

DEPARTMENT OF LABOR**Pension and Welfare Benefits Administration****DEPARTMENT OF THE TREASURY****Internal Revenue Service****PENSION BENEFIT GUARANTY CORPORATION**

RIN 1210-AA52

Revision of Annual Information Return/Report

AGENCIES: Pension and Welfare Benefits Administration, Labor; Internal Revenue Service, Treasury; Pension Benefit Guaranty Corporation.

ACTION: Notice of adoption of revised forms.

SUMMARY: This document announces the adoption of the revised annual return/report forms (the Form 5500 Series) filed for employee pension, welfare and fringe benefit plans under the Employee Retirement Income Security Act of 1974, as amended (ERISA), and the Internal Revenue Code of 1986, as amended, (the Code). The Form 5500 Series is the principal source of information and data concerning the operation, funding, assets and investments of pension, welfare and fringe benefit plans, and also serves as the primary means by which the operation of plans can be monitored by participants, beneficiaries and the general public. The form revisions are being adopted concurrent with the implementation of a new computerized ERISA Filing Acceptance System (EFAST) to improve the forms and simplify and expedite the receipt and processing of the Form 5500 Series by relying on computer scannable forms and electronic filing technologies. The revised forms affect the financial and other information required to be reported and disclosed by employee benefit plans. The Form 5500-EZ is not discussed in this notice.

DATES: Effective Date: This notice is effective on February 2, 2000.

Applicability Date: The revised forms apply for plan years beginning on or after January 1, 1999.

FOR FURTHER INFORMATION CONTACT:

George M. Holmes, Jr. or Eric A. Raps, Pension and Welfare Benefits Administration (PWBA), U.S. Department of Labor, (202) 219-8515, for questions relating to the Form 5500 and Schedules A, C, D, G, H and I as well as the reporting requirements under Title I of ERISA; James Flannery, Internal Revenue Service (IRS), (202) 622-6214, for questions relating to

Schedules B, E, F, P, R, T and SSA as well as questions relating to the reporting requirements under Title II of ERISA; James J. Bloch, Pension Benefit Guaranty Corporation (PBGC), (202) 326-4080 (x 3530) for questions relating to Schedule B and line 9 of Schedule R as well as questions relating to the reporting requirements under Title IV of ERISA. For further information on an item not mentioned above, contact Mr. Holmes. The telephone numbers referenced above are not toll-free numbers.

SUPPLEMENTARY INFORMATION:**I. Background**

Under part 1 of Title I of ERISA, Title IV of ERISA, and the Code, administrators of pension and welfare benefit plans subject to those provisions are required to file returns/reports annually concerning, among other things, the financial condition and operations of employee benefit plans. Employers sponsoring certain fringe benefit plans and other plans of deferred compensation that are not subject to Title I of ERISA are also required under the Code to file certain information annually with the IRS. These annual reporting requirements are satisfied generally by filing the Form 5500 Series in accordance with its instructions and the related regulations.¹

The Form 5500 Series is the principal source of information and data concerning the operation, funding, assets and investments of more than 800,000 pension and welfare benefit plans with assets estimated at \$4.3 trillion. Accordingly, the Form 5500 Series information and data necessarily constitute an integral part of each agency's enforcement, research and policy development programs and are a source of information and data for use by other federal agencies, Congress and the private sector in assessing employee benefit, tax, and economic trends and policies. The returns/reports also serve as the primary means by which the operations of plans can be monitored by participants, beneficiaries and the general public.

On September 3, 1997, the Department of Labor (Department), IRS and the PBGC (collectively the Agencies) published in the **Federal Register** (62 FR 46556) a notice of

proposed revisions to the Form 5500 Series. The Agencies' proposal replaced the Form 5500, Form 5500-C and Form 5500-R with one Form 5500 intended to streamline the report and the methods by which it is filed. Concurrent with the development of the new Form 5500, the Agencies also developed a new computerized system to process Form 5500 returns/reports (the ERISA Filing Acceptance System or "EFAST"). The new computerized processing system is designed to simplify and expedite the receipt and processing of the new Form 5500 by relying on computer scannable forms and electronic filing technologies. The development of the new forms in conjunction with the EFAST system is intended to streamline and improve the Form 5500 Series and lower the administrative burdens and costs incurred by employee benefit plans that file the Form 5500 Series each year.

A public hearing on the proposed forms revisions was held on November 17, 1997, and written comments on the proposal were received until the public record was closed on December 3, 1997. The Agencies received oral testimony and over 60 written public comments from employer groups, employee representatives, financial institutions, service organizations and others on the form streamlining proposal. On February 4, 1998, the Department announced that, in response to public comments, the implementation of the new Form 5500 would be delayed until the 1999 plan year.

Public reaction to the September 3, 1997 Notice of Proposed Forms Revisions was generally supportive of the new streamlined structure of the Form 5500 Series. The Agencies decided to adopt the new forms largely as proposed, but, in response to public comments, made various adjustments to the proposed forms and instructions where consistent with the purposes of the Form 5500 and the objectives of the streamlining project. A revised version of the new Form 5500 was submitted to the Office of Management and Budget (OMB) for approval under the Paperwork Reduction Act (PRA) and a Notice was published in the **Federal Register** on June 24, 1998 (63 FR 34493) which provided a 30-day opportunity to submit comments to OMB on the new Form 5500 submission. At the same time, the revised Form 5500 was made available on PWBA's internet site (<http://www.dol.gov/dol/pwba>) as part of the Agencies' commitment to make information about the new forms available to plans and their service providers at the earliest opportunity. Following its PRA review, OMB gave

¹ For purposes of Title I of ERISA, the filing of the Form 5500 Series, in accordance with its instructions and related regulations, by the administrator of a pension or welfare benefit plan constitutes compliance with the limited exemption and alternative method of compliance prescribed in 29 CFR part 2520, promulgated in accordance with the authority granted by the Secretary of Labor under sections 104(a) and 110 of ERISA.

conditional PRA approval to the new Form 5500 on August 26, 1998.²

The new Form 5500 Series replaces the Form 5500 and the Form 5500-C/R with a single new Form 5500 with basic identifying information for use by all filers and 13 schedules focused on particular subjects and/or filing requirements—five pension schedules, seven financial schedules, and one fringe benefit schedule. The pension schedules are: Schedule B (Actuarial Information); Schedule E (ESOP Annual Information); Schedule R (Retirement Plan Information); Schedule T (Qualified Pension Plan Coverage Information); and Schedule SSA (Annual Registration Statement Identifying Separated Participants With Deferred Vested Benefits). The financial schedules are: Schedule A (Insurance Information); Schedule C (Service Provider Information); Schedule D (DFE/Participating Plan Information); Schedule G (Financial Transaction Schedules); Schedule H (Financial Information); Schedule I (Financial Information-Small Plan); and Schedule P (Annual Return of Fiduciary of Employee Benefit Trust). The fringe benefit schedule is Schedule F (Fringe Benefit Plan Annual Information Return). The new schedules are Schedules D, H, I, R and T; the schedules that have been revised are Schedules A, C and G; and the schedules that have either not been revised or have undergone minimal changes are Schedules B, E, F, P and SSA.

The revisions being adopted to the Form 5500 annual return/report provide plans using simple tax qualification structures and financial operations with correspondingly streamlined annual reporting requirements and also target reporting requirements so that welfare plans generally complete fewer items than pension plans and small plans generally complete fewer items than large plans. The Agencies have

² The OMB conditions were described in the **Federal Register** on December 10, 1998 (63 FR 68370) in the preamble to the proposed amendments to the Department's reporting regulations. The conditions were: (i) consolidating the separate reporting of long-term and short-term corporate debt instruments into one line item for all corporate debt instruments on the Schedule H (Income and Expense Statement), (ii) adding a clarifying instructional statement to the text on line 5 of Schedule R, (iii) bolding instructional text on line 3 of Schedule T, (iv) adding a statement to the Schedule C instructions that trades and businesses (whether or not incorporated) are "persons" required to be reported as service providers, and (v) clarifying the instructions for line 3b(2) of Schedule H regarding the inapplicability of the "short plan year" provisions of 29 CFR 2520.104-50 to Direct Filing Entity (DFE) Form 5500s filed for group insurance arrangements and investment entities described in 29 CFR 2520.103-12 (103-12 IEs).

developed a reference guide, which is included in the instructions for the new Form 5500, that is designed to provide general information and guidance on completing the revised Form 5500 and schedules entitled: "Quick Reference Chart Form 5500 Schedules and Attachments."

As part of the development of the revised Form 5500 Series, the Department also published in the **Federal Register** (63 FR 68370), on December 10, 1998, proposed amendments to the annual reporting regulations (Part 2520 of Chapter XXV of Title 29 of the Code of Federal Regulations) to implement under Title I of ERISA certain of the proposed changes to the Form 5500 Series. A number of other technical amendments to the regulations were proposed in order to update certain of the reporting and disclosure regulations. In the December 10, 1998 Notice, the Department stated that the public comments submitted in response to the September 3, 1997 Notice of Proposed Forms Revisions would be treated as part of the public record for the Notice of Proposed Rulemaking, and, to the extent those comments included information relevant to the proposed regulatory amendments, the Department would treat those comments as comments on the Notice of Proposed Rulemaking to avoid the need to submit duplicate public comments. The Department received four comments in response to the December 10, 1998 Notice. A notice of final rulemaking regarding those regulatory amendments will be published separately by the Department in the **Federal Register**.

The Agencies also published a **Federal Register** notice, on June 28, 1999 (64 FR 34686) soliciting public comments on the draft computer scannable versions of the new forms developed by two vendors who were competing for the contract to design and build the EFAST system. Specifically, contracts were awarded to two national computer firms to competitively develop a computerized form processing system and related computer scannable versions of the new Form 5500 Series. The Agencies subsequently selected one as the vendor to operate EFAST and process the new Form 5500 returns/reports.

As noted above, EFAST has been designed to simplify and expedite the receipt and processing of the Form 5500 Series by relying on computer scannable forms and electronic filing technologies. In that regard, the 1999 Form 5500 is available in two different computer scannable formats; both have the same data elements but provide filers with a

choice of formats for preparing the Form 5500. The first format is a "machine print" format under which the filer uses a computer and software to enter data and complete the form. Upon completion of the data entries under this format, the completed forms and any required attachments may be filed through electronic means (provided the EFAST electronic specifications are met and a copy with all required signatures is retained as part of the plan's records), or the filer may print a paper copy, and after the required signatures have been affixed, mail the return/report to the address specified in the Form 5500 instructions under the heading labeled "Where To File." The completed machine print Form 5500 return/report can be read by participants and beneficiaries, and the EFAST system will collect the data by scanning bar codes printed out at the bottom of each page. The second format is a "hand print" format under which the filer enters data by hand or typewriter on specially designed green drop-out ink forms and the EFAST system uses optical character recognition technology to scan the hand or typewritten data entries. The "hand print" format can be filed only by mail to the address specified in the Form 5500 instructions under the heading labeled "Where To File."

The Agencies are printing in this notice informational copies of the hand print 1999 Form 5500 and schedules, and the instruction package for the 1999 Form 5500 return/report. However, because of the new technologies being used by the Agencies for processing the revised Form 5500, **Federal Register** copies of the Form 5500 and schedules will not be acceptable for filing. Informational copies of the hand print forms, machine print forms and the instruction package will also be posted on the Department's web page at www.dol.gov/dol/pwba. The 1999 Form 5500 package (hand print green drop-out ink forms and instructions) will be distributed to employee benefit plan filers in the same manner as in prior years. Refer to the EFAST web page at www.efast.dol.gov beginning in late March 2000 for information on obtaining the machine print forms and related software.

II. Summary of Comments on Proposed Forms

In addition to a number of general comments relating to the statutory and regulatory annual reporting scheme, the Agencies received a number of comments relating to specific elements of the proposed revisions to the Form 5500. Upon consideration of all the

written comments and the record of the public hearing, as well as the Agencies' respective administrative, enforcement and informational requirements, the Agencies were unable to adopt all of the public suggestions and recommendations regarding revisions to the annual return/report. However, in an effort to facilitate both compliance with the annual reporting requirements and the processing of annual returns/reports, the Agencies have in response to public comments made certain changes to the forms and clarifications to the instructions accompanying the forms. The following is a summary of the major comments received by the Agencies which have been organized on a subject matter basis.

A. Annual Reporting Scheme

Some commentators recommended that Form 5500 return/report filers should not be required to report each year various information that was reported on the prior year's Form 5500 if the information remains unchanged. Other commentators recommended that certain information should not be required to be reported, but, instead, should be required to be maintained as part of the plan's records and provided to the Agencies only in response to a specific request for the information. The Agencies believe that adopting these recommendations would make it more difficult for the Agencies to carry out their enforcement, research and other responsibilities and would diminish the value of the Form 5500 as a disclosure document for plan participants and beneficiaries. The Agencies, therefore, have not adopted these recommendations. A few commentators recommended changes to the Form 5500 that would eliminate or modify reporting requirements or other features of the Form 5500 that, in the Agencies' view, are mandated by statute or regulations. The Agencies, accordingly did not adopt these changes.

B. Form 5500

1. Restructuring of the Form 5500 and Elimination of the Form 5500-C/R. In general, the comments were positive as to the restructuring of the Form 5500 Series, including the elimination of Form 5500-C/R. The Agencies, accordingly, have decided to adopt the new structure of the forms largely as proposed. However, several of the new schedules added as part of the proposal have been re-labeled to be consistent with the general practice in the current Form 5500 of using a single alphabetic identifier for schedules, i.e., Schedule FIN (Financial Information) is now Schedule H (Financial Information),

Schedule FIN-SP (Financial Information-Small Plan) is now Schedule I (Financial Information-Small Plan), and Schedule PEN (Pension Plan Information) is now Schedule R (Retirement Plan Information). Further, the Schedule Q (Qualified Pension Plan Coverage Information) was re-labeled as Schedule T (Qualified Pension Plan Coverage Information) to avoid confusion with the Schedule Q introduced by the IRS for the Form 5300 Series.

