



Introduction

Welcome to the IRS Retirement Plan Burden Survey

Thank you for taking the time to provide us feedback. Please answer all questions with reference to the `{e://Field/YEAR}` `{e://Field/PLAN}`, PLAN NUMBER `{e://Field/NUMBER}` `{e://Field/FORM}` annual return. At any time you can leave the survey and come back to complete it. The survey will pick up from the last page you completed.

If you need assistance, please email us at raas.irs.taxpayer.surveys@irs.gov or call 202-803-9147. You can find a Frequently Asked Questions (FAQ) document and copy of the full survey in links below. These links will be available throughout the survey.

Privacy Act and Paperwork Reduction Act Notice for Retirement Plan Burden Model Data Collection

Our authority for requesting information with this survey is 5 U.S.C. § 301, and 26 U.S.C. 7801, 7803, and 7805 and the Paperwork Reduction Act. The information you provide allows the IRS to analyze the role of taxpayer burden in tax administration. This information is also used to fulfil the IRS's statutory obligations to the Office of Management and Budget and Congress for information required by the Paperwork Reduction Act, and to provide tax policy analysis support to the Office of Tax Analysis at the Department of the Treasury. This information will also help us to better understand taxpayer needs and burden reduction opportunities. Data collected will be shared with IRS staff, but your responses will be used for research and aggregate reporting purposes only and will not be used for other non-statistical or non-research purposes such as direct enforcement activities. The information that you provide will be protected as required by law. We estimate that it will take 10 to 15 minutes to complete this survey, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Providing the information is voluntary; not providing all or part of the information requested will have no impact on you but may reduce our ability to address taxpayer concerns regarding paperwork reduction. We may not conduct or sponsor, and you are not required to respond to, a collection of information unless it displays a valid OMB control number. The OMB number for this survey is 1545-2212. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: IRS, Special Services Section, SE:W:CAR:MP:T:M:S, Room 6129, 1111 Constitution Avenue, NW, Washington, DC 20224.

Opening Block

Persons Involved in `{e://Field/YEAR}` `{e://Field/FORM}` `{e://Field/PLAN}` Return Activities

Please answer all questions for the following plan only: <code>{e://Field/PLAN}</code> , PLAN NUMBER <code>{e://Field/NUMBER}</code>
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Who was involved in the preparation of the \${e://Field/YEAR} \${e://Field/FORM}?

Select all that apply

- ☐ The plan sponsor
- ☐ External service provider (e.g., third-party administrator, accountant, lawyer, insurance company, etc.)

External providers

Which external service providers were involved in the preparation of the \${e://Field/YEAR} Form \${e://Field/FORM}?

Select all that apply

- ☐ Third-Party Administrator
- ☐ Accountant
- ☐ Lawyer
- ☐ Insurance Company
- ☐ Other

Did the external service provider(s) indicated in the previous question perform any of the following retirement plan activities during \${e://Field/YEAR} other than the preparation of the \${e://Field/YEAR} \${e://Field/FORM}?

Select all that apply

- ☐ Actuarial services
- ☐ Plan record-keeping or accounting
- ☐ Drafting or revising plan documents
- ☐ General plan administration, including the completion of required reports, forms, and disclosures
- ☐ Responding to notices from the IRS, U.S. Department of Labor or the Pension Benefit Guaranty Corporation regarding the Form 5500, 5500-SF or 5500-EZ
- ☐ Other

- ☐ No other services were provided beyond the preparation of the \${e://Field/FORM}

Recordingkeeping

Retirement Plan Return-Related Record-Keeping

Please think about your organization's retirement plan return-related record-keeping. Return-related record-keeping includes all the activities you did to create, maintain, and store records needed to complete your \${e://Field/YEAR} \${e://Field/FORM}.

Which of the following statements describe the recordkeeping system(s) your organization used for the \${e://Field/YEAR} \${e://Field/FORM}?

Select all that apply

- ☐ General record-keeping software products such as Microsoft Office, Quickbooks, IBM Notes, Open Office
- ☐ An account from which all retirement plan expenses were paid
- ☐ A separate hard-copy ledger
- ☐ An external service provider to perform all record-keeping
- ☐ Other

Does your organization use the same recordkeeping system for payroll and the \${e://Field/YEAR} \${e://Field/FORM}?

- ☐ Yes
- ☐ No
- ☐ Don't know

Gathering Materials

Gathering Materials, Learning About Requirements, and Using IRS Taxpayer

Services

Consider the materials your organization gathered and how your organization learned about its \${e://Field/YEAR} \${e://Field/FORM} requirements.

Which, if any, of the following resources did your organization use to learn about its \${e://Field/YEAR} \${e://Field/FORM} responsibilities?

Select all that apply

- ☐ IRS website
- ☐ U.S. Department of Labor (DOL) website
- ☐ IRS or DOL forms, instructions, or publications
- ☐ Seminars or training
- ☐ TV, newspapers, or journals
- ☐ General internet search
- ☐ Other

- ☐ None of the above

Time Spent

Time Spent on \${e://Field/YEAR} \${e://Field/FORM} Activities

Think about all the time your organization spent on retirement plan return-related record-keeping, planning, gathering return-related materials, learning about reporting requirements, using IRS or non-IRS resources, and completing, reviewing, and submitting the \${e://Field/YEAR} \${e://Field/FORM}

Please include time spent:

- On the \${e://Field/YEAR} \${e://Field/FORM} as well as any associated forms, schedules, and worksheets that you completed in connection with the \${e://Field/YEAR} \${e://Field/FORM}
- Corresponding or speaking with the external service provider(s) regarding the \${e://Field/YEAR} \${e://Field/FORM}

Please do NOT include time spent:

- By external service providers
- On the Independent Public Accountant audit and report
- On other federal, state, or local tax or information returns
- On forms filed with the U.S. Department of Labor and/or the Pension Benefit Guaranty Corporation
- On disclosures to plan participants and/or beneficiaries

How much time did your organization spend on the following activities related to the preparation of the \${e://Field/YEAR} \${e://Field/FORM}?

