

# Instructions for Form 5307

(Revised September 2001)

## Application for Determination for Adopters of Master or Prototype or Volume Submitter Plans

Section references are to the Internal Revenue Code unless otherwise noted.



Department of the Treasury  
Internal Revenue Service

**Paperwork Reduction Act Notice.** We ask for the information on this form to carry out the Internal Revenue laws of the United States. If you want to have your plan approved by the IRS, you are required to give us the information. We need it to determine whether you meet the legal requirements for plan approval.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time is:

	Recordkeeping	Learning about the law or the form	Preparing the form	Copying, assembling, and sending the form to the IRS
Form 5307	27 hr., 8 min.	6 hr., 34 min.	10 hr., 6 min.	48 min.
Sch. Q (Form 5300)	6 hr., 13 min.	9 hr., 14 min.	9 hr., 45 min.	

If you have comments concerning the accuracy of these time estimates or suggestions for making this form simpler, we would be happy to hear from you. You can write to the Tax Forms Committee, Western Area Distribution Center, Rancho Cordova, CA 95743-0001.

**Do not** send any of these forms or schedules to this address. Instead, see **Where To File** on page 2.

**Public Inspection.** Form 5307 is open to public inspection if there are more than 25 plan participants. The total number of participants must be shown on line 4e. See the instructions for line 4e for a definition of participant.

**Disclosure Request by Taxpayer.** The Tax Reform Act of 1976 permits a taxpayer to request the IRS to disclose and discuss the taxpayer's return and/or return information with any person(s) the taxpayer designates in a written request. Use **Form 2848**, Power of Attorney and Declaration of Representative, for this purpose.

### Changes To Note

- The form and the instructions have undergone revisions in the format and the information required. Review these documents before completing the application.
- Complete **Schedule Q (Form 5300)**, Elective Determination

Requests, if you want to broaden the scope of a determination letter by requesting a determination that your plan satisfies certain qualification requirements relating to minimum participation, coverage, and nondiscrimination. Schedule Q is no longer mandatory.

- Completion of page 3 of Form 5307 is also optional. Complete page 3 for: **(a)** a request for a determination regarding the ratio percentage test under Regulations section 1.410(b)-2(b)(2), **(b)** a determination regarding one of the special requirements under Regulations section 1.410(b)-2(b)(5), (6), or (7), or **(c)** a request for a determination regarding the nondiscrimination design-based safe harbors of section 401(a)(4).
- The former regional prototype program has merged into the "Master or Prototype Program" (M&P). See Rev. Proc. 2000-20, 2000-6 I.R.B. 553 regarding the restructuring of the prototype approval process.

## How To Get Forms and Publications

**Personal computer.** You can access the IRS Web Site 24 hours a day, 7 days a week at **www.irs.gov** to:

- Download forms, instructions, and publications.
- See answers to frequently asked tax questions.
- Search publications on-line by topic or keyword.
- Send us comments or request help by e-mail.
- Sign up to receive local and national tax news by e-mail.

You can also reach us using file transfer protocol at **ftp.irs.gov**.

**CD-ROM.** Order **Pub. 1796**, Federal Tax Products on CD-ROM, and get:

- Current year forms, instructions, and publications.
- Prior year forms, instructions, and publications.
- Popular tax forms that may be filled in electronically, printed out for submission, and saved for recordkeeping.
- The Internal Revenue Bulletin.

Buy the CD-ROM on the Internet at **www.irs.gov/cdorders** from the National Technical Information Service (NTIS) for \$21 (plus a \$5 handling fee).

**By phone and in person.** You can order forms and publications 24 hours a day, 7 days a week, by calling **1-800-TAX-FORM** (1-800-829-3676). You can also get most forms and publications at your local IRS office.

For questions regarding this form, call the Employee Plans Customer Service, toll-free, at 1-877-829-5500 between 8:00 a.m. and 9:30 p.m. eastern time.

## General Instructions

### Purpose of Form

Adopters of M&P or volume submitter plans file Form 5307 to request a

determination letter from the IRS for the qualification of a defined benefit or a defined contribution plan and the exempt status of any related trust.

## Type of Plan

• A **Defined Contribution Plan** (DCP) is a plan that provides an individual account for each participant and for benefits based only:

1. On the amount contributed to the participant's account, and
2. Any income, expenses, gains and losses, and any forfeitures of accounts of other participants that may be allocated to the participant's account.

• A **Defined Benefit Plan** (DBP) is any plan that is not a DCP.

