When effort matters: Expectations of reward and efficacy guide cognitive control

allocation

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Abstract

The amount of mental effort we invest in a task is influenced by the reward we can expect if we

perform that task well. However, some of the rewards that have the greatest potential for driving

these efforts (e.g., jobs, grants) are partly determined by factors beyond one's control. In such

cases, effort has more limited *efficacy* for obtaining rewards. We have proposed that people

integrate information about the expected reward and efficacy for effort to determine the expected

value of control, and then adjust their control allocation (i.e. mental effort) accordingly. Here we

test this theory's key behavioral and neural predictions. We show that participants invest more

control when this control is more rewarding and more efficacious, and that these incentive

components separately modulate EEG signatures of incentive evaluation and proactive control

allocation. Our findings support the prediction that people combine worth and worthwhileness to

determine how much effort to invest.

Cognitive control is critical to one's ability to achieve most goals [1-3]–whether to complete

a paper in time for its deadline or sending that birthday message amidst a busy workday – but

exerting control appears to come at a cost. We experience cognitive control as mentally

effortful[4,5], and therefore require some form of incentive to justify investing control in a task[6,7].

For instance, a student is likely to study harder for an exam that has higher stakes (e.g., worth

half of their grade) than a lower-stakes exam. Accordingly, research has shown that participants

generally exert more mental effort on a cognitive control task (e.g., Stroop, flanker) when they

are offered higher rewards for performing well, as evidenced by improved task performance and

increased engagement of relevant control circuits [7-16].

In the real world, increased control may not translate to achieving desired outcomes (e.g.,

when *efficacy* is low). For instance, even when the stakes are high, that same student is likely to

exert less effort studying if they think that those efforts have little bearing on their score on that

exam, say if they felt that grading for the exam is driven mostly by factors out of their control

(e.g., subjectivity in grading, favoritism). While previous work has closely examined the

mechanisms by which people evaluate the potential rewards to expect for a certain control

allocation, much less is known about how they evaluate the efficacy of that control, nor how

these two incentive components (reward and efficacy) are integrated to determine how much

control is invested.

We have recently developed a model that formalizes the roles of evaluation, decision-

making, and motivation in allocating and adjusting cognitive control [17,18] (Fig.1). Our model

describes how cognitive control can be allocated based on the overall worth of executing

different types and amounts of control, which we refer to as their Expected Value of Control

(EVC). The EVC of a given control allocation is determined by the extent to which the costs that

would need to be incurred (mental effort) are outweighed by the benefits. Critically, these

benefits are a function of both the expected outcomes for reaching one's goal (*reward*, e.g.,

money or praise) and the likelihood that this goal will be reached with a given investment of

control (*efficacy*) (Fig. 1A). The amount of control invested is predicted to increase

monotonically with a combination of these two incentive components (Fig. 1B).

Figure 1. The EVC model predicts that control should increase with expected reward and efficacy.
A. EVC model. Control intensity is chosen to optimize the trade-off between effort costs and payoff,
maximizing the expected value of control. The payoff of a given control signal is determined by the
expected reward and efficacy for a given control intensity. **B**. The EVC model proposes that higher
intensities of control (x-axis) are associated with greater effort costs (red) but that these effort costs can be
outweighed by the expected payoff for a given control intensity (blue). These payoffs typically increase as
a function of task performance, and task performance typically improves as a function of control
intensity. The EVC of each control intensity (purple) is calculated as the difference between its payoff
and its cost. The optimal level of control to invest is the one that maximizes EVC (vertical black arrows).
Left: When the expected reward for performing the task well is higher (from dashed to solid line), higher
control intensities achieve even higher payoffs. **Right**: When performance matters less for acquiring a
given reward (low efficacy [dashed line]) – here, simulated by having reward be unrelated to performance
on most trials (instead, occurring at a fixed high rate; see Fig. 2) – the relative payoff for high vs. low
control intensities decreases.

The EVC model integrates over and formalizes past theories that posit roles for

reward/utility and/or efficacy/controllability/agency in the motivation to engage in a particular

course of action [19-26]. In so doing, our model enables a description of the computational and

neural mechanisms of control allocation. For instance, past research has shown that behavioral

and neural markers of proactive control increase with increases in anticipated task difficulty[27-32].

Through the lens of the EVC theory (Fig. 1), these difficulty-related increases in control intensity

can be accounted for by changes in expected reward (i.e., the harder the task, the less likely you

are to achieve the rewards associated with performing the task well) and/or changes in expected

efficacy (i.e., the harder the task, the less helpful a given level of control is for achieving the

same level of performance). The latter explains why the relationship between control intensity

and task difficulty is non-monotonic - once the task exceeds a certain difficulty (i.e., once effort

is no longer efficacious; [33,34]), a person stops intensifying their mental efforts and instead starts to

disengage from a task.

Our theory therefore makes the novel prediction that differences in efficacy (holding

expected reward and difficulty constant) should itself be sufficient to drive changes in behavioral

and neural signatures of control allocation. The theory makes the further prediction that reward

and efficacy should shape incentive processing and associated neural correlates at multiple

stages, including during the initial evaluation of each of these incentive components and at the

point when those components converge to determine control allocation based on their combined

value (EVC).

