



2026 403(b) Survey Questionnaire

Questionnaires must be postmarked or completed online by **Friday, July 24, 2026**.

Those who complete the questionnaire will receive a free copy of the report.

All information provided will be strictly confidential. Only aggregate data will be released publicly.

For questions on the survey, please contact 540.323.7828 or research@psca.org

Survey Instructions

- Please do not use numerical abbreviations.
- Please answer all questions as of December 31, 2025.
- It will be helpful if you have your 2025 year-end payroll report available before completing the survey.
- If your organization offers more than one 403(b) plan, please pick the largest plan.

Submission Options:

Online: Complete at psca.org/research/403b.

Email: research@psca.org

Fax: 312-275-7171

Mail to: PSCA's 2026 403(b) Survey
4401 N. Fairfax Dr., Suite 600
Arlington, Virginia 22203

Contact Information

Please provide your contact information to receive a free copy of the annual survey report. (You may attach a business card instead.)

Plan Name: _____

Plan Service Provider: _____

Contact Name: _____

Company: _____

Phone: _____

E-mail: _____

Address: _____

Who referred you to the survey (name and company), if applicable?

A. Plan Demographics

1a. Who is your plan service provider? This is a financial services institution that provides investments, recordkeeping, and/or administrative services. (Check all that apply.)

- | | |
|---|--|
| <input type="checkbox"/> Ascensus (including Newport Group) | <input type="checkbox"/> Nationwide |
| <input type="checkbox"/> Equitable (Formerly AXA Equitable) | <input type="checkbox"/> Principal |
| <input type="checkbox"/> Empower Retirement/MassMutual | <input type="checkbox"/> TIAA |
| <input type="checkbox"/> Fidelity Investments | <input type="checkbox"/> Transamerica Retirement Solutions |
| <input type="checkbox"/> GuideStone Financial Resources | <input type="checkbox"/> Vanguard |
| <input type="checkbox"/> Lincoln Financial Group | <input type="checkbox"/> Voya Financial |
| <input type="checkbox"/> MetLife | |
| <input type="checkbox"/> Mutual of America | <input type="checkbox"/> Other: _____ |

b. How many years have you used this plan provider for this retirement plan? (If multiple providers, answer for the longest one.)

2. Is your organization:

- a private organization
- a public (government) organization

3. Please identify what type of non-profit organization you represent:

- Arts/Cultural
- Association
- Athletic/Recreation
- Foundation
- Healthcare (other than hospitals)
- Higher Education (including faith-based)
- Hospitals and Hospital Systems (including faith-based)
- K-12 Education (including Pre-K through 12 or other variations or faith-based)
- Library or Museum
- Other education
- Religious Institution (any faith-based institution not education or healthcare)
- Research, Science, or Environmental
- Social/Community Services
- Other: _____

4a. Approximately how many employees participate (have an account balance) in your organization's 403(b) plan?

- 1-49
- 50-199
- 200-999
- 1,000-4,999
- 5,000+

b. What is the approximate asset value of your plan?

- Less Than \$2MM
- \$2MM - \$4.9MM
- \$5MM - \$19.9MM
- \$20MM - \$99.9MM
- \$100MM - \$499MM
- \$500MM - \$999 MM
- \$1 Billion or more

5. What is your plan's ERISA status? An ERISA plan is a plan subject to the federal law that sets minimum standards for most voluntarily established retirement plans. Some 403(b) plans are exempt from ERISA regulations and are considered non-ERISA plans.

- ERISA
- Non-ERISA
- Unsure

6a. Does your organization offer any other retirement plans to employees in addition to the 403(b) plan you are completing this survey about?

- Yes No

6b. If yes, please indicate which additional plans you offer. (Check all that apply.)

- Profit sharing – 401(a)
- 403(b) ERISA
- 401(k) Plan
- 403(b) Non-ERISA
- 457(f) (non-qualified plan for executives)
- 457(b) (Government or top-hat)
- Money purchase – 401(a)
- Defined benefit, traditional
- Defined benefit, other (e.g., cash balance)
- Other: _____

c. If you offer multiple retirement plans, do you use the same plan provider on them all or different providers?