**Note:** A qualified plan must satisfy section 401(a) including, but not limited to, participation, vesting, nondiscriminatory contributions or benefits, distributions, and contribution and benefit limitations.

## Who May File

This form may be filed by an adopter of:

- An approved non-standardized M&P plan,
- An approved volume submitter plan, or
- An approved standardized plan under the circumstances described in Rev. Proc. 2000-20.

**Note.** See *Announcement 2001-77, 2001-30 I.R.B. 83* for exceptions.

## Standardized Plans

Standardized plans will generally satisfy the requirements of sections 410(b) and 401(a)(4) if they follow the terms of their plan document. Specific determinations regarding sections 410(b) and 401(a)(4) are not routinely issued for these plans since a standardized plan operated in accordance with its terms will satisfy the requirements of sections 410(b) and 401(a)(4).

## Who May Not File

This form may not be filed to request a determination letter for:

- An M&P adopter that amends the plan other than through the choice of elections offered under the approved adoption agreement. However, an M&P adopter may amend the adoption agreement to add overriding language for sections 415 or 416 because of the aggregation of plans

or may amend the trust or custodial account document to make any permitted changes;

- A cash balance plan (use **Form 5300**, Application for Determination for Employee Benefit Plan);
- A multiemployer or multiple-employer plan (use Form 5300);
- An employee stock ownership plan (ESOP) (Attach **Form 5309**, Application for Determination of Employee Stock Ownership Plan, to Form 5300);
- An individually designed plan (other than an approved volume submitter plan) (Use Form 5300);
- A request to determine if you are a member of an affiliated service group (use Form 5300); or

## Where To File

File Form 5307 at the address indicated below:

Internal Revenue Service,  
P.O. Box 192,  
Covington, KY 41012-0192.

Requests shipped by express mail or a delivery service should be sent to:

Internal Revenue Service,  
201 West Rivercenter Blvd.,  
Attn: Extracting Stop 312,  
Covington, KY 41011.

**Private Delivery Services.** In addition to the United States mail, you can use certain private delivery services designated by the IRS to meet the "timely mailing as timely filing/paying" rule for tax returns and payments. The most recent list of designated private delivery services was published by the IRS in October 2001 and includes only the following:

- Airborne Express (Airborne): Overnight Air Express Service, Next Afternoon Service, Second Day Service.
- DHL Worldwide Express (DHL): DHL "Same Day" Service, DHL USA Overnight.
- Federal Express (FedEx): FedEx Priority Overnight, FedEx Standard Overnight, FedEx 2Day.
- United Parcel Service (UPS): UPS Next Day Air, UPS Next Day Air Saver, UPS 2nd Day Air, UPS 2nd Day Air A.M., UPS Worldwide Express Plus, and UPS Worldwide Express.

The private delivery service can tell you how to get written proof of the mailing date.

## How to Complete the Application

Applications are screened for completeness. **The application must be signed by the employer, plan administrator or authorized representative.** Incomplete applications may be returned to the applicant. For this reason, it is important that an appropriate response be entered for each line item (unless instructed otherwise). In completing the application, pay careful attention to the following:

- N/A (not applicable) is accepted as a response **only** if an N/A block is provided.
- If a number is requested, a number must be entered.
- If an item provides a choice of boxes to check, check only one box unless instructed otherwise.
- If an item provides a box to check, written responses are not acceptable.
- Governmental plans and nonelecting church plans do not have to complete line 10a.
- The IRS may, at its discretion, require a plan restatement or additional information any time it is deemed necessary.

**Note.** *Rev. Proc. 2001-6 publishes the guidance under which the determination letter program is administered. It is updated annually and can be found in the Internal Revenue Bulletin (I.R.B.)* **Example.** *Rev. Proc. 2001-6, 2001-1 I.R.B. 194 superseded Rev. Proc. 2000-6.*

## What To File

- The appropriate user fee, if applicable, and **Form 8717**, User Fee for Employee Plan Determination Letter Request. Please submit a separate check for each application. Make checks payable to the "United States Treasury."
- Schedule Q (Form 5300), if any elective determinations are being requested, and any additional schedules or demonstrations required by these instructions or by the instructions for Schedule Q.
- All applications for plans that have at any time in the past received a favorable determination letter must include a copy of the plan's latest determination letter.
- An opinion or advisory letter issued to the plan must accompany all applications for adopters of M&P or volume submitter plans.

