUM SERVICE YEARS
- e e e PROPORTIONAL TO CREDITED SERVICE YEARS,
WITH MAXIMUM NUMBER SERVICE YEARS: (1) _____ (2) _____ (3) _____
- f f f PROPORTIONAL TO WAGES AND SALARIES PAID DURING YEAR, NO MAXIMUM
- g g g PROPORTIONAL TO WAGES AND SALARIES PAID
DURING YEAR, WITH MAXIMUM WAGES & SALARY: (1)\$ _____ (2)\$ _____ (3)\$ _____
- h h h PROPORTIONAL TO WAGES AND SALARIES AT OR BELOW THE SWB
- i i i PROPORTIONAL TO WAGES AND SALARIES ABOVE THE SWB, NO MAXIMUM
- j j j PROPORTIONAL TO WAGES AND SALARIES ABOVE
THE SWB, WITH MAXIMUM WAGES & SALARIES: (1)\$ _____ (2)\$ _____ (3)\$ _____
- k k k PROPORTIONAL TO WAGES AND SALARIES AND CREDITED SERVICE YEARS
- l l l PROPORTIONAL TO WAGES AND SALARIES AND CREDITED SERVICE YEARS,
WITH MAXIMUM WAGES AND SALARIES: (1)\$ _____ (2)\$ _____ (3)\$ _____
MAXIMUM CREDITED SERVICE YEARS: (1) _____ (2) _____ (3) _____
- m m m PROPORTIONAL TO MANDATORY CONTRIBUTION: (1)MAN _____ (2)MAN _____ (3)MAN _____
- n n n PROPORTIONAL TO VOLUNTARY CONTRIBUTION: (1)VOL _____ (2)VOL _____ (3)VOL _____
- o o o PROPORTIONAL TO VOLUNTARY CONTRIBUTIONS: (1)VOL _____ (2)VOL _____ (3)VOL _____
WITH MAXIMUM VOLUNTARY CONTRIBUTION: (1)\$ _____ (2)\$ _____ (3)\$ _____
- p p p PROPORTIONAL TO VOLUNTARY CONTRIBUTIONS: (1)VOL _____ (2)VOL _____ (3)VOL _____
WITH MAX VOL AS A PERCENT OF PAY: (1) _____% (2) _____% (3) _____%
- q q q PROPORTIONAL TO TOTAL PARTICIPANT CONTRIBUTIONS, NO MAXIMUM
- r r r PROPORTIONAL TO TOTAL PARTICIPANT CONTRIBU-
TIONS, WITH MAX ON TOTAL CONTRIBUTION: (1)\$ _____ (2)\$ _____ (3)\$ _____
- s s s PROPORTIONAL TO TOTAL PARTICIPANT CONTRIBU-
TIONS, WITH MAX ON TOTAL AS PERCENT PAY: (1) _____% (2) _____% (3) _____%
- z z z OTHER (SPECIFY BELOW):

CTE1: _____

CTE2: _____

CTE3: _____

R2E. Do any of the above employer contribution formulas depend on the Social Security taxable wage base (SWB)? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

CTE1 CTE2 CTE3

- a a a YES, ACTUAL SWB IN EFFECT EACH YEAR
- b b b YES, CAREER AVERAGE SWB CALCULATED EACH YEAR
- c c c YES, CAREER AVERAGE SWB ESTIMATED IN YEAR:
(1) 19__ (2) 19__ (3) 19__
- d d d NO
- z z z OTHER (SPECIFY BELOW):

CTE1: _____
 CTE2: _____
 CTE3: _____

R2F. Are the above employer contribution formulas based only on specific calendar time periods, or on all years covered by this pension plan? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

CTE1 CTE2 CTE3

- a a a COVERS ALL YEARS: NO SPECIFIC DATES CITED.
- b b b BEFORE: (1) ____, 19__ (2) ____, 19__ (3) ____, 19__
- c c c AFTER: (1) ____, 19__ (2) ____, 19__ (3) ____, 19__
- d d d FROM: (1) ____, 19__ (2) ____, 19__ (3) ____, 19__
TO: (1) ____, 19__ (2) ____, 19__ (3) ____, 19__
- z z z OTHER (SPECIFY BELOW):

CTE1: _____
 CTE2: _____
 CTE3: _____

R2G. Are participants eligible for employer contributions for each year they meet minimum employment requirements, or does the amount of the contribution depend on the actual number of hours worked each year?
(ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

CTE1 CTE2 CTE3

a a a FULL CONTRIBUTION FOR EACH YEAR EMPLOYED; NO MINIMUM WORK REQUIREMENTS

b b b CONTRIBUTION EITHER FULL OR ZERO; FULL CONTRIBUTION IS GIVEN FOR EACH YEAR WORKED A MINIMUM OF:

(1) _____ (2) _____ (3) _____ #HOURS PER YEAR

OR

c c c (1) _____ (2) _____ (3) _____ #WEEKS PER YEAR, AND
(1) _____ (2) _____ (3) _____ #HOURS PER WEEK

OR

d d d (1) _____ (2) _____ (3) _____ #MONTHS PER YEAR, AND
(1) _____ (2) _____ (3) _____ #HOURS PER MONTH

e e e CONTRIBUTION A PRORATED FRACTION FROM ZERO TO ONE ASY; FULL CONTRIBUTION IS GIVEN FOR EACH YEAR WORKED A MINIMUM OF:

(1) _____ (2) _____ (3) _____ #HOURS PER YEAR

OR

f f f (1) _____ (2) _____ (3) _____ #WEEKS PER YEAR, AND
(1) _____ (2) _____ (3) _____ #HOURS PER WEEK

OR

g g g (1) _____ (2) _____ (3) _____ #MONTHS PER YEAR, AND
(1) _____ (2) _____ (3) _____ #HOURS PER MONTH

n h h CONTRIBUTION A PRORATED FRACTION FROM ZERO TO MORE THAN ONE ASY; FULL CONTRIBUTION GIVEN FOR EVERY:

(1) _____ (2) _____ (3) _____ #HOURS PER YEAR

OR

i i i (1) _____ (2) _____ (3) _____ #WEEKS PER YEAR, AND
(1) _____ (2) _____ (3) _____ #HOURS PER WEEK

OR

j j j (1) _____ (2) _____ (3) _____ #MONTHS PER YEAR, AND
(1) _____ (2) _____ (3) _____ #HOURS PER MONTH

z z z OTHER (SPECIFY BELOW):

CTE1: _____

CTE2: _____

CTE3: _____

R24. To receive any of the above employer contributions, are there any other special requirements? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

- | <u>CTE1</u> | <u>CTE2</u> | <u>CTE3</u> | |
|----------------------------|----------------------------|----------------------------|--|
| <input type="checkbox"/> a | <input type="checkbox"/> a | <input type="checkbox"/> a | NO OTHER SPECIAL REQUIREMENTS (EXCEPT MATCHING AMOUNTS) |
| <input type="checkbox"/> b | <input type="checkbox"/> b | <input type="checkbox"/> b | EMPLOYER APPROVAL REQUIRED |
| <input type="checkbox"/> c | <input type="checkbox"/> c | <input type="checkbox"/> c | PAST SERVICE REQUIRED |
| <input type="checkbox"/> d | <input type="checkbox"/> d | <input type="checkbox"/> d | IF PLAN PARTICIPANT ON: (1) ___ 19 ___ (2) ___ 19 ___ (3) ___ 19 ___ |
| <input type="checkbox"/> e | <input type="checkbox"/> e | <input type="checkbox"/> e | IF PLAN PARTICIPANT BEFORE: (1) ___ 19 ___ (2) ___ 19 ___ (3) ___ 19 ___ |
| <input type="checkbox"/> f | <input type="checkbox"/> f | <input type="checkbox"/> f | IF PLAN PARTICIPANT AFTER: (1) ___ 19 ___ (2) ___ 19 ___ (3) ___ 19 ___ |
| <input type="checkbox"/> g | <input type="checkbox"/> g | <input type="checkbox"/> g | IF PLAN PARTICIPANT FROM: (1) ___ 19 ___ (2) ___ 19 ___ (3) ___ 19 ___ |
| | | | TO: (1) ___ 19 ___ (2) ___ 19 ___ (3) ___ 19 ___ |
| <input type="checkbox"/> z | <input type="checkbox"/> z | <input type="checkbox"/> z | OTHER (SPECIFY BELOW): |

