

2025 RCLCO & CEL National Real Estate Compensation and Benefits Survey

Thank you for your participation! This is a company-level survey. Survey entries submitted by individual employees will not be accepted. All sections of the survey must be completed in order to be considered a participant and receive a complimentary copy of the survey results. RCLCO and CEL Compensation Advisors reserve the right to exclude any submitted surveys that have not been completed properly, are missing critical information or are incomplete.

Please note, in order to ensure participants only answer questions that are relevant to their company type, incentive structure, and benefits offerings, logic has been applied to the survey. All questions may not be visible to all participants.

All survey responses are due no later than Friday, June 6, 2025.

* 1. How did you hear about this survey? Check all that apply.

- ☐ RCLCO
- ☐ NAIOP
- ☐ NAA
- ☐ Past Participant

☐ Other

☐ N/A

Participant Information

2. Contact Information

* Company Name

* First Name of Respondent

* Last Name of Respondent

* Title

* Phone

* Email Address

* Address Line 1

Address Line 2

* City

* State 

* Zip code

3. Survey Report should be sent to (if different than above).

Name

Position Title

Email Address

4. Additional recipients for survey report (if applicable).

Name

Position Title

Email Address

Organizational Data

* 5. In what regions of the United States does your company invest, own, manage, develop and/or operate properties? Check all that apply.

☐ Northwest (OR, WA, AK)

☐ West (CA, HI)

- ☐ Southwest (AZ, NV, NM)
- ☐ Rocky Mountains (CO, UT, WY, ID, MT)
- ☐ Plains (KS, NE, SD, ND)
- ☐ South Central (TX, OK, LA, AR)
- ☐ Midwest (IL, IA, MO, MN, WI, MI, IN, OH)
- ☐ Southeast (TN, KY, MS, AL, FL, GA, SC, NC)
- ☐ Mid-Atlantic (VA, WV, MD, DE, DC)
- ☐ Northeast (NJ, PA, NY)
- ☐ New England (CT, RI, MA, VT, NH)

* 6. Please indicate your company's type of organization (ownership).

- ☐ Privately-Held
- ☐ REIT (Private)
- ☐ REIT (Public)
- ☐ Public (Non-REIT)
- ☐ Non-Profit
- ☐ Family Owned/Family Office
- ☐ Other

Please Specify

7. Which of the following **Commercial** uses does your company specialize in? Can include single use or mixed use. Check all that apply, if applicable.

- ☐ Office - CBD
- ☐ Office - Suburban
- ☐ Office - Medical
- ☐ Healthcare
- ☐ Industrial - Flex
- ☐ Industrial - Warehouse
- ☐ Retail - Shopping Center
- ☐ Retail - Mall
- ☐ Retail - Single Tenant
- ☐ Retail - Lifestyle/Entertainment

8. Which of the following **Rental Residential** and **For-Sale Residential** uses does your company specialize in? Check all that apply, if applicable.

- ☐ Multifamily Rental - Garden
- ☐ Multifamily Rental - Mid/Highrise
- ☐ Affordable Housing
- ☐ Student Housing
- ☐ Senior Living
- ☐ Single Family Rental
- ☐ Single Family For-Sale
- ☐ Multifamily Condominium
- ☐ Master-planned Community

9. Which of the following **Niche** property uses does your company specialize in? Can include single use or mixed use. Check all that apply, if applicable.

- ☐ Urban Infill
- ☐ Military Housing
- ☐ Manufactured Housing
- ☐ Lodging (Hotel/Resort)
- ☐ Large Scale Land Development
- ☐ Self Storage
- ☐ Other

10. Please indicate which functions your company has in-house, and which functions your company provides for 3rd party clients. Check all that apply.

	In-house functions for company-owned investments	Functions your company provides for 3rd Party clients
Investment/Fund Management/Advisor	<input type="checkbox"/>	<input type="checkbox"/>
Brokerage/Transactions (Leasing, Sales, Investment Sales, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Development/Redevelopment	<input type="checkbox"/>	<input type="checkbox"/>
Construction (GC)	<input type="checkbox"/>	<input type="checkbox"/>
Build-to-Suit	<input type="checkbox"/>	<input type="checkbox"/>
Property Management	<input type="checkbox"/>	<input type="checkbox"/>
Asset Management	<input type="checkbox"/>	<input type="checkbox"/>
Construction Management	<input type="checkbox"/>	<input type="checkbox"/>
Project Management	<input type="checkbox"/>	<input type="checkbox"/>
Facility Management	<input type="checkbox"/>	<input type="checkbox"/>
Capital Markets	<input type="checkbox"/>	<input type="checkbox"/>

Corporate Services	<input type="checkbox"/>	<input type="checkbox"/>
Valuation	<input type="checkbox"/>	<input type="checkbox"/>
Sales and Marketing	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>

* 11. Number of employees in your company (excluding contract workers).