Here, we test these predictions across two studies using a novel paradigm that explicitly

dissociates expectations of reward and efficacy associated with a cognitive control task (the

Stroop task; Fig. 2), allowing us to isolate their individual and joint contributions to control

allocation. To further examine how reward and efficacy are encoded at different stages of

incentive processing, in Study 2 we measured EEG and pupillometry while participants

performed this task, allowing us to separately measure the extent to which reward and efficacy

are reflected in signals associated with the initial evaluation of the incentives available on a

given trial (putatively indexed by the post-cue P3b; [27,35]) versus those associated with proactive

allocation of the control deemed appropriate for the upcoming trial (putatively indexed by the

contingent negative variation [CNV] occurring prior to the presentation of the target stimulus;

[27,30,32,36-38]). Confirming our predictions, both studies found that participants adaptively increased

their control allocation (and thus performed better at the task) when expecting higher levels of

reward and efficacy. Study 2 showed that both incentive components amplify event-related

potentials (ERPs) associated with distinct stages of incentive processing: incentive evaluation

(indexed by the P3b following cue presentation) and control allocation (indexed by the

contingent negative variation [CNV] prior to Stroop target onset). Critically, only the CNV

reflected the integration of reward and efficacy. The amplitude of both ERPs, but more so the

CNV, predicted performance when the target appeared, supporting the prediction that these

neural signals index different stages in the evaluation and allocation of control.

Figure 2. Manipulation of expected reward and efficacy. On each trial, participants view an incentive
cue followed by a Stroop stimulus (target) and then feedback indicating how much reward they received.
Four different cues indicate whether a trial is high or low in reward and efficacy. The P3b and CNV
event-related potentials are measured during the interval between cue and target, as indices of cue
evaluation (P3b) and control allocation (CNV).

118   **Results**

To test the prediction that reward and efficacy together shape cognitive effort investment

and task performance, we developed and validated a novel paradigm that manipulates efficacy

independently from expected reward (Fig. 2). Specifically, prior to the onset of a Stroop stimulus

(the *target*), we cued participants with the amount of monetary reward they would receive if

successful on that trial ($0.10 vs. $1.00) and whether success would be determined by their

performance (being fast and accurate; *high efficacy*) or whether it would instead be determined

independently of their performance (based on a weighted coin flip; *low efficacy*). Using an

adaptive yoking procedure, we held expected reward constant across efficacy levels, while also

varying reward and efficacy independently of task difficulty (i.e., levels of congruency).

Participants performed this task in an experimental session that measured only behavior

(Study 1; N=21) or one that additionally measured EEG activity and pupillometry (Study 2;

N=44). Studies 1-2 had the same trial structure but differed slightly in the design of the incentive

cues, overall number of trials, and within-trial timing, and were run at different study sites (see

Methods). Predictions for Study 2 were preregistered based on findings from Study 1

(osf.io/35akg).

Performance improves with increasing expected reward and efficacy. We predicted that

reward and efficacy would together incentivize greater control allocation. Given that participants

needed to be fast and accurate to perform well on our task, we expected to find that participants

would be faster to respond correctly when they expected control to be more rewarding and more

efficacious. Replicating previous findings[27], across both studies we found that reaction times on

accurate trials (i.e., accurate RTs, split-half reliability based on odd vs even trials for Study 1: r

= .79 & Study 2: r = .91) were faster for high compared to low reward trials (Study 1: b = -9.81,

p = .002; Study 2: b = -5.03, p = .004). Critically, accurate RTs were *also* faster for high

compared with low efficacy trials (Study 1: b = -14.855, p <.001; Study 2: b = -5.89, p = .016).

We further found reward-efficacy interactions in the predicted direction – with the speeding

effect of reward being enhanced on high efficacy trials – but this interaction was only significant

in Study 2 (Study 1: b = -9.75, p = .116; Study 2: b = -9.23, p = .009; cf. Fig. 3).

Figure 3. Reward and efficacy improve performance. Participants in both Study 1 (**A**) and Study 2 (**B**)
were fastest to give a correct response when both reward and efficacy were high, suggesting that these
variables jointly determined control allocation. Error bars represent within-subject standard error of the
mean.

Additional analyses confirmed that these performance improvements were not driven by

speed-accuracy tradeoffs. Whereas participants were faster when reward or efficacy was high,

they were not less accurate (Tables S1-S2). In fact, their accuracies (split-half reliability Study 1:

r = .72, Study 2: r = .83) tended to improve when reward or efficacy were high, though only the

effect of efficacy on accuracy in Study 2 was significant (b = 0.08, p = .033, Table S2). Together,

the faster RTs and more accurate responses suggest that the effects of reward and efficacy on

response speed reflected increased control allocation rather than speed-accuracy tradeoffs

(lowering of response thresholds; i.e., increased impulsivity).

All of the analyses above control for the effects of task difficulty (response congruence)

and practice effects (trial) on performance, which in both studies manifested as worse

performance (slower and less accurate responding) with increasing response incongruence, and

improved performance (faster and more accurate responding) over time (Table S1-S2, Fig. S1).

The effects of reward and efficacy on performance did not significantly differ between the two

studies (Table S3).