2. Financial Reporting for Large and Small Plans. Several commentators requested that the Agencies require small plans (plans that previously were eligible to file the Form 5500-C/R) to report the same financial information that is required of large plans (plans that previously filed the Form 5500), or, in the alternative, require that small plans continue to report the financial information that is now contained in the current Form 5500-C. Other commentators suggested that the 100 participant threshold for determining whether a plan is "large" or "small" should be increased, for example, to 150 or 200 participants. With respect to the first comment, the Agencies concluded that significantly expanding the financial reporting for small plans would be inconsistent with a principal objective of this project which was to simplify and streamline the information collected on the Form 5500. Further, the Agencies believe that the financial reporting by small plans in the new Form 5500 contains much of the financial information on the Form 5500-C (lines 27 and 28) while providing improved disclosures over the current Form 5500-C. With respect to the second comment, the extension of the reporting threshold to a 200 participant threshold would expand the number of small plan filers by approximately 45,000 plans. In light of the fact that such a change may require legislation, and because the Agencies would need to more fully explore and consider the consequences of such an extension, the Agencies did not alter the current rules regarding the 100 participant threshold.

3. Preparer Identification. Several commentators indicated that it was not clear how filers would comply with the proposed requirement to identify the "preparer" of the Form 5500 because many persons may be involved in the collection and preparation of information reported on the Form 5500 return/report. The commentators asked for specific instructions regarding this requirement if it were to be maintained in the final form. In the alternative, a commentator asked that the "preparer" requirement be replaced with

authorization for a party to be designated as an official contact to discuss filing errors. The Agencies agree that it may be difficult to identify a single preparer of the Form 5500 for many plans, and accordingly, have changed the item so that it is optional and allows a filer to designate the person or entity that the filer believes was principally responsible for the preparation of the annual return/report.

4. Multiple Signature Requirements.

Several commentators questioned the need for multiple signatures on the Form 5500 return/report. In response, the Agencies have clarified the instructions for the Title I and II signature requirements for administrators and employers on the return/report and the IRS eliminated the employer signature requirement from the Schedule T. The other signatures required on the return/report (independent qualified public accountant's signature, enrolled actuary signature on Schedule B, trustee signature on Schedule P, and administrator signature on Schedule SSA) serve independent purposes such that it is not currently feasible to eliminate these signatures or consolidate them onto a single place on the form.

5. Elimination of Certain Compliance and Disclosure Questions.

Several commentators suggested that the proposed elimination of certain compliance and disclosure questions may adversely affect plan participants. Specific areas identified included the following.

First, commentators questioned the proposed elimination of the reporting of the number of active participants who are fully vested, partially vested and nonvested. The Agencies did not reinstate these questions because the subgrouping of active participants by fully vested, partially vested and nonvested was not widely used by the Agencies, was a source of confusion for many filers, was duplicative of certain information reported on Schedule B, and was not required under the current or revised Form 5500 for the small plan filers which comprise the majority of all return/report filers. Further, to the extent individual participants want vesting information regarding their own benefits, they generally can obtain an individual benefit statement from their plan administrator.

Second, commentators questioned the proposed elimination of "yes/no" questions on plan amendments and distribution of summaries of material modifications (SMMs). Under Title I of ERISA, plan administrators must automatically furnish a notice to

participants and beneficiaries of material modifications to the plan or changes in the information required to be included in the summary plan description (SPD) that were adopted during the reporting year. These notices typically must be furnished to participants and beneficiaries before the plan's Form 5500 return/report would be filed and available to participants and beneficiaries. Accordingly, participants and beneficiaries should have received a notice regarding the plan amendment before they ordinarily would have access to the answers to these "yes/no" questions on the form. Also, the Department has developed an ERISA Compliance Quick Checklist (to be included in the Form 5500 instruction package but not required to be filed with the government) that makes specific reference to these SPD/SMM requirements. The Department, accordingly, has not reinstated these questions.

Third, commentators asked that the Agencies reinstate the question for small plan filers on whether 20% or more of plan assets are held in a single investment and the question for all filers on compliance with fidelity bonding requirements. The Agencies decided to reinstate questions on these subjects because they serve important enforcement and disclosure functions and provide important protections to participants and beneficiaries.

6. Delay of Effective Date. In response to comments, the Agencies postponed the implementation year for the new forms from the 1998 plan year until the 1999 plan year. Thus, the earliest filing due date for returns/reports using the new forms for plans with calendar year plan years is July 31, 2000. (See below for a discussion of the transitional rules and special filing due date rules for common or collective trusts (CCTs) and pooled separate accounts (PSAs) electing to file as direct filing entities (DFEs)).

7. Uniform Method to Count Plan Participants. Several commentators noted that numerical counts of plan participants were required on several different schedules using several different counting formulas. One commentator suggested that proposed Form 5500 (Line 4), Schedule B (Line 2b), Schedule PEN (Lines 1a, 1b, and 1c), and PBGC Form 1 (Line 13) be revised to permit a plan administrator to provide the same participant count for each item. Another commentator suggested that all the requested information be in one place on the form. In response, the Agencies note that the different participant counts are used for different purposes and thus are difficult

to make consistent. In an effort to clarify and simplify these questions, however, the Agencies decided to consolidate most of the participant count questions onto the Form 5500 instead of the various schedules (with the exception of certain questions on the Schedule B which are certified to by the enrolled actuary and certain questions on Schedule T which are unique to the application of the qualified plan minimum coverage requirements), and to return, in general, to the format for participant count questions used currently on the Form 5500. The Agencies have also attempted to clarify the accompanying instructions.

C. Schedule A (Insurance Information) and Other Reporting on Insurance Products

1. Policy Year vs. Plan Year

Reporting. Several commentators asked the Department not to adopt the proposed change to require Schedule A reporting of insurance contracts on a plan year basis. The present rule allows reporting on a contract or policy year basis as an alternative to a plan year basis. The commentators indicated that plan year reporting would require a substantial revision of existing recordkeeping systems while not providing better information on the insurance contracts being reported. Two commentators, however, stated that the proposed change could help in coordinating financial information on plan investments provided by banks and insurance companies. The Department proposed the change to enable better coordination of information on the Schedule A regarding individual contracts with aggregate investment and benefit payment information on the Form 5500 financial statements (which is reported on a plan year basis). In view of the complexities and costs attendant to the proposed change, the Department has decided to retain the option of contract or policy year reporting on the Schedule A.

2. Insurance Company

Noncompliance with Obligation to Provide Necessary Information to Plan Administrators. Several commentators described difficulty obtaining information (particularly fee and commission-related) from insurance companies. They expressed concern about requiring any new information on the Schedule A (such as the new requirement to report insurance company employer identification numbers (EINs) and National Association of Insurance Commissioners (NAIC) codes) because they expected that the new requirements would exacerbate the current problem. It is the

view of the Department that compliance with annual reporting requirements requires the filing of complete, accurate and timely annual returns/reports, which includes the information required to be reported on the Schedule A. Accordingly, plan administrators are obliged to take reasonable and prudent steps to secure the necessary Schedule A information. In this regard, it should be noted that, with respect to the obligation of insurance carriers to furnish Schedule A information, ERISA section 103(a)(2) specifically provides in pertinent part that, if some or all of the information necessary to enable the administrator to comply with the requirements of Title I of ERISA is maintained by an insurance carrier or other organization which provides some or all of the benefits under a plan or holds assets of the plan in a separate account, such carrier or other organization is required to transmit and certify the accuracy of such information to the administrator within 120 days after the end of the plan year. The current instructions for the Schedule A state that if necessary information is missing because of an insurer's refusal to provide the information, the administrator should complete the Schedule A, to the extent possible, and file a timely return/report noting the refusal and any deficiencies in the Schedule A. The Department cautions administrators that annual return/report filings should not be delayed pending receipt of requested Schedule A information beyond the date on which the annual report is due (including any timely obtained extensions for filing), and that an amended return/report should be filed upon receipt of the deficient Schedule A information.

3. Fair Market Value vs. Contract

Value Reporting for Insurance Contracts. Certain changes to the Schedule A and accompanying instructions were proposed by the Department in light of Financial Accounting Standards Board (FASB) Statement of Financial Accounting Standards No. 110 (FAS 110) and No. 126 (FAS 126) and American Institute of Certified Public Accountants Statement of Position 94-4 (SOP 94-4), which generally require that financial statements presented in accordance with Generally Accepted Accounting Principles (GAAP) must disclose the fair value of investment contracts with insurance companies (except for certain investment contracts held by defined benefit pension plans and "fully benefit responsive" contracts held by defined contribution plans with assets of \$100 million or less). Commentators

representing insurance companies indicated that determining whether a contract may be reported at "book value" or contract value under these accounting rules is a complex determination, and one that insurance companies generally will leave to the discretion of a plan's administrator and, if applicable, auditor. Therefore, the commentators asked the Agencies to permit contract value reporting for all applicable insurance and annuity contracts, or alternatively, confirm that an insurance company will satisfy its obligation under ERISA section 103(a)(2) by furnishing plan administrators with only contract value information. The Department did not adopt these recommendations. Section 103 of ERISA and the Department's regulations generally require reporting of plan assets valued at their "current value." As noted above, insurance companies are required under ERISA section 103(a)(2) to provide the information needed by the plan administrator to complete the plan's annual report, including both contract value and fair value information if needed. The Department continues to believe that conforming the Schedule A to the financial statement disclosure provisions in FAS 110, FAS 126 and SOP 94-4 will foster greater uniformity in the reporting of plan asset values without imposing significant costs on either plans or service providers.

The proposal also called for Schedule A reporting of the current value of "plan assets" in the insurance company general account. Some commentators expressed concern about this requirement and asked for its elimination or clarification. This proposed Schedule A change was intended to provide a line on which plans could comply with the above described requirement to report certain general account contracts at fair value. One commentator suggested that the question be rephrased to ask for the current value of the "plan's funds" in the general account. Accordingly, the new question has been re-worded; however, for consistency with the existing Schedule A question on current value of the "plan's interest" in insurance company separate accounts, the question asks for the current value of the "plan's interest" in the insurance company general account.

4. *Schedule A Reporting of Investment Contracts with Insurance Companies.* Several commentators noted that the current Schedule A instructions read "This schedule must be attached to Form 5500 * * * where any benefits under the plan are provided by an insurance company, insurance service,

or other similar organization." The proposed instructions included the phrase "(or investments are managed) by an insurance company * * *." Commentators expressed confusion about whether the instruction was intended to clarify existing reporting obligations or impose new ones. The proposed instruction was not intended to impose any new Schedule A reporting requirements, but rather was intended to state the current requirement to report on the Schedule A contracts with insurance companies (including investment and annuity contracts) that are part of the plan's "funding arrangement" as well as those that are part of the plan's "benefit arrangement." Accordingly, the instruction has been revised to mirror the current Form 5500 instructions for line 14 of the Form 5500 and Line 14 of the Form 5500-C which explain Schedule A reporting is required for contracts with insurance companies that are part of the plan's "funding arrangement" as well as those that are part of the plan's "benefit arrangement."

5. *Reporting of Allocated Insurance Contracts.* The Department received several comments on the reporting of allocated insurance contracts referred to in 29 CFR 2520.104-44(b)(2). Section 2520.104-44(b)(2) provides pension plans "the benefits of which are provided exclusively through allocated insurance contracts or policies" with a limited exemption from and alternative method of compliance with the annual audit requirement and the requirement to report certain financial information on the annual report. Although the Notice of proposed forms revisions and the proposed amendments to the Department's annual reporting regulations did not propose to modify the reporting for allocated insurance contracts, the commentators urged that the term "allocated insurance contract" should be broadened to include: (i) Insurance products that "guarantee benefits" even if they do not provide upon receipt of the required premium a retirement benefit of a specified amount; (ii) insurance products that guarantee a fixed rate of return even if they do not provide upon receipt of the required premium a retirement benefit of a specified amount, and (iii) group annuity contracts held by defined contribution plans where each participant's interest in the contract is credited or "allocated" to the participant's individual account in the plan, but the value of each participant's interest in the insurance contract is adjusted for market value fluctuations.

The term "allocated" insurance contract has been consistently defined

in the instructions to the Form 5500 Series. Under that definition, contracts are not "allocated" unless the insurance company or organization that issued the contract has unconditionally guaranteed, upon receipt of the required premium or consideration, to provide a retirement benefit of a specified amount to each covered participant without adjustment for fluctuations in the market value of the underlying assets of the company or organization, and each participant has a legal right to such benefits which is legally enforceable directly against the insurance company or organization. See the March 1, 1989 Notice of Adoption of Revised Forms (1989 Notice), 54 FR 8631, 8635.³ The 1989 Notice included the following statements regarding the Department's longstanding view on this definition: "'allocated' contracts include only those contracts under which an insurance company immediately assumes upon receipt of contributions or premiums fixed dollar obligations to provide the retirement benefit specified in the plan * * * and that the reporting exemption for allocated insurance contracts "is premised on the fact that under such contracts the plan has effectively transferred the risk for the payment of benefits accrued to that date * * * to the insurer and, accordingly, limited reporting is appropriate." The types of contracts identified by the commentators either did not possess these characteristics and/or failed to satisfy other components of the definition, or the commentators did not provide sufficient information about the characteristics of the contract to support a conclusion that the policies underlying 29 CFR 2520.104-44 apply such that the audit and financial reporting relief for allocated contracts should be broadened to include these other types of contracts. Accordingly, the Department has not adopted these comments and has retained unmodified the Form 5500 return/report instructions pertaining to "allocated" insurance contracts.