Total Number (enter whole number)	
Full-time % (enter percentage)	
Part-time % (enter percentage)	

12. Please indicate the size measure of your portfolio/assets (United States only).

Please provide answer in whole numbers. Ex. 1,000,000 vs. 1M.
Complete all that apply.

	Total #	Owned/Self-Managed %	Owned/Managed by 3rd Party %	3rd Party Mgmt. by your Company %	Number of Properties
Multifamily rental units					
Single family rental units					
Commercial sq. ft.					
Storage units					

* 13. Please indicate the estimated market value of your company's portfolio.

Please provide answer in whole numbers. Ex. 1,000,000 vs. 1M.
Complete all that apply.

14. **For Investment/Fund Managers Only:** Please indicate your company's assets under management (AUM).

Please provide answer in whole numbers. Ex. 1,000,000 vs. 1M.
Complete all that apply.

15. **For Developers only:** Please indicate the size of your company's development pipeline.

Please provide answer in whole numbers. Ex. 1,000,000 vs. 1M.
Complete all that apply.

16. **For-Sale Residential Companies Only:** Please indicate the number of single-family units/lots sold in 2024. Complete all that apply.

	# of units
Detached Units	
Attached Units	
Detached Lots	
Attached Lots	

Base Salary

For the following questions keep the following definitions below in mind when responding:

Top Executives: Positions typically reporting to the CEO, generally C-suite positions and senior officers.

Senior Management: Senior-level professionals with 10-15+ years of experience. Positions typically have significant people management and department leadership responsibilities.

* 17. Please indicate if the following employee groups experienced a decrease, no change, or increase in salary from 2024 to 2025. If different actions were taken within an employee group, please indicate the action relevant to the majority in that category.

	Decrease	No Change	Increase
Top Executives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Senior Management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exempt Employees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Non-Exempt Employees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Company Overall	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 18. For each employee group below, please indicate the average percentage change in salary/base wages from 2024 to 2025. Please include all employees (promotions and non-promotions). Answer in whole number.

	Average % Change
Top Executives	
Senior Management	
Exempt Employees	
Non-Exempt Employees	
Company Overall	

* 19. What was the average percentage increase for the following employee groups from 2024 to

2025? Answer in whole numbers.

	Average % Change
Employees Receiving Promotions	
Employees Not Receiving Promotions	

* 20. Please indicate your company’s anticipated position on salary adjustments from 2025 to 2026.

	Decrease	No Change	Increase
Top Executives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Senior Management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exempt Employees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Non-Exempt Employees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Company Overall	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 21. For each employee group below, please indicate the projected average percentage change in salary/base wages from 2025 to 2026. Please include all employees (promotions and non-promotions). Answer in whole numbers.

	Average % Change
Top Executives	
Senior Management	
Exempt Employees	
Non-Exempt Employees	
Company Overall	

* 22. Does your company utilize geographic pay differentials for employees in different markets?

- ☐ Yes, for all employees
- ☐ Yes, on a case-by-case basis (discretionary)

- ☐ No
- ☐ Not applicable (all employees located in same market)

Annual Bonus & Incentives

When answering questions in this section, please note the following:

- Incentives for performance year 2024 represent the most recent awards earned by employees. Awards are typically paid out in late 2024 or early 2025.
- Incentives for performance year 2023 represent awards earned by employees for performance year 2023. These incentives were typically paid in late 2023 or early 2024.

* 23. Does your company offer annual bonus/incentives (formal or informal)?

- ☐ Yes
- ☐ No

For the following questions keep the following definitions below in mind when responding:

Top Executives: Positions typically reporting to the CEO, generally C-suite positions and senior officers.

Senior Management: Senior-level professionals with 10-15+ years of experience. Positions typically have significant people management and department leadership responsibilities.