Reward and efficacy levels are reflected in neural signatures of cue evaluation and

control allocation. Our behavioral results suggest that participants adjust their mental effort

investment (allocation of cognitive control) based on the expected rewards and the degree to

which control is perceived to be efficacious; that is, they invest more effort when the expected

reward and efficacy are high. To examine the neural and temporal dynamics associated with the

processing of these two incentive components, we focused on two well-characterized event-

related potentials (ERPs): the P3b (split-half reliability r = .86), which peaks around 250-550 ms

following cue onset and is typically associated with cue evaluation[27]; the CNV (split-half

reliability r = .75), which emerges about 500 ms prior to Stroop target onset and is typically

associated with preparatory attention or proactive control[27,28,30,32,36,37]. Based on past research,

we preregistered the predictions below for the CNV. Additional predictions regarding the P3b

were generated subsequent to preregistration based on further review of the literature.

We found that reward and efficacy modulated both of these ERPs (Table 1, Fig. 4).

Replicating past work[27], cues signaling higher rewards were associated with significantly larger

amplitudes of both P3b (b = 0.34, p <.001) and CNV (b = -0.28, p = .001). Importantly, holding

reward constant, cues signaling high rather than low efficacy were likewise associated with

significantly larger amplitudes of P3b (b = 0.44, p <.001) and CNV (b = -0.30, p = .008).

Crucially, only the CNV tracked the interaction of reward and efficacy (b = -0.35, p

= .046), reflecting the finding that the effect of reward on CNV amplitude was enhanced when

efficacy was high. We did not find a significant reward-efficacy interaction with the P3b (b = -

0.01, p = .947). Thus, although reward and efficacy independently modulated the P3b and CNV

(i.e., main effects of reward and efficacy on both ERPs), only the CNV reflected their integration

(i.e., reward-efficacy interaction). This pattern of results is consistent with our prediction that

reward and efficacy are initially evaluated separately (reflected in the P3b), but are subsequently

integrated to determine EVC and thereby allocate control (reflected in the CNV).

Figure 4. P3b and CNV amplitudes track increases in expected reward and efficacy. A. ERP
averages for each incentive condition, separately for the P3b (**top**) and CNV (**bottom**). Shaded areas
indicate time windows used for quantification. Topographies show group-level (fixed-effect) contrasts for
reward and efficacy, respectively. **B.** Average ERP amplitudes within the relevant time windows show
that the magnitude of the (positive-going) P3b and the (negative-going) CNV increase with greater reward
and efficacy. The CNV but not the P3b tracked the interaction of reward and efficacy, mirroring the
behavioral effects (cf. Fig. 3). **C-D.** Fixed (group-level) effects of ERP amplitude on accuracy (**C**) and
accurate RT (**D**) show that increased P3b and CNV predicted better performance when the target
appeared. Shaded error bars represent standard error of the mean.

Table 1. *Effects of Reward and Efficacy on Neural Signals*

Predictors	P3b			CNV		
	Estimates	*CI*	*p*	*Estimates*	*CI*	*p*
(Intercept)	0.26	-0.27 – 0.78	0.339	-0.16	-0.63 – 0.31	0.507
Efficacy	0.44	0.24 – 0.65	**<0.001**	-0.30	-0.53 – -0.08	**0.008**
Reward	0.34	0.16 – 0.51	**<0.001**	-0.28	-0.45 – -0.11	**0.001**
Trial	-0.54	-0.62 – -0.46	**<0.001**	-0.03	-0.12 – 0.05	0.461
P3b Baseline	0.00	-0.01 – 0.01	0.950			
Efficacy:Reward	-0.01	-0.33 – 0.31	0.948	-0.35	-0.69 – -0.01	**0.046**
P3b				0.16	0.14 – 0.17	**<0.001**
CNV Baseline				-0.02	-0.03 – -0.00	**0.005**
Observations	22580			22580		

Note: Statistically significant p-values (< 0.05) are displayed in bold.

Neural signatures of incentive processing predict effort investment. We have shown that reward and efficacy affect behavioral performance (accurate RT) and neural activity during initial cue evaluation (P3b) and proactive control allocation (CNV), suggesting that these neural signals reflect the transformation of incentives into effort allocation. To test this hypothesis more directly, we included single-trial P3b and CNV amplitude (normalized within-subject) as regressors in our models of accurate RT and accuracy, to test whether variability in these two neural signals explained trial-by-trial variability in task performance (Table 2). We found that both P3b and CNV were associated with better Stroop task performance on the when the target appeared: Larger ERP magnitudes were associated with an increased probability of responding correctly (P3b; b = 0.08, p <.001, CNV: b = -0.10, p <.001), and also with faster accurate RTs (P3b: b = -7.04, p <.001, CNV: b = 15.58, p <.001). Crucially, the CNV's relationship with accurate RT was significantly stronger than the P3b's (X^2 = 18.51, p < .001), providing evidence consistent with our prediction that the CNV plays a more important role in allocating control than the P3b, and with our observation that CNV's relationship with reward and efficacy more

closely resembles that found for accurate RT (i.e., both the CNV and accurate RT were

modulated by the interaction of reward and efficacy; compare Fig. 3 and Fig. 4B). However,

CNV and P3b did not differ reliably in their association with accuracy ($X^2 = 0.78$, $p = .378$).

Together, these findings suggest that the P3b and CNV index the transformation of incentive

processing into effort investment, a process that entails integration of the reward and efficacy

expected on a given trial.