CTE1: _____
CTE2: _____
CTE3: _____

R2J. When does the employer begin to make these contributions on behalf of the participant? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

CTE1	CTE2	CTE3		(1)	(2)	(3)
<input type="checkbox"/> a	<input type="checkbox"/> a	<input type="checkbox"/> a	AT ONSET OF EMPLOYMENT			
<input type="checkbox"/> b	<input type="checkbox"/> b	<input type="checkbox"/> b	AFTER EMPLOYEE REACHES AGE:	_____	_____	_____
<input type="checkbox"/> c	<input type="checkbox"/> c	<input type="checkbox"/> c	AFTER EMPLOYEE COMPLETES FIRST # YRS:	_____	_____	_____
<input type="checkbox"/> d	<input type="checkbox"/> d	<input type="checkbox"/> d	AFTER EMPLOYEE REACHES AGE: OR AFTER COMPLETES FIRST # YRS:	_____	_____	_____
<input type="checkbox"/> e	<input type="checkbox"/> e	<input type="checkbox"/> e	AFTER EMPLOYEE REACHES AGE: AND AFTER COMPLETES FIRST # YRS:	_____	_____	_____
<input type="checkbox"/> z	<input type="checkbox"/> z	<input type="checkbox"/> z	OTHER (SPECIFY):			

CTE1: _____

CTE2: _____

CTE3: _____

R2K. Is there a maximum age or service years after which employer contributions are no longer made on behalf of the participant? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

CTE1	CTE2	CTE3		(1)	(2)	(3)
			DEFINE ASY: (1) <input type="checkbox"/> ASY: _____ (2) <input type="checkbox"/> ASY: _____ (3) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED			
<input type="checkbox"/> a	<input type="checkbox"/> a	<input type="checkbox"/> a	YES, MAXIMUM AGE:	_____	_____	_____
<input type="checkbox"/> b	<input type="checkbox"/> b	<input type="checkbox"/> b	YES, MAXIMUM ASY:	_____	_____	_____
<input type="checkbox"/> c	<input type="checkbox"/> c	<input type="checkbox"/> c	YES, MAXIMUM AGE PLUS ASY:	_____	_____	_____
<input type="checkbox"/> d	<input type="checkbox"/> d	<input type="checkbox"/> d	YES, WHEN OVER MAXIMUM AGE: OR OVER MAXIMUM ASY:	_____	_____	_____
<input type="checkbox"/> e	<input type="checkbox"/> e	<input type="checkbox"/> e	YES, WHEN OVER MAXIMUM AGE: AND OVER MAXIMUM ASY:	_____	_____	_____
<input type="checkbox"/> f	<input type="checkbox"/> f	<input type="checkbox"/> f	NO			
<input type="checkbox"/> z	<input type="checkbox"/> z	<input type="checkbox"/> z	OTHER (SPECIFY BELOW):			

CTE1: _____

CTE2: _____

CTE3: _____

R2L. What is the vesting schedule that applies to these employer contributions? (USE SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

CTE1	CTE2	CTE3	→	DEFINE ASY: (1) <input type="checkbox"/> ASY: _____ (2) <input type="checkbox"/> ASY: _____ (3) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED
------	------	------	---	--

a a a SAME AS: (1) _____ (2) _____ (3) _____

b b b IMMEDIATE 100% VESTING FROM THE TIME OF INITIAL PARTICIPATION

c c c CLIFF VESTING: VESTING INCREASES FROM 0% TO 100% WHEN:

AGE: (1) _____ (2) _____ (3) _____

ASY: (1) _____ (2) _____ (3) _____

AGE+ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ OR ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ AND ASY: (1) _____ (2) _____ (3) _____

d d d STEP VESTING: VESTING BEGINS AT: (1) _____ % (2) _____ % (3) _____, WHEN:

AGE: (1) _____ (2) _____ (3) _____

ASY: (1) _____ (2) _____ (3) _____

AGE+ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ OR ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ AND ASY: (1) _____ (2) _____ (3) _____

VESTING REACHES: (1) _____ % (2) _____ % (3) _____ %, WHEN:

AGE: (1) _____ (2) _____ (3) _____

ASY: (1) _____ (2) _____ (3) _____

AGE+ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ OR ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ AND ASY: (1) _____ (2) _____ (3) _____

VESTING REACHES 100% WHEN:

AGE: (1) _____ (2) _____ (3) _____

ASY: (1) _____ (2) _____ (3) _____

AGE+ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ OR ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ AND ASY: (1) _____ (2) _____ (3) _____

e e e NO VESTING SCHEDULE CITED

z z z OTHER (SPECIFY BELOW):

CTE1: _____

CTE2: _____

CTE3: _____

R2M. Can vested participants at their own discretion withdraw any of these employer contributions while still employed? (USE SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

CTE1 CTE2 CTE3

DEFINE ASY: (1) <input type="checkbox"/> ASY: _____ (2) <input type="checkbox"/> ASY: _____ (3) <input type="checkbox"/> ASY: _____
<input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED

- a a a YES
- b b b YES, AFTER AGE: (1)____(2)____(3)____
- c c c YES, AFTER ASY: (1)____(2)____(3)____
- d d d YES, AFTER AGE: (1)____(2)____(3)____ OR ASY: (1)____(2)____(3)____
- e e e YES, AFTER AGE: (1)____(2)____(3)____ AND ASY: (1)____(2)____(3)____
- f f f YES, AFTER AGE PLUS ASY EQUALS: (1)____(2)____(3)____
- g g g NO, CANNOT WITHDRAW UNTIL RETIRE OR TERMINATE EMPLOYMENT
- z z z OTHER (SPECIFY BELOW):

CTE1: _____

CTE2: _____

CTE3: _____

R2N. Does this pension plan include any provisions that calculate the total amount of the employer's annual contribution as the sum of the contributions due each participant, as determined by the participants' PAY, AGE, ASY, hours worked, or other participant characteristics?

1. YES

TURN TO P.32, R3

5. NO

TURN TO P. 39, SECTION S

43. On an annual basis, how are these (other) employer contributions (COE) calculated? (USE MORE THAN ONE COLUMN IF NECESSARY.)