* 24. Please indicate if the following employee groups experienced a decrease, no change, or increase in individual annual bonus payout from performance year 2023 to performance year 2024. If different actions were taken within an employee group, please indicate the action relevant to the majority in that category.

	Decrease	No Change	Increase
Top Executives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Senior Management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exempt Employees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Non-Exempt Employees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Company Overall	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 25. For each employee group below, please indicate the average percentage change in individual annual bonus payout from performance year 2023 to performance year 2024. Please include all employees (promotions and non-promotions).

	Average % Change
Top Executives	
Senior Management	
Exempt Employees	
Non-Exempt Employees	
Company Overall	

* 26. For each employee group below, please indicate your company’s **anticipated** percentage change in individual annual bonus payouts from performance year 2024 to performance year 2025.

	No change	<10% increase	10-25% increase	>25% increase	<10% decrease	10-25% decrease	>25% decrease
Executive management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Senior management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exempt employees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Non-exempt employees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Company overall	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

* 27. In what month does your company normally pay bonuses to employees? If your company pays bonuses multiple times per year, please indicate the frequency (monthly, quarterly, bi-annually).

* 28. Does your company use target bonuses as a method for managing incentive compensation?

- ☐ Yes
- ☐ No

* 29. If yes, what was the company's average bonus achievement for performance year 2024 expressed as a percentage of the target award?

* 30. Does your company have a formalized bonus pool?

- ☐ Yes
- ☐ No

* 31. If there is a formalized bonus pool, please indicate how it is determined.

32. When determining annual bonuses for the following employee groups, what is the estimated breakdown of objective and subjective/discretionary measures? Leave field blank if employee group is not bonus eligible.

	Est. % Objective Measures	Est. % Subjective Measures
Top Executives		
Senior Management		
Exempt Employees		
Non-Exempt Employees		

* 33. What metrics/KPIs are considered when determining annual bonuses?

- ☐ Achievement of leasing targets
- ☐ Capital raised
- ☐ Cash on cash return
- ☐ EBITDA
- ☐ Employee opinion surveys
- ☐ ESG
- ☐ IRR
- ☐ Net operating income
- ☐ Number of new investments/developments
- ☐ Strategic goals
- ☐ Tenant retention ratio
- ☐ Value/size of portfolio (AUM)
- ☐ No metrics/KPIs formally considered (awards are fully discretionary)
- ☐ Other

* 34. Does your company share a percentage of fee income (e.g. acquisition fee, disposition fee, development fee) directly with employees? This can be in lieu of or in addition to traditional annual bonus awards.

- ☐ Yes
- ☐ No
- ☐ N/A

35. **For Developers Only:** Does your company offer project milestone or project completion awards?

☐ Yes

☐ No

☐ N/A

36. If yes, are the awards additive or in lieu of traditional annual bonus awards?

☐ Awards are additive to annual bonus

☐ Awards are in lieu of annual bonus

37. **For Onsite Residential Rental Positions Only:** Does your company offer leasing commissions?

☐ Yes

☐ No

☐ N/A

38. What type of leases are eligible for commissions?

☐ New leases

☐ Lease renewals

39. How are commissions structured?

☐ % of lease value

☐ Flat dollar amount per lease or renewal

☐ Other

Please specify

Long Term Incentive Plans (LTIP)

LTIP: Private Companies

* 40. Does your company offer a long-term incentive plan (LTIP)?

☐ Yes

☐ No

* 41. Which employees are eligible for long-term incentives?

☐ Executive Management

☐ Senior Management

☐ Mid-Level Professionals

☐ Junior-Level Professionals

* 42. What percentage of non-property level employees are eligible for long-term incentives?

When calculating this percentage, please remove all property-level employees (e.g., Property Managers, Maintenance, Facilities, On-site Leasing) from the denominator.

* 43. Which type(s) of LTIP structures does your company offer?

☐ Profit Sharing

- ☐ Platform ownership (granted)
- ☐ Platform ownership (purchased)
- ☐ Stock appreciation rights (SAR) or enterprise value growth plan
- ☐ Promote/Carried interest
- ☐ Other

* 44. How often are LTIP grants made?

- ☐ Annually
- ☐ 2 years
- ☐ 3 years
- ☐ 4 years
- ☐ 5 years or more
- ☐ Other

* 45. What is the duration of the performance period?