A commentator also asked for the Department to clarify whether the reporting relief for allocated contracts applies only to defined benefit pension

³ Before the issuance of the 1988 Form 5500, the Form and the accompanying instructions were published in a notice in the **Federal Register**, 51 FR 33500 (September 19, 1986), with the public having the opportunity to furnish written comments and oral testimony to the Department. The definition of the term "allocated" insurance contract was incorporated into the 1988 Form 5500 instructions and has been included in the Form 5500 instructions for all subsequent plan years. Also see 43 FR at 10138 (March 10, 1978) for the discussion of allocated insurance contracts in the preamble to the final § 2520.104-44 regulations.

plans. Although the regulatory relief in 29 CFR 2520.104-44(b)(2) is limited to pension benefit plans the benefits of which are provided exclusively through allocated insurance contracts, neither the regulation nor the Form 5500 return/report instructions distinguish between defined contribution and defined benefit pension plans.

One commentator asked the Department to clarify the term "contracts with allocated funds" that is referred to on line 5 of Schedule A (Insurance Information). It is the Department's view that allocated funds referred to on line 5 represent the portion of an insurance contract that would otherwise meet all of the standards for an allocated insurance contract described above.

6. Reporting of Synthetic GICs and Similar Contracts at Book Value. Several commentators asked that the form or the instructions authorize "synthetic GICs," "separate account GICs," and insurance company "stable value funds" to be reported at contract or "book" value on the Schedule A, Schedule H and Schedule I because, according to the commentators, these contracts are designed to provide returns and investment features similar to insurance company general account investment contracts. Insufficient information was presented on the nature of these contracts, the implications of contract value reporting and the feasibility of reporting these various contracts on a single line item to enable the Agencies to adopt this recommendation. Thus, these contracts must continue to be reported in conformance with existing annual reporting requirements.

7. Insurance Fee and Commission Reporting. Several commentators noted that insurance fees and commissions must be individually reported on Schedule A, whereas fees and commissions on bank investment products, mutual funds, or other products are not individually reported on a separate schedule. These commentators suggested either eliminating the Schedule A requirement to report insurance fees and commissions or requiring broader fee/commission reporting from banks and other financial institutions. The Department did not adopt this recommendation because section 103(e) of ERISA specifically calls for the annual report to include information on fees and commissions paid by insurance companies, and the Department continues to believe that these Schedule A disclosures provide useful information. Also, the Department has been generally reviewing fee disclosure

issues outside the context of this Form 5500 project.

Several commentators also questioned the proposed requirement to report fees and commissions paid to "other persons" noting that the current Schedule A requests this information only for "agents and brokers." Section 103(e) of ERISA includes "other persons" with agents and brokers in defining the requirement to report insurance contract fees and commissions. Further, the current Schedule A instructions provide that fees paid by insurance carriers to persons other than agents and brokers should be reported on the Schedule A as acquisition costs, administrative expenses, etc., as appropriate, and note that for large plan filers these fees paid to "other persons" are subject to separate reporting on the Schedule C. In light of the above, the requirement to report fees and commissions paid to "other persons" has been retained in the Schedule A because the Department believes it serves important enforcement targeting and disclosure purposes to require individual identification of all persons who are paid insurance fees and commissions.

D. Schedule C (Service Provider Information)

1. Improve Reporting on Plan Fees and Expenses. Several commentators suggested that the Agencies require both large and small plans to report all fees and expenses whether paid for by the plan or employer, including break-out reporting of both bundled fees and fees on investment products that are included in determining the net investment gain (or loss). Other commentators suggested increasing the Schedule C threshold so that only persons receiving compensation in excess of substantially increased thresholds (e.g., \$10,000, \$25,000, or \$100,000) be reported and/or that only the top 20 highest paid service providers be included. The Agencies concluded that requiring Schedule C reporting by small plan filers would not be consistent with a principal objective of the project which is to streamline the Form 5500. Similarly, the Agencies concluded that raising the reporting thresholds may result in the disclosure of inadequate service provider information. Accordingly, the Agencies decided not to adopt these suggested changes. However, as noted above, the Department is reviewing general fee disclosure issues outside the context of this Form 5500 project.

2. Reports on Trustee Identification and Service Provider Terminations. The proposal eliminated from the Schedule

C the requirement that large plans list plan trustees annually and restricted the requirement to report service provider terminations to terminations of accountants and enrolled actuaries. Several commentators expressed concern that restricting the reporting of terminated parties on the Schedule C to accountants and actuaries would limit the Agencies' ability to evaluate possible fiduciary problems, and suggested that the Agencies either retain current requirements or broaden the report to include all terminated service providers. Others suggested that the Agencies reinstate the requirement to identify terminated trustees and add terminations of independent third party appraisers. Other comments supported the change, contending that the reports on service provider terminations and the trustee list are not useful. It is the view of the Agencies that the currently required annual information on Schedule C regarding trustees and termination of various service providers is not widely used and to a large extent is duplicative of information otherwise available to participants either as part of the plan's SPD and SMMs or by comparing consecutive annual reports. In addition, the majority of annual report filers are small plan filers which are already exempt from these requirements because the Schedule C only applies to large plan filers.

3. Clarify "Service Code" Entry.

Under current rules, Schedule C reporting is generally required when any person receives, directly or indirectly, \$5,000 or more in compensation for services rendered to a plan. A commentator asked that the instructions clarify how the \$5,000 threshold is applied when multiple services are provided. The current instructions already make it clear that the \$5,000 threshold is calculated taking into account compensation for all services provided (regardless of whether the compensation for any single service among the multiple services is less than \$5,000). For example, the current instructions state: "If more than one service was provided, enter only the code of the primary service." Nonetheless, to further clarify the instructions and to provide for more accurate disclosure of service fees, the Agencies have changed the service code rule to require the reporting of a service code for each service included in the total compensation figure.

4. Allow Cash or Accrual Basis Reporting on Schedule C.

One commentator asked for clarification of whether the Schedule C permits use of either the cash or accrual basis method of accounting for reporting

compensation paid to service providers. The Department has clarified the instructions to the Schedule C to provide for the use of either the cash or accrual basis method for recognition of transactions on the Schedule C as long as one method is consistently used.

E. Schedule D (DFE /Participating Plan Information)

1. Clarify DFE Requirements. The proposal called for a comprehensive restructuring of the way Direct Filing Entity (DFE) information is reported by PSAs, CCTs, master trusts investment accounts (MTIAs), 103–12 investment entities (103–12 IEs), and group insurance arrangements (GIAs). Specifically, under the proposal, the Form 5500 would be established as the standardized reporting format for DFEs. Several commentators described the new DFE provisions as an improvement because the standardized reporting format for DFEs clarifies the reporting process for DFEs and provides more understandable information to participants and beneficiaries regarding their plans' participation in these pooled investment and insurance arrangements. A commentator also suggested that all PSAs, CCTs, MTIAs, other investment entities that hold plan assets, and GIAs be required to file directly, and suggested the proposal be expanded to broaden disclosure to participants about the DFE investments. Some commentators expressed concern about possible competitive disadvantages for PSAs that do not choose to file as DFEs, requested that the Department reconsider the standardized filing requirement for DFEs, and also stated that the DFE changes would increase the reporting requirements for PSAs and CCTs.

The Department believes that the changes to the reporting requirements for plans participating in CCTs, PSAs, MTIAs, 103–12 IEs, and GIAs is the best alternative for capturing the information needed to carry out its oversight responsibilities over the plan assets held by these entities and ensuring that there is adequate disclosure of plan investment and insurance information to plan participants and beneficiaries. Continuation of the current annual reporting rules would perpetuate the Department's current inability to correlate and effectively use the data regarding the approximately \$2 trillion in plan assets invested by plans in DFEs, and, therefore, would be adverse to the interests of participants and beneficiaries since the DFE information is an integral part of the annual report of each participating plan. Moreover, with the exception of abbreviated

income and expense statements for CCTs and PSAs being required as part of their Schedule H filing, in the Department's view, substantially all of the information that would be required to be reported by DFEs under the new Form 5500 currently must be reported. Further, direct reporting by CCTs, PSAs, 103–12 IEs and GIAs continues to be optional. Thus, the Department believes that the major change in reporting with respect to DFEs is that information must be reported in a standardized format using the Form 5500 and associated schedules.

Some commentators expressed concern about the proposed requirement that plans classify and report the underlying assets of CCTs and PSAs that do not elect to report as DFEs. The commentators stated that implementation of this rule will be costly because, under the proposal, such plans will have to classify each investment held by the entity and report their percentage interest as of the beginning and end of the plan year. The commentators suggested that CCTs and PSAs currently are only required to provide participating plans and the Department with a statement of assets and liabilities as of their fiscal year end, and argued that the proposed change would require these entities to prepare statements of assets and liabilities on a monthly or more frequent basis. Under existing annual reporting rules, however, plans must include the current value of their investment in CCTs and PSAs in their annual reports as of the beginning and end of the plan year. Further, these asset break-out rules do not apply to small plan filers and the Department does not envision that the required asset break-out reporting rules will impose a substantial additional burden on large plan filers inasmuch as there is only a limited number of general asset categories on the Schedule H (Financial Information) that could be used, e.g., interest bearing cash; U.S. government securities; corporate debt instruments; corporate stock; partnership/joint venture interests; real estate; loans; other assets; and employer securities. Further, the Department does not believe that the new DFE rules should result in material cost increases or administrative burdens for plans because of the information required to be transmitted by CCTs and PSAs to their participating plans.

2. Notice of DFE Filing to Plans.

Several commentators noted that there was no explicit provision in the proposed Form 5500 instructions that required CCTs and PSAs to annually notify their participating plans whether the CCT or PSA will file a Form 5500

as a DFE with the Department. The Department clarified the notice requirements in the proposed regulatory amendments to 29 CFR 2520.103–5 in a separate Notice of Proposed Rulemaking that was published in the **Federal Register** on December 10, 1998 (63 FR 68370). A notice of final rulemaking on those regulatory amendments will be published separately in the **Federal Register**.

3. Reconfigure Schedule D. Several commentators noted that the multi-purpose Schedule D as proposed was confusing, and one suggested that it be divided into two parts, Part I to be filed by plans and Part II to be filed by DFEs. The Department has restructured the Schedule D into two parts. Part I must be completed by plans and DFEs to report information on their investments in MTIAs, CCTs, PSAs and 103–12 IEs. Part II must be completed by DFEs to report information regarding participating plans. Another commentator indicated that it is unlikely that the space on the Schedule D would be sufficient to list, in many cases, every plan that at some time during a year participated in a DFE (particularly CCTs and PSAs). The Schedule D was restructured to address that issue by using a continuation page approach.

One commentator noted that among other information that must be reported on the Schedule D by a PSA electing to file as a DFE is each participating plan's EIN and plan number (PN). The commentator stated that most insurers do not possess this information, and, therefore, suggested that the Department permit insurers to use their contract identification number in lieu of the EIN and PN on the Schedule D. The Department did not adopt this recommendation. Plan administrators already must furnish EIN and PN information to banks and insurance carriers filing statements of assets and liabilities for CCTs and PSAs under current direct filing rules. This requirement was originally included in 29 CFR 2520.103–9(b)(2), adopted as a final rule on March 10, 1978 (43 FR 14009). Also, EIN and PN information facilitates effective correlation of information filed by plans and DFEs. Another commentator asked that the Schedule D listing of plan sponsor names and assets should not be open to public inspection. The content of the annual report under Title I of ERISA generally is required to be public information. See, e.g., ERISA section 106. Accordingly, the Department did not adopt this recommendation.

4. Filing Due Dates and Transitional Rules Regarding DFEs. Some CCTs and

PSAs indicated an intent to file as DFEs but stated that substantial lead time would be needed to prepare for the new reporting requirements, and suggested making the filing optional for several years or otherwise delaying the implementation of the DFE rules. Some said no changes should be implemented until effective electronic filing options are available to DFEs.

As previously mentioned, implementation of the new Form 5500 has been delayed until 1999 plan year filings. To facilitate the transition to the new reporting rules for DFEs, the Department is also clarifying the due date for DFE Form 5500 filings and adopting a transitional reporting rule for plans and DFEs participating in CCTs and PSAs. First, as to the DFE Form 5500 due date, inasmuch as DFE filings continue to be considered an integral part of the annual report of each participating plan, each participating plan's Form 5500 return/report will be treated as incomplete unless the DFE information is filed within the prescribed time. The regulatory amendments clarify that, as with the current rule for statements of assets and liabilities, the DFE Form 5500 filing should pertain to the DFE fiscal year ending with or within the plan year. The regulatory amendments also establish the filing due date for all DFEs, other than GIAs, as no later than 9-1/2 months after the end of the DFE's fiscal year.⁴ This structure is intended to provide a predictable filing deadline for DFEs while also ensuring that all DFE filings will be due on or before the latest annual report due date for any participating plan regardless of the plan's reporting year.

A transitional rule applies to plans and DFEs participating in CCTs or PSAs which do not elect to file as a DFE for their fiscal year ending in 1999. The transitional rule waives for the 1999 reporting year the requirement that large plan filers and DFEs break out, as dollar value entries in the appropriate categories on the asset and liability statement contained in Schedule H (Financial Information), their percentage interest in the underlying assets of CCTs and PSAs that do not file as DFEs. Rather, for the 1999 reporting year only, large plans and DFEs may report their interest on the aggregate CCT or PSA

⁴ The Department did not extend the filing due date for GIAs (i.e., due no later than the last day of the 7th month after the end of the GIA fiscal year) because the GIA filing is in lieu of the plan's filing rather than supplementing the plan's filing (as is the case with filings made by CCTs, PSAs, MTIAs and 103-121Es). GIAs, however, are able to obtain the same filing extension that is available to plans (i.e., 2½ months by timely filing a Form 5558).

lines of the Schedule H asset and liability statement (i.e., lines 1c(9) and 1c(10) of Schedule H) as of the beginning and end of the plan year even if the CCT or PSA does not file a Form 5500 as a DFE. Plans participating in a CCT or PSA also are not required to attach the CCT's or PSA's statement of assets and liabilities to its 1999 filing.