Table 2. *Effects of Neural Signals on Behavioral Performance*

Predictors	Accuracy			Accurate RT		
	Log-Odds	*CI*	*p*	*Estimates*	*CI*	*p*
(Intercept)	1.87	1.65 – 2.08	**<0.001**	647.66	630.60 – 664.71	**<0.001**
Efficacy	0.08	0.00 – 0.15	**0.044**	-4.00	-8.84 – 0.85	0.106
Reward	0.03	-0.05 – 0.10	0.465	-3.25	-6.85 – 0.34	0.076
P3b	0.08	0.04 – 0.11	**<0.001**	-7.04	-8.87 – -5.21	**<0.001**
CNV	-0.10	-0.14 – -0.06	**<0.001**	15.58	12.02 – 19.15	**<0.001**
Congruency (i-n)	0.65	0.44 – 0.85	**<0.001**	-64.00	-68.85 – -59.14	**<0.001**
Congruency (n-c)	0.34	0.18 – 0.49	**<0.001**	-15.86	-20.27 – -11.45	**<0.001**
Baseline	0.02	-0.02 – 0.07	0.326	2.23	0.05 – 4.42	**0.045**
Trial	0.04	0.00 – 0.08	**0.036**	-10.77	-12.58 – -8.95	**<0.001**
Efficacy:Reward	0.01	-0.14 – 0.17	0.853	-9.96	-17.14 – -2.78	**0.007**
Observations	22580			18999		

225　Note: Statistically significant p-values (< 0.05) are displayed in bold. Congruency (n-i) refers to the comparison
226　between incongruent and neutral Stroop stimulus; Congruency (c-n) refers to the comparison between neutral and
227　congruent Stroop stimulus.
228

Opposing effects of expected efficacy on pupil responses. Contrary to our predictions,

we observed no effect of reward on pupillary responses to the cue, and pupil responses were

smaller (not larger) when efficacy was higher (p < .001, cf. Table S4, Fig. S2). We did not find a

significant interaction between reward and efficacy on pupil diameter. Although the effect of

efficacy on pupil responses might be difficult to reconcile with the behavioral and EEG results

(i.e., performance and ERP magnitudes both scaled positively with reward and efficacy), they

nevertheless provide evidence against the idea that our behavioral and EEG results merely reflect

changes in arousal. If this alternative explanation were true, pupil diameter—a reliable index of

arousal[39-41], previously shown to scale with uncertainty[42]—should have increased when either

reward or efficacy were high.

Influences of incentives on EEG signatures of response and feedback monitoring.

While the focus of our study was on measures of incentive processing and proactive control

allocation, we preregistered secondary hypotheses regarding the potential influence reward and

efficacy might have on neural signatures of reactive control. Specifically, we predicted that these

incentive components might enhance monitoring of response accuracy and subsequent feedback.

Contrary to this hypothesis, when examining the error-related negativity (ERN) – a negative

deflection in response-locked activity for errors relative to correct responses [43,44] (though see [45]

for ERN elicited by partial errors on correct trials)– we did not find main effects of reward or

efficacy (ps > .444) but did find a significant interaction (b = 1.52, p = .001; Fig. S3; Table S5 -

7), whereby ERN amplitude on error trials was greatest (i.e., most negative) on trials with low

reward and low efficacy (see also Table S8 for complementary analyses of midfrontal theta).

Follow-up analyses suggest that this pattern may result from different dynamics in control and

response evaluation between conditions (see Supplement, Fig. S3; Table S5 -7).

We found a different pattern of results when examining the feedback-related negativity

(FRN), which typically indexes the difference in feedback-locked activity for trials that resulted

in negative compared to positive feedback[46]. Consistent with previous findings[47-52], we found a

reliable effect of receipt vs omission of reward on FRN amplitude (b = 0.80, p <.001), and this

effect was enhanced for high reward trials (b = 0.81, p = .007; Table S9). However, in addition to

this, and contrary to the hypothesis we preregistered based on previous findings[53,54], we found

that effects of reward receipt vs omission on FRN amplitude were *reduced* for trials with high

efficacy compared to those with low efficacy (b = -0.83, p = .007; Fig. S4, Table S9). This

efficacy-related FRN finding might reflect the fact that, under conditions of low efficacy, reward

outcomes are less predictable, thus weakening predictions about forthcoming reward (see

Supplementary Discussion).

269   **Discussion**

Cognitive control is critical but also costly. People must therefore choose what type and

how much control is worth exerting at a given time. Whereas previous studies have highlighted

the critical role of expected rewards when making these decisions, our studies highlight a further

determinant of control value that is equally critical: how efficacious one perceives their efforts to

be (i.e., how much does intensifying control increase their chances of obtaining their reward).

Across two studies, we showed that participants were sensitive to both expected reward and

efficacy when determining how much control to allocate, and therefore performed best when

expecting higher levels of reward and efficacy. Study 2 further demonstrated that both incentive

components increase distinct ERPs, separately related to cue evaluation and proactive control,

providing markers of different stages of incentive processing (evaluation vs. allocation of

control). Collectively, these findings lend support to our theory that participants integrate

information relevant to determining the Expected Value of Control (EVC), and adjust their

control allocation accordingly.