- Same provider
- Different providers

7. What type of contributions does your plan allow?

- Pre-tax participant contributions
- Roth participant contributions
- Pre-tax employer contributions
- Roth employer contributions

Note: If you have separate plans for separate contribution types, please do not combine both plans on this questionnaire. Either pick one plan to submit, or complete a separate questionnaire for each plan.

B. Participant Contributions

8. Indicate all types of participant contributions permitted in this plan. (Check all that apply.)

- Employee pre-tax
- Employee after-tax Roth
- Employee after-tax — traditional (voluntary non-Roth)
- None (Skip to Section C)

9. Are mandatory participant contributions to your organization's 403(b) plan required as a condition of employment?

- Yes
- No

10a. Does the plan permit catch-up contributions to participants age 50 or older?

- Yes
- No (Skip to question 11)

b. If yes, what percentage of participants age 50 or older made catch-up contributions in 2025? _____%

c. If your organization makes contributions to the plan, do you match catch-up contributions?

- Yes
- No
- N/A

d. Did the plan adopt the "super catch-up" provision from SECURE 2.0 allowing participants aged 60–63 to make additional catch-up contributions?

- Yes
- No

e. Does the plan offer a 15-year rule catch-up contribution?

- Yes
- No

11a. Does this plan have an automatic enrollment feature?

- Yes
- No

11b. Do you re-enroll all non-participants and/or under-contributing participants? (Check all that apply.)

- Yes, non-participants
- Yes, under-contributing participants
- No

If yes, how frequently do you re-enroll them?

- Annually
- Every 2 years
- Every 3 or more
- Periodically — no set schedule

c. What is the default deferral percentage?

- 1%
- 2%
- 3%
- 4%
- 5%
- 6%
- Other: _____%

d. What is your default rate in relation to your matching formula?

- Default is lower than the amount needed to receive the maximum match
- Default is at the amount needed to receive the maximum match
- Default is above the amount needed to receive the maximum match
- N/A (no match)

e. What is the default investment option?

- Balanced fund
- Managed account
- Target-date
- Other: _____

f. Approximately what percentage of automatically enrolled participants (either new hires or all non-participants, depending on your plan design) opted out of the plan in 2025?

- None
- 0.01–0.9%
- 1–4.9%
- 5–9.9%
- 10–19.9%
- 20% or more
- Unsure

12a. Does your plan have an auto-escalation feature in which deferral rates are automatically increased over time?

- Yes
- Yes, but only if the participant elects it
- No

b. If yes, how much are deferrals increased each year?

- 1%
- 2%
- Participant choice
- Other: _____%

c. Do you escalate the default deferral rate until it is high enough to receive the full possible matching contribution (if the default is not already set at the maximum match rate)?

- Yes
- No
- Escalate beyond the maximum match rate
- N/A (no match)

d. If yes, what is the cap on automatic increases?

- Less than 5%
- 5%
- 6%
- 7–9%
- 10%
- 15%
- No cap
- Other: _____%

C. Employer Contributions

13a. Does your plan provide for a matching contribution? (A matching contribution requires a participant to contribute to this or another plan in order to receive a specified employer contribution.)

- Yes
- No (Skip to question 14a)

13b. If yes, indicate the type of formula used and then write in the numerical formula used. (Check all that apply if more than one formula is used.)

- Fixed match (e.g., Organization contributes 10% of pay if participant puts in at least 5%)
Organization contributes _____% of pay if participant contributes a minimum of _____%
- Stated employer match (e.g., matches \$0.50 per \$1 up to 6% of pay contributed by the participant)
Organization contributes \$ _____ per \$1 up to _____% of pay
- Safe harbor match — traditional formula (\$1 per \$1 on the first 3% contributed and \$0.50 per \$1 on the next 2%)
- Safe harbor — automatic enrollment formula (\$1 per \$1 on the first 1% of pay and \$0.50 per \$1 on the next 5%)
- Graded match (age based, service based, or tiered formula)
 - Age based (describe): _____
 - Service based (describe): _____
 - Tiered formula (e.g., \$1 per \$1 on the first 3% then \$0.50 on the next 3% of pay contributed). Describe your formula: _____
- Discretionary match (determined annually)
Describe (if made in 2025): _____
- Other (Describe): _____

c. Did your organization make the matching contribution in 2025?