F. Schedule H (Financial Information), Schedule I (Financial Information—Small Plan) and Schedule G (Financial Transaction Schedules)

1. Employer Delinquent Transmission of Participant Contributions. One commentator requested a change to the question on participant contributions to require reporting only when contributions are not transmitted by the employer within 15 business days after the end of the month in which the contributions are withheld or received by the employer in the case of pension plans, and 90 days after such receipt or withholding in the case of welfare plans. In comparison, the proposed question on Schedule H and Schedule I (referred to as Schedule FIN and FIN-SP in the September 3, 1997 proposal) asks whether participant contributions were transmitted by the earliest date on which such contributions could reasonably be segregated from the employer's general assets (which date cannot exceed 15 business days after the end of the month in which the contributions are withheld or received by the employer in the case of pension plans and 90 days after receipt or withholding in the case of welfare plans). The commentator's suggested change would undercut the purpose of the question which was designed to identify circumstances under which the Department's regulatory requirements for timely handling of participant contributions may have been violated. Accordingly, the comment has not been adopted.

2. Direct Rollover Reporting. The Agencies proposed to add to the Schedule H a requirement to separately report plan distributions in the form of "direct rollovers" to IRAs and other qualified plans. Several commentators stated that this information is currently reported to the IRS on Form 1099-R and suggested that additional recordkeeping burdens would result from this requirement. The Agencies decided to eliminate this question from the Schedule H.

3. Schedule of Assets Held for Investment Purposes at End of Year, Schedule of Investment Assets Both Acquired and Disposed of Within the Plan Year, and Schedule of Reportable (5%) Transactions. The Department

received comments both supporting and opposing the proposal to eliminate these schedules from the annual report. Several commentators said that elimination of these schedules would deprive participants, the Department, and others of valuable plan information. Other commentators supported the change as reducing reporting burdens by eliminating unnecessary information from the annual report, but noted the proposal did not result in significant overall burden savings because all the information still had to be retained so that it could be made available to participants, beneficiaries, the Department and other authorized parties on request. In view of the potential importance of the scheduled information to participants and others, and the few additional burdens attendant to the filing of such information in light of the continued disclosure obligation, the Department decided to retain these schedules as part of the annual report for large plan filers. However, the Department decided to adopt the elements of the proposal that (1) eliminated the requirement to report participant or beneficiary directed transactions under an individual account plan on the schedule of reportable (5%) transactions, and (2) eliminated the requirement to report the historical cost for assets held as a result of such participant or beneficiary direction on the Schedule of Assets Held for Investment Purposes at End of Year and the Schedule of Investment Assets Both Acquired and Disposed of Within the Plan Year. Further, the instructions to the Form 5500 return/report state that, although these schedules must continue to be attached to the Form 5500 for large plan filers to report assets held for investment and reportable transactions, filers are not required to use computer scannable forms for these attachments.

One commentator also requested that the Department eliminate altogether the requirement to report cost information on the schedule of reportable transactions and the schedules of assets for "participation units" in insurer pooled accounts regardless of participant or beneficiary direction of the asset because, according to the commentator, some insurers do not maintain "cost" information on such participation units. The commentator stated that there is no "natural historical cost number" for these participation units and there is no taxable transaction associated with interfund transfers while funds are held within a tax qualified plan. Requirements regarding reporting of cost of plan assets have long

been part of the Title I annual reporting rules. Cost reporting in conjunction with current value reporting on these schedules for non-participant directed assets provides comparative information regarding the value of plan assets. The Department was unable to conclude, based on the limited information provided regarding the type of insurer accounts described by the commentator, that these accounts were not capable of being reported with a cost figure calculated on an acceptable accounting basis, and was unable to conclude that adopting this recommendation would be consistent with the purposes of Title I and would provide adequate disclosure to participants and beneficiaries and adequate reporting to the Department.

4. Reporting Participant Loans in Default. Several commentators asked for guidance on whether participant loans in default must continue to be reported on the Schedule G even after a "deemed distribution" has been reported to the IRS under the Code. Others asked that participant loans in default not be required to be reported if they are adequately secured by the participant's account balance in the plan. Under the proposal, participant loans in default could be reported as an aggregate figure rather than as individual loans on the Schedule G. In light of the above comments, several changes were made to the Schedule G as well as Schedule H and Schedule I to clarify the reporting requirements in a way that the Agencies believe will in the aggregate reduce administrative burdens and improve reporting regarding participant loans.

5. Reporting Preferred and Common Stocks, Preferred and Other Corporate Debt, and Realized and Unrealized Gains/Losses. Some commentators stated that the breakout of preferred versus common stock, preferred versus other bonds, and realized versus unrealized gains/losses is unnecessary and suggested that the Agencies consolidate those categories into stocks, bonds, and total gains/losses. Several commentators also stated that the recharacterization of corporate debt instruments from "preferred" and "other" to "long term" and "short term" would require reprogramming and questioned the value of this change. The Agencies have examined these breakouts and decided to retain them because they serve important enforcement and disclosure purposes, but, have decided to adopt the recommendation to retain the "preferred" and "other" categories for reporting corporate debt instruments.

6. Reporting of Corrective Distributions.—Plans that fail either the actual deferral percentage or actual

contribution percentage tests, or certain plans that have Code section 415 excess annual additions may make corrective distributions to satisfy these rules. A commentator asked the Agencies to clarify how such corrective distributions should be reported on the form. In response, a new line was added to the Income and Expense Statements on Schedule H and Schedule I to report corrective distributions.

G. Schedule R (Retirement Plan Information)

Schedule R (Retirement Plan Information), referred to as Schedule PEN in the September 3, 1997 proposal, was modified in response to public comments. As noted above, the questions on the number of participants were consolidated into the Form 5500. The questions on plan distributions and funding were continued, but the requirement to report distributions that were not paid as qualified joint and survivor annuities, which some commentators characterized as burdensome, was replaced, at a commentator's recommendation, with the requirement to report the number of single sum distributions. The Agencies, however, retained the reporting of distributions paid in property other than cash, annuity contracts or publicly traded securities and the EINs of the two principal payors of plan benefits because they serve as valuable tools for monitoring plans' compliance with the requirements and objectives of ERISA and the Code.

H. Schedule T (Qualified Plan Coverage Information)

Schedule T, referred to as Schedule Q in the September 3, 1997 proposal, requires the reporting of specific plan coverage data pertinent to a plan's compliance with the minimum coverage requirements of the Code and is being adopted largely as proposed. The Form 5500 and the Schedule T allow plans, in appropriate circumstances, to report coverage information as infrequently as every third year under the three year testing cycle rule. In response to a commentator's request, a space was added to the Form 5500 that allows a filer to indicate that a Schedule T is not being attached because the plan is relying on coverage testing information for a prior year. Further, in response to one comment, the instructions for the Schedule T have been modified to allow plans maintained by more than one employer to report which of their participating employers automatically meet the minimum coverage requirements, thus eliminating the separate Schedule T that would

otherwise have to be filed for these employers.

I. Miscellaneous Technical Adjustments

Various commentators submitted technical suggestions on how to further improve and clarify various portions of the proposal. Many of the suggestions focused on technical corrections and improvements in the instructions as opposed to changes on the forms. The Agencies have reviewed the comments and made various technical corrections/clarifications in response to those comments.

III. Regulations Relating to the Final Form

For purposes of Title I of ERISA, the filing of a completed Form 5500 (including the report of an independent qualified public accountant and any required statements, schedules and attachments) by plans with 100 or more participants constitutes compliance with the limited exemption and alternative method of compliance prescribed in paragraph (b) of 29 CFR 2520.103-1, promulgated in accordance with the authority granted the Secretary under sections 104(a)(3) and 110 of ERISA. The filing of a completed Form 5500, with the appropriate statements, schedules and attachments, also constitutes compliance with the simplified annual reporting requirements prescribed at 29 CFR 2520.104-41, adopted pursuant to the authority granted the Secretary under ERISA sections 104(a)(2)(A) and 104(a)(3). Also see 29 CFR 2520.103-1(c). In the supplementary information accompanying the 1997 proposed forms revisions (62 FR 46556), the Department noted that certain amendments to the annual reporting regulations would be necessary to accommodate certain proposed revisions to the forms. As stated previously, proposed amendments to the Department's annual reporting regulations were published in the **Federal Register** for public comment on December 10, 1998 (63 FR 68370). A final rule amending the Department's annual reporting regulations will be published separately by the Department in the **Federal Register**. The findings required under sections 104(a)(3) and 110 of ERISA relating to the use of the Form 5500, as revised, as an alternative method of compliance and limited exemption from the reporting and disclosure requirements of part 1 of Title I of ERISA will be contained in that final rule.

Paperwork Reduction Act

The Form 5500 Series contain information collection requirements.

They have been approved by the Office of Management and Budget under the provisions of the Paperwork Reduction Act of 1995 (44 U.S.C. 3506(c)). The Form 5500 Series has been assigned the following OMB Control Numbers: U.S. Department of Labor, Pension and Welfare Benefits Administration 1210-0110 and 1210-0089; U.S. Department of the Treasury, Internal Revenue Service 1545-1610; and Pension Benefit Guaranty Corporation 1212-0057. The OMB control numbers and estimates of the time required to complete the Form

5500 Series are presented in the Paperwork Reduction Act Notice contained in the instructions to the Form 5500 Series.

Statutory Authority

Accordingly, pursuant to the authority in sections 101, 103, 104, 109, 110 and 4065 of ERISA and sections 6039D and 6058 of the Code, the Form 5500 Series Annual Return/Report and the instructions thereto are adopted as set forth herein.

Signed at Washington, DC, this 20th day of January, 2000.

Leslie Kramerich,

Acting Assistant Secretary, Pension and Welfare Benefits Administration, Department of Labor.

Carol D. Gold,

Director, Employee Plans, Tax Exempt and Government Entities Division, Internal Revenue Service, Department of the Treasury.

David M. Strauss,

Executive Director, Pension Benefit Guaranty Corporation.

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2a Plan sponsor's name and address (employer, if for single-employer plan) (Address should include room or suite no.)

1)	Name													
	Name Continued													
2)	Doing Business As (DBA) Name													
	C / O Name													
3)	Mailing Street Address (or Foreign Street)													
4)	Location Address													
	Location Address Continued													
5)	Foreign Routing Code (Zip Code)													
6)	Foreign Mailing Country													
7)	City (or Foreign City)													
8)	State	Zip Code												

2b Employer Identification Number (EIN)

--	--	--	--	--	--	--	--	--	--	--	--	--	--

2c Sponsor's telephone number

--	--	--	--	--	--	--	--	--	--	--	--	--	--

2d Business code
(see Instructions)

--	--	--	--	--	--	--	--	--	--	--	--	--	--

3a Plan administrator's name and address (if same as plan sponsor, enter "Same")

1)	Name													
	Name Continued													
	C / O Name													
2)	Street Address (or Foreign Street)													
3)	Foreign Routing Code (Zip Code)													
4)	Foreign Mailing Country													
5)	City (or Foreign City)													
6)	State	Zip Code												

3b Administrator's EIN

--	--	--	--	--	--	--	--	--	--	--	--	--	--

3c Administrator's telephone number

--	--	--	--	--	--	--	--	--	--	--	--	--	--

4 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:

a Sponsor's name

b EIN

--	--	--	--	--	--	--	--	--	--	--	--	--	--

c PN

--	--	--	--	--	--	--	--	--	--	--	--	--	--

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5 Preparer Information (optional)

a Name (including firm name, if applicable) and address

1)	Name													
	Name Continued													
2)	Street Address (or Foreign Street)													
3)	Foreign Housing Code (Zip Code)													
4)	Foreign Mailing Country													
5)	City (or Foreign City)													
6)	State	Zip Code												

b EIN

--	--	--	--	--	--	--	--	--	--	--	--	--	--

c Telephone number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

6 Total number of participants at the beginning of the plan year

--	--	--	--	--	--	--	--	--	--	--	--

7 Number of participants as of the end of the plan year (welfare plans complete only lines 7a, 7b, 7c, and 7d)

a Active participants

--	--	--	--	--	--	--	--	--	--	--	--

b Retired or separated participants receiving benefits

--	--	--	--	--	--	--	--	--	--	--	--

c Other retired or separated participants entitled to future benefits

--	--	--	--	--	--	--	--	--	--	--	--

d Subtotal. Add lines 7a, 7b, and 7c

--	--	--	--	--	--	--	--	--	--	--	--

e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits

--	--	--	--	--	--	--	--	--	--	--	--

f Total. Add lines 7d and 7e

--	--	--	--	--	--	--	--	--	--	--	--

g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)

--	--	--	--	--	--	--	--	--	--	--	--

h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested

--	--	--	--	--	--	--	--	--	--	--	--

i 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)

--	--	--	--	--	--	--	--	--	--	--	--

0 1 9 9 0 0 0 3 1 N



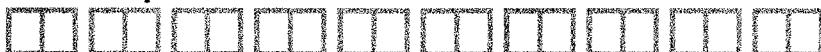
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8 Benefits provided under the plan (complete 8a through 8c, as applicable)

- a 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) below).



- b 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) below).