Previous research has shown that people often expend more effort on a task when it

promises greater reward[7-16], but this effort expenditure has its limits. If obtaining that reward also

requires greater effort (i.e., if higher reward is also associated with greater difficulty), the

individual may decide not to invest the effort[55]. Similarly, if difficulty remains constant, but

reward becomes less contingent on effort (i.e., efficacy decreases), the individual may again

decide to divest their efforts[33,34,56,57]. The EVC theory can account for all of these phenomena,

and predicts that expected reward and efficacy will jointly determine how mental effort is

allocated (in the form of cognitive control), and that the underlying evaluation process will

unfold from initial cue evaluation to eventual control allocation. Specifically, the theory predicts

that these incentive components will be processed sequentially over multiple stages that include

initial evaluation of each component, their integration, control allocation, and execution of the

allocated control. Our behavioral and neural findings validate the predictions of this theory:

When participants expected their control to have greater reward and efficacy, we saw increased

neural activity in consecutive ERPs associated with incentive evaluation (P3b) and control

allocation (CNV), followed by increases in control (reflected in improved performance).

Our EEG results extend and clarify previous findings. First, a previous study found (like

us) that the cue-locked P3b is sensitive to the expected reward but not the expected difficulty of

the task to be performed when the target appears[27]. We varied expected efficacy while holding

expected difficulty constant, and show that varying efficacy alone is sufficient to generate

comparable increases in the cue-locked P3b as variability in expected reward. The difference

between our finding and the null result previously observed for task difficulty may be accounted

for by the fact that efficacy (like reward) has a monotonic relationship with motivational

salience, whereas difficulty does not.

Second, our results extend previous studies that linked the CNV with preparatory

attention and proactive control[58-60]. CNV amplitudes scale with a cue's informativeness about an

upcoming task[28,36,37,61,62], temporal expectations about an upcoming target[63-65], and an

individual's predicted confidence in succeeding when the target appears[66]. Critically, CNV

amplitudes also scale with the expected reward for and difficulty of successfully performing an

upcoming task[27,30,32,38], suggesting that this component reflects adjustments to proactive control

in response to motivationally relevant variables. Here, we extend this body of work by showing

that the CNV not only varies with expected efficacy (when isolated from expected difficulty) but

that, unlike the P3b, it is further modulated by the interaction between reward and efficacy (i.e.,

the expected payoff for control; Fig. 1), and predicts trial-to-trial variability in performance,

suggesting that it may index the allocation and/or execution of control based on an evaluation of

EVC.

With that said, we note that P3b amplitude was also associated with variability in

performance, though to a somewhat lesser degree. It is therefore possible that control allocation

was already being determined at this early stage of the trial but, in conjunction with past

findings[67], it is equally or perhaps more likely that the P3b indexed the initial evaluation of the

motivational relevance of cued incentives, as we originally hypothesized. Consistent with our

original interpretation, we found that the amplitude of the P3b (but not CNV) decreased over the

course of the session, potentially reflecting decreased attentiveness to the cues. It is further of

note that even both ERP components combined did not fully mediate incentive effects on

performance. This could be due to those ERPs being noisy indicators of the underlying

processes, or to dynamics following target onset that lead to additional variance as a function of

incentives that cannot be explained with proactive control. Specific predictions of the latter

account could be tested in future work explicitly designed to do so.

Our remaining findings provide evidence against alternative interpretations of these

neural results, for instance that they reflect increased arousal or overall engagement throughout

the trial. Pupil diameter, an index of arousal[40-42], was larger when participants were expecting

lower efficacy. Although this pattern was not predicted in advance, these findings are consistent

with the interpretation that pupil responses in our paradigm track arousal – induced by higher

uncertainty under low efficacy – instead of proactive control[39,42]. In contrast, the magnitudes of

the P3b and CNV increased uniformly with reward and efficacy, suggesting that these two ERPs

reflect processes related to proactive control rather than changes in arousal.

Our response- and feedback-related results further suggest that reward and efficacy

specifically increased proactive control, but not reactive control (performance monitoring; [68]) or

overall engagement. Unlike the P3b and CNV, indices of performance monitoring (the ERN and

FRN) were not enhanced with greater reward and efficacy, suggesting that these incentive

conditions were not simply amplifying the motivational salience of errors and reward outcomes.

Rather than reflecting motivational influences on control, the unique patterns of ERN and FRN

amplitudes we observed across conditions may instead provide insight into how participants

formed and updated expectations of performance and outcomes across these different

conditions[69] (see Supplemental Discussion).

Our study builds on past approaches to studying interactions between motivation and

cognitive control[9,12,16,38] by examining changes in effort allocation in response to two incentive

components that are predicted to jointly increase one's motivation. Thus, unlike studies that only

vary the expected reward for an upcoming task, our behavioral and neural findings cannot be

accounted for by general increases in drive, vigor, or arousal. Further, unlike studies that vary the

expected difficulty of an upcoming task, resulting in non-monotonic allocation of effort (the

classic inverted U-shaped function of effort by difficulty; [70,71,72]) the incentive components we

varied should only engender monotonic increases in effort. The monotonic relationship between

these incentive components and the value of control (EVC) can in fact account for the nonlinear

effect of difficulty on effort allocation: at very high levels of difficulty, a given level of control

becomes less and less efficacious. Our study therefore provides the most direct insight yet into

the mechanisms and influences of EVC per se, rather than only some of its components.

One interesting feature of our results is that participants engaged in some reasonably high

level of effort even when their efforts were completely inefficacious (0% efficacy). There are

several plausible explanations for this, including an intrinsic bias towards accuracy (or against

error commission)[73] and potential switch costs associated with the interleaved trial structure[74].

