

**SCHEDULE Q  
(Form 5300)**

(January 1996)  
Department of the Treasury  
Internal Revenue Service

**Nondiscrimination Requirements**

► **File as an attachment to Form 5300, 5303, 5307, or 5310.**

**See the instructions before completing this schedule.**

OMB No. 1545-0197

Name of plan sponsor (employer, if single-employer plan) as shown on Form 5300, 5303, 5307, or 5310

Employer identification number

Name of plan

**Part I Type of Plan**

Enter the appropriate letter ("A" through "I") that describes the type of plan (See page 1 of instructions): ►

**If you entered A, B, or I, do not complete the rest of the schedule.**

**Part II Participation, Coverage, and Nondiscrimination Requirements**

	Yes	No
<b>1</b> Are the qualified separate lines of business rules of section 414(r) being used in applying the requirements of section 401(a)(26) or section 410(b) to the employer's plan(s)? . . . . . ►		
If yes, see the instructions for line 1 and attach Demo 1.		
<b>2</b> Section 401(a)(26) participation requirements:		
<b>a</b> Is this a plan that automatically satisfies section 401(a)(26)? . . . . .		
If yes, see the instructions for additional information that must be submitted, and go to line 2i. Otherwise, continue with line 2b.		
<b>b</b> If this is a disaggregation of the plan, are additional schedules attached? (See Instructions) . . . . .		
<b>c</b> Enter the section 401(a)(26) test date (MMDDYY) . . . . .		
<b>d</b> Total number of employees on the test date (employer-wide) . . . . .		
<b>e</b> Number of excludable employees counted on line 2d . . . . .		
<b>f</b> Subtract line 2e from line 2d . . . . .		
<b>g</b> Number of benefiting employees on the test date . . . . .		
<b>h</b> Enter the lesser of 50 or 40% of line 2f. . . . .		
<b>i</b> Is line 2g at least as great as line 2h, or, if you answered yes on line 2a, have you attached Demo 2 as required by the instructions? . . . . . ►		
<b>If you entered C, D, E, or F in Part I, stop here. If you entered G in Part I, skip to Part III, line 12. If you entered H, continue with line 3.</b>		
<b>3</b> Is this a request for a determination that specified benefits, rights, or features meet the nondiscriminatory current availability requirement? . . . . . ►		
If yes, see the instructions for line 3 and attach Demo 3.		
<b>4</b> Is the plan restructured, mandatorily disaggregated, or permissively aggregated? (See instructions.) . . . . . ►		
If yes, see the instructions for the demonstration that must be submitted and label it Demo 4.		
<b>5</b> Section 410(b) coverage requirements (See instructions.):		
<b>a</b> If the plan is disaggregated into two or more separate plans, are additional coverage schedules attached? . . . . .		
<b>b</b> Does the employer receive services from any leased employees as defined in section 414(n)? . . . . .		
<b>c</b> Coverage of plan at (give date) . . . . .		
<b>d</b> Total number of employees (include self-employed individuals) (employer-wide) . . . . .		
<b>e</b> Statutory and regulatory exclusions under this plan (do not count an employee more than once):		
(1) Number of employees excluded because of minimum age or years of service required . . . . .		
(2) Number of employees excluded because of inclusion in a collective bargaining unit . . . . .		
(3) Number of employees excluded because they terminated employment with less than 501 hours of service and were not employed on last day of plan year . . . . .		
(4) Number of employees excluded because employed by other qualified separate lines of business (QSLOBs) . . . . .		
(5) Number of employees excluded because they were nonresident aliens with no earned income from sources within the United States . . . . .		
<b>f</b> Total statutory and regulatory exclusions (add lines 5e(1) through (5)) . . . . .		
<b>g</b> Nonexcludable employees (subtract line 5f from line 5d) . . . . .		
<b>h</b> Number of nonexcludable employees on line 5g who are highly compensated employees (HCEs) . . . . .		
<b>i</b> Number of nonexcludable HCEs on line 5h benefiting under the plan. . . . .		
<b>j</b> Number of nonexcludable employees who are nonhighly compensated employees (NHCEs) (subtract line 5h from line 5g) . . . . .		
<b>k</b> Number of nonexcludable NHCEs on line 5j benefiting under the plan . . . . .		
<b>l</b> Ratio percentage (see instructions) . . . . .		
<b>m</b> Enter the ratio percentage for the following, if applicable:		
(1) Section 401(k) part of the plan . . . . .		
(2) Section 401(m) part of the plan . . . . .		
<b>n</b> Are the results on line 5l or 5m based on the aggregated coverage of more than one plan? . . . . .		