- c Fringe benefits (check this box if the plan provides fringe benefits)

9a Plan funding arrangement (check all that apply)	9b Plan benefit arrangement (check all that apply)
(1) <input type="checkbox"/> Insurance	(1) <input type="checkbox"/> Insurance
(2) <input type="checkbox"/> Section 412(i) Insurance contracts	(2) <input type="checkbox"/> Section 412(i) 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

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) T (Qualified Pension Plan Coverage Information)
- If a Schedule T is not attached because the plan is relying on coverage testing information for a prior year, enter the year ► Y Y Y Y
- 3) B (Actuarial Information)
- 4) E (ESOP Annual Information)
- 5) 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)
- 7) P (Trust Fiduciary Information)

c Fringe Benefit Schedule

- F (Fringe Benefit Plan Annual Information)

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Schedule A (Form 5500) 1999

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- (a) Name and address of the agents, brokers or other persons to whom commissions or fees were paid

Name												
Street Address												
City	State	Zip Code										

- (b) Amount of commissions paid

00												
----	--	--	--	--	--	--	--	--	--	--	--	--

- (c) Fees paid / Amount

00												
----	--	--	--	--	--	--	--	--	--	--	--	--

- (e) Organization code

- (d) Fees paid / Purpose

- (a) Name and address of the agents, brokers or other persons to whom commissions or fees were paid

Name												
Street Address												
City	State	Zip Code										

- (b) Amount of commissions paid

00												
----	--	--	--	--	--	--	--	--	--	--	--	--

- (c) Fees paid / Amount

00												
----	--	--	--	--	--	--	--	--	--	--	--	--

- (e) Organization code

- (d) Fees paid / Purpose

- (a) Name and address of the agents, brokers or other persons to whom commissions or fees were paid

Name												
Street Address												
City	State	Zip Code										

- (b) Amount of commissions paid

00												
----	--	--	--	--	--	--	--	--	--	--	--	--

- (c) Fees paid / Amount

00												
----	--	--	--	--	--	--	--	--	--	--	--	--

- (e) Organization code

- (d) Fees paid / Purpose

0 5 9 9 0 0 0 2 1 Q



Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

3 Current value of plan's interest under this contract in the general account at year end

00

4 Current value of plan's interest under this contract in separate accounts at year end

00

5 Contracts With Allocated Funds

a State the basis of premium rates

► 00

b Premiums paid to carrier

00

c Premiums due but unpaid at the end of the year

00

d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount

00

Specify nature of costs

► 00

e Type of contract (1) individual policies (2) group deferred annuity

(3) other (specify below)

► 00

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan check here

►

0 5 9 9 0 0 0 3 1 R



Schedule A (Form 5500) 1999

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Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organization(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

7 Benefit and contract type (check all applicable boxes)

- | | | | |
|---|---|--|---|
| (a) <input type="checkbox"/> Health (other than dental or vision) | (b) <input type="checkbox"/> Dental | (c) <input type="checkbox"/> Vision | (d) <input type="checkbox"/> Life Insurance |
| (e) <input type="checkbox"/> Temporary disability (accident and sickness) | (f) <input type="checkbox"/> Long-term disability | (g) <input type="checkbox"/> Supplemental unemployment | (h) <input type="checkbox"/> Prescription drug |
| (i) <input type="checkbox"/> Stop loss (large deductible) | (j) <input type="checkbox"/> HMO contract | (k) <input type="checkbox"/> PPO contract | (l) <input type="checkbox"/> Indemnity contract |
| (m) <input type="checkbox"/> Other (specify below) | | | |

A horizontal row of 20 empty square boxes for writing responses.

8 Experience-rated contracts

a Premiums:

(1) Amount received

(2) Increase (decrease)
In amount due but unpaid

(3) Increase (decrease) in unearned premium reserve

(4) Earned ((1) + (2) - (3)).....

b Benefit charges:

(1) Claims paid

(2) Increase (decrease) in claim reserves

(3) Incurred claims (add (1) and (2))

(4) Claims charged

0 5 9 9 0 0 0 5 1 T



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c Remainder of premium:

- (1) Retention charges (on an accrual basis) --
 (A) Commissions
- (B) Administrative service or other fees
- (C) Other specific acquisition costs
- (D) Other expenses
- (E) Taxes
- (F) Charges for risks or other contingencies
- (G) Other retention charges

												00
												00
												00
												00
												00
												00
												00
												00

(H) Total retention.....

												00
--	--	--	--	--	--	--	--	--	--	--	--	----

(2) Dividends or retroactive rate refunds.

(These amounts were 1) paid in cash, or 2) credited.) ...

												00
--	--	--	--	--	--	--	--	--	--	--	--	----

d Status of policyholder reserves at end of year:

- (1) Amount held to provide benefits after retirement

												00
--	--	--	--	--	--	--	--	--	--	--	--	----

- (2) Claim reserves

												00
--	--	--	--	--	--	--	--	--	--	--	--	----

- (3) Other reserves

												00
--	--	--	--	--	--	--	--	--	--	--	--	----

e Dividends or retroactive rate refunds due.

(Do not include amount entered in c(2).)

												00
--	--	--	--	--	--	--	--	--	--	--	--	----

9 Nonexperience-rated contracts:

- a Total premiums or subscription charges paid to carrier

												00
--	--	--	--	--	--	--	--	--	--	--	--	----

- b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, item 2 above, report amount

Specify nature of costs below

												00
--	--	--	--	--	--	--	--	--	--	--	--	----

0 5 9 9 0 0 0 6 1 U



**SCHEDULE B
(Form 5500)**

Department of the Treasury
Internal Revenue Service
Department of Labor
Pension and Welfare Benefits
Administration
Pension Benefit Guaranty Corporation

Actuarial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974, referred to as ERISA, except when attached to Form 5500-EZ and, in all cases, under section 6059(a) of the Internal Revenue Code, referred to as the Code.

- Attach to Form 5500 or 5500-EZ if applicable.
► See separate instructions.

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OMB No. 1210-0110

1999

This Form is Open to Public
Inspection (except when
attached to Form 5500-EZ).

For calendar plan year 1999
or fiscal plan year beginning

MM / DD / YY YY YY

, and ending

MM / DD / YY YY YY

► If an item does not apply, enter "N/A." ► Round off amounts to nearest dollar.

► Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan

B Three-digit
plan number ►
D Employer Identification Number
-

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-EZ

F 100 or fewer participants
in prior plan year

E Type of plan:

(1) Single-employer (2) Multiemployer (3) Multiple-employer

Part I Basic Information (To be completed by all plans)

1a Enter the actuarial valuation date:

MM / DD / YY YY YY

b Assets:

- (1) Current value of assets
(2) Actuarial value of assets for funding standard account

00
 00

Statement by Enrolled Actuary (see instructions before signing):

To the best of my knowledge, the information supplied in this schedule and on the accompanying schedules, statements, and attachments, if any, is complete and accurate, and in my opinion each assumption used in combination, represents my best estimate of anticipated experience under the plan. Furthermore, in the case of a plan other than a multiemployer plan, each assumption used (a) is reasonable (taking into account the experience of the plan and reasonable expectations) or (b) would, in the aggregate, result in a total contribution equivalent to that which would be determined if each such assumption were reasonable; in the case of a multiemployer plan, the assumptions used, in the aggregate, are reasonable (taking into account the experience of the plan and reasonable expectations).

Signature of actuary

Date

MM / DD / YY YY YY

Print or type

Name of actuary													
Firm name													
Address of the firm													
City					State	Zip Code		-					

G Most recent
enrollment number

-

Telephone number
(including area code)

--

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions

For Paperwork Reduction Act Notice and OMB Control Nos., see the Inst. for Form 5500 or 5500-EZ. Cat. No. 13507E Schedule B (Form 5500) 1999

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- c (1) Accrued liability for plans using immediate gain methods
 - (2) Information for plans using spread gain methods:
 - (a) Unfunded liability for methods with basis
 - (b) Accrued liability under entry age normal method
 - (c) Normal cost under entry age normal method

- d Information on current liabilities of the plan:**

- (1) Amount excluded from current liability attributable to pre-participation service (see instructions)
 - (2) "RPA '94" information:
 - (a) Current liability
 - (b) Expected increase in current liability due to benefits accruing during the plan year
 - (c) Current liability computed at highest allowable interest rate (see instructions)
 - (d) Expected release from "RPA '94" current liability for the plan year
 - (3) "OBRA '87" Information:
 - (a) Current liability
 - (b) Expected increase in current liability due to benefits accruing during the plan year
 - (c) Expected release from "OBRA '87" current liability for the plan year

- ## 2 Operational Information as of beginning of this plan year:

- a Current value of the assets (see Instructions)

b "RPA '94" current liability:

(1) No. of Persons

(2) Vested Benefits

(3) Total Benefits

- (1) For retired participants and beneficiaries receiving payments**

00 00

- (2) For terminated vested participants**

(+) + C-terminated vector, pCR-Script™

- ### (3) For active participants

(5) For active participants

- #### (1) Total

(4) total 00 00

c If the percentage resulting from dividing line 2a by line 2b(4), column (3), is less than 70%, enter such percentage

□□□□%

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3 Contributions made to the plan for the plan year by employer(s) and employees:
(a) Month-Day-Year | (b) Amount paid by employer

(b) Amount paid by employer

(c) Amount paid by employees

3 Totals

4 Quarterly contributions and liquidity shortfall(s):

a Plans other than multiemployer plans, enter funded current liability percentage for preceding year (see instructions)

b If line 4a is less than 100%, see instructions, and complete the following amount fields as applicable:

1 Liquidity shortfall as of end of Quarter of this plan year

(1) 1st

(3) 3rd

(2) 2n

ENRON ENERGY TRADING COMPANY

11. *Leucosia* *leucostoma* (Fabricius) (Fig. 11)

5. Actuarial cost method used as the basis for this plan year's funding standard account computation:

(a) Attained age normal (b) Entry age normal (c) Accrued benefit (unit credit) (d) Aggregate
 (e) Frozen initial liability (f) Individual level premium (g) Individual aggregate (h) Other (specify)

► [View all 1000+ products](#)

0 7 9 9 0 0 0 3 1 T



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8 Miscellaneous Information:

- a If a waiver of a funding deficiency or an extension of an amortization period has been approved for this plan year, enter the date of the ruling letter granting the approval
 b If one or more alternative methods or rules (as listed in the instructions) were used for this plan year, enter the appropriate code in accordance with the instructions ►
 c Is the plan required to provide a Schedule of Active Participant Data? (see instructions)
 If "Yes," attach schedule.

 Yes No

9 Funding standard account statement for this plan year:

Charges to funding standard account:

- a Prior year funding deficiency, if any
 b Employer's normal cost for plan year as of valuation date
 c Amortization charges as of valuation date: Outstanding Balance

(1) All bases except funding waivers ► (\$ 00)(2) Funding waivers ► (\$ 00)

- d Interest as applicable on line 9a, 9b, and 9c
 e Additional interest charge due to late quarterly contributions, if applicable
 f Additional funding charge from Part II, line 12u, if applicable N/A

- g Total charges. Add lines 9a through 9f
 Credits to funding standard account:

- h Prior year credit balance, if any
 i Employer contributions. Total from column (b) of line 3 Outstanding Balance

- j Amortization credits as of valuation date ► (\$ 00)

- k Interest as applicable to end of plan year on lines 9h, 9i, and 9j
 l Full funding limitation (FFL) and credits

- (1) ERISA FFL (accrued liability FFL)
 (2) "OBRA '87" FFL (155% current liability FFL)
 (3) "RPA '94" override (90% current liability FFL)
 (4) FFL credit before reflecting "OBRA '87" FFL
 (5) Additional credit due to "OBRA '87" FFL
 m (1) Waived funding deficiency
 (2) Other credits
 n Total credits. Add lines 9h through 9k, 9l(4), 9l(5), 9m(1), and 9m(2)

0 7 9 9 0 0 0 5 1 V



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- o Credit balance: If line 9n is greater than line 9g, enter the difference
 - p Funding deficiency: If line 9g is greater than line 9n, enter the difference
 - Reconciliation account:
 - q Current year's accumulated reconciliation account:
 - (1) Due to additional funding charges as of the beginning of the plan year
 - (2) Due to additional interest charges as of the beginning of the plan year
 - (3) Due to waived funding deficiencies:
 - (a) Reconciliation outstanding balance as of valuation date
 - (b) Reconciliation amount.
Line 9c(2) balance minus line 9q(3)(a)...
 - (4) Total as of valuation date

10 Contribution necessary to avoid an accumulated funding deficiency.
Enter the amount in line 9p or the amount required under the alternative
funding standard account if applicable

00

11 Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions.

Yes No

Part II Additional Information for Certain Plans Other Than Multiemployer Plans

Please see Who Must File in the instructions to determine if you must complete Part II.