For instance, switch costs associated with control adjustments may discourage a significant drop

in control following a high efficacy trial. An even more intriguing possibility is that experiences

in the real world drive participants to have strong priors that their efforts are generally

efficacious (and practice allocating control within a certain range of expected efficacies)[75],

making it difficult for them to adjust all the way to the expectation that reward is completely

unrelated to their performance on a task.

Individual differences in expectations of efficacy may also play a significant role in

determining one's motivation to engage in individual tasks or effortful behavior at large[19,21,76-78].

Forms of amotivation, like apathy and anhedonia, are common across a variety of psychiatric and

neurological disorders, and most likely reflect deficits in the process of evaluating potential

incentive components, determining the overall EVC of candidate control signals, specifying the

EVC-maximizing control allocation, and/or executing this control. Thus, to understand what

drives adaptive versus suboptimal control, we need to find new and better ways to assess what

drives these key processing stages underlying motivated effort. By highlighting the crucial role

efficacy plays in determining whether control is worthwhile, and identifying candidate neural

signatures of the process by which this is evaluated and integrated into decisions about control

allocation, our studies pave the way towards this goal.

Method

Study 1

 Participants. 21 individuals participated in Study 1 (age: M = 21.14, SD = 5.15; 17

female). Participants gave informed consent and received partial course credits and cash ($5 to

$10, depending on their performance and task contingencies) for completing the study. The study

was approved by the university's institutional review board.

 Design and Procedure. We used a within-subject 2 (reward: high, low) x 2 (efficacy:

high, low) design. On high and low reward Stroop trials, participants saw cues that informed

them that they would receive $1.00 and $0.10 respectively on the upcoming trial (Fig. 2).

Reward levels were crossed with efficacy. On high efficacy trials, whether participants were

rewarded depended entirely on their performance (i.e., fast and accurate responses were always

rewarded—100% performance-reward contingency, cf. Table S10 for summary statistics on

criterion-performance and reward). On low efficacy trials, rewards were not contingent on

participants' performance; instead, rewards were sampled from a rolling window (size = 10) of

reward rate in high efficacy trials to match reward rates across efficacy levels. This approach

parallels and builds on recent work examining the influence of performance contingency in the

domain of motor control (where individuals simply needed to respond quickly [56,57]), but

importantly our task required participants engage cognitive control in order to be fast while also

overcoming a prepotent bias to respond based on the color word.

 Participants first completed three practice blocks. In the first practice block (80 trials),

participants learned the key-color mappings by indicating whether the stimulus XXXXX was

displayed in red, yellow, green, or blue (using D, F, J, K keys; counterbalanced across

participants). In the second practice block (16 trials), participants learned to associate cues with

different reward and efficacy levels (Fig. 2). Finally, participants completed a practice block (64

trials) that resembled the actual task. Incentive instructions read as follow: "In the next block,

you again need to press the key associated with the color of the text on the screen. From now on,

you will have the opportunity to get an additional bonus based on how you perform the task. You

will be told on each trial how performance could affect your bonus. Before each word appears,

you will see an image that tells you 2 things: (1) the amount of reward you could earn and (2)

whether or not your performance will determine if you get that reward. When you see one of the

two images above, you can get a low ($0.10) or high reward ($1.00) if you respond quickly and

accurately. The two images above ALSO indicate that you can get a low or high reward, BUT the

gray hands indicate that your reward will have NOTHING to do with how quickly or accurately

you perform. Instead these rewards will be determined randomly. As long as you provide some

response on that trial, you have some possibility of getting a low ($0.10) or high ($1.00) reward.

Although these rewards will be random, you will be just as likely to get a reward on these trials

as the trials with the blue hands."

Once familiar with the task, participants were introduced to the performance bonus and

completed the main task. Performance bonus instructions read as follows: "From now on, you

will continue performing the same task, but it will not be practice. Every trial can influence your

ultimate bonus. At the end of the session, we will choose 10 trials at random and pay you an

additional bonus based on the total amount of money you earned across those 10 trials. This

means you have the opportunity to earn up to 10 additional dollars on this task." On an

individual trial, cues were presented for 1500 ms, followed by a 250 ms fixation cross, followed

by a target. To increase task difficulty, the response deadline for each trial was 750 ms but

reaction times were recorded as long as a response was made within 1000 ms after Stroop

stimulus onset. Immediately after a response was made, feedback was presented for 750 ms. If a

response was made before 1000 ms, the remaining time was added to the inter-trial-interval, in

which a fixation cross was displayed for 500 ms to 1000 ms. The main task consisted of four

blocks of 75 trials each (except for the first 14 participants, who completed 80 trials per block).

After completing the task, participants completed questionnaires that were administered

for analyses unrelated to the present studies. At the end of the experiment, ten trials were

randomly chosen and participants received a bonus that was the summed outcomes of those

trials.

Study 2

Participants. Before data collection, we conducted a sensitivity analysis, which indicated

that a sample size of N = 50 will provide 80% statistical power to detect effect sizes of d = 0.3 or

larger. We preregistered our sample size, task design, and analysis plan (osf.io/35akg) and

recruited 53 undergraduate students (age M = 20.18, SD = 2.30; 15 male; 38 female). We

excluded from all analyses 9 participants who performed poorly on the Stroop task (i.e., below

60% accuracy on high efficacy trials), leaving 44 participants in the final sample. Technical

issues also prevented us from recording clean pupil data from 7 participants in this final sample,

leaving 37 participants in the pupil analyses. Participants gave informed consent and received

partial course credits and cash ($5 to $10, depending on their performance and task

contingencies) for completing the study. The study was approved by the university's institutional

review board.