- ☐ 1 year
- ☐ 2 years
- ☐ 3 years
- ☐ 4 years
- ☐ 5 years or more
- ☐ Other

* 46. Over how many years does the LTIP award vest? If there is no vesting, please enter 0.

* 47. What is the structure of the vesting schedule?

- ☐ No vesting (immediate)
- ☐ Cliff vesting (0% vested until the completion of the performance period)
- ☐ Pro rata vesting (equal percentage vested each year)
- ☐ Variable vesting (different percentage vested each year)
- ☐ Other

* 48. Please indicate if awards are retained or forfeited in the following termination scenarios:

	Retained by Employee	Forfeited
For Cause	<input type="radio"/>	<input type="radio"/>
Voluntary - Employment by non-Competitor	<input type="radio"/>	<input type="radio"/>
Voluntary - Employment by Competitor	<input type="radio"/>	<input type="radio"/>
Without Cause	<input type="radio"/>	<input type="radio"/>
Retirement	<input type="radio"/>	<input type="radio"/>
Death/Disability	<input type="radio"/>	<input type="radio"/>

LTIP: Promote/Carried Interest Plans

* 49. How does your company structure promote/carried interest awards?

- ☐ Fund-level
- ☐ Deal-by-deal level

* 50. What percentage of promote/carried interest is shared with the management team (non-owners)?

* 51. Does your company offer co-investment from management?

☐ Yes

☐ No

52. If yes, is co-investment required or optional?

	Promote/Carried Interest Participants: Required	Promote/Carried Interest Participants: Offered (Optional)	Promote/Carried Interest Non- Participants: Required	Promote/Carried Interest Non- Participants: Offered (Optional)
Executive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senior Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mid-Level Professionals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Junior-Level Professions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* 53. Does your company offer financing for co-investment?

☐ Yes, through a third party lender

☐ Yes, through a company-sponsored loan

☐ No

☐ Other

* 54. What percentage of financing is available?

Long Term Incentive Plans (LTIP)

LTIP: Public Companies

* 78. Does your company offer a long-term incentive plan (LTIP)?

☐ Yes

☐ No

* 79. Which employees are eligible for long-term incentives?

☐ Executive Management

☐ Senior Management

☐ Mid-Level Professional

☐ Junior-Level Professional

* 80. What incentive vehicles are currently used?

☐ Restricted Shares (RSUs)

☐ Stock Options

☐ Performance Shares/Units (PSUs)

☐ Stock Appreciation Rights (SARs)

☐ Profit Sharing/Cash LTIP

☐ Other

81. Please complete the following based on plans offered at your company.

	How many years are in the performance period?	How often are grants issued?				
		Annually	2 years	3 years	4 years	5 or more years
Restricted Shares (RSUs)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stock Options		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Performance Shares/Units (PSUs)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stock Appreciation Rights (SARs)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Profit Sharing/Cash LTIP		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

82. Please complete the following based on plans offered at your company.

	Over how many years does the award vest?	What are the vesting criteria?	
		Time based	Performance
Restricted Shares (RSUs)		<input type="radio"/>	<input type="radio"/>
Stock Options		<input type="radio"/>	<input type="radio"/>
Performance Shares/Units (PSUs)		<input type="radio"/>	<input type="radio"/>
Stock Appreciation Rights (SARs)		<input type="radio"/>	<input type="radio"/>

Profit Sharing/Cash LTIP		<input type="radio"/>	<input type="radio"/>
Other		<input type="radio"/>	<input type="radio"/>

83. What is the structure of the vesting schedule? Please complete the following based on plans offered at your company.

	No vesting (immediate)	Cliff vesting	Pro rata vesting (equal percentage vested each year)	Variable vesting (different percentage each year)
Restricted Shares (RSUs)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stock Options	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Performance Shares/Units (PSUs)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stock Appreciation Rights (SARs)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Profit Sharing/Cash LTIP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

84. Please indicate which financial criteria are relevant to the defined plan. Please complete based on plans offered at your company.

	Total Shareholder Return	FFO or AFFO\$/FFO per Share, or AFFO per Share	Income Criteria: NOI EPS Net Income	EBITDA	Return on: Assets, Equity, or Investment (ROIC)	Dividend Growth Payout or Coverage	Balance Sheet: Debt to Equity/Cap Structure	Other Company Financial Criteria
Redistricted Shares (RSUs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stock Options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Performance Shares/Units (PSUs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stock Appreciation Rights (SARs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Profit Sharing/Cash LTIP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

* 85. Do your plan(s) have a non-financial component?