12 Additional required funding charge (see instructions):

- | | | |
|---|--|--|
| a Enter "Gateway %." Divide line 1b(2) by line 1d(2)(c) and multiply by 100. | <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> | If line 12a is at least 90%, go to line 12u and enter -0. If line 12a is less than 80%, go to line 12b. If line 12a is at least 80% (but less than 90%), see instructions and, if applicable, go to line 12u and enter -0. Otherwise, go to line 12b |
| b "RPA '94" current liability. Enter line 1d(2)(a) | <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> | |
| c Adjusted value of assets (see instructions) | <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> | |
| d Funded current liability percentage. Divide line 12c by 12b and multiply by 100 | <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> | |
| e Unfunded current liability. Subtract line 12c from line 12b | <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> | |
| f Liability attributable to any unpredictable contingent event benefit | <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> | |
| g Outstanding balance of unfunded old liability | <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> | |
| h Unfunded new liability. Subtract the total of lines 12f and 12g from line 12e.
Enter -0- if negative | <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> | |
| i Unfunded new liability amount (<input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> % of line 12h) | <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> | |
| j Unfunded old liability amount | <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> | |
| k Deficit reduction contribution. Add lines 12i, 12j, and 1d(2)(b) | <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> <input style="width: 30px; height: 15px; border: 1px solid black; margin-right: 10px;" type="text"/> | |

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I Net charges in funding standard account used to offset the deficit reduction contribution. Enter a negative number if less than zero 00

m Unpredictable contingent event amount:

(1) Benefits paid during year attributable to unpredictable contingent event 00

(2) Unfunded current liability percentage. Subtract the percentage on line 12d from 100% %

(3) Transition percentage %

(4) Enter the product of lines 12m(1), 12m(2), and 12m(3) 00

(5) Amortization of all unpredictable contingent event liabilities 00

(6) "RPA '94" additional amount (see instructions) 00

(7) Enter the greatest of lines 12m(4), 12m(5), or 12m(6) 00

Preliminary Calculation

n Preliminary additional funding charge: Enter the excess of line 12k over line 12l (if any), plus line 12m(7), adjusted to end of year with interest 00

o Contributions needed to increase current liability percentage to 100% (see instructions) 00

p Enter the lesser of line 12n or 12o. Also, enter the result on line 12t if the employer did not elect for 1995 to use the Optional rule under Code section 412(l)(3)(E) and does not elect for 1999 to use the Transition rule under Code section 412(l)(11) 00

Final Calculation (complete line 12q, 12r, or 12s, as applicable, and lines 12t and 12u)

q If the employer elects to use the Transition rule for 1999, but did not elect for 1995 to use the Optional rule, complete line 14 and enter the lesser of line 12p or 14e here and on line 12t 00

r If the employer elected for 1995 to use the Optional rule, but does not elect for 1999 to use the Transition rule, complete line 13 and enter the greater of line 12p or 13q here and on line 12t 00

s If the employer elected for 1995 to use the Optional rule and elects to use the Transition rule for 1999, enter the lesser of (1) the greater of line 12p or 13q, or (2) line 14e. Also, enter on line 12t 00

t Additional funding charge prior to adjustment 00

u Adjusted additional funding charge. (0 % of line 12t) 00

13 Additional funding charge under prior law (see instructions):

a "OBRA '87" current liability. Enter line 1d(3)(a) 00

b Adjusted value of assets (see instructions) 00

c Funded current liability percentage. Divide line 13b by line 13a and multiply by 100 %

d Unfunded current liability. Subtract line 13b from line 13a 00

0 7 9 9 0 0 0 7 1 X



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e Outstanding balance of unfunded old liability	00
f Liability attributable to any unpredictable contingent event benefit	00
g Unfunded new liability. Subtract the total of lines 13e and 13f from line 13d.....	00
h Unfunded new liability amount (<input type="text"/> % of line 13g)	00
i Unfunded old liability amount	00
j Deficit reduction contribution. Add lines 13h and 13i	00
k Net amortization charge for certain bases	00
l Unpredictable contingent event amount:	
(1) Benefits paid during year attributable to unpredictable contingent event	00
(2) Unfunded current liability percentage. Subtract the percentage on line 13c from 100%	%
(3) Transition percentage	8000 %
(4) Enter the product of lines 13l(1), 13l(2), and 13l(3)	00
(5) Amortization of all unpredictable contingent event liabilities	00
(6) Enter the greater of line 13l(4) or line 13l(5)	00
m Additional funding charge (excess of line 13j over line 13k (if any), plus line 13l(6))	00
n Assets needed to increase current liability percentage to 100% (line 13d)	00
o Smaller of line 13m or line 13n	00
p Interest adjustment	00
q Additional funding charge. Add lines 13o and 13p.....	00
14 Transition rule:	
a Initial funded current liability percentage. Enter the percentage from line 12d of the 1995 Schedule B here	%
b Target percentage for transition rule (see instructions)	%
c Target amount (see instructions)	00
d Enter the amount from line 13q here (additional funding charge under prior law)	00
e Additional funding charge under transition rule of Code section 412(l)(11): Enter the greater of line 14c or 14d	00

0 7 9 9 0 0 0 8 1 Y



Schedule C (Form 5500) 1999

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(a) Name										
<input type="text"/>										
(b) Employer identification number (see instructions)	<input type="text"/> - <input type="text"/>									
(c) Official plan position	<input type="text"/>									
(d) Relationship to employer, employee organization, or person known to be a party-in interest	<input type="text"/>									
(e) Gross salary or allowances paid by plan	<input type="text"/> 00		(f) Fees and commissions paid by plan		<input type="text"/> 00		(g) Nature of service code(s) (see instructions)			
<input type="text"/>										
(a) Name										
<input type="text"/>										
(b) Employer identification number (see instructions)	<input type="text"/> - <input type="text"/>									
(c) Official plan position	<input type="text"/>									
(d) Relationship to employer, employee organization, or person known to be a party-in interest	<input type="text"/>									
(e) Gross salary or allowances paid by plan	<input type="text"/> 00		(f) Fees and commissions paid by plan		<input type="text"/> 00		(g) Nature of service code(s) (see instructions)			
<input type="text"/>										
(a) Name										
<input type="text"/>										
(b) Employer identification number (see instructions)	<input type="text"/> - <input type="text"/>									
(c) Official plan position	<input type="text"/>									
(d) Relationship to employer, employee organization, or person known to be a party-in interest	<input type="text"/>									
(e) Gross salary or allowances paid by plan	<input type="text"/> 00		(f) Fees and commissions paid by plan		<input type="text"/> 00		(g) Nature of service code(s) (see instructions)			
<input type="text"/>										
(a) Name										
<input type="text"/>										
(b) Employer identification number (see instructions)	<input type="text"/> - <input type="text"/>									
(c) Official plan position	<input type="text"/>									
(d) Relationship to employer, employee organization, or person known to be a party-in interest	<input type="text"/>									
(e) Gross salary or allowances paid by plan	<input type="text"/> 00		(f) Fees and commissions paid by plan		<input type="text"/> 00		(g) Nature of service code(s) (see instructions)			

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Schedule C (Form 5500) 1999

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Part II Termination Information on Accountants and Enrolled Actuaries (see Instructions)

(a) Name												
----------	--	--	--	--	--	--	--	--	--	--	--	--

(b) EIN	-										
---------	---	--	--	--	--	--	--	--	--	--	--

(c) Position

(d) Address	Street Address											
-------------	----------------	--	--	--	--	--	--	--	--	--	--	--

City				State	Zip Code	-						
------	--	--	--	-------	----------	---	--	--	--	--	--	--

(e) Telephone No.	-		-													
-------------------	---	--	---	--	--	--	--	--	--	--	--	--	--	--	--	--

EXPLANATION

(a) Name												
----------	--	--	--	--	--	--	--	--	--	--	--	--

(b) EIN	-										
---------	---	--	--	--	--	--	--	--	--	--	--

(c) Position

(d) Address	Street Address											
-------------	----------------	--	--	--	--	--	--	--	--	--	--	--

City				State	Zip Code	-						
------	--	--	--	-------	----------	---	--	--	--	--	--	--

(e) Telephone No.	-		-													
-------------------	---	--	---	--	--	--	--	--	--	--	--	--	--	--	--	--

EXPLANATION

0 9 9 9 0 0 0 3 1 V



Schedule D (Form 5500) 1999

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(a) Name of MTIA, CCT, PSA, or 103-12IE																				
(b) Name of sponsor of entity listed in (a)																				
(c) EIN					PN					(d) Entity code					(e) Dollar value of interest in MTIA, CCT, PSA, or 103-12IE at end of year (see instructions)					

1 1 9 9 0 0 0 2 1 N



Schedule D (Form 5500) 1999

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(a) Plan name																				
(b) Name of plan sponsor																				
(c) EIN	<input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/>				PN <input type="text"/> <input type="text"/>															

(a) Plan name																				
(b) Name of plan sponsor																				
(c) EIN			-					PN												

(a) Plan name	<input style="width: 1000px; height: 30px; border: none; border-bottom: 1px solid black;" type="text"/>	
(b) Name of plan sponsor	<input style="width: 1000px; height: 30px; border: none; border-bottom: 1px solid black;" type="text"/>	
(c) EIN	<input style="width: 50px; height: 20px; border: 1px solid black;" type="text"/> - <input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/>	PN <input style="width: 50px; height: 20px; border: 1px solid black;" type="text"/>

(a) Plan name	<input style="width: 1000px; height: 30px; border: none; font-size: 10px; font-family: monospace; padding: 2px; margin: 0;" type="text"/>	
(b) Name of plan sponsor	<input style="width: 1000px; height: 30px; border: none; font-size: 10px; font-family: monospace; padding: 2px; margin: 0;" type="text"/>	
(c) EIN	<input style="width: 50px; height: 20px; border: 1px solid black; font-size: 10px; font-family: monospace; padding: 2px; margin: 0;" type="text"/> - <input style="width: 100px; height: 20px; border: 1px solid black; font-size: 10px; font-family: monospace; padding: 2px; margin: 0;" type="text"/>	PN <input style="width: 50px; height: 20px; border: 1px solid black; font-size: 10px; font-family: monospace; padding: 2px; margin: 0;" type="text"/>

(a) Plan name	[REDACTED]		
(b) Name of plan sponsor	[REDACTED]		
(c) EIN	[REDACTED] - [REDACTED]	PN	[REDACTED]

1 1 9 9 0 0 0 4 1 P



Schedule E (Form 5500) 1999

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- b At all times after the acquisition of the employer securities with the loan proceeds, did the ESOP own more than 50% of: Yes No
 (i) each class of outstanding stock of the employer corporation, or
 (ii) the total value of all outstanding stock of the corporation?
- c If line 8b is "No," does the securities acquisition loan satisfy one of the transition rules of Act section 7301(f) of OBRA 1989 or satisfy the exception in Code section 133(b)(6)(B)(ii)? (See instructions for explanation of transition rules.)
- d If line 8c is "No," enter the name and address of payees to whom interest with respect to securities acquisition loans was paid.

Name												
Street												
City							State	Zip Code	-			

9 What was the amount of interest paid on the securities acquisition loan? ► 00

- 10a Were any securities disposed of within 3 years after the plan acquired section 133 securities in a taxable event described in Code section 4978B(c)? Yes No
- b If line 10a is "Yes," does one or more of the exceptions provided in Code section 4978B(d) apply to all dispositions of employer securities?
- 11a Were any of the ESOP's securities acquisition loans refinanced during this reporting period? Yes No
- b If line 11a is "Yes," does the refinancing meet the requirements of Act section 1602 of SBJPA 1996? Yes No
If the employer maintaining the ESOP deducted dividends under Code section 404(k), answer the questions on lines 12 through 14, otherwise skip to line 15.
- 12a Did the amount of the dividends paid exceed the employer's current or accumulated earnings and profits within the meaning of Code section 316? Yes No
- b Is the amount paid a dividend under applicable state law? Yes No
- 13 If dividends deducted under Code section 404(k) were used to repay an exempt loan, were any dividends used to repay the loan generated by securities that were not acquired with the proceeds of the loan being repaid? Yes No
- 14 If the answer to line 13 is "Yes," were the dividends paid with respect to employer securities that satisfy the transition rules of Act section 7302(b)(2) of OBRA 1989? Yes No

- 15 Complete the following information for each class of stock owned by the ESOP:
- (a) Class of stock (b) Common stock (C) (c) Readily tradable*
 Preferred stock (P) Yes (Y) No (N)
- (d) Dividend rate during plan year** % (e) Dividends paid to participants*** 00
- (f) Dividends used to repay exempt loan (1) allocated stock 00 (2) unallocated stock 00

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(a) Class of stock	(b) Common stock (C) Preferred stock (P)	(c) Readily tradable* Yes (Y) No (N)
	<input type="checkbox"/>	<input type="checkbox"/>
(d) Dividend rate during plan year**	(e) Dividends paid to participants***	 .00
(f) Dividends used to repay exempt loan	(1) allocated stock	(2) unallocated stock
	 .00	 .00
(a) Class of stock	(b) Common stock (C) Preferred stock (P)	(c) Readily tradable* Yes (Y) No (N)
	<input type="checkbox"/>	<input type="checkbox"/>
(d) Dividend rate during plan year**	(e) Dividends paid to participants***	 .00
(f) Dividends used to repay exempt loan	(1) allocated stock	(2) unallocated stock
	 .00	 .00
(a) Class of stock	(b) Common stock (C) Preferred stock (P)	(c) Readily tradable* Yes (Y) No (N)
	<input type="checkbox"/>	<input type="checkbox"/>
(d) Dividend rate during plan year**	(e) Dividends paid to participants***	 .00
(f) Dividends used to repay exempt loan	(1) allocated stock	(2) unallocated stock
	 .00	 .00
Totals of dividends reported on Line 15(e) and (f) for all classes of stock. ►	(e) Dividends paid to participants***	 .00
(f) Dividends used to repay exempt loan	(1) allocated stock	(2) unallocated stock
	 .00	 .00

* If the stock is readily tradable on an established securities market within the meaning of Code section 409(l), enter "Y," otherwise enter "N."

** Dividend rate paid for each class of stock during the plan year.

*** Dividend paid directly to or distributed to participants.

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SCHEDULE G
(Form 5500)Department of the Treasury
Internal Revenue ServiceDepartment of Labor
Pension and Welfare Benefits
Administration**Financial Transaction Schedules**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

► File as an attachment to Form 5500.