- Yes, the same formula as in 2024
- Yes, but a reduced amount
- Yes, but a higher amount
- No, it was suspended for 2025
- No, it is discretionary and not made in 2025
- Other: _____

d. How frequently are matching contributions made to this plan?

- Annually
- Monthly
- Quarterly
- Payroll period
- Not applicable
- Other: _____

If matching contributions are not made annually, is a year-end true-up match made so that all employees receive the full match?

- Yes No

e. When do full-time employees become eligible to receive matching organization contributions?

- Immediately After 12 months
- After 1 month After 2 years
- After 3 months Other: _____
- After 6 months

f. When do part-time employees become eligible to receive matching contributions?

- They don't (only full time employees receive a match)
- Immediately (1 month or less)
- Between 1 and 3 months of service
- After 3 months of service
- After 6 months of service
- After 1 year of service
- After 2 years of consecutive work for 500 or more hours per year (LTPT per SECURE)
- Other: _____

g. What is your plan's vesting schedule for matching organization contributions?

- Immediate full vesting 4-year graduated
- 2-year cliff 5-year graduated
- 3-year cliff 6-year graduated
- 3-year graduated Other: _____

14a. Does your plan provide for a non-matching employer contribution? (A non-matching organization contribution does not require participant contributions in order to receive the organization contribution.)

- Yes No (Skip to question 15)

b. If yes, indicate the type of formula used, then write in the numerical formula, if appropriate.

- Discretionary contribution
If made in 2025, indicate the percent of pay contributed: _____%
- Guaranteed percentage of participants' pay (Non-Safe harbor)
Percent contributed: _____%
- Safe harbor contribution (3% of pay to all eligible employees)
- Other (describe): _____

c. Did your organization make the non-matching contribution in 2025?

- Yes, the same formula as in 2024
- Yes, but a reduced amount
- Yes, but a higher amount
- No, it was suspended for 2025
- No, it is discretionary and not made in 2025
- Other: _____

d. How frequently are non-matching contributions made to this plan?

- Annually
- Monthly
- Quarterly
- Payroll period
- Not applicable
- Other: _____

e. When do full-time employees become eligible to receive non-matching employer contributions?

- Immediately
- After 1 month
- After 3 months
- After 6 months
- After 12 months
- After 2 years
- Other: _____

f. When do part-time employees become eligible to receive non-matching contributions?

- They don't (only full time employees receive non-matching contributions)
- Immediately (1 month or less)
- Between 1 and 3 months of service
- After 3 months of service
- After 6 months of service
- After 1 year of service
- After 2 years of consecutive work for 500 or more hours per year (LTPT per SECURE)
- Other: _____

g. What is your plan's vesting schedule for non-matching employer contributions?

- Immediate full vesting
- 2-year cliff
- 3-year cliff
- 3-year graduated
- 4-year graduated
- 5-year graduated
- 6-year graduated
- Other: _____

15. Does your plan allow employer contributions to be elected as Roth (newly allowed feature permitted under SECURE 2.0)?

- Yes, added already or will by end of year
- No, and will not add
- Possibly, still considering
- Unsure, haven't considered yet

16. What is your plan's age requirement to receive organization contributions?

- 18
- 21
- 26
- None
- Other: _____

17. How are forfeitures shared in this plan?

- Reallocated to participants
- Applied to reduce employer contributions
- Used to pay plan expenses
- No forfeitures
- Other (describe): _____

D. Investments

18. What kinds of investment vehicles are used in your plan? (Check all that apply.)

- Annuities
- Mutual Funds
- Unsure
- Other: _____

19. Which of the following investment options are available to participants? (Check all that apply.)

- | | |
|--|--|
| <input type="checkbox"/> Balanced Fund/Asset Allocation | <input type="checkbox"/> Equity-Indexed, Domestic |
| <input type="checkbox"/> Bond-Actively Managed, Domestic | <input type="checkbox"/> Equity-Indexed, International/Global |
| <input type="checkbox"/> Bond-Indexed, Domestic | <input type="checkbox"/> ESG (Socially Responsible) |
| <input type="checkbox"/> Bond, International | <input type="checkbox"/> Real Estate Fund |
| <input type="checkbox"/> Capital Preservation Option | <input type="checkbox"/> Sector Fund(s) (Other than Real Estate) |
| <input type="checkbox"/> Cash Equivalents (CD/Money Market) | <input type="checkbox"/> Self-Directed Brokerage Window |
| <input type="checkbox"/> Emerging Markets | <input type="checkbox"/> Target Retirement Date |
| <input type="checkbox"/> Equity-Actively Managed, Domestic | <input type="checkbox"/> Risk-based Asset Allocation Fund |
| <input type="checkbox"/> Equity-Actively Managed, International/Global | <input type="checkbox"/> Other: _____ |

20. Are you considering adding private asset investments to your lineup?

- Yes No Unsure

21a. Does your plan offer a target-date fund as an investment option?