CHECK:			(1) <input type="checkbox"/> PRE TAX	(2) <input type="checkbox"/> PRE TAX	(3) <input type="checkbox"/> PRE TAX
			<input type="checkbox"/> POST TAX	<input type="checkbox"/> POST TAX	<input type="checkbox"/> POST TAX
			<input type="checkbox"/> NOT CITED	<input type="checkbox"/> NOT CITED	<input type="checkbox"/> NOT CITED
DEFINE ASY:			(1) <input type="checkbox"/> ASY: _____	(2) <input type="checkbox"/> ASY: _____	(3) <input type="checkbox"/> ASY: _____
			<input type="checkbox"/> NOT USED	<input type="checkbox"/> NOT USED	<input type="checkbox"/> NOT USED

COE1 COE2 COE3 →

b b b FIXED DOLLAR AMOUNT: (1) \$ _____ (2) \$ _____ (3) \$ _____

c c c FIXED PERCENTAGE OF PAY: (1) _____ % (2) _____ % (3) _____ %
 UP TO MAXIMUM AMOUNT: (1) \$ _____ (2) \$ _____ (3) \$ _____

d d d FIXED PERCENTAGE PAY AT OR BELOW SWB: (1) _____ % (2) _____ % (3) _____ %

e e e FIXED PERCENTAGE PAY ABOVE SWB: (1) _____ % (2) _____ % (3) _____ %

f f f FIXED PERCENTAGE PAY ABOVE SWB: (1) _____ % (2) _____ % (3) _____ %
 UP TO MAXIMUM CONTRIBUTION: (1) \$ _____ (2) \$ _____ (3) \$ _____

g g g VARYING DOLLAR OR PERCENTAGE:

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

(1) _____ (2) _____ (3) _____ UNDER (NO MIN): (1) _____ (2) _____ (3) _____
 (1) _____ (2) _____ (3) _____ FROM (MIN): (1) _____ (2) _____ (3) _____
 TO: (1) _____ (2) _____ (3) _____
 (1) _____ (2) _____ (3) _____ FROM: (1) _____ (2) _____ (3) _____
 TO: (1) _____ (2) _____ (3) _____
 (1) _____ (2) _____ (3) _____ FROM: (1) _____ (2) _____ (3) _____
 TO (MAX): (1) _____ (2) _____ (3) _____
 (1) _____ (2) _____ (3) _____ OVER (NO MAX): (1) _____ (2) _____ (3) _____

z z z OTHER (SPECIFY BELOW):

COE1: _____
 COE2: _____
 COE3: _____

R3A. Do any of the (other) employer contribution formulas depend on the Social Security taxable wage base (SWB)? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

- | <u>COE1</u> | <u>COE2</u> | <u>COE3</u> | |
|----------------------------|----------------------------|----------------------------|--|
| <input type="checkbox"/> a | <input type="checkbox"/> a | <input type="checkbox"/> a | YES, ACTUAL SWB IN EFFECT EACH YEAR |
| <input type="checkbox"/> b | <input type="checkbox"/> b | <input type="checkbox"/> b | YES, CAREER AVERAGE SWB CALCULATED EACH YEAR |
| <input type="checkbox"/> c | <input type="checkbox"/> c | <input type="checkbox"/> c | YES, CAREER AVERAGE SWB ESTIMATED IN YEAR:
(1) 19__ (2) 19__ (3) 19__ |
| <input type="checkbox"/> d | <input type="checkbox"/> d | <input type="checkbox"/> d | NO |
| <input type="checkbox"/> z | <input type="checkbox"/> z | <input type="checkbox"/> z | OTHER (SPECIFY BELOW): |

COE1: _____
 COE2: _____
 COE3: _____

R3B. Are the (other) employer contribution formulas based on wages and salaries earned during specific calendar time periods, or during all years covered by this pension plan? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

- | <u>COE1</u> | <u>COE2</u> | <u>COE3</u> | |
|----------------------------|----------------------------|----------------------------|--|
| <input type="checkbox"/> a | <input type="checkbox"/> a | <input type="checkbox"/> a | COVERS ALL YEARS: NO SPECIFIC DATES CITED. |
| <input type="checkbox"/> b | <input type="checkbox"/> b | <input type="checkbox"/> b | BEFORE: (1) ____, 19__ (2) ____, 19__ (3) ____, 19__ |
| <input type="checkbox"/> c | <input type="checkbox"/> c | <input type="checkbox"/> c | AFTER: (1) ____, 19__ (2) ____, 19__ (3) ____, 19__ |
| <input type="checkbox"/> d | <input type="checkbox"/> d | <input type="checkbox"/> d | FROM: (1) ____, 19__ (2) ____, 19__ (3) ____, 19__
TO: (1) ____, 19__ (2) ____, 19__ (3) ____, 19__ |
| <input type="checkbox"/> z | <input type="checkbox"/> z | <input type="checkbox"/> z | OTHER SPECIFY BELOW): |

COE1: _____
 COE2: _____
 COE3: _____

R3C. Are participants eligible for employer contributions for each year they meet minimum employment requirements, or does the amount of the contribution depend on the actual number of hours worked each year?
 (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

COE1 COE2 COE3

a a a FULL CONTRIBUTION FOR EACH YEAR EMPLOYED; NO MINIMUM WORK REQUIREMENTS

b b b CONTRIBUTION EITHER FULL OR ZERO; FULL CONTRIBUTION IS GIVEN FOR EACH YEAR WORKED A MINIMUM OF:

(1) _____ (2) _____ (3) _____ #HOURS PER YEAR

OR

c c c (1) _____ (2) _____ (3) _____ #WEEKS PER YEAR, AND
 (1) _____ (2) _____ (3) _____ #HOURS PER WEEK

OR

d d d (1) _____ (2) _____ (3) _____ #MONTHS PER YEAR, AND
 (1) _____ (2) _____ (3) _____ #HOURS PER MONTH

e e e CONTRIBUTION A PRORATED FRACTION FROM ZERO TO ONE ASY; FULL CONTRIBUTION IS GIVEN FOR EACH YEAR WORKED A MINIMUM OF:

(1) _____ (2) _____ (3) _____ #HOURS PER YEAR

OR

f f f (1) _____ (2) _____ (3) _____ #WEEKS PER YEAR, AND
 (1) _____ (2) _____ (3) _____ #HOURS PER WEEK

g g g (1) _____ (2) _____ (3) _____ #MONTHS PER YEAR, AND
 (1) _____ (2) _____ (3) _____ #HOURS PER MONTH

h h h CONTRIBUTION A PRORATED FRACTION FROM ZERO TO MORE THAN ONE ASY; FULL CONTRIBUTION GIVEN FOR EVERY:

(1) _____ (2) _____ (3) _____ #HOURS PER YEAR

OR

i i i (1) _____ (2) _____ (3) _____ #WEEKS PER YEAR, AND
 (1) _____ (2) _____ (3) _____ #HOURS PER WEEK

j j j (1) _____ (2) _____ (3) _____ #MONTHS PER YEAR, AND
 (1) _____ (2) _____ (3) _____ #HOURS PER MONTH

z z z OTHER (SPECIFY BELOW):

COE1: _____

COE2: _____

COE3: _____

R3D. To receive any of the above employer contributions, are there any other special requirements? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

<u>COE1</u>	<u>COE2</u>	<u>COE3</u>	
<input type="checkbox"/> a	<input type="checkbox"/> a	<input type="checkbox"/> a	NO OTHER SPECIAL REQUIREMENTS (EXCEPT MATCHING AMOUNTS)
<input type="checkbox"/> b	<input type="checkbox"/> b	<input type="checkbox"/> b	EMPLOYER APPROVAL REQUIRED
<input type="checkbox"/> c	<input type="checkbox"/> c	<input type="checkbox"/> c	PAST SERVICE REQUIRED
<input type="checkbox"/> d	<input type="checkbox"/> d	<input type="checkbox"/> d	IF PLAN PARTICIPANT ON: (1) ___ 19 ___ (2) ___ 19 ___ (3) ___ 19 ___
<input type="checkbox"/> e	<input type="checkbox"/> e	<input type="checkbox"/> e	IF PLAN PARTICIPANT BEFORE: (1) ___ 19 ___ (2) ___ 19 ___ (3) ___ 19 ___
<input type="checkbox"/> f	<input type="checkbox"/> f	<input type="checkbox"/> f	IF PLAN PARTICIPANT AFTER: (1) ___ 19 ___ (2) ___ 19 ___ (3) ___ 19 ___
<input type="checkbox"/> g	<input type="checkbox"/> g	<input type="checkbox"/> g	IF PLAN PARTICIPANT FROM: (1) ___ 19 ___ (2) ___ 19 ___ (3) ___ 19 ___
			TO: (1) ___ 19 ___ (2) ___ 19 ___ (3) ___ 19 ___
<input type="checkbox"/> z	<input type="checkbox"/> z	<input type="checkbox"/> z	OTHER (SPECIFY BELOW):