Official Use Only
OMB No. 1210-0110**1999**This Form is Open to
Public Inspection.For the calendar year 1999
or fiscal plan year beginning**MM / DD / YY YY**

, and ending

MM / DD / YY YY

A Name of plan

B Three-digit
plan number ►

C Name of plan sponsor as shown on line 2a of Form 5500

D Employer Identification Number

-**Part I Schedule of Loans or Fixed Income Obligations In Default or Classified as Uncollectible**(a) Party-in-interest

(b) Identity and address of obligor

Name												
Street												
City							State	Zip Code				

(c) Original amount of loan

(f) Unpaid balance at end of year

Amount received during reporting year	(d) Principal	00		(e) Interest	00		(f) Unpaid balance at end of year					
---------------------------------------	---------------	----	--	--------------	----	--	-----------------------------------	--	--	--	--	--

(g) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items

Amt. overdue (h) Principal

00 Amt. overdue (i) Interest

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(a) Party-in-Interest

(b) Identity and address of obligor

Name												
Street												
City					State		Zip Code					

(c) Original amount of loan

Amount received during reporting year

(d) Principal

(e) Interest

(f) Unpaid balance at end of year

(g) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items

Amt. overdue (h) Principal

Amt. overdue (i) Interest

.00

(a) Party-in-Interest

(b) Identity and address of obligor

Name												
Street												
City					State		Zip Code					

(c) Original amount of loan

Amount received during reporting year

(d) Principal

(e) Interest

(f) Unpaid balance at end of year

(g) Detailed description of loan including dates of making and maturity, interest rate, the type and value of collateral, any renegotiation of the loan and the terms of the renegotiation, and other material items

Amt. overdue (h) Principal

Amt. overdue (i) Interest

.00

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Schedule G (Form 5500) 1999

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Part II Schedule of Leases In Default or Classified as Uncollectible

- | | |
|--|-------|
| (a) Party-in-Interest | _____ |
| (b) Identity of lessor/lessee | _____ |
| (c) Relationship to plan, employer, employee organization or other party-in-interest | _____ |
| (d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased) | _____ |
| (e) Original cost | _____ |
| (f) Current value at time of lease | _____ |
| (g) Gross rental receipts during the plan year | _____ |
| (h) Expenses paid during the plan year | _____ |
| (i) Net receipts | _____ |
| (j) Amount in arrears | _____ |

- | | |
|--|--------------------------|
| (a) Party-in-Interest | <input type="checkbox"/> |
| (b) Identity of lessor/lessee | [24 boxes] |
| (c) Relationship to plan, employer, employee organization or other party-in-interest | [24 boxes] |
| (d) Terms and description (type of property, location and date it was purchased, terms regarding rent, taxes, insurance, repairs, expenses, renewal options, date property was leased) | [24 boxes] |
| (e) Original cost | [12 boxes] .00 |
| (f) Current value at time of lease | [12 boxes] .00 |
| (g) Gross rental receipts during the plan year | [12 boxes] .00 |
| (h) Expenses paid during the plan year | [12 boxes] .00 |
| (i) Net receipts | [12 boxes] .00 |
| (j) Amount in arrears | [12 boxes] .00 |

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**SCHEDULE H
(Form 5500)**Department of the Treasury
Internal Revenue ServiceDepartment of Labor Pension and
Welfare Benefits Administration
Pension Benefit Guaranty Corporation**Financial Information**

This schedule is required to be filed under Section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

► File as an attachment to Form 5500.

Official Use Only

OMB No. 1210-0110

1999This Form is Open
to Public Inspection.For the calendar year 1999
or fiscal plan year beginning**MM / DD / YY YY**

, and ending

MM / DD / YY YY

A Name of plan

B Three-digit
plan number ►

C Plan sponsor's name as shown on line 2a of Form 5500

D Employer Identification Number

-**Part I Asset and Liability Statement**

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines c(9) through c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. DFEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, 1i, and, except for master trust investment accounts, also do not complete lines 1d and 1e. See Instructions.

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	00	00
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	00	00
(2) Participant contributions	00	00
(3) Other	00	00
c General Investments:		
(1) Interest-bearing cash (including money market accounts and certificates of deposit)	00	00
(2) U.S. Government securities	00	00
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	00	00
(B) All other	00	00
(4) Corporate stocks (other than employer securities):		
(A) Preferred	00	00
(B) Common	00	00
(5) Partnership/joint venture interests	00	00

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(a) Beginning of Year

(b) End of Year

(6) Real estate (other than employer real property)	00	00
(7) Loans (other than to participants) ...	00	00
(8) Participant loans	00	00
(9) Value of interest in common/ collective trusts ..	00	00
(10) Value of interest in pooled separate accounts	00	00
(11) Value of interest in master trust investment accounts	00	00
(12) Value of interest in 103-12 investment entities	00	00
(13) Value of interest in registered investment companies (e.g., mutual funds)	00	00
(14) Value of funds held in insurance company general account (unallocated contracts)	00	00
(15) Other	00	00
d Employer-related investments:		
(1) Employer securities	00	00
(2) Employer real property	00	00
e Buildings and other property used in plan operation	00	00
f Total assets (add all amounts in lines 1a through 1e) ...	00	00
Liabilities		
g Benefit claims payable	00	00
h Operating payables	00	00
i Acquisition indebtedness	00	00
j Other liabilities	00	00
k Total liabilities (add all amounts in lines 1g through 1j)	00	00
Net Assets		
l Net assets (subtract line 1k from line 1f)	00	00

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Schedule H (Form 5500) 1999

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Part II Income and Expenses Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. DFEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income	(a) Amount
a Contributions:	
(1) Received or receivable in cash from:	
(A) Employers	00
(B) Participants	00
(C) Others (including rollovers)	00
(2) Noncash contributions	00
	(b) Total
(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2)	00
b Earnings on Investments: (1) Interest:	
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	00
(B) U.S. Government securities	00
(C) Corporate debt instruments	00
(D) Loans (other than to participants)	00
(E) Participant loans	00
(F) Other	00
(G) Total interest. Add lines 2b(1)(A) through (F)	00
 (2) Dividends:	
(A) Preferred stock	00
(B) Common stock	00
(C) Total dividends. Add lines 2b(2)(A) and (B)	00
 (3) Rents	
 (4) Net gain (loss) on sale of assets:	
(A) Aggregate proceeds	00
(B) Aggregate carrying amount (see instructions)	00
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	00

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Schedule H (Form 5500) 1999

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(5) Unrealized appreciation (depreciation) of assets:	(a) Amount
(A) Real estate	00
(B) Other	00
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	00
(6) Net investment gain (loss) from common/collective trusts	00
(7) Net investment gain (loss) from pooled separate accounts	00
(8) Net investment gain (loss) from master trust investment accounts	00
(9) Net investment gain (loss) from 103-12 investment entities	00
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	00
c Other income	00
d Total income. Add all income amounts in column (b) and enter total	00
Expenses	
e Benefit payment and payments to provide benefits:	
(1) Directly to participants or beneficiaries, including direct rollovers	00
(2) To insurance carriers for the provision of benefits	00
(3) Other	00
(4) Total benefit payments. Add lines 2e(1) through (3)	00
f Corrective distributions (see instructions)	00
g Certain deemed distributions of participant loans (see instructions)	00
h Interest expense	00
i Administrative expenses:	
(1) Professional fees	00
(2) Contract administrator fees	00
(3) Investment advisory and management fees ..	00
(4) Other	00
(5) Total administrative expenses. Add lines 2i(1) through (4)	00
j Total expenses. Add all expense amounts in column (b) and enter total	00

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Schedule H (Form 5500) 1999

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	Yes	No	Amount
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?.....	<input type="checkbox"/>	<input type="checkbox"/>	00
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	<input type="checkbox"/>	<input type="checkbox"/>	00
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	<input type="checkbox"/>	<input type="checkbox"/>	00
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see Instructions for format requirements)	<input type="checkbox"/>	<input type="checkbox"/>	
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see Instructions for format requirements)	<input type="checkbox"/>	<input type="checkbox"/>	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	<input type="checkbox"/>	<input type="checkbox"/>	
5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? If yes, enter the amount of any plan assets that reverted to the employer this year	<input type="checkbox"/>	<input type="checkbox"/>	00
5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See Instructions).			
5b(1) Name of plan	<input type="text"/>		
5b(2) EIN	<input type="text"/>	-	<input type="text"/>
5b(3) PN	<input type="text"/>		
5b(1) Name of plan	<input type="text"/>		
5b(2) EIN	<input type="text"/>	-	<input type="text"/>
5b(3) PN	<input type="text"/>		
5b(1) Name of plan	<input type="text"/>		
5b(2) EIN	<input type="text"/>	-	<input type="text"/>
5b(3) PN	<input type="text"/>		
5b(1) Name of plan	<input type="text"/>		
5b(2) EIN	<input type="text"/>	-	<input type="text"/>
5b(3) PN	<input type="text"/>		

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**SCHEDULE I
(Form 5500)**Department of the Treasury
Internal Revenue ServiceDepartment of Labor Pension and
Welfare Benefits Administration

Pension Benefit Guaranty Corporation

Financial Information -- Small Plan

This schedule is required to be filed under Section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

► File as an attachment to Form 5500.

Official Use Only
OMB No. 1210-0110**1999**This Form is Open
to Public Inspection.For the calendar year 1999
or fiscal plan year beginning**MM / DD / YYYY**

, and ending

MM / DD / YYYY

A Name of plan

B Three-digit
plan number ►

C Plan sponsor's name as shown on line 2a of Form 5500

D Employer Identification Number

-

Complete Schedule I if the plan covered fewer than 100 participants as of the beginning of the plan year. You may also complete Schedule I if you are filing as a small plan under the 80-120 participant rule (see instructions). Complete Schedule H if reporting as a large plan or DFE.

Part I Small Plan Financial Information

Report below the current value of assets and liabilities, income, expenses, transfers and changes in net assets during the plan year. Combine the value of plan assets held in more than one trust. Do not enter the value of the portion of an insurance contract that guarantees during this plan year to pay a specific dollar benefit at a future date. Include all income and expenses of the plan including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar.

1 Plan Assets and Liabilities:**(a) Beginning of Year****(b) End of Year**

a Total plan assets

- 00

b Total plan liabilities

- 00c Net plan assets
(subtract line 1b
from line 1a)**-** 00**2 Income, Expenses, and Transfers for this Plan Year:****(a) Amount**

a Contributions received or receivable

(1) Employers

- 00

(2) Participants

- 00

(3) Others (including rollovers)

- 00

b Noncash contributions

- 00

c Other income

- 00

d Total Income (add lines 2a(1), 2a(2), 2a(3), 2b, and 2c)

- 00

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	(a) Amount		
2e Benefits paid (including direct rollovers)	00		
f Corrective distributions (see instructions)	00		
g Certain deemed distributions of participant loans (see instructions)	00		
h Other expenses	00		
i Total expenses (add lines 2e, 2f, 2g, and 2h)		00	
j Net income (loss) (subtract line 2i from line 2d)		00	
k Net transfers	00		
3 Specific Assets: If the plan held any assets in one or more of the following specific categories, check yes and enter the current value as of the end of the plan year. Allocate the value of the plan's interest in a commingled trust containing the assets of more than one plan on a line-by-line basis unless the trust meets one of the specific exceptions described in the instructions.			
	Yes	No	Amount
a Partnership/joint venture interests	<input type="checkbox"/>	<input type="checkbox"/>	00
b Employer real property	<input type="checkbox"/>	<input type="checkbox"/>	00
c Real estate (other than employer real property)	<input type="checkbox"/>	<input type="checkbox"/>	00
d Employer securities	<input type="checkbox"/>	<input type="checkbox"/>	00
e Participant loans	<input type="checkbox"/>	<input type="checkbox"/>	00
f Loans (other than to participants)	<input type="checkbox"/>	<input type="checkbox"/>	00
g Tangible personal property	<input type="checkbox"/>	<input type="checkbox"/>	00

Part II Transactions During Plan Year

4 During the plan year:	Yes	No	Amount
a Did the employer fail to transmit to the plan any participant contributions within the maximum time period described in 29 CFR 2510.3-102? (See instructions)	<input type="checkbox"/>	<input type="checkbox"/>	00
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by the participants' account balance	<input type="checkbox"/>	<input type="checkbox"/>	00
c Were any leases to which the plan was a party in default or classified during the year as uncollectible?	<input type="checkbox"/>	<input type="checkbox"/>	00

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Schedule I (Form 5500) 1999

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	Yes	No	Amount	
d Did the plan engage in any nonexempt transaction with any party-in-interest?	<input type="checkbox"/>	<input type="checkbox"/>	00	
e Was the plan covered by a fidelity bond?	<input type="checkbox"/>	<input type="checkbox"/>	00	
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	<input type="checkbox"/>	<input type="checkbox"/>	00	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	<input type="checkbox"/>	<input type="checkbox"/>	00	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	<input type="checkbox"/>	<input type="checkbox"/>	00	
i Did the plan at any time hold 20% or more of its assets in any single security, debt, mortgage, parcel of real estate, or partnership/joint venture interest?	<input type="checkbox"/>	<input type="checkbox"/>	00	
j Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	<input type="checkbox"/>	<input type="checkbox"/>	00	
<hr/>				
5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? If yes, enter the amount of any plan assets that reverted to the employer this year	Yes	No	Amount	
	<input type="checkbox"/>	<input type="checkbox"/>	00	
5b If during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See Instructions.)				
5b(1) Name of plan	<input type="checkbox"/>			
	5b(2) EIN	<input type="checkbox"/> - <input type="checkbox"/>	5b(3) PN	<input type="checkbox"/>
5b(1) Name of plan	<input type="checkbox"/>			
	5b(2) EIN	<input type="checkbox"/> - <input type="checkbox"/>	5b(3) PN	<input type="checkbox"/>
5b(1) Name of plan	<input type="checkbox"/>			
	5b(2) EIN	<input type="checkbox"/> - <input type="checkbox"/>	5b(3) PN	<input type="checkbox"/>
5b(1) Name of plan	<input type="checkbox"/>			
	5b(2) EIN	<input type="checkbox"/> - <input type="checkbox"/>	5b(3) PN	<input type="checkbox"/>

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**SCHEDULE R
(Form 5500)**

Department of the Treasury
Internal Revenue Service
Department of Labor Pension and
Welfare Benefits Administration
Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

► File as an Attachment to Form 5500.