☐ Yes

☐ No

Please Specify

* 86. Do your plan(s) have a discretionary component?

☐ Yes

☐ No

Please Specify

* 87. Please indicate if awards are retained or forfeited in the following termination scenarios:

Retained by Employee

Forfeited

For Cause

☐☐

Voluntary - Employment by
non-Competitor

☐☐

Voluntary - Employment by
Competitor

☐☐

Without Cause

☐☐

Retirement

☐☐

Death/Disability

☐☐

Compensation/Human Capital Policies & Trends

88. What is your company's work schedule policy?

	# Days in Office	# Days Remote
Real Estate Functions		
Corporate Functions		
Onsite Property-Level Employees		

* 89. If your company offers a hybrid work schedule, are the days in the office fixed or flexible?

- ☐ All office days are fixed for employees
- ☐ Office days are flexible and determined by individual teams
- ☐ Office days are fully flexible and determined by the employee
- ☐ Combination: Some office days are fixed, others are flexible
- ☐ N/A

For the following questions, keep the definitions below in mind when responding:

Voluntary Turnover: The number of full-time employees voluntarily separating from the Company, divided by the average full-time employees during the year, expressed as a percentage.

Total Turnover: The number of full-time employees voluntarily separating + the number of full-time employees separated by the Company (non-voluntary), divided by the average full-time employees during the year, expressed as a %. (Note: Use same denominator as for Voluntary Turnover).

**Do not include any change (reduction) in employee count related to the disposition of assets.

* 90. What was your company’s turnover rate for the past 12-month period? Please note answer as a percentage. If you do not have onsite property-level employees, please put N/A.

Voluntary Turnover RateTotal Turnover Rate

Overall		
Corporate & Real Estate Functions (not onsite)		
Onsite Property-Level Employees		

* 91. What was the most frequently given reason for voluntary resignation at your company over the past 12-month period?

- ☐ Compensation
- ☐ Lack of schedule flexibility (in office vs. remote)
- ☐ Lack of training and development opportunities
- ☐ Lack of career mobility and progression
- ☐ Change to a different industry
- ☐ Challenges with management or team dynamics
- ☐ Other

* 92. What area(s) of the company are most in demand from a talent attraction and retention perspective? Select top three.

- ☐ Acquisition/Disposition
- ☐ Administration
- ☐ Asset Management
- ☐ Capital Markets (Debt)
- ☐ Compliance/Risk Management
- ☐ Construction
- ☐ Development
- ☐ Equity Capital Raising

- ☐ Executive Management
- ☐ Finance/Accounting
- ☐ Human Resources
- ☐ Information Technology
- ☐ Leasing
- ☐ Marketing
- ☐ Property Management (Corporate)
- ☐ Property Management (Onsite)
- ☐ Research
- ☐ Other

* 93. Do you anticipate workforce hiring for the remainder of 2025?

- ☐ Yes
- ☐ No

* 94. Which functions/departments do you anticipate hiring for the remainder of 2025?

- ☐ Acquisition/Disposition
- ☐ Administration
- ☐ Asset Management
- ☐ Capital Markets (Debt)
- ☐ Construction
- ☐ Compliance/Risk Management
- ☐ Development

- ☐ Equity Capital Raising
- ☐ Executive Management
- ☐ Finance/Accounting
- ☐ Human Resources
- ☐ Information Technology
- ☐ Leasing
- ☐ Marketing
- ☐ Property Management (Corporate)
- ☐ Property Management (Onsite)
- ☐ Research
- ☐ Other

* 95. Has your company established and communicated policies or initiatives related to Environmental, Social and Governance (ESG)?

- ☐ Yes
- ☐ No

* 96. Has your company established and communicated policies or initiatives related to Diversity, Equity, and Inclusion (DEI)?

- ☐ Yes
- ☐ No

97. Which actions/policies has your company implemented over the past 12 months or does your company have under consideration for near-term implementation?