If you're not sure, please provide your best estimate. If you did not spend any time on the activity, enter 0.

	Hours	Minutes
A. Accounting and record-keeping that would not have been gathered or reconciled for normal plan operations.	0	0
B. Planning activities related to the filing of the \${e://Field/YEAR} \${e://Field/FORM}. <i>Do not include activities related to normal plan operations.</i>	0	0
C. Gathering materials, learning about tax law, and using IRS or non-IRS resources.	0	0
D. Preparing and filing the \${e://Field/YEAR} \${e://Field/FORM}. <i>This time should include:</i> <i>Reviewing, selecting, or learning to use IFILE (the EFAST2 web-based filing system)</i> <i>Reviewing, selecting, or learning to use off-the-shelf tax preparation or filing software</i> <i>Creating, maintaining, or updating customized or proprietary software that was developed specifically for your organization or the plan</i> <i>Time spent corresponding with the external service provider(s)</i>	0	0
E. Responding to notices from the IRS regarding the \${e://Field/YEAR} or one or more previously filed Forms 5500, 5500-SF or 5500-EZ.	0	0
F. All other \${e://Field/YEAR} \${e://Field/FORM} activities.	0	0

You reported spending a total of 0 hour(s) and 0 minute(s) on other activities related to the preparation of the \${e://Field/YEAR} \${e://Field/FORM}. Please describe those activities.

You reported spending a total of 0 hour(s) and 0 minute(s) on all activities related to the preparation of the {e://Field/YEAR} {e://Field/FORM}. Would you like to review your answers?

- ☐ Yes
- ☐ No

How much time did your organization spend on the following activities related to the preparation of the {e://Field/YEAR} {e://Field/FORM}?

	Hours	Minutes
A. Accounting and record-keeping that would not have been gathered or reconciled for normal plan operations.	{q://C}	{q://C}
B. Planning activities related to the filing of the {e://Field/YEAR} {e://Field/FORM}.	{q://C}	{q://C}
C. Gathering materials, learning about tax law, and using IRS or non-IRS resources.	{q://C}	{q://C}
D. Preparing and filing the {e://Field/YEAR} {e://Field/FORM}.	{q://C}	{q://C}
E. Responding to notices from the IRS regarding the {e://Field/YEAR} or one or more previously filed Form 5500, 5500-SF or 5500-EZ	{q://C}	{q://C}
F. All other {e://Field/YEAR} {e://Field/FORM} activities	{q://C}	{q://C}

What is the average hourly pay rate of employees in your organization who are responsible for {e://Field/YEAR} {e://Field/FORM} return-related activities?

Do not include money your organization spent on external service providers.

\$

Costs

Costs Associated with Tax Compliance

Please think about how much money your organization spent to comply with its $\text{\$}\{e://Field/YEAR\}$ $\text{\$}\{e://Field/FORM\}$ annual reporting requirements. If you're not sure, please provide your best estimate.

How much was paid to external service provider(s) for all $\text{\$}\{e://Field/YEAR\}$ $\text{\$}\{e://Field/FORM\}$ return-related activities?

If you did not pay an external service provider, please enter 0.

\$

Of the $\text{\$}\{q://QID15/ChoiceTextEntryValue\}$ in fees paid to external service providers, how much was spent *exclusively* on the preparation of the $\text{\$}\{e://Field/YEAR\}$ $\text{\$}\{e://Field/FORM\}$?

Do not include any amounts spent for the Independent Qualified Public Accountant audit and report.

\$

Of the $\text{\$}\{q://QID15/ChoiceTextEntryValue\}$ in fees paid to external service providers, how much was spent *exclusively* on planning activities, record-keeping, and accounting related to filing of the $\text{\$}\{e://Field/YEAR\}$ $\text{\$}\{e://Field/FORM\}$?

Do not include any amounts spent for the Independent Qualified Public Accountant audit and report.

\$

How much did your organization spend purchasing, creating, or updating software to prepare the $\text{\$}\{e://Field/YEAR\}$ $\text{\$}\{e://Field/FORM\}$?

\$

How much did your organization spend on other \${e://Field/YEAR} \${e://Field/FORM} annual return-related activities?

This may include money spent on photocopies, tax research services, tax publications and journals, or postage.

\$

All Respondents

Does your organization sponsor more than one retirement plan that was required to file a \${e://Field/YEAR} Form 5500, 5500-SF or 5500-EZ?

- ☐ Yes
- ☐ No

How many plans in total? If you're not sure, please provide your best estimate.

Open Text

What are the most challenging aspects of complying with the \${e://Field/FORM} reporting requirements?

How did your experience completing the \${e://Field/YEAR} \${e://Field/FORM} change compared to prior years?

Please provide any suggestions for how the IRS could improve the $\{e://Field/FORM\}$ reporting requirements.

Block 7

You're almost done! To complete the survey, click the "Submit" button below.

Once the survey is submitted, you will not be able to return to the survey to view or edit your responses.

At any time you can leave the survey and come back to complete it.
The survey will pick up after the last page you completed.

[Retirement Plan Survey FAQ](#)
[Preview Survey](#)

Technical Assistance 1.202.803.9147 or raas.irs.taxpayer.surveys@irs.gov

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