- An adoption agreement must be submitted for M&P plans. Do not submit a copy of the basic plan document or trust instrument unless the plan is an M&P which uses a separate trust or custodial account document, in which case such trust or custodial account document must be submitted along with the application.

- All applications submitted by adopters of approved volume submitter plans must be accompanied by a copy of the plan and trust instrument and a written representation, made by the volume submitter under penalty of perjury, which explains if the plan and trust instrument are or are not word-for-word identical to the approved specimen plan and, if not identical, describes the location, nature and effect of each difference from the language of the approved specimen plan.

- Written authorization allowing the volume submitter practitioner to act as a representative of the employer with respect to the request for a determination letter.

- All applications submitted by adopters of approved volume submitter plans must also be accompanied by any other information or material required by the Service.

## Specific Plans—Additional Requirements

### (See Procedural Requirements Checklist)

- If this application is filed for a standardized plan, complete only lines 1 through 5, 7 through 9, and 10c. Explain in a cover letter why the application is being filed.

- For a governmental or nonelecting church plan, file Form 5307 but skip line 10a. A nonelecting church plan is a plan for which an election under section 410(d) has not been made.

- For plans of controlled groups of corporations, trades or businesses under common control, and affiliated service groups, submit the statement specified in the instructions for lines 6a and 6b.

- File **Form 5310**, Application for Determination for Terminating Plan, to request a determination letter for the complete termination of a DBP or DCP.

- File **Form 5310-A**, Notice of Merger, Consolidation, or Transfer of

Plan Assets or Liabilities, 30 days prior to a merger, consolidation, or transfer of plan assets or liabilities.

## Specific Instructions

**Line 1a.** Enter the name, address, and telephone number of the plan sponsor/employer. A plan sponsor means:

1. In the case of a plan that covers the employees of one employer, the employer;

2. In the case of a plan sponsored by two or more entities required to be combined under sections 414(b), (c) or (m), one of the members participating in the plan; or

3. In the case of a plan that covers the employees and/or partner(s) of a partnership, the partnership.

The name of the plan sponsor/employer should be the same name that was or will be used when the Form 5500 or Form 5500-EZ is filed for the plan.

**Address.** Include the suite, room, or other unit number after the street address. If the Post Office does not deliver mail to the street address and the plan has a P.O. box, show the box number instead of the street address. The address should be the address of the sponsor/employer.

**Line 1b.** Enter the 9-digit employer identification number (EIN) assigned to the plan sponsor/employer. This should be the same EIN that was or will be used when the Form 5500 or Form 5500-EZ is filed for the plan.

**Do not use a social security number or the EIN of the trust.**

File **Form SS-4**, Application for Employer Identification Number, to apply for an EIN. Form SS-4 can be obtained by calling 1-800-TAX-FORM.

The plan of a group of entities required to be combined under section 414(b), (c), or (m) whose sponsor is more than one of the entities required to be combined should only enter the EIN of one of the sponsoring members. This EIN **must** be used in all subsequent filings of determination letter requests and annual returns/reports unless there is a change of sponsor.

**Line 1c.** Enter the two digits representing the month the employer's tax year ends. This is the employer whose EIN was entered on line 1b.

**Line 2.** The contact person will receive copies of all correspondence as authorized in a power of attorney, Form 2848, or other written designation. Either complete the contact's information on this line, or check the box and attach a power of attorney or other written designation.

**Line 3a.** Enter the number(s) that correspond to the request(s) being made.

**Enter 1** if the IRS has not issued a determination letter for this plan.

**Enter 2** if the IRS has previously issued a determination letter for this plan and enter the date the plan was signed.

In addition, enter the date the plan or amendment was signed. If a plan or amendment is proposed, enter 9/9/9999. Enter the effective date where requested. The term "Date amendment effective" means the date the amendment becomes operative or takes effect.

**Enter 3** if this is a standardized plan. You must also enter a "1" or "2" and the appropriate dates in the space provided.

**Line 3b.** If you do not have a copy of the latest determination letter, or if no determination letter has ever been received by the employer, submit copies of the initial plan (or adoption agreement), or the latest plan (or adoption agreement) for which you do have a determination letter, and any subsequent amendments and/or restatements.

**Line 3c.** Section 3001 of ERISA requires the applicant to provide evidence that each employee who qualifies as an interested party has been notified of the filing of the application. If "Yes" is checked, it means that each employee has been notified as required by Regulations section 1.7476-1 or this is a one-person plan. A copy of the notice is not required to be attached to this application. If "No" is checked or this line is blank, your application will be returned.