	Implemented Over the Past 12 months	Action Under Consideration for Near-Term Implementation
New or revised compensation philosophy	<input type="checkbox"/>	<input type="checkbox"/>
New or restructured annual bonus plan	<input type="checkbox"/>	<input type="checkbox"/>
New or restructured long-term incentive plan	<input type="checkbox"/>	<input type="checkbox"/>
Expanded eligibility for long-term incentive plan	<input type="checkbox"/>	<input type="checkbox"/>
Increased employee share of healthcare benefits cost	<input type="checkbox"/>	<input type="checkbox"/>
Decreased employee share of healthcare benefits cost	<input type="checkbox"/>	<input type="checkbox"/>
Succession planning for C-suite executives	<input type="checkbox"/>	<input type="checkbox"/>
Succession planning for senior leadership (not C-suite)	<input type="checkbox"/>	<input type="checkbox"/>
New DEI Policy	<input type="checkbox"/>	<input type="checkbox"/>
Discontinued Previous DEI Policy	<input type="checkbox"/>	<input type="checkbox"/>

Benefits

* 98. Which type of PTO policy does your company offer?

- ☐ Separate PTO (separate banks for sick and vacation)
- ☐ Pooled PTO (combines sick and vacation)
- ☐ Unlimited PTO

99. What is the number of paid time off days granted for full-time employees based on completed years of service? Complete based on previous response. If your company also offers personal days, please include those in count of vacation days. **Report using # of days (not hours).**

	6						Annual	Total #
	months	1 year	5 years	10 years	15 years	20 years	Carryover	of days
							# of Days	Capped
								(zero if
								no cap)
Separate PTO: Vacation Days								
Separate PTO: Sick Days								
Pooled PTO: PTO Bank								

* 100. How many paid holidays does your company offer? Please include fixed holidays and floating holidays (if applicable).

* 101. Which holidays does your company offer? Check all that apply.

- ☐ New Year’s Day
- ☐ Martin Luther King Jr. Day
- ☐ President’s Day
- ☐ Good Friday
- ☐ Easter Monday
- ☐ Memorial Day
- ☐ Juneteenth
- ☐ Fourth of July
- ☐ Labor Day
- ☐ Indigenous Peoples’ Day/Columbus Day
- ☐ Election Day
- ☐ Veterans Day

- ☐ Thanksgiving
- ☐ Day after Thanksgiving
- ☐ Christmas Eve
- ☐ Christmas
- ☐ New Year's Eve
- ☐ Other

* 102. Which benefits does your company offer overall? Check all that apply.

- ☐ Medical Insurance
- ☐ Dental Insurance
- ☐ Vision Plan
- ☐ Health Insurance for Part Time Employees

Min Hours Per Week:

- ☐ Employee Assistance Program (EAP)

Number of visits:

- ☐ Tax-Advantage Medical Programs
- ☐ Life/Disability Insurance
- ☐ Retirement Plans

* 103. Please specify the type(s) of medical insurance available.

☐ Indemnity

☐ PPO

☐ POS

☐ HMO

* 104. On a **monthly** basis, what is the average cost, per individual employee, for **MEDICAL** expenses for the employer and employee, for each category?

	Employer Cost: Avg. Cost (\$) per individual employee	Employee Cost: Avg. Cost (\$) per individual employee
Employee (single coverage)		
Employee + 1 Adult		
Employee + Family		

* 105. Please specify the type(s) of dental insurance available.

☐ Indemnity

☐ PPO

☐ DMO

* 106. On a **monthly** basis, what is the average cost, per individual employee, for **DENTAL** expenses for the employer and employee, for each category?

	Employer Cost: Avg. Cost (\$) per individual employee	Employee Cost: Avg. Cost (\$) per individual employee
Employee (single coverage)		
Employee + 1 Adult		
Employee + Family		

* 107. Please specify the type(s) of tax-advantage medical programs available.

- ☐ Cafeteria/Section 125 (before tax premiums)
- ☐ Pre-Tax Healthcare Flexible Spending Account (HSA, HRA, FSA)
- ☐ Pre-Tax Dependent Care Flexible Spending Account

* 108. Please specify the type(s) of life and disability insurance available.

- ☐ Basic Life Insurance
- ☐ Supplemental Life Insurance
- ☐ AD&D Insurance
- ☐ Supplemental AD&D
- ☐ Basic Long-Term Disability Insurance
- ☐ Supplemental Long-Term Disability Insurance
- ☐ Short-Term Disability Insurance
- ☐ Long-Term Care Insurance
- ☐ Business Travel Accident Insurance

* 109. If long-term disability coverage is offered, what percentage of the premium does the company pay?