COE1: _____

COE2: _____

COE3: _____

R3E. When does the employer begin to make these (other) regular annual contributions on behalf of the participant? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

COE1	COE2	COE3		(1)	(2)	(3)
<input type="checkbox"/> a	<input type="checkbox"/> a	<input type="checkbox"/> a	AT ONSET OF EMPLOYMENT			
<input type="checkbox"/> b	<input type="checkbox"/> b	<input type="checkbox"/> b	AFTER EMPLOYEE REACHES AGE:	_____	_____	_____
<input type="checkbox"/> c	<input type="checkbox"/> c	<input type="checkbox"/> c	AFTER EMPLOYEE COMPLETES FIRST # YRS:	_____	_____	_____
<input type="checkbox"/> d	<input type="checkbox"/> d	<input type="checkbox"/> d	AFTER EMPLOYEE REACHES AGE: OR AFTER COMPLETES FIRST # YRS:	_____	_____	_____
<input type="checkbox"/> e	<input type="checkbox"/> e	<input type="checkbox"/> e	AFTER EMPLOYEE REACHES AGE: AND AFTER COMPLETES FIRST # YRS:	_____	_____	_____
<input type="checkbox"/> z	<input type="checkbox"/> z	<input type="checkbox"/> z	OTHER (SPECIFY):			

COE1: _____

COE2: _____

COE3: _____

R3F. Is there a maximum age or service years after which participants no longer receive these (other) regular employer contributions? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

COE1	COE2	COE3	DEFINE ASY:	(1)	(2)	(3)
<input type="checkbox"/> a	<input type="checkbox"/> a	<input type="checkbox"/> a	YES, MAXIMUM AGE:	_____	_____	_____
<input type="checkbox"/> b	<input type="checkbox"/> b	<input type="checkbox"/> b	YES, MAXIMUM ASY:	_____	_____	_____
<input type="checkbox"/> c	<input type="checkbox"/> c	<input type="checkbox"/> c	YES, MAXIMUM AGE PLUS ASY:	_____	_____	_____
<input type="checkbox"/> d	<input type="checkbox"/> d	<input type="checkbox"/> d	YES, WHEN OVER MAXIMUM AGE: OR OVER MAXIMUM ASY:	_____	_____	_____
<input type="checkbox"/> e	<input type="checkbox"/> e	<input type="checkbox"/> e	YES, WHEN OVER MAXIMUM AGE: AND OVER MAXIMUM ASY:	_____	_____	_____
<input type="checkbox"/> f	<input type="checkbox"/> f	<input type="checkbox"/> f	NC			
<input type="checkbox"/> z	<input type="checkbox"/> z	<input type="checkbox"/> z	OTHER (SPECIFY BELOW):			

COE1: _____

COE2: _____

COE3: _____

R3G. What is the vesting schedule that applies to these other employer contributions? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

COE1 COE2 COE3 →

DEFINE ASY: (1) <input type="checkbox"/> ASY: _____ (2) <input type="checkbox"/> ASY: _____ (3) <input type="checkbox"/> ASY: _____
<input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED <input type="checkbox"/> NOT USED

a a a SAME AS: (1) _____ (2) _____ (3) _____

b b b IMMEDIATE 100% VESTING FROM THE TIME OF INITIAL PARTICIPATION

c c c CLIFF VESTING: VESTING INCREASES FROM 0% TO 100% WHEN:

AGE: (1) _____ (2) _____ (3) _____

ASY: (1) _____ (2) _____ (3) _____

AGE+ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ OR ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ AND ASY: (1) _____ (2) _____ (3) _____

d d d STEP VESTING: VESTING BEGINS AT: (1) _____%(2) _____%(3) _____, WHEN:

AGE: (1) _____ (2) _____ (3) _____

ASY: (1) _____ (2) _____ (3) _____

AGE+ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ OR ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ AND ASY: (1) _____ (2) _____ (3) _____

VESTING REACHES: (1) _____%(2) _____%(3) _____%, WHEN:

AGE: (1) _____ (2) _____ (3) _____

ASY: (1) _____ (2) _____ (3) _____

AGE+ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ OR ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ AND ASY: (1) _____ (2) _____ (3) _____

VESTING REACHES 100% WHEN:

AGE: (1) _____ (2) _____ (3) _____

ASY: (1) _____ (2) _____ (3) _____

AGE+ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ OR ASY: (1) _____ (2) _____ (3) _____

AGE: (1) _____ (2) _____ (3) _____ AND ASY: (1) _____ (2) _____ (3) _____

e e e NO VESTING SCHEDULE CITED

z z z OTHER (SPECIFY BELOW):

COE1: _____

COE2: _____

COE3: _____

R3H. Can vested participants at their own discretion withdraw any of these employer contributions while still employed? (USE SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

DEFINE ASY: (1) <input type="checkbox"/> ASY: _____	(2) <input type="checkbox"/> ASY: _____	(3) <input type="checkbox"/> ASY: _____
<input type="checkbox"/> NOT USED	<input type="checkbox"/> NOT USED	<input type="checkbox"/> NOT USED

COE1 COE2 COE3 →

- a a a YES
- b b b YES, AFTER AGE: (1)____(2)____(3)____
- c c c YES, AFTER ASY: (1)____(2)____(3)____
- d d d YES, AFTER AGE: (1)____(2)____(3)____ OR ASY: (1)____(2)____(3)____
- e e e YES, AFTER AGE: (1)____(2)____(3)____ AND ASY: (1)____(2)____(3)____
- f f f YES, AFTER AGE PLUS ASY EQUALS: (1)____(2)____(3)____
- g g c NO, CANNOT WITHDRAW UNTIL RETIRE OR TERMINATE EMPLOYMENT
- z z z OTHER (SPECIFY BELOW):

COE1: _____

COE2: _____

COE3: _____

SECTION 5

DEFINED CONTRIBUTION PLANS: RETIREMENT BENEFITS

- S1. Does the employer make any lump-sum contributions at the time of retirement to participants that qualify for normal retirement, including any contributions to achieve some minimum retirement benefit?

1. YES

TURN TO P. 40 ,
S1A

5. NO

→ TURN TO P. 44, S2

51A. How is the lump-sum contribution (CLS) at the time of normal retirement determined? (USE MORE THAN ONE COLUMN IF NECESSARY.)

CHECK: (1) <input type="checkbox"/> PRE TAX			(2) <input type="checkbox"/> PRE TAX			(3) <input type="checkbox"/> PRE TAX		
<input type="checkbox"/> POST TAX			<input type="checkbox"/> POST TAX			<input type="checkbox"/> POST TAX		
<input type="checkbox"/> NOT CITED			<input type="checkbox"/> NOT CITED			<input type="checkbox"/> NOT CITED		
DEFINE ASY: (1) <input type="checkbox"/> ASY: _____			(2) <input type="checkbox"/> ASY: _____			(3) <input type="checkbox"/> ASY: _____		
<input type="checkbox"/> NOT USED			<input type="checkbox"/> NOT USED			<input type="checkbox"/> NOT USED		