Rules defining "interested parties" and the form of notification are in Regulations section 1.7476-1. For an example of an acceptable format, see Rev. Proc. 2001-6, 2001-1 I.R.B. 194

**Line 4b.** Enter the three-digit number, beginning with "001" and continuing in numerical order for each plan you adopt (001-499). This numbering will differentiate your plans. The number assigned to a plan must not be changed or used for any other plan. This should be the same

number that was or will be used when the Form 5500 or Form 5500-EZ is filed for the plan.

**Line 4c.** Plan year means the calendar, policy, or fiscal year on which the records of the plan are kept.

**Line 4e.** Enter the total number of participants. A participant means:

1. The total number of employees participating in the plan including employees under a section 401(k) qualified cash or deferred arrangement who are **eligible** but do not make elective deferrals,

2. Retirees and other former employees who have a nonforfeitable right to benefits under the plan, and

3. The beneficiary of a deceased employee who is receiving or will in the future receive benefits under the plan. Include one beneficiary for each deceased employee regardless of the number of individuals receiving benefits.

**Example:** Payment of a deceased employee's benefit to three children is considered a payment to one beneficiary.

**Line 5. Cash balance plan.** For this purpose, a "cash balance" formula is a benefit formula in a defined benefit plan by whatever name (e.g., personal account plan, pension equity plan, life cycle plan, cash account plan, etc.) that rather than, or in addition to, expressing the accrued benefit as a life annuity commencing at normal retirement age, defines benefits for each employee in terms more common to a defined contribution plan such as a single sum distribution amount (e.g., 10 percent of final average pay times years of service, or the amount of the employee's hypothetical account balance). Use Form 5300 rather than Form 5307, to request a letter for a cash balance plan.

**Lines 6a and 6b.** If the plan employer is a member of a controlled group of corporations, trades or businesses under common control, or an affiliated service group, all employees of the group will be treated as employed by a single employer for purposes of certain qualification requirements.

Attach a statement showing in detail:

1. All members of the group;
2. Their relationship to the plan employer;
3. The type(s) of plan(s) each member has, and

4. Plans common to all members.

**Note.** *If you want to apply for a determination letter to determine if you are a member of an affiliated service group, file Form 5300 instead of Form 5307.*

**Line 7d.** Answer this "Yes" if you have selected any choice labeled "Other" in the adoption agreement..

**Line 9a.** If "Yes" is checked, attach a list for each plan, which includes the following information:

1. Name of plan,
2. Type of plan,
3. Form of plan (standardized or nonstandardized),
4. Plan number,
5. Vesting schedule,
6. Whether the plan has received a determination letter or an application for a letter is pending with IRS.

**Note.** *Also indicate if the plan is paired (if paired, indicate the letter serial number of the paired plan).*

**Lines 9b and 9c.** See M-8, M-12, and M-14 of Regulations section 1.416-1.

**Line 10a.** Section 411(d)(6) protected benefits include:

- The accrued benefit of a participant as of the later of the amendment's adoption date or effective date; and
- Any early retirement benefit, retirement-type subsidy or optional form of benefit for benefits from service before such amendment.

If the answer is "Yes," explain on an attachment how the amendment satisfies one of the exceptions to the prohibition on reduction or elimination of section 411(d)(6) protected benefits.

## Optional Ratio Percentage Test Determination

**Line 11.** This question may be used to request an optional determination regarding the ratio percentage test under Regulations section 1.410(b)-2(b)(2). If "No" is checked and a request for a determination regarding the average benefit test is not made on Schedule Q, the determination letter for the plan will not be a determination regarding section 410(b). If "No" is checked but a request for a determination regarding the average benefit test is made on Schedule Q, the determination letter for the plan will also be a determination regarding the average benefit test. Plans using the

qualified separate lines of business rules of section 414(r) must file Schedule Q if a determination is desired that the plan satisfies the gateway test of section 410(b)(5)(B) or the special requirements for employer wide plans.

**Line 11a.** If a determination is being requested and the plan is disaggregated into two or more separate plans, that are other than profit-sharing and/or sections 401(k) and/or 401(m) plans, complete lines 11b through 11n with respect to each disaggregated portion of the plan. Attach additional schedules as necessary to identify the other disaggregated portions of the plan. Provide the requested coverage information, in the same format as line 11, separately with respect to the other portions of the plan, or to otherwise show that the other portions of the plan separately satisfy section 410(b).