Design and Procedure. The behavioral paradigm and procedures were similar to those in

Study 1. In addition, we recorded EEG and pupillary responses and changed the following task

parameters: No fixation cross was presented during the cue-target interval; that is, the cue

transitioned directly to the target to avoid inducing visual evoked potentials that would influence

the amplitude of the CNV; we added a post-response blank screen (800 ms) to dissociate

response evaluation and feedback processing; participants performed eight blocks of 75 trials

each. We also changed the appearance of the cues as depicted in Fig. 2. We selected putatively

equiluminant colors (grey: C:30.98, M: 19.61, Y: 20.78, K: 0; pink: C: 9.8, M: 42.75, Y: 0, K: 0,

blue: C: 61.96, M: 0, Y: 0.39, K: 0). Luminance (computed post-hoc for the 4 cue stimuli as a

whole) was similar across the individual cue stimuli (low efficacy low reward 1.4199 cd/m^2, low

efficacy high reward: 1.3980 cd/m^2, high efficacy low reward: 1.3829 cd/m^2, high efficacy high

reward: 1.3577 cd/m^2) and approximately 1.4 cd/m^2. We used the same stimuli throughout and

did not counterbalance. Note that the small deviations in luminance do not correspond to the

observed patterns in pupil dilation.

EEG Recording and Preprocessing. EEG data were recorded from 32 Ag/AgCl

electrodes embedded in a stretched Lycra cap (Electro-Cap International, Eaton, OH) at a

sampling rate of 512 Hz. Impedances were kept below 5 kΩ during recording. Vertical

electrooculography (VEOG) was recorded from two electrodes placed above and below the right

eye, respectively. Signals were amplified using ANT TMSi Refa8 device (Advanced Neuro

Technology, Enschede, The Netherlands), grounded to the forehead, and referenced online to the

average of all electrodes. Offline, the EEG data were re-referenced to the average of electrodes

placed on the two earlobes. During preprocessing, continuous data were high-pass filtered at 0.1

Hz (12 dB/oct, zero phase-shift Butterworth filter) and decomposed into independent

components using the infomax independent component analysis algorithm implemented in

EEGLAB [79]. We inspected the independent components and used the ICLabel EEGLAB

extension [80] to help identify and remove blink and noise components. We used ICLabel, an

extension made by EEGLAB's developers [80], to identify ICs that were classified as eye or muscle

Ics. The algorithm assigns probabilities to 7 categories: brain, muscle, eye, heart, line noise,

channel noise, other. The extension also provides an interface (see

https://sccn.ucsd.edu/wiki/ICLabel) that shows the topography, time course, power spectrum, and

ERP-image (sorted by trial number) of each IC. Guided by ICLabel's classification algorithm,

for each participant, we excluded, on average, 2 to 3 eye frontal components (e.g., blinks,

vertical/horizontal eye movements) and 1 to 3 muscle components (usually Ics that showed

maximal activity at temporal sites). Ics were considered blinks or eye movement Ics and

excluded if (1) there was a high probability (> 85% & < 1% brain) of them being classified as an

eye-related IC *and* (2) the IC time course activity resembled blinks or vertical/horizontal eye

movements (e.g., activity that looks like step-functions) *and* (3) the topography showed maximal

activity at frontal sites (see https://sccn.ucsd.edu/wiki/ICLabel for an example of such an IC). Ics

were considered as muscle Ics and excluded if (1) there was a high probability (> 95% muscle &

< 1% brain) of them being classified as a muscle IC *and* (2) the power spectrum resembled noise

or muscle activity more than neural activity (i.e., power peaks at higher frequencies rather than

lower frequencies).

Pre-processed EEG data were epoched relative to the onset of four events: cue (-200 to

1500 ms), stimulus (-200 to 800 ms), response (-200 to 800 ms), and feedback (-200 to 800 ms).

All epochs were baseline-corrected using the mean amplitude before event onset (-200 to 0 ms),

and single-trial baseline activity was included as covariates in the statistical models [81]. Epochs

containing artifacts, with amplitudes exceeding ±150 µV or gradients larger than 50 µV, were

excluded from further analysis. We focused our analyses on these event-related potentials,

quantified agnostic of condition with ROIs and time-windows determined a priori based on the

literature [82]: cue-locked P3b (250 to 550 ms, averaged across Pz, P3 and P4 [27,83]), cue-locked late

contingent negative variations (CNV; 1000 to 1500 ms post-cue, i.e., -500 to 0 ms pre-target,

averaged across Fz, FCz, and Cz [30]), response-locked correct- and error-related negativities

(CRN/ERN; 0 to 100 ms [43,84]), and feedback-locked feedback-related negativity (FRN;

quantified peak-to-peak at FCz as the difference between the negative peak between 250 to 350

ms and the positive peak in the preceding 100 ms from the detected peak [85]). All EEG data

preprocessing were performed using custom MATLAB scripts using EEGLAB functions (cf.[86]).

For each ERP (except the FRN that was quantified peak-to-peak), we averaged the amplitudes

within the specified time window separately for each epoch and exported these single-trial values

for further analyses in R.