CLS1 CLS2 CLS3 →

b b b FIXED DOLLAR AMOUNT: (1) \$ _____ (2) \$ _____ (3) \$ _____

c c c FIXED PERCENTAGE OF PAY: (1) _____ % (2) _____ % (3) _____ %
 UP TO MAXIMUM AMOUNT: (1) \$ _____ (2) \$ _____ (3) \$ _____

d d d FIXED PERCENTAGE PAY AT OR BELOW SWB: (1) _____ % (2) _____ % (3) _____ %

e e e FIXED PERCENTAGE PAY ABOVE SWB: (1) _____ % (2) _____ % (3) _____ %

f f f FIXED PERCENTAGE PAY ABOVE SWB: (1) _____ % (2) _____ % (3) _____ %
 UP TO MAXIMUM CONTRIBUTION: (1) \$ _____ (2) \$ _____ (3) \$ _____

g g g VARYING DOLLAR OR PERCENTAGE:

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

(1) _____	(2) _____	(3) _____	UNDER (NO MIN):	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	FROM (MIN):	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	TO:	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	FROM:	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	TO:	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	FROM:	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	TO (MAX):	(1) _____	(2) _____	(3) _____
(1) _____	(2) _____	(3) _____	OVER (NO MAX):	(1) _____	(2) _____	(3) _____

S1A (continued)

CLS1 CLS2 CLS3

h h h AUGMENT TO ACHIEVE MINIMUM ACCOUNT BALANCE OF:
(1)\$_____ (2)\$_____ (3)\$_____

i i i AUGMENT TO ACHIEVE A MINIMUM REGULAR PAYMENT OF:
(1)\$_____ (2)\$_____ (3)\$_____

j j j AUGMENT TO ACHIEVE A MINIMUM REGULAR PAYMENT OF:
(1)_____% (2)_____% (3)_____% FINAL PAY

k k k AUGMENT TO REPLACE SS UNTIL ELIGIBLE FULL BENEFITS

l l l AUGMENT TO REPLACE SS UNTIL ELIGIBLE REDUCED BENEFITS

m m m AUGMENT TO REPLACE SS, FULL OR REDUCED NOT CITED

z z z OTHER (SPECIFY BELOW):

CLS1: _____

CLS2: _____

CLS3: _____

S2. Express how contributions from all sources to each participant are determined, including any other minimums or maximums on contributions, using the terms defined in the above questions (MAN, MMAN, VOL, MVOL, CTE, COE, CLS), and standard notation.

EXPRESS ALL FORMULAS IN ANNUAL AMOUNTS.

CNRT#1=

S2A. Does this pension plan specify the rate at which these contributions accrue interest?

1. YES

5. NO → TURN TO P. 45, 53

S2B. How is the annual rate determined?

- a FIXED RATE: ____ . ____%
- b VARYING RATE DEPENDING ON COMPANY PERFORMANCE, NO MIN. RATE
- c VARYING RATE DEPENDING ON COMPANY PERFORMANCE, WITH MIN.: ____ . ____%
- d VARYING RATE DEPENDING ON ACTUAL RETURNS ON INVESTED FUNDS
- z OTHER (SPECIFY): _____

- S3. Aside from vesting requirements, what minimum combinations of age and actual service years are required (CRAS) to receive annuity benefits from this defined contribution plan? (CHECK ALL COMBINATIONS THAT APPLY.)

CRAS1 → DEFINE ASY: ASY: _____ NOT USED

- a NO MINIMUM AGE OR ASY
- b MINIMUM AGE OF: (1) _____ AND NO MINIMUM ASY.
- c MINIMUM ASY OF: (1) _____ AND NO MINIMUM AGE.
- d MINIMUM AGE OF: (1) _____ AND MINIMUM ASY OF: (1) _____
- e MINIMUM AGE OF: (1) _____ AND MINIMUM ASY OF: (1) _____
- f MINIMUM AGE OF: (1) _____ AND MINIMUM ASY OF: (1) _____
- g AGE PLUS ASY OF: (1) _____, NO MIN AGE OR ASY
- h AGE PLUS ASY OF: (1) _____ AND MINIMUM AGE OF: (1) _____
- i AGE PLUS ASY OF: (1) _____ AND MINIMUM ASY OF: (1) _____
- j AGE PLUS ASY OF: (1) _____ AND MINIMUM AGE OF: (1) _____,
AND MINIMUM ASY OF: (1) _____
- z OTHER (SPECIFY BELOW):

CRAS1: _____

54. For vested participants that terminate employment before retirement, when are they eligible to receive regular annuity payments based on all contributions to their accounts, including accrued interest?
 (CHECK ALL COMBINATIONS THAT APPLY.)

CRAS2 → DEFINE ASY: ASY: _____ NOT USED

- a NO MINIMUM AGE OR ASY
- b MINIMUM AGE OF: (2) _____ AND NO MINIMUM ASY.
- c MINIMUM ASY OF: (2) _____ AND NO MINIMUM AGE.
- d MINIMUM AGE OF: (2) _____ AND MINIMUM ASY OF: (2) _____
- e MINIMUM AGE OF: (2) _____ AND MINIMUM ASY OF: (2) _____
- f MINIMUM AGE OF: (2) _____ AND MINIMUM ASY OF: (2) _____
- g AGE PLUS ASY OF: (2) _____ NO MIN AGE OR ASY
- h AGE PLUS ASY OF: (2) _____ AND MINIMUM AGE OF: (2) _____
- i AGE PLUS ASY OF: (2) _____ AND MINIMUM ASY OF: (2) _____
- j AGE PLUS ASY OF: (2) _____ AND MINIMUM AGE OF: (2) _____, AND MINIMUM ASY OF: (2) _____
- z OTHER (SPECIFY BELOW):

CRAS2: _____

SECTION T

DEFINED CONTRIBUTION PLANS: EARLY AND LATE RETIREMENT

T1. Are participants in this pension plan subject to a mandatory retirement age?

1. YES



5. NO

GO TO T2

T1A. What is the mandatory retirement age?

T2. For participants that retire earlier or later than the normal retirement date, does the employer make any additional lump-sum contribution to the participant's account?

1. YES

TURN TO P. 48, T3

5. NO



TURN TO P. 52, SECTION W

T3. How is the additional lump-sum contribution (CLS) determined?

CHECK:	(4) <input type="checkbox"/> PRE TAX <input type="checkbox"/> POST TAX <input type="checkbox"/> NOT CITED	(5) <input type="checkbox"/> PRE TAX <input type="checkbox"/> POST TAX <input type="checkbox"/> NOT CITED	(6) <input type="checkbox"/> PRE TAX <input type="checkbox"/> POST TAX <input type="checkbox"/> NOT CITED
DEFINE ASY:	(4) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED	(5) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED	(6) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED

CLS4	CLS5	CLS6	
<input type="checkbox"/> b	<input type="checkbox"/> b	<input type="checkbox"/> b	FIXED DOLLAR AMOUNT: (4) \$ _____ (5) \$ _____ (6) \$ _____
<input type="checkbox"/> c	<input type="checkbox"/> c	<input type="checkbox"/> c	FIXED PERCENTAGE OF PAY: (4) _____ % (5) _____ % (6) _____ % UP TO MAXIMUM AMOUNT: (4) \$ _____ (5) \$ _____ (6) \$ _____
<input type="checkbox"/> d	<input type="checkbox"/> d	<input type="checkbox"/> d	FIXED PERCENTAGE PAY AT <u>OR BELOW</u> SWB: (4) _____ % (5) _____ % (6) _____ %
<input type="checkbox"/> e	<input type="checkbox"/> e	<input type="checkbox"/> e	FIXED PERCENTAGE PAY <u>ABOVE</u> SWB: (4) _____ % (5) _____ % (6) _____ %
<input type="checkbox"/> f	<input type="checkbox"/> f	<input type="checkbox"/> f	FIXED PERCENTAGE PAY <u>ABOVE</u> SWB: (4) _____ % (5) _____ % (6) _____ % UP TO MAXIMUM CONTRIBUTION: (4) \$ _____ (5) \$ _____ (6) \$ _____
<input type="checkbox"/> g	<input type="checkbox"/> g	<input type="checkbox"/> g	VARYING DOLLAR OR PERCENTAGE:

<input type="checkbox"/> \$ AMOUNT <input type="checkbox"/> % PAY <input type="checkbox"/> % (PAY > SWB) <input type="checkbox"/> % (PAY ≤ SWB) <input type="checkbox"/> _____	<input type="checkbox"/> \$ AMOUNT <input type="checkbox"/> % PAY <input type="checkbox"/> % (PAY > SWB) <input type="checkbox"/> % (PAY ≤ SWB) <input type="checkbox"/> _____	<input type="checkbox"/> \$ AMOUNT <input type="checkbox"/> % PAY <input type="checkbox"/> % (PAY > SWB) <input type="checkbox"/> % (PAY ≤ SWB) <input type="checkbox"/> _____	<input type="checkbox"/> PAY <input type="checkbox"/> AGE <input type="checkbox"/> ASY <input type="checkbox"/> AGE+ASY <input type="checkbox"/> _____	<input type="checkbox"/> PAY <input type="checkbox"/> AGE <input type="checkbox"/> ASY <input type="checkbox"/> AGE+ASY <input type="checkbox"/> _____	<input type="checkbox"/> PAY <input type="checkbox"/> AGE <input type="checkbox"/> ASY <input type="checkbox"/> AGE+ASY <input type="checkbox"/> _____
↓	↓	↓	↓	↓	↓
(4) _____	(5) _____	(6) _____	UNDER (NO MIN): (4) _____ (5) _____ (6) _____		
(4) _____	(5) _____	(6) _____	FROM (MIN): (4) _____ (5) _____ (6) _____		
			TO: (4) _____ (5) _____ (6) _____		
(4) _____	(5) _____	(6) _____	FROM: (4) _____ (5) _____ (6) _____		
			TO: (4) _____ (5) _____ (6) _____		
(4) _____	(5) _____	(6) _____	FROM: (4) _____ (5) _____ (6) _____		
			TO (MAX): (4) _____ (5) _____ (6) _____		
(4) _____	(5) _____	(6) _____	OVER (NO MAX): (4) _____ (5) _____ (6) _____		

T3. (continued)

CLS4 CLS5 CLS6

h h h

AUGMENT TO ACHIEVE MINIMUM ACCOUNT BALANCE OF:

(4)\$ _____ (5)\$ _____ (6)\$ _____

i i i

AUGMENT TO ACHIEVE A MINIMUM REGULAR PAYMENT OF:

(4)\$ _____ (5)\$ _____ (6)\$ _____

j j j

AUGMENT TO ACHIEVE A MINIMUM REGULAR PAYMENT OF:

(4) _____ % (5) _____ % (6) _____ % FINAL PAY

k k k

AUGMENT TO REPLACE SS UNTIL ELIGIBLE FULL BENEFITS

l l l

AUGMENT TO REPLACE SS UNTIL ELIGIBLE REDUCED BENEFITS

m m m

AUGMENT TO REPLACE SS, FULL OR REDUCED NOT CITED

z z z

OTHER (SPECIFY BELOW):

CLS4: _____

CLS5: _____

CLS6: _____

T3A. Do any of the above lump-sum contribution formulas depend on the Social Security taxable wage base (SWB)? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

CLS4 CLS5 CLS6

a a a YES, ACTUAL SWB IN EFFECT AT RETIREMENT

b b b YES, CAREER AVERAGE SWB CALCULATED AT RETIREMENT

c c c YES, CAREER AVERAGE SWB ESTIMATED IN YEAR:
(1) 19__ (2) 19__ (3) 19__

d d d NO

z z z OTHER (SPECIFY BELOW):

CLS4: _____

CLS5: _____

CLS6: _____

T3B. To receive the lump-sum employer contributions, are there any other special requirements? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

- | <u>CLS4</u> | <u>CLS5</u> | <u>CLS6</u> | |
|----------------------------|----------------------------|----------------------------|---|
| <input type="checkbox"/> a | <input type="checkbox"/> a | <input type="checkbox"/> a | NO OTHER SPECIAL REQUIREMENTS (EXCEPT MATCHING AMOUNTS) |
| <input type="checkbox"/> b | <input type="checkbox"/> b | <input type="checkbox"/> b | EMPLOYER APPROVAL REQUIRED |
| <input type="checkbox"/> c | <input type="checkbox"/> c | <input type="checkbox"/> c | PAST SERVICE REQUIRED |
| <input type="checkbox"/> d | <input type="checkbox"/> d | <input type="checkbox"/> d | IF PLAN PARTICIPANT ON: (4)____19__(5)____19__(6)____19__ |
| <input type="checkbox"/> e | <input type="checkbox"/> e | <input type="checkbox"/> e | IF PLAN PARTICIPANT BEFORE: (4)____19__(5)____19__(6)____19__ |
| <input type="checkbox"/> f | <input type="checkbox"/> f | <input type="checkbox"/> f | IF PLAN PARTICIPANT AFTER: (4)____19__(5)____19__(6)____19__ |
| <input type="checkbox"/> g | <input type="checkbox"/> g | <input type="checkbox"/> g | IF PLAN PARTICIPANT FROM: (4)____19__(5)____19__(6)____19__ |
| | | | TO: (4)____19__(5)____19__(6)____19__ |

z z z OTHER (SPECIFY BELOW):

CLS4: _____

CLS5: _____

CLS6: _____

SECTION W

DEFINED CONTRIBUTION PLANS: DISABILITY, DEATH AND SURVIVOR BENEFITS

W1. Does this pension plan include any special provisions for disability retirement benefits?

1. YES

5. NO

→ TURN TO P. 58, W3



W1A. Does this pension plan include a provision that increases the vesting percentage for participants that were not fully vested at the time of disablement?

DEFINE ASY: ASY: _____ NOT USED

- a YES, INCREASED TO 100% AT TIME OF DISABLEMENT
- b YES, INCREASED TO 100% WHEN ABOVE MINIMUM AGE: _____
- c YES, INCREASED TO 100% WHEN ABOVE MINIMUM ASY: _____
- d YES, INCREASED TO 100% WHEN ABOVE MINIMUM AGE+ASY: _____
- e YES, INCREASED TO 100% WHEN ABOVE MINIMUM AGE: _____
OR ABOVE MINIMUM ASY: _____
- f YES, INCREASED TO 100% WHEN ABOVE MINIMUM AGE: _____
AND ABOVE MINIMUM ASY: _____
- g NO, VESTING PERCENTAGE IS NOT INCREASED ABOVE AMOUNT CALCULATED AT TIME OF DISABLEMENT.
- z OTHER (SPECIFY): _____

W1B. After disablement, do participants continue to accrue service credit until they are eligible for early or normal retirement benefits, or are no additional service years credited after the time of disablement?

DEFINE ASY: ASY: _____ NOT USED

- a ACCRUE ONE ASY FOR EACH YEAR DISABLED, NO MAXIMUM.
- b ACCRUE ONE ASY FOR EACH YEAR, TO MAXIMUM AGE: _____
- c ACCRUE ONE ASY FOR EACH YEAR, TO MAXIMUM ADDITIONAL ASY: _____
- d ACCRUE ONE ASY FOR EACH YEAR, TO MAXIMUM TOTAL ASY: _____
- e ACCRUE ONE ASY FOR EACH YEAR, TO TOTAL AGE+ASY: _____
- f NO ADDITIONAL SERVICE YEARS CREDITED.
- z OTHER (SPECIFY): _____
-
-

W2. Does the employer make any lump-sum contributions to participant's accounts at the time of disablement, including any contributions to achieve some minimum retirement benefit?

1. YES

5. NO

TURN TO P. 58, W3

W2A. How is the lump-sum contribution (CLS) at the time of normal retirement determined? (USE MORE THAN ONE COLUMN IF NECESSARY.)

CHECK:	(7) <input type="checkbox"/> PRE TAX <input type="checkbox"/> POST TAX <input type="checkbox"/> NOT CITED	(8) <input type="checkbox"/> PRE TAX <input type="checkbox"/> POST TAX <input type="checkbox"/> NOT CITED	(9) <input type="checkbox"/> PRE TAX <input type="checkbox"/> POST TAX <input type="checkbox"/> NOT CITED
DEFINE ASY:	(7) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED	(8) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED	(9) <input type="checkbox"/> ASY: _____ <input type="checkbox"/> NOT USED

CLS7 CLS8 CLS9

b b b FIXED DOLLAR AMOUNT: (7) \$ _____ (8) \$ _____ (9) \$ _____

c c c FIXED PERCENTAGE OF PAY: (7) _____ % (8) _____ % (9) _____ %
UP TO MAXIMUM AMOUNT: (7) \$ _____ (8) \$ _____ (9) \$ _____

d d d FIXED PERCENTAGE PAY AT OR BELOW SWB: (7) _____ % (8) _____ % (9) _____ %

e e e FIXED PERCENTAGE PAY ABOVE SWB: (7) _____ % (8) _____ % (9) _____ %

f f f FIXED PERCENTAGE PAY ABOVE SWB: (7) _____ % (8) _____ % (9) _____ %
UP TO MAXIMUM CONTRIBUTION: (7) \$ _____ (8) \$ _____ (9) \$ _____

g g g VARYING DOLLAR OR PERCENTAGE:

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

(7) _____ (8) _____ (9) _____ UNDER (NO MIN): (7) _____ (8) _____ (9) _____

(7) _____ (8) _____ (9) _____ FROM (MIN): (7) _____ (8) _____ (9) _____

(7) _____ (8) _____ (9) _____ TO: (7) _____ (8) _____ (9) _____

(7) _____ (8) _____ (9) _____ FROM: (7) _____ (8) _____ (9) _____

(7) _____ (8) _____ (9) _____ TO: (7) _____ (8) _____ (9) _____

(7) _____ (8) _____ (9) _____ FROM: (7) _____ (8) _____ (9) _____

(7) _____ (8) _____ (9) _____ TO (MAX): (7) _____ (8) _____ (9) _____

(7) _____ (8) _____ (9) _____ OVER (NO MAX): (7) _____ (8) _____ (9) _____

W2A. (continued)

CLS7 CLS8 CLS9

h h h

AUGMENT TO ACHIEVE MINIMUM ACCOUNT BALANCE OF:
(7)\$ _____ (8)\$ _____ (9)\$ _____

i i i

AUGMENT TO ACHIEVE A MINIMUM REGULAR PAYMENT OF:
(7)\$ _____ (8)\$ _____ (9)\$ _____

j j j

AUGMENT TO ACHIEVE A MINIMUM REGULAR PAYMENT OF:
(7) _____% (8) _____% (9) _____% FINAL PAY

k k k

AUGMENT TO REPLACE SS UNTIL ELIGIBLE FULL BENEFITS

l l l

AUGMENT TO REPLACE SS UNTIL ELIGIBLE REDUCED BENEFITS

m m m

AUGMENT TO REPLACE SS, FULL OR REDUCED NOT CITED

z z z

OTHER (SPECIFY BELOW):

CLS7: _____

CLS8: _____

CLS9: _____

W2B. Do any of the above lump-sum contribution formulas depend on the Social Security taxable wage base (SWB)? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

CLS7 CLS8 CLS9

a a a YES, ACTUAL SWB IN EFFECT AT RETIREMENT

b b b YES, CAREER AVERAGE SWB CALCULATED AT RETIREMENT

c c c YES, CAREER AVERAGE SWB ESTIMATED IN YEAR:
(7) 19__ (8) 19__ (9) 19__

d d d NO

z z z OTHER (SPECIFY BELOW):

CLS7: _____

CLS8: _____

CLS9: _____

W2C. Are the above lump-sum contribution formulas based on wages and salaries earned during specific calendar time periods, or during all years covered by this pension plan? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

CLS7 CLS8 CLS9

a a a COVERS ALL YEARS: NO SPECIFIC DATES CITED.

b b b BEFORE: (7) ____, 19__ (8) ____, 19__ (9) ____, 19__

c c c AFTER: (7) ____, 19__ (8) ____, 19__ (9) ____, 19__

d d d FROM: (7) ____, 19__ (8) ____, 19__ (9) ____, 19__

TO: (7) ____, 19__ (8) ____, 19__ (9) ____, 19__

z z z OTHER (SPECIFY BELOW):

CLS7: _____

CLS8: _____

CLS9: _____

W2D. To receive the lump-sum employer contributions, are there any other special requirements? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

<u>CLS7</u>	<u>CLS8</u>	<u>CLS9</u>	
<input type="checkbox"/> a	<input type="checkbox"/> a	<input type="checkbox"/> a	NO OTHER SPECIAL REQUIREMENTS (EXCEPT MATCHING AMOUNTS)
<input type="checkbox"/> b	<input type="checkbox"/> b	<input type="checkbox"/> b	EMPLOYER APPROVAL REQUIRED
<input type="checkbox"/> c	<input type="checkbox"/> c	<input type="checkbox"/> c	PAST SERVICE REQUIRED
<input type="checkbox"/> d	<input type="checkbox"/> d	<input type="checkbox"/> d	IF PLAN PARTICIPANT ON: (7) ___ 19 ___ (8) ___ 19 ___ (9) ___ 19 ___
<input type="checkbox"/> e	<input type="checkbox"/> e	<input type="checkbox"/> e	IF PLAN PARTICIPANT BEFORE: (7) ___ 19 ___ (8) ___ 19 ___ (9) ___ 19 ___
<input type="checkbox"/> f	<input type="checkbox"/> f	<input type="checkbox"/> f	IF PLAN PARTICIPANT AFTER: (7) ___ 19 ___ (8) ___ 19 ___ (9) ___ 19 ___
<input type="checkbox"/> g	<input type="checkbox"/> g	<input type="checkbox"/> g	IF PLAN PARTICIPANT FROM: (7) ___ 19 ___ (8) ___ 19 ___ (9) ___ 19 ___
			TO: (7) ___ 19 ___ (8) ___ 19 ___ (9) ___ 19 ___
<input type="checkbox"/> z	<input type="checkbox"/> z	<input type="checkbox"/> z	OTHER (SPECIFY BELOW):

CLS7: _____

CLS8: _____

CLS9: _____

W3. Does this pension plan include any special provisions for the payment of benefits to the surviving beneficiaries or estates of participants whose death occurs before retirement?

1. YES



5. NO



TURN TO P. 64 , SECTION X

W3A. Does this pension plan include a provision that increases the vesting percentage for participants that were not fully vested at the time of death?

DEFINE ASY: ASY: _____ NOT USED

- a YES, INCREASED TO 100% AT TIME OF DEATH
- b YES, INCREASED TO 100% WHEN ABOVE MINIMUM AGE: _____
- c YES, INCREASED TO 100% WHEN ABOVE MINIMUM ASY: _____
- d YES, INCREASED TO 100% WHEN ABOVE MINIMUM AGE+ASY: _____
- e YES, INCREASED TO 100% WHEN ABOVE MINIMUM AGE: _____
OR ABOVE MINIMUM ASY: _____
- f YES, INCREASED TO 100% WHEN ABOVE MINIMUM AGE: _____
AND ABOVE MINIMUM ASY: _____
- g NO, VESTING PERCENTAGE IS NOT INCREASED ABOVE AMOUNT CALCULATED AT TIME OF DEATH.
- z OTHER (SPECIFY): _____

W3B. After the participant's death, does service credit continue to accrue until the participant would have been eligible for early or normal retirement benefits, or are no additional service years credited after the time of death?

DEFINE ASY: ASY: _____ NOT USED

- a ACCRUE ONE ASY FOR EACH YEAR, NO MAXIMUM.
- b ACCRUE ONE ASY FOR EACH YEAR, TO MAXIMUM AGE: _____
- c ACCRUE ONE ASY FOR EACH YEAR, TO MAXIMUM ADDITIONAL ASY: _____
- d ACCRUE ONE ASY FOR EACH YEAR, TO MAXIMUM TOTAL ASY: _____
- e ACCRUE ONE ASY FOR EACH YEAR, TO TOTAL AGE PLUS ASY: _____
- f USE ASY AT THE TIME OF DEATH; AND GREATER OF AGE AT DEATH OR AGE: _____
- g NO ADDITIONAL AGE OR SERVICE YEARS CREDITED.
- z OTHER (SPECIFY): _____

W4. Does the employer make any lump-sum contributions to participants accounts at the time of death, including any additional contributions to achieve some minimum benefit?

1. YES

5. NO

TURN TO P. 64 , SECTION X

W4A. How is the additional lump-sum contribution (CLS) determined?

CHECK: (10) <input type="checkbox"/> PRE TAX	(11) <input type="checkbox"/> PRE TAX	(12) <input type="checkbox"/> PRE TAX
<input type="checkbox"/> POST TAX	<input type="checkbox"/> POST TAX	<input type="checkbox"/> POST TAX
<input type="checkbox"/> NOT CITED	<input type="checkbox"/> NOT CITED	<input type="checkbox"/> NOT CITED
DEFINE ASY: (10) <input type="checkbox"/> ASY: _____	(11) <input type="checkbox"/> ASY: _____	(12) <input type="checkbox"/> ASY: _____
<input type="checkbox"/> NOT USED	<input type="checkbox"/> NOT USED	<input type="checkbox"/> NOT USED

CLS10 CLS11 CLS12

<input type="checkbox"/> b	<input type="checkbox"/> b	<input type="checkbox"/> b	FIXED DOLLAR AMOUNT:	(10) \$ _____	(11) \$ _____	(12) \$ _____
<input type="checkbox"/> c	<input type="checkbox"/> c	<input type="checkbox"/> c	FIXED PERCENTAGE OF PAY:	(10) _____ %	(11) _____ %	(12) _____ %
			UP TO MAXIMUM AMOUNT:	(10) \$ _____	(11) \$ _____	(12) \$ _____
<input type="checkbox"/> d	<input type="checkbox"/> d	<input type="checkbox"/> d	FIXED PERCENTAGE PAY AT OR BELOW SWB:	(10) _____ %	(11) _____ %	(12) _____ %
<input type="checkbox"/> e	<input type="checkbox"/> e	<input type="checkbox"/> e	FIXED PERCENTAGE PAY ABOVE SWB:	(10) _____ %	(11) _____ %	(12) _____ %
<input type="checkbox"/> f	<input type="checkbox"/> f	<input type="checkbox"/> f	FIXED PERCENTAGE PAY ABOVE SWB:	(10) _____ %	(11) _____ %	(12) _____ %
			UP TO MAXIMUM CONTRIBUTION:	(10) \$ _____	(11) \$ _____	(12) \$ _____
<input type="checkbox"/> g	<input type="checkbox"/> g	<input type="checkbox"/> g	VARYING DOLLAR OR PERCENTAGE:			

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> \$ AMOUNT
<input type="checkbox"/> % PAY
<input type="checkbox"/> % (PAY > SWB)
<input type="checkbox"/> % (PAY ≤ SWB)
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

<input type="checkbox"/> PAY
<input type="checkbox"/> AGE
<input type="checkbox"/> ASY
<input type="checkbox"/> AGE+ASY
<input type="checkbox"/> _____

(10) _____	(11) _____	(12) _____	UNDER (NO MIN):	(10) _____	(11) _____	(12) _____
(10) _____	(11) _____	(12) _____	FROM (MIN):	(10) _____	(11) _____	(12) _____
			TO:	(10) _____	(11) _____	(12) _____
(10) _____	(11) _____	(12) _____	FROM:	(10) _____	(11) _____	(12) _____
			TO:	(10) _____	(11) _____	(12) _____
(10) _____	(11) _____	(12) _____	FROM:	(10) _____	(11) _____	(12) _____
			TO (MAX):	(10) _____	(11) _____	(12) _____
(10) _____	(11) _____	(12) _____	OVER (NO MAX):	(10) _____	(11) _____	(12) _____

W4A. (continued)

CLS10 CLS11 CLS12

h h h AUGMENT TO ACHIEVE MINIMUM ACCOUNT BALANCE OF:
(10)\$ _____ (11)\$ _____ (12)\$ _____

i i i AUGMENT TO ACHIEVE A MINIMUM REGULAR PAYMENT OF:
(10)\$ _____ (11)\$ _____ (12)\$ _____

j j j AUGMENT TO ACHIEVE A MINIMUM REGULAR PAYMENT OF:
(10) _____% (11) _____% (12) _____% FINAL PAY

k k k AUGMENT TO REPLACE SS UNTIL ELIGIBLE FULL BENEFITS

l l l AUGMENT TO REPLACE SS UNTIL ELIGIBLE REDUCED BENEFITS

m m m AUGMENT TO REPLACE SS, FULL OR REDUCED NOT CITED

z z z OTHER (SPECIFY BELOW):

CLS10: _____

CLS11: _____

CLS12: _____

W4B. Do any of the above lump-sum contribution formulas depend on the Social Security taxable wage base (SWB)? (ENTER IN SAME COLUMN AS ABOVE FOR EACH DEFINITION.)

CLS10 CLS11 CLS12

a a a YES, ACTUAL SWB IN EFFECT AT RETIREMENT

b b b YES, CAREER AVERAGE SWB CALCULATED AT RETIREMENT

c c c YES, CAREER AVERAGE SWB ESTIMATED IN YEAR:
(10) 19__ (11) 19__ (12) 19__

d d d NO

z z z OTHER (SPECIFY BELOW):

CLS10: _____

CLS11: _____

CLS12: _____

SECTION X

DEFINED CONTRIBUTION PLANS: PAYMENT OPTIONS

- X1. Does this pension plan include a payment option available at the time of retirement under which benefits would continue to be paid to a surviving beneficiary?

1. YES

5. NO

→ TURN TO P. 65, X2

- X1A. Under which retirement circumstances is the survivor payment option available?

a NORMAL RETIREMENT

b LATE RETIREMENT

c EARLY RETIREMENT

d VESTED DEFERRED RETIREMENT

e DISABILITY RETIREMENT

z OTHER (SPECIFY):

X2. Excluding survivor benefits, does this pension plan include a provision for any lump-sum benefit payment upon the death of a retired participant?

1. YES



5. NO

→ TURN TO P. 66 , SECTION Y

X2A. Under which retirement circumstances are the death benefit payments made? (CHECK ALL THAT APPLY.)

a NORMAL RETIREMENT

b LATE RETIREMENT

c EARLY RETIREMENT

d VESTED DEFERRED RETIREMENT

e DISABILITY RETIREMENT

z OTHER (SPECIFY):

X2B. How are the lump-sum death benefits calculated for a retired participant?

a FIXED DOLLAR AMOUNT: \$ _____

b FIXED PERCENT YEARLY BENEFITS: _____%

z OTHER (SPECIFY):

SECTION Y

DEFINED CONTRIBUTION PLANS: COMMENTS

- Y1. Record below any unusual characteristic(s) of this pension plan, or any other pertinent information needed to interpret the plan provisions as coded in Sections L-X.