**Example.** If this plan benefits the employees of more than one qualified separate line of business (QSLOB), the portion of the plan benefiting the employees of each QSLOB is treated as a separate plan maintained by that QSLOB and must separately satisfy section 410(b) unless the employer-wide plan testing rule in Regulations section 1.414(r)-1(c)(2)(ii) applies.

If a determination is being requested for a section 401(k) and/or 401(m) plan you must complete line 11l for the portion of the plan that is not a section 401(k) or a 401(m) plan. Also complete line 11m(1) to report the ratio percentage for the section 401(k) portion of the plan and line 11m(2) to report the ratio percentage for the section 401(m) portion of the plan.

**Line 11c.** If, for purposes of satisfying the minimum coverage requirements of section 410(b), you are applying the daily testing option in Regulations section 1.410(b)-8(a)(2) or the quarterly testing option in Regulations section 1.410(b)-8(a)(3), or, if you are using single-day "snapshot" testing as permitted under section 3 of Rev. Proc. 93-42, 1993-2 C.B. 540, enter the most recent eight-digit date (MMDDYYYY) for which the coverage data is submitted. If you are applying the annual testing option in Regulations section 1.410(b)-8(a)(4), enter the year for which the coverage data is submitted.

**Line 11d.** Include all employees of all entities combined under sections 414(b), (c), (m), or (o). Also include all self-employed individuals, common law employees, and leased employees as defined in section 414(n) of any of the entities above, other than those excluded by section 414(n)(5). Certain individuals may also be required to be counted as employees. See the definition of employee in Regulations section 1.410(b)-9. Also see Regulations section 1.410(b)-6(i), which may permit the employer to exclude certain former nonhighly compensated employees.

**Note.** *This note applies only to plans that include a qualified cash or deferred arrangement under section 401(k) or employee or matching contributions under section 401(m). If there are any contributions under the plan that are not subject to the special rule for section 401(k) plans and section 401(m) plans in Regulations section 1.401(a)(4)-1(b)(2)(ii)(B) (such as nonelective contributions), complete lines 11e through 11k with respect to the portion of the plan that includes these contributions and enter the ratio percentage for this portion of the plan on line 11i. Otherwise, complete lines 11e through 11k with respect to the section 401(k) part of the plan (or the section 401(m) plan if there is no section 401(k) arrangement) and leave line 11i blank. In all cases, enter the ratio percentages for the section 401(k) and the section 401(m) parts of the plan, as applicable, on line 11m. These percentages should be based on the actual nonexcludables in the 401(k) and 401(m) portions, respectively. It is suggested that these calculations be submitted with the application but this is optional.*

 *If the plan provides for nonelective profit-sharing contributions, do not base the calculations on lines 11m(1) and (2) on the nonexcludable employees reported on line 11g unless all of the disaggregated plans (profit-sharing, 401(k), and 401(m)) have the same nonexcludable employees with the same age and service requirements.*

**Line 11e(1).** Enter the number of employees who are excluded because they have not attained the lowest minimum age and service requirements for any employee under this plan. If the employer is separately testing the portion of a plan that

benefits otherwise excludable employees, attach a separate schedule describing which employees are treated as excludable employees on account of the minimum age and service requirements under each separate portion of the plan.

**Line 11e(2).** Enter the number of employees who are excluded because they are collectively bargained employees as defined in Regulations section 1.410(b)-6(d)(2), regardless of whether those employees benefit under the plan. For this purpose, an employee covered under a CBA is not considered a collectively bargained employee if more than 2% of the employees who are covered under the agreement are professional employees as defined in Regulations section 1.410(b)-9.

**Line 11e(3).** Enter the number of employees who do not receive an allocation or accrue a benefit under the plan only because they do not satisfy a minimum hours of service requirement or a last day of the plan year requirement, provided they do not have more than 500 hours of service, and they are not employed on the last day of the plan year. Do not enter on this line any employees who have more than 500 hours of service, even if they are not employed on the last day of the plan year.

**Line 11e(4).** If this plan benefits the employees of one QSLOB, enter on this line the number of employees of the employer's other QSLOBs. This is not applicable if the plan is tested under the special rule for employer-wide plans in Regulations section 1.414(r)-1(c)(2)(ii).

**Line 11e(5).** Enter the number of employees who are nonresident aliens who receive no earned income (as defined in section 911(d)(2)) from the employer that constitutes income from sources within the United States (as defined in section 861(a)(3)).