	Yes	No
o Identify the coverage test being met by the plan by entering "A" for ratio percentage, "B" for average benefit, or "C" for pre-ERISA rules for certain governmental and nonelecting church plans. (See instructions.) . . . . .		
<b>Answer line 6 only if the response on line 5o is "B."</b>		
6 Is this a request for a determination that the plan satisfies the average benefit test? . . . . .		
If yes, see the instructions for line 6 and attach Demo 5.		
<b>If the plan consists solely of a section 401(k) plan and/or a section 401(m) plan (e.g., there are no nonelective contributions), skip to line 10. Otherwise, continue with line 7.</b>		
7 Is the plan intended to satisfy a design-based safe harbor? (See instructions.) . . . . .		
<b>Answer line 8 if the response to line 7 is yes. Skip to line 9 if line 7 is answered no.</b>		
8 Design-based nondiscrimination safe harbors:		
a Does the plan provide for disparity in contributions or benefits that is intended to meet the permitted disparity requirements of section 401(1)? . . . . .		
If yes, answer line 8b. Otherwise, skip to line 8c.		
b Do the provisions of the plan ensure that the overall permitted disparity limits will not be exceeded? . . . . .		
c Enter the letter ("A" - "G") from the list below that identifies the safe harbor intended to be satisfied . . . . .		
<b>A</b> = Defined contribution plan with uniform allocation formula <b>B</b> = Target benefit plan <b>C</b> = Unit credit defined benefit plan <b>D</b> = Unit credit fractional rule plan <b>E</b> = Flat benefit fractional rule plan <b>F</b> = Insurance contract plan <b>G</b> = Cash balance plan		
d List the plan sections that satisfy the safe harbor (including, if applicable, the permitted disparity requirements) here: . . . . .		
<b>Answer line 9 only if the response to line 7 is no.</b>		
9 Is this a request for a determination that the plan satisfies a nondesign-based safe harbor or a general test? . . . . .		
If yes, see the instructions for line 9 and attach Demo 6. Also, enter the letter ("A" - "C") corresponding to the type of determination requested: . . . . .		
<b>A</b> = General test, involving "safety valve" rule in Regulations section 1.401(a)(4)-3(c)(3) (available to defined benefit plans only) <b>B</b> = General test, not involving "safety valve" rule <b>C</b> = Nondesign-based safe harbor		
10 Does a plan provision provide for pre-participation or imputed service or does a plan amendment or, for an initial determination, a plan provision, provide for a period of past service in excess of the safe harbor? . . . . .		
If yes, see the instructions for line 10 and attach Demo 7.		
11 Is the plan part of a floor offset arrangement intended to satisfy the safe harbor in Regulations section 1.401(a)(4)-8(d)? . . . . .		
If yes, see the instructions for line 11 and attach Demo 8.		
<b>Stop here if the response to line 7 is no.</b>		

**Part III Nondiscriminatory Compensation and Employee Contributions**

12 Are you required to show that a definition of compensation is nondiscriminatory? (See instructions.) . . . . .		
If yes, see instructions and attach Demo 9.		
<b>If you entered G in Part I, stop here.</b>		
13 Is this a defined benefit plan with employee contributions not allocated to separate accounts? . . . . .		
<b>If no, stop here.</b>		
14 Enter the letter ("A" - "E") corresponding to the method used to determine the employer-provided benefit: . . . . .		
<b>Method</b> <b>A</b> = Composition-of-workforce method <b>B</b> = Minimum benefit method (also enter the plan factor, if applicable (.4 or .6)) <b>C</b> = Grandfather rule <b>D</b> = Government plan method <b>E</b> = Cessation of employee contributions method If "A," see the instructions for line 14 and attach Demo 10. If applicable, list the plan provisions and indicate the plan factor here: . . . . .		
15 Enter the letter (A, B, or C) corresponding to the method used to show that the employee-provided benefit is nondiscriminatory in amount: . . . . .		
<b>Method</b> <b>A</b> = Same rate of contributions <b>B</b> = Total benefits method <b>C</b> = Grandfather rule If "C," see the instructions for line 15 and attach Demo 11.		

