



<b>3a</b> Plan administrator's name and address (If same as plan sponsor, enter "Same")	<b>3b</b> Administrator's EIN
	<b>3c</b> Administrator's telephone number

<b>4</b> If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report below: <b>a</b> Sponsor's name	<b>b</b> EIN
	<b>c</b> PN

<b>5</b> Preparer information (optional) <b>a</b> Name (including firm name, if applicable) and address	<b>b</b> EIN
	<b>c</b> Telephone number

<b>6</b> Total number of participants at the beginning of the plan year	<b>6</b>
<b>7</b> Number of participants as of the end of the plan year (welfare plans complete only lines <b>7a</b> , <b>7b</b> , <b>7c</b> , and <b>7d</b> )	
<b>a</b> Active participants	<b>7a</b>
<b>b</b> Retired or separated participants receiving benefits	<b>7b</b>
<b>c</b> Other retired or separated participants entitled to future benefits	<b>7c</b>
<b>d</b> Subtotal. Add lines <b>7a</b> , <b>7b</b> , and <b>7c</b>	<b>7d</b>
<b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	<b>7e</b>
<b>f</b> Total. Add lines <b>7d</b> and <b>7e</b>	<b>7f</b>
<b>g</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	<b>7g</b>
<b>h</b> Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	<b>7h</b>
<b>i</b> If any participant(s) separated from service with a deferred vested benefit, enter the number of separated participants required to be reported on a Schedule SSA (Form 5500)	<b>7i</b>

<b>8</b> Benefits provided under the plan (complete <b>8a</b> and <b>8b</b> , as applicable)	
<b>a</b> <input type="checkbox"/> Pension benefits (check this box if the plan provides pension benefits and enter the applicable pension feature codes from the List of Plan Characteristics Codes printed in the instructions):	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>b</b> <input type="checkbox"/> Welfare benefits (check this box if the plan provides welfare benefits and enter the applicable welfare feature codes from the List of Plan Characteristics Codes printed in the instructions):	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

<b>9a</b> Plan funding arrangement (check all that apply)	<b>9b</b> Plan benefit arrangement (check all that apply)
(1) <input type="checkbox"/> Insurance	(1) <input type="checkbox"/> Insurance
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(3) <input type="checkbox"/> Trust	(3) <input type="checkbox"/> Trust
(4) <input type="checkbox"/> General assets of the sponsor	(4) <input type="checkbox"/> General assets of the sponsor

FOR INFORMATION PURPOSES ONLY, DO NOT USE FOR FILING

0 2 0 8 0 0 0 2 0 C



**10** Schedules attached (Check all applicable boxes and, where indicated, enter the number attached. See instructions.)

**a Pension Benefit Schedules**

- (1)  **R** (Retirement Plan Information)
- (2)  **B** (Actuarial Information)
- (3)  **E** (ESOP Annual Information)
- (4)  **SSA** (Separated Vested Participant Information)

**b Financial Schedules**

- (1)  **H** (Financial Information)
- (2)  **I** (Financial Information -- Small Plan)
- (3)  **A** (Insurance Information)
- (4)  **C** (Service Provider Information)
- (5)  **D** (DFE/Participating Plan Information)
- (6)  **G** (Financial Transaction Schedules)

FOR INFORMATION PURPOSES ONLY, DO NOT USE FOR FILING

0 2 0 8 0 0 0 3 0 D