- Yes No

b. If yes, is the target-date fund a packaged product or customized?

- A packaged product
- Customized
- Combination

c. If no, are you considering adding one?

- Yes No Unsure

d. Which of the following features are included in your target date fund? (Check all that apply.)

- Annuity/Income feature
- Managed payout
- None of the above
- Unsure

22a. Does the plan offer a professionally-managed account in which participants have the option of having their plan assets allocated and managed for them?

- Yes No

b. If yes, approximately what percentage of participants use a professionally-managed account? _____ %

23. Does your plan have a lifetime income option for participants as part of its investment menu?

- Yes No Unsure

24a. Does your plan have a default option for participants that enroll in the plan but do not pick an investment option?

- Yes No Unsure

b. If yes, what is the default option?

- Balanced fund
- Money market fund
- Professionally-managed account
- Stable value fund
- Target-date fund
- Risk-based Asset Allocation Fund
- Other: _____

25a. Separate from individual fund restrictions, does the plan limit how frequently participants can transfer assets among investment options?

- No plan limit (daily transfers allowed)
- Monthly
- Quarterly
- Annually
- No transfers allowed
- Other (describe): _____

b. Do you have a limit on the number of transfers a participant may complete?

- Yes No

26. Which of the following do you use in the management of your investment lineup? (Check all that apply.)

- Unaffiliated third party advisor
- Third party advisor affiliated with your recordkeeper
- Plan sponsor committee
- None — all investment options from provider(s) offered
- Other: _____

27. Does this plan have an investment policy statement?

- Yes No Unsure

28. How frequently are the plan's investments evaluated by the plan's fiduciaries?

- Annually
- Semi-annually
- Quarterly
- Not applicable
- Other (describe): _____

E. Investment Advice

29a. Does your organization provide access to investment advice to participants? (Investment advice is not plan education but a specific investment recommendation to the participant that requires participant action to execute. Advice is not a professionally managed account in which the manager makes the investment decision for the participant.)

- Yes No (Skip to section F)

b. If yes, who provides the advice?

- Financial Advisor unaffiliated with your plan provider
- Financial Advisor affiliated with your plan provider
- Web-based provider (Independent Third-Party, e.g., Morningstar or Financial Engines)
- Other: _____

c. How is advice delivered to participants? (Check all that apply.)

- One-on-one counseling in person
- Telephone hotline
- Online advice (internet provider)
- Web conference
- AI
- Other (describe): _____

29d. If advice is offered, who pays for it?

- Plan Sponsor/Employer
- Participant — out of plan assets.
- Participant — directly pays for it.
- No fee, offered by our plan provider at no additional cost.

e. Estimate the percentage of participants who used investment advice when offered in 2025: _____ %

f. Does your advice provider act as a fiduciary and assume fiduciary liability for its services?

- Yes
- No
- Unsure

F. Plan Administration Practices

30. Who pays for each of the following plan expenses?

| Expense | Source Paying Expense | | |
|---|--------------------------|--------------------------|--------------------------|
| | Plan | Organization | Shared |
| Audit fees | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Communication to employees | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Compensation of internal administrative staff | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Investment management fees | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Investment consultant fees | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Other consultant fees | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Legal fees | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Plan recordkeeping fees | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Trustee fees | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

31a. For those expenses paid by the plan, are the expenses allocated so that all participants pay:

- The same percentage of their account balance
- The same dollar amount
- Neither
- Other arrangement (please specify): _____

b. Are you reevaluating how expenses are allocated to participants?

- Yes, will move from a flat dollar amount per participant to a percentage of assets.
- Yes, will move from a percentage of assets to flat dollar amount per participant.
- No, not currently.
- Under consideration but have not decided yet.