Pupil Recording and Preprocessing. Pupil data were recorded using the EyeLink 1000

Desktop Mount eye tracker (SR Research, Mississauga, Ontario, CA). The EyeLink system was

configured using a 35-mm lens, 5-point gaze location calibration, monocular right-eye sampling

at 500 Hz, and centroid fitting for pupil area recordings. All data processing was performed using

custom R and Python scripts. Blink artifacts detected using the EyeLink blink detection

algorithm were removed and subsequently interpolated linearly from -200 ms prior to and post-

blink onset. Finally, we down-sampled the continuous data to 20 Hz and z-score normalized

(within-subject) each data point by subtracting the mean pupil size of all data points and then

dividing by the standard deviation.

Analysis

Classical frequentist statistical analyses were performed in R. The design was entirely

within-subjects; unless stated otherwise, all estimates and statistics were obtained by fitting

mixed-effects (multilevel or hierarchical) single-trial regression models (two-levels: all factors

and neurophysiological responses for each condition were nested within participants) with

random intercepts and slopes (unstructured covariance matrix) using the R package lme4 [87].

Random effects were modeled as supported by the data, determined using singular value

decomposition, to avoid overparameterization and model degeneration [88,89]. All analysis code for

reproducing the reported results can be found on OSF: osf.io/35akg. All continuous regressors

were within-subject mean-centered. Two-tailed probability values and degrees of freedom

associated with each statistic was determined using the Satterthwaite approximation

implemented in lmerTest [90]. We inspected Q-Q-plots for violations of normally distributed

residuals and assured that there was no problematic collinearity between regressors. Wherever

relevant, we also reported split-half reliabilities (correlations) based on odd/even-numbered

trials.

Behavioral. In both samples, accuracy was analyzed using generalized linear mixed

effects models with a binomial link function. The predictors or regressors were reward, efficacy,

their interaction, congruency, and trial number. Accurate RTs were modeled using linear mixed

effects models and the same predictors, and z-scored within subject for visualization, only. For

trial-by-trial predictions of performance with ERPs, the behavioral models were extended by

including P3b and CNV amplitudes z-scored within participants as predictors. In separate

analyses we confirmed that similar results are obtained using a step-wise approach, analyzing

residuals of the behavioral model with CNV and P3b as predictors or analyzing incentive effects

on residuals from a model with ERPs but without incentive conditions, suggesting partially non-

overlapping variance. Trial number (Trial) was added to these and all other models as a nuisance

regressor to account for trends over time, such as learning or fatigue effects (cf. Fig. S5).

EEG. Full linear mixed effects models for all ERPs included reward, efficacy, and their

interactions, as well as trial as predictors. For each ERP, we regressed out the baseline activity at

the same electrode sites [81]. This approach accounts for variability prior to the effect of interest

that can otherwise induce spurious effects due to noise or spill-over from previous stages of the

trial. Although noise in the baseline is assumed to average to zero when using traditional ERP-

averaging approaches, this assumption does not necessarily hold for single-trial analyses. To

address these potential spurious effects, we follow recommendations to include the baseline as a

nuisance regressor [81]. In the CNV analyses, we further controlled for variation in the preceding

P3b amplitude, because here, likewise, due to the autocorrelation of the signals, larger P3b

amplitudes (a positive-going ERP) would require larger subsequent CNV amplitudes (a negative-

going ERP) to counteract the larger positive P3b amplitudes and reach the average levels of CNV

amplitude. We compared the results with and without inclusion of the P3b as a regressor and the

patterns of results were qualitatively similar. For the ERN analyses, we included as predictors

target congruency, response accuracy, and interactions with incentives. For FRN analyses, we

included as predictors the outcome (whether trials were rewarded or not), and interactions with

incentives.

Pupil Response Model and Analysis. We modeled the pupillary response as a linear

time-invariant system comprising of a temporal sequence of "attentional pulses" [91]. As with

methods used in functional magnetic resonance imaging analysis to deconvolve blood-oxygen-

level-dependent signals, this approach allows us to deconvolve temporally overlapping pupil

responses and estimate the magnitude of the pupil response associated with each event.

Following previous work [91,92], each event (e.g., fixation, cue, target, response, feedback) was

modeled as a characteristic impulse response approximated by an Erlang gamma function, $h =$

$t^n e^{\left(\frac{-nt}{tmax}\right)}$, where the impulse response h is defined by t, the time since event onset, t_{max}, the

latency of response maximum, and n, the shape parameter of the Erlang distribution. Guided by

previous empirical estimates [93], we set $n = 10.1$ and $t_{max} = 1.30s$. We used the pypillometry

python package to estimate the magnitude (i.e., coefficient) of the pupil response for each event

[94], and we z-scored normalized these coefficients (within-subject) before fitting mixed-effects

models to evaluate whether the coefficients varied as a function of the experimental

manipulations (i.e., efficacy, reward, target congruency, and feedback).

570   **Data Availability.** The datasets generated and analyzed during the current study are

571   available under osf.io/35akg.

572   **Code Availability.** Scripts for all analyses are available osf.io/35akg.

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Author Contributions

The authors conceived the study jointly. HL collected the data. RF and HL analyzed the data and

wrote the manuscript. All authors edited the manuscript.

Competing Interests

The authors declare no competing interests.

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