**Line 11g.** Subtract the total of lines 11e(1) through 11e(5) as reported on line 11f from the total employees reported on line 11d. The result is the number of "nonexcludable employees." These are the employees who can not be excluded from the plan for statutory or regulatory reasons and must be considered in the calculation of the ratio percentage even though they might not "benefit" under the plan. If they meet the age and service requirements of section 410 and are not otherwise excludable employees, they must be included in this number.

**Line 11h.** Enter the number of employees on line 11g who are highly compensated employees (HCEs) as defined in section 414(q).

**Line 11i.** In general, an employee is treated as benefiting under the plan for coverage tests purposes only if the employee receives an allocation of contributions or forfeitures or accrues a benefit under the plan for the plan year. Certain other employees are treated as benefiting if they fail to receive an allocation of contributions and/or forfeitures, or to accrue a benefit, solely because they are subject to plan provisions that uniformly limit plan benefits, such as a provision for maximum years of service, maximum retirement benefits, application of offsets or fresh start wear-away formulas, or limits designed to satisfy section 415. An employee is treated as benefiting under a plan to which elective contributions under section 401(k) or employee contributions and matching contributions under section 401(m) may be made if the employee is currently eligible to make such elective or employee contributions, or to receive a matching contribution, whether or not the employee actually makes or receives such contributions, (Regulations section 1.401(k)-1(g)(4) and 1.401(m)-1(f)(4)). However, do not apply this rule to determine if an employee is to be counted as benefiting for lines 11i and 11k if, in accordance with the **Note** following the instruction for line 11d, the information provided in lines 11e through 11k relates to the portion of the plan that is not subject to the rule in Regulations section 1.401(a)(4)-1(b)(2)(ii)(B).

**Line 11k.** See the instructions for line 11i for the meaning of "benefiting under the plan."

**Line 11i.** To obtain the ratio percentage:

**Step 1.** Divide the number on line 11k (nonexcludable NHCEs benefiting under the plan) by the number on line 11j (nonexcludable NHCEs).

**Step 2.** Divide the number on line 11i (nonexcludable HCEs benefiting under the plan) by the number on line 11h nonexcludable HCEs).

**Step 3.** Divide the result from Step 1 by the result from Step 2.

**Note.** *If the ratio percentage entered on line 11i and/or line 11m is less than 70%, the plan does not satisfy the ratio percentage test. In this case, the plan must satisfy the average*

*benefit test. A determination regarding the average benefit test can be requested using Schedule Q.*

**Line 11m.** See the **Note** following the instructions for line 11d. To determine the ratio percentages for the section 401(k) and all section 401(m) (matching and employee contribution) portions of the plan, follow the steps described in the instructions for lines 11d through 11i, but treat an employee as benefiting under the rules for section 401(k) plans and section 401(m) plans described in the instruction for line 11i.

## **Design-Based Nondiscrimination Safe Harbors**

**Line 12.** This question may be used by certain plans to request an optional determination regarding the design-based safe harbor under section 401(a)(4).

If this is a section 401(k) and/or section 401(m) plan that does not contain a provision for nonelective employer contributions, this option should be marked "No."

If any disaggregated plan relies on a non-design based safe harbor or a general test this option must be marked "No." The Schedule Q may be used to request a determination regarding a non-design based safe harbor or a general test.

If this plan has been restructured into component plans, this option must be marked "No." The Schedule Q may be used to request a determination regarding how each restructured component plan satisfies the nondiscrimination in amount requirement of Regulations section 1.401(a)(4)-1(b)(2).

If "Yes" is checked, or if "No" is checked but a request for a determination regarding a non-design based safe harbor or a general test is made on Schedule Q, the determination letter for the plan will

also be a determination regarding the section 401(a)(4) requirement that a plan not discriminate in the amounts of contributions or benefits.

If "No" is checked, and a request for a determination regarding a non-design based safe harbor or a general test is not made on Schedule Q, the determination letter for the plan will not be a determination regarding this requirement, unless the plan is a section 401(k) and/or section 401(m) plan only.

**Line 12a.** Check "Yes" if the plan is intended to satisfy the permitted disparity requirements of section 401(l).

**Line 12b.** To satisfy section 401(l), a plan must provide that the overall permitted disparity limits are not exceeded and specify how employer-provided contributions or benefits under the plan are adjusted, if necessary, to satisfy the overall permitted disparity limits. See Regulations section 1.401(l)-5.

**Line 12c.** This line provides a list of the design-based nondiscrimination safe-harbor regulations.