32a. Does your plan utilize investments that include revenue sharing?

- Yes
- No

b. If yes, how is it allocated?

- Used for payment of recordkeeping and administration fees
- Credited back periodically to participant accounts
- Used for payment of other allowable plan expenses (auditor, investment consultants, ERISA compliance, etc.)
- Other: _____

33. Do you use an ERISA bucket? (Expense Budget Account (EBA); Plan Expense Reimbursement Account (PERA); Recapture account)?

- Yes
- No
- Unsure

34a. How frequently is a formal evaluation of plan fees conducted?

- Annually
- Semi-annually
- Quarterly
- Every two years
- Never
- Other: _____

34b. If a formal evaluation is conducted, who was involved in your last formal evaluation of plan fees? (Check all that apply.)

- Plan advisor
- Investment committee
- Senior management
- Outside counsel
- Other external advisors
- Other: _____

35. If your organization uses a third party administrator, which services do they provide for your plan? (Check all that apply.)

- Common remitter — Multiple providers
- Common remitter — Multiple payroll sources
- Recordkeeping
- Aggregation (For multi-provider plans)
- Testing/limit monitoring
- Plan document
- Government reporting
- Not applicable
- Other (describe): _____

36a. Do you retain an advisor to help with your plan, separate from your service provider?

- Yes
- No

b. If yes, what services do they provide? (Check all that apply.)

- Plan design
- Plan administration
- Provider selection
- Investments
- Investments as a plan fiduciary
- Participant education
- Other: _____

37. How many service providers (recordkeepers) do you currently use?

- 1
- 2
- 3
- 4
- 5
- Other: _____

38a. Which of the follow methods are used to administer the plan to employees (enrollment, inquires, changes, loans, distributions, etc.)? (Check all that apply.)

- Provider call centers
- Internal benefits staff
- Internet
- Mobile app
- Other: _____

b. If internal benefits staff, what transactions do they handle?

- Enrollments
- Distributions (loans, hardships, final)
- Beneficiary designations
- Other: _____

39. Which of the following participant behaviors do you monitor? (Check all that apply.)

- Automatic enrollment levels
- Fund transfers
- Hardship withdrawals
- Investment allocations
- Investment of Roth deferrals
- Loans
- Participant contribution levels
- None
- Other: _____

40. What changes did you make to the plan in 2025 or planning for 2026? (Check all that apply.)

- Minor changes to the investment lineup
- A comprehensive re-design of the investment lineup
- Added plan loans
- Added an automatic enrollment feature
- Added a Roth feature
- Other plan design changes (vesting, eligibility, etc.)
- Changed or added employer contributions
- Changed or added participant contributions
- Changed or added providers, advisors, or consultants
- Changed default investment options
- Consolidated the number of providers on the plan
- Put out a Request for Proposal (RFP) for the plan
- None
- Other (describe): _____

41. Are you undertaking any measures to help your workforce deal with student loan debt? (Check all that apply.)

- Making a matching contribution to the plan based on student loan payments (per SECURE 2.0).
- Waiting for additional direction/clarification from the IRS
- Offer an education assistance program to provide up to \$5,250 tax-free for education expenses (a 127 plan)
- Provide a third party advisory program that helps employees minimize their student loan debt through forgiveness or refinancing
- Just education
- No, and don't plan to
- Not yet, but considering
- Other _____

42. What cybersecurity measures (if any) have you taken as it relates to your plan? (Check all that apply.)

- Initiated cybersecurity awareness campaigns (e.g. regarding phishing, changing passwords, etc.)
- Distributed email alerts/communications about specific cybersecurity issues
- Requested documented cybersecurity measures from provider(s)
- Adopted a cybersecurity guarantee offered by my recordkeeper(s) for participants
- Written cybersecurity policy
- Use multi-factor identification
- None
- Unsure
- Other (describe): _____

43a. Do you evaluate whether your plan is successful (meeting your goals for the plan)?

- Yes No

b. If yes, what measurements do you use? (Check all that apply.)

- Participation rates
- Deferral rates
- Average account balances
- Income replacement
- Other: _____

G. Plan Compliance

44a. Do you file a form 5500?

- Yes No (Skip to question 49a)

b. Who prepares the Form 5500?