* 110. Please specify the type(s) of retirement plans offered by your company.

- ☐ 401(k) Plan
- ☐ Profit Share 401(k) Plan
- ☐ Non 401(k) Defined Contribution Plan

☐ Supplemental Executive Retirement Plan (SERP)

* 111. Does your company offer 401(k) plan employer matching contributions?

☐ Yes

☐ No

* 112. What are your 401(k) matching practices?

☐ Flat dollar match

☐ Percentage match

What is the max dollar amount matched?

What is the max percentage of salary matched?

* 113. Is there a 401(k) vesting schedule for matched employer contributions?

☐ Yes

☐ No

* 114. If yes, what is it? Please fill in the number of years, if applicable.

☐ Immediate vesting

☐ Cliff vesting

☐ Multi Year Vesting

☐ Other

of years cliff

after # years

Please Specify

* 115. Does your company provide any of the following additional benefits? Check all that apply.

- ☐ Adoption benefit
- ☐ Back-up childcare resources
- ☐ Bring your child to work in an emergency
- ☐ Carpooling/transit subsidy
- ☐ Compressed work weeks
- ☐ Co-sponsored community service program
- ☐ Critical illness insurance
- ☐ Financial consulting
- ☐ Free/Subsidized parking
- ☐ Group legal plan
- ☐ Housing discount
- ☐ Matching charitable contributions

- ☐ New-hire referral bonus
- ☐ On-site daycare
- ☐ On-site workout facility
- ☐ Paid (subsidized) association/professional society dues
- ☐ Paid or subsidized off-site fitness membership
- ☐ Pet insurance
- ☐ Subsidy for at-home office equipment
- ☐ Summer hours
- ☐ Wellness program
- ☐ Other

* 116. What Learning & Development/Continuing Education benefits does your company cover/subsidize?

- ☐ Company sponsored professional development courses
- ☐ Formal mentoring program
- ☐ Leadership/executive coaching
- ☐ Tuition reimbursement for advanced degrees, certificate programs and/or professional licenses
- ☐ N/A

* 117. What is the average employee cost/year for L&D/Continuing Education benefits?

* 118. Does your company offer a parental leave policy beyond state requirements?

- ☐ Yes

☐ No

* 119. For the parental leave policy, is there an eligibility requirement? Check all that apply.

☐ Full Time employee

☐ Minimum Tenure (typically 1 year, or 1,250 hours)

☐ No or not defined

* 120. Please provide details on your company's parental leave policy.

	Up to # Paid Weeks	Up to # Unpaid Weeks	# of Total Weeks (Paid + Unpaid)	Rate of Pay (%) Except as PTO applies
Birthing Parent				
Non-birthing parent				

* 121. Do you offer car allowance for employees?

☐ Yes

☐ No

122. Which employees are eligible for the car allowance and what is the average annual amount of the benefit?

	Eligible for Car Allowance	Average Annual Amount of Benefits (whole number)
Company Executives	<input type="checkbox"/>	
Construction	<input type="checkbox"/>	

Property Management	<input type="checkbox"/>	
Leasing	<input type="checkbox"/>	
Acquisitions/Disposition	<input type="checkbox"/>	
Development	<input type="checkbox"/>	
Asset Management	<input type="checkbox"/>	
Other	<input type="checkbox"/>	

123. Other: Please specify who else is eligible for a car allowance?

124. **Multifamily Employers Only:** Does your company offer discounted rent (for company-owned properties) as a benefit?

	Eligible for discounted rent	If yes, average percent discount (whole number)
Full-Time Employees	<input type="checkbox"/>	
Part-Time Employees	<input type="checkbox"/>	

125. Please indicate the positions that are eligible for the housing discount:

- ☐ Community Manager
- ☐ Assistant Community Manager
- ☐ Maintenance Supervisor
- ☐ Maintenance Technician

☐ Leasing Representative

☐ Other

126. **For Sale Residential Employers Only:** Does your company offer any discounts or incentives for employees who choose to buy a home through an affiliated company?

☐ No

☐ Yes, a dollar value or percentage discount on purchase price

☐ Yes, a discount on closing costs

☐ Other

Compensation Data Upload

* 127. Download the Excel File through the link below, and then return to this screen to upload your file.

<https://www.rclco.com/compensation-survey-resources/>

File 0 of 1

Max file size: 10.0MB



Press here to [Browse](#)