**For the calendar year 1999
or fiscal plan year beginning**

MM / DD / YYYY

, and ending

MM / DD / YYYY

4000

OMB No. 1210-0110

1999

**This Form Is Open
to Public Inspection.**

A Name of plan

B Three-digit
plan number

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C. Plan sponsor's name as shown on line 2a of Form 5500

B Three-digit
plan number

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Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

- | | | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---------------------------|
| <p>1 Total value of distributions paid in property other than in cash, annuity contracts, or publicly traded employer securities</p> <p>2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits). }</p> | <table border="1" style="border-collapse: collapse; width: 150px;"> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> </table> | | | | | | | | | | | | | | | | | | | <p>.....</p> <p>.....</p> |
| | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

- 3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year

Part II **Funding Information** (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part)

- | | | |
|---|---|---|
| <p>4 Is the plan administrator making an election under Code section 412(c)(8) or ERISA section 302(c)(8)?</p> <p>If the plan is a defined benefit plan, go to line 7.</p> <p>5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions, and enter the date of the ruling letter granting the waiver.</p> <p>If you completed line 5, complete lines 3, 9, and 10 of Schedule B and do not complete the remainder of this schedule.</p> <p>6a Enter the minimum required contribution for this plan year</p> <p>b Enter the amount contributed by the employer to the plan for this plan year</p> <p>c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)</p> <p>If you completed line 6c, do not complete the remainder of this schedule.</p> | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | MM / DD / YY YY |
|---|---|---|

For Paperwork Reduction Act Notice and OMB Control Numbers, see the Instructions for Form 5500. Cat. No. 24419B Schedule R (Form 5500) 1999

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7 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure providing automatic approval for the change, does the plan sponsor or plan administrator agree with the change? Yes No N/A

Do not complete line 8, if the plan is a multiemployer plan or a plan with 100 or fewer participants during the prior plan year (see Instructions).

8 Is the employer electing to compute minimum funding for this plan year using the transitional rule provided in Code section 412(l)(11) and ERISA section 302(d)(11)? Yes No N/A

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased the value of benefits? (see Instructions) Yes No

2 1 9 9 0 0 0 2 1 0



**SCHEDULE T
(Form 5500)**Department of the Treasury
Internal Revenue Service**Qualified Pension Plan Coverage Information**This form is required to be filed under section 6058(a) of the
Internal Revenue Code (the Code).

► File as an attachment to Form 5500.

Official Use Only
OMB No. 1210-0110**1999**This Form Is Open to
Public Inspection.For the calendar year 1999
or fiscal plan year beginning**MM / DD / YY YY YY**

, and ending

MM / DD / YY YY YY

A Name of plan

B Three-digit
plan number ►

C Plan sponsor's name as shown on line 2a of Form 5500

D Employer Identification Number

-

Note: If the plan is maintained by:

- More than one employer and benefits employees who are not collectively-bargained employees, a separate Schedule T may be required for each employer (see the instruction for line 1).
- An employer that operates qualified separate lines of business (QSLOBs) under Code section 414(r), a separate Schedule T may be required for each QSLOB (see the instruction for line 2).

1 If this schedule is being filed to provide coverage information regarding the noncollectively bargained employees of an employer participating in a plan maintained by more than one employer, enter the name and EIN of the participating employer:

1a Name of participating employer

1b Employer identification number

-

2 If the employer maintaining the plan operates QSLOBs, enter the following information:

a The number of QSLOBs that the employer operates is

b The number of such QSLOBs that have employees benefiting under this plan is

c Does the employer apply the minimum coverage requirements to this plan on an employer-wide rather than a QSLOB basis?

 Yes No

d If the entry on line 2b is two or more and line 2c is "No," identify the QSLOB to which the coverage information given on line 3 or 4 relates.

►

3 Exceptions—Check the box before each statement that describes the plan or the employer.

If you check any box, do not complete the rest of this Schedule.

- a The employer employs only highly compensated employees (HCEs).
- b No HCEs benefited under the plan at anytime during the plan year.
- c The plan benefits only collectively-bargained employees.
- d The plan benefits all nonexcludable nonhighly compensated employees of the employer (as defined in Code sections 414(b), (c), and (m)), including leased employees and self-employed individuals.
- e The plan is treated as satisfying the minimum coverage requirements under Code section 410(b)(6)(C).

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500. Cat. No. 22770R Schedule T (Form 5500) 1999

2 7 9 9 0 0 0 1 1 T



4 Enter the date the plan year began for which coverage data is being submitted

/ /

a Did any leased employees perform services for the employer at any time during the plan year?

Yes No

b In testing whether the plan satisfies the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4), does the employer aggregate plans?

Yes No

c Complete the following:

(1) Total number of employees of the employer (as defined in Code section 414(b), (c), and (m)), including leased employees and self-employed individuals

(2) Number of excludable employees as defined in IRS regulations (see Instructions)

(3) Number of nonexcludable employees. (Subtract line 4c(2) from line 4c(1))

(4) Number of nonexcludable employees (line 4c(3)) who are HCEs

(5) Number of nonexcludable employees (line 4c(3)) who benefit under the plan

(6) Number of benefiting nonexcludable employees (line 4c(5)) who are HCEs

d Enter the plan's ratio percentage and, if applicable, identify below the disaggregated part of the plan to which the information on lines 4c and 4d pertains (see Instructions)

%

►

e Identify any disaggregated part of the plan and enter its ratio percentage:

(1) Disaggregated part:

Ratio Percentage:

%

(2) Disaggregated part:

Ratio Percentage:

%

(3) Disaggregated part:

Ratio Percentage:

%

f This plan satisfies the coverage requirements on the basis of (check one):

(1) the ratio percentage test

(2) average benefit test

2 7 9 9 0 0 0 2 1 U



Department of the Treasury
Internal Revenue Service

Department of Labor
Pension and Welfare
Benefits Administration

**Pension Benefit
Guaranty Corporation**

1999

Instructions for Form 5500

Annual Return/Report of Employee Benefit Plan

*Code references are to the Internal Revenue Code.
ERISA refers to the Employee Retirement Income Security Act of 1974.*

Changes To Note for 1999

• New Streamlined Form 5500:

This year's Form 5500 Series has been substantially revised and improved. We replaced the Form 5500, Form 5500-C, and Form 5500-R with one Form 5500 intended to streamline the report and the methods by which it is filed and processed. The revised form is patterned along the lines of tax returns familiar to individual and corporate taxpayers – a simple main form with basic identifying information and a checklist that guides each filer to more detailed schedules that are applicable to the filer's specific type of plan.

• EFAST Processing System:

There are several important changes that will benefit filers in particular. We developed a new computerized system to process Form 5500 return/reports called the ERISA Filing Acceptance System or "EFAST." For the first time you will file your Form 5500 with the U.S. Department of Labor's Pension and Welfare Benefits Administration (PWBA) rather than the Internal Revenue Service (see **Where To File** on page 5 for the new mailing and private delivery addresses).

You can choose a "machine print" format using computer software to complete the form. Machine print forms can be filed electronically or by mail (including certain private delivery services). We encourage filers to file machine print versions of the form and think most of you will find that to be the best option. For instance, the machine print forms can be easily printed out on computer printers and the computer software should help filers avoid common mistakes. Electronic filers will have to file a new EFAST form to get a digital signature and other codes needed to file an electronic return/report. Check the Department of Labor's Web Page at www.efast.dol.gov periodically, beginning in late March, 2000 for updates.

You can also use a "hand print" format that is completed by hand or typewriter. However, the hand print format can be filed only by mail (including certain private delivery services). The hand print version of the form is a "machine readable" form. As such, it must be printed using special paper, special green ink, and within precise specifications. Filers should not substitute a black and white or other reproduction of these hand print forms. A copy of the hand print forms is included in the **Package 5500**. You can get additional copies of the green ink forms 24 hours a day, 7 days a week, by calling **1-800-TAX-FORM** (1-800-829-3676).

• Direct Filing Entities:

All Direct Filing Entities (DFEs) must now use the Form 5500; however, a one-time **1999 Transition Rule** permits all DFEs with a fiscal year ending in 1999 to file on or before October 16, 2000 (see **When To File** on page 4).

Large plans participating in Common/Collective Trusts (CCTs) or Pooled Separate Accounts (PSAs) that are not DFEs (those that do not file a Form 5500) will have to allocate the underlying assets of such CCTs and PSAs and report the value on a line-by-line basis on the Schedule H (Form 5500) (see **Schedule H, Specific Instructions**). However, under a **1999 Transition Rule**, this requirement is deferred until plan years beginning in 2000.

About the Form 5500

The Annual Return/Report Form 5500 is used to report information concerning employee benefit plans, Direct Filing Entities (DFEs) and fringe benefit plans. See **Who Must File** on page 2, and **When To File** and **Where To File** on pages 4 and 5.

Any administrator or sponsor of an employee benefit plan subject to ERISA must file information about each plan every year (Code section 6058 and ERISA sections 104 and 4065). Every employer maintaining a specified fringe benefit plan as described in Code section 6039D (except Code sections 79, 105, 106, 120, and 129 plans) is also required to file each year.

The Internal Revenue Service (IRS), Department of Labor (DOL), and Pension Benefit Guaranty Corporation (PBGC) have consolidated their returns and report forms to minimize the filing burden for plan administrators and employers. The chart on pages 8 and 9 gives a brief guide to the annual return/report requirements for the 1999 Form 5500. Employers and administrators who comply with the instructions for the Form 5500 and schedules will generally satisfy the annual reporting requirements for the IRS and DOL. Plans covered by the PBGC have special additional requirements, including filing Annual Premium Payment (PBGC Form 1) and reporting certain transactions directly with that agency. See PBGC's Premium Package (Form 1).

Each Form 5500 must accurately reflect the characteristics and operations of the plan or arrangement being reported. The requirements for completing the Form 5500 vary according to the type of plan or arrangement. The section **Lines and Schedules To Complete** on page 6, summarizes what information must be reported for different types of plans and arrangements.

The Form 5500 and attachments are screened by a computer process for completeness. The filing may be rejected based upon this review. We urge all employers and plan administrators to provide complete and accurate information and otherwise comply fully with the filing requirements.

ERISA and the Code provide for the assessment or imposition of penalties for not submitting the required information when due. See **Penalties** on page 5.

Annual reports filed under Title I of ERISA must be made available by plan administrators to plan participants and by the Department of Labor to the public pursuant to ERISA sections 104 and 106.

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Telephone Assistance

If you have questions and/or need help completing this form, please call **1-877-829-5500**. This line has been established by the IRS to assist filers with certain questions pertaining to retirement plans (e.g., pension and profit-sharing plans (including 401(k) plans)), including questions on Schedules B, E, F, H, I, P, R, SSA, and T. This toll-free telephone service is available Monday through Friday from 8:00 a.m. to 9:30 p.m. EST.

How To Get IRS Forms and Publications**Personal Computer**

You can access the IRS's Internet Web Site 24 hours a day, 7 days a week at www.irs.gov to:

- Download forms, instructions, and publications.
 - See answers to frequently asked tax questions.
 - Search publications on-line by topic or keyword.
 - Send us comments or request help by e-mail.
 - Sign up to receive local and national tax news by e-mail.
- You can also reach us using file transfer protocol at [ftp.irs.gov](ftp://ftp.irs.gov)

By phone and in person.

You can order forms and publications 24 hours a day, 7 days a week, by calling **1-800-TAX-FORM** (1-800-829-3676). You can also get most forms and publications at your local IRS office.

General Instructions**Section 1:****Who Must File**

A return/report must be filed every year for every pension benefit plan, welfare benefit plan, fringe benefit plan, and Direct Filing Entity described below. (Code sections 6058, 6039D, and ERISA sections 104 and 4065).

Pension Benefit Plan

All pension benefit plans covered by ERISA are required to file a Form 5500 except as provided in **Pension and Welfare Plans Excluded From Filing** on page 3. The return/report is due whether or not the plan is qualified and even if benefits no longer accrue, contributions were not made this plan year, or contributions are no longer made. Pension benefit plans required to file include both defined benefit plans and defined contribution plans.

The following are among the pension benefit plans for which a return/report must be filed:

1. Profit-sharing, stock bonus, money purchase, 401(k) plans, etc.
2. Annuity arrangements under Code section 403(b)(1).
3. Custodial accounts established under Code section 403(b)(7) for regulated investment company stock.
4. Individual retirement accounts (IRAs) established by an employer under Code section 408(c).
5. Pension benefit plans maintained outside the United States primarily for nonresident aliens if the employer who maintains the plan is:
 - a domestic employer, or
 - a foreign employer with income derived from sources within the United States (including foreign subsidiaries of domestic employers) if contributions to the plan are deducted on its U.S. income tax return. For this type of plan, enter 3A on Form 5500, Part II, line 8a.

6. Church pension plans electing coverage under Code section 410(d). Church plans that elect should enter 813000 as the business code on Form 5500, Part II, line 2d.

7. Pension benefit plans that cover residents of Puerto Rico, the U.S. Virgin Islands, Guam, Wake Island, or American Samoa. This includes a plan that elects to have the provisions of section 1022(i)(2) of ERISA apply.

8. Plans that satisfy the Actual Deferral Percentage requirements of Code section 401(k)(3)(A)(ii) by adopting the "SIMPLE" provisions of section 401(k)(11).

See **Lines and Schedules To Complete** on page 6 and **Pension and Welfare Plans Excluded From Filing** on page 3 for more information about what must be completed for pension and welfare plans.

Special Rules for Certain Plans of Partnerships and Wholly Owned Trades or Businesses

A plan that provides deferred compensation solely for (1) an individual or an individual and his or her spouse who wholly own a trade or business, whether incorporated or unincorporated; or (2) partners or the partners and the partners' spouses in a partnership may generally file **Form 5500-EZ**, Annual Return of One-Participant (Owners and Their Spouses) Retirement Plan, rather than a Form 5500, provided that the plan:

1. Satisfies the minimum coverage requirements of Code section 410(b) without being combined with any other plan maintained by the employer;
2. Does not cover a business that is a member of a "controlled group"; or
3. Does not cover a business for which leased employees (as defined in Code section 414(n)(2)) perform services.

A plan that meets all of the above conditions is exempt from filing the Form 5500-EZ if the plan (and any other plans of the employer) had total assets of \$100,000 or less at the end of every plan year beginning on or after 1/1/94.

For this purpose, a "controlled group" is a controlled group of corporations under Code section 414(b), a group of trades or businesses under common control under Code section 414(c), or an affiliated service group under Code section 414(m) that includes the business of the owner or partner covered