- Recordkeeper
- Organization
- Auditor
- TPA
- A Form 5500 aggregator other than the plan's recordkeeper
- Other: _____

45a. Did your organization have a CPA audit the plan in 2025?

- Yes No (Skip to question 50a)

b. If yes, what sort of opinion did your auditor provide?

- Unqualified Qualified Adverse

c. If yes, in what range was the charge by your auditors?

- Less than \$15,000
- Between \$15,000–\$30,000
- More than \$30,000

46a. Has your plan been audited by the DOL/IRS in the past?

- Yes No

b. If yes, what plan-year was most recently audited? _____

H. Plan Education

47a. Indicate all of the purposes for providing plan education in 2025. (Check all that apply.)

- a. To increase appreciation for the plan
- b. To increase participation
- c. To increase deferrals
- d. To improve asset allocation
- e. To introduce plan changes
- f. To make the transition of a merger/acquisition
- g. To reduce fiduciary liability
- h. Retirement planning
- i. To increase employees' overall financial literacy
- j. To increase employees' confidence in ability to retire as planned
- k. None, we did not provide any plan education in 2025
- l. Other (describe): _____

b. Which of the above educational purposes was your primary goal in 2025? (Pick one.)

48. Indicate all of the methods used to inform employees about the plan and plan options. (Check all that apply.)

- E-mail
- Enrollment kits
- Gap analysis
- Individually- targeted communication
- Internet/Intranet sites
- Mobile apps
- Modeling software
- Newsletters
- One-on-one counseling with a financial advisor or Certified Financial Planner™
- One-on-one informational meetings with provider by appointment (not advice)
- One-on-one informational meetings with permanent on-site provider representative (not advice)
- Retirement income projections
- Retirement health score
- Seminars/workshops
- Social media
- Webinars
- Web-based financial advice
- Other (describe): _____

49a. Did you offer a comprehensive financial wellness program beyond your standard retirement plan education programs in 2025?

- Yes, we offered financial wellness initiatives in 2025.
- No, but we are implementing financial wellness initiatives in 2026.
- No, but we are considering implementing them or are interested to learn more about them.
- No, and we are not interested in implementing financial wellness initiatives.

49b. If offered, what topics are covered in your financial wellness program?

- Budgeting
- Emergency funds
- Debt management
- Decumulation
- Student loans
- Protection (e.g., life insurance, disability insurance, long-term care insurance)
- Estate planning/will preparation
- HSA education
- Other: _____

c. How is the financial wellness program delivered?

- Online
- In-person
- Other: _____

d. Do you provide an incentive for participation in the financial wellness program?

- Yes No
- If yes, what? _____

I. Plan Loans and Distributions

50a. Does this plan allow participants to take loans?

- Yes, any reason
- Yes, hardship situations only
- No

b. What is the minimum loan amount?

- No minimum
- \$500 or less
- \$501 – \$999
- \$1,000
- Other (describe): _____

c. How are loan repayments made?

- Payroll deduction only
- Check from participant
- Electronic Fund Transfer/ACH deduction from participant bank account
- Other: _____

d. Do you allow participants to continue to make loan repayments following termination of employment?

- Yes No

e. How many loans does this plan allow participants to have outstanding at a time?

- 1 2 3 4 5 Other: _____

f. Is the participant charged a fee when taking a plan loan? (Check all that apply.)

- Origination fee Ongoing maintenance fee No
- Other _____

If origination fee, how much is it? \$ _____

If ongoing/maintenance fee, how much and how frequently is the fee (quarterly, annual, etc.)? \$ _____

g. Are loans limited to employee money sources only?

- Yes No Unsure

51a. Does this plan allow hardship withdrawals?

- Yes No Determined by individual contract

b. If yes, check all the reasons this plan allows for hardship withdrawals by employed participants.

- Purchase of primary residence or to prevent eviction or foreclosure
- Post-secondary educational expenses
- Medical expenses, deductible to the participant
- Major financial pressures
- Funeral expenses
- Natural disasters and/or casualty loss
- Other (describe): _____

51c. If yes, who approves hardship withdrawal requests?

- Self-certification
- Employer (you)
- Service provider
- Advisor
- Third Party Administrator
- Other: _____

d. What money sources are available for hardship withdrawals?

- Employee sources only
- Vested account and employee sources
- Other: _____

52a. Does this plan allow non-hardship in-service distributions?

- Yes No

b. If yes, check all that apply:

- before age 59½ after age 59½

53. Which of the following optional distribution reasons does your plan allow? (Check all that apply.)

- Qualified birth and adoption (QBAD)
- Natural disasters
- Terminal illness
- Emergency withdrawal (\$1,000 per year)
- Domestic violence
- Other: _____

54. Which of the following policies does your plan use for participants that terminate prior to retirement?

- Retain in plan regardless of balance
- Retain in plan if the balance is over \$7,000, transfer balance to an IRA if the balance is between \$1,000 and \$7,000, and pay out balances less than \$1,000
- Retain in plan if balance is more than \$5,000—we did not adopt the SECURE provision allowing an increase to \$7,000
- Retain in plan if the balance is more than \$1,000 and pay out balances less than \$1,000

55a. Check all of the distribution methods permitted by this plan.

| Option | Pre-retirement Distributions | Retirement Distributions |
|-----------------------------------|------------------------------|--------------------------|
| Retain in plan | <input type="checkbox"/> | <input type="checkbox"/> |
| Lump sum/cash | <input type="checkbox"/> | <input type="checkbox"/> |
| Annual installments | <input type="checkbox"/> | <input type="checkbox"/> |
| Monthly or quarterly installments | <input type="checkbox"/> | <input type="checkbox"/> |
| Periodic/partial withdrawals | <input type="checkbox"/> | <input type="checkbox"/> |
| Annuities | <input type="checkbox"/> | <input type="checkbox"/> |
| Rollover to another plan | <input type="checkbox"/> | <input type="checkbox"/> |
| Rollover to deemed IRA | <input type="checkbox"/> | <input type="checkbox"/> |

b. If terminated employees are permitted to keep assets in the plan, approximately what percentage do so?

- Retirees: _____% keep assets in the plan
- Separated vested: _____% keep assets in the plan
- NA

56. Do you actively encourage participants to keep their assets in the plan at retirement?

- Yes No

J. Numerical Data

These are the last questions of the survey, but are critical to complete to the best of your ability (if you don't know a data piece please skip that question and fill in what you can). A year-end statement from your plan provider may be a good source of the information.

57. What was the total market value of plan assets at the end of the 2025 plan year (including any outstanding plan loans)?
\$ _____
58. Estimate the total number of active U.S. employees employed at your organization as of December 31, 2025.

59. Of the employees reported in question 58, how many were eligible to participate in this plan as of December 31, 2025? (Answer should be equal to or less than your answer to question 58.)

60. Of the employees reported in question 59, how many had an account balance as of December 31, 2025? (Answer should be equal to or less than your answer to question 59.)
_____ Unsure
61. How many non-employed participants (i.e., terminated vested employees, etc.) had balances in the plan as of December 31, 2025?
_____ Unsure
62. How many participants made contributions in 2025? Please list the total that made any kind of contributions (excluding terminated vested employees), then the number that made each type of contribution, where applicable. (The total may be less than the sum of pre- and after- tax contributions if, for example, any participants made both pre- and after- tax contributions.)
Total that made contributions: _____
Number that made pre-tax contributions: _____
Number that made Roth after-tax (if allowed): _____
Number that made traditional after-tax (if allowed): _____
63. Please list the following information from your payroll reports so that we can calculate your average participant deferral rate:
Gross employee contribution for 2025: _____
Gross annual payroll for eligible participants for 2025: _____
64. What was the total employer contribution to the plan for 2025 for matching and/or non-matching contributions? (If you make both, please break it out by type of contribution, if available.)
Matching contribution: _____ Not applicable
Non-matching contribution: _____ Not applicable
Total contribution: _____ Not applicable
65. How many investment funds are available to participants for each type of contribution?
Organization contributions _____ (# funds)
Participant contributions _____ (# funds)
Note: Target-date and risk-based asset allocation fund families should each be counted as a single fund.
66. How many active participants had an outstanding loan at the end of 2025?
_____ Not applicable
67. What was the total dollar amount of outstanding loans at the end of 2025?
_____ Not applicable
68. How many participants took a hardship withdrawal in 2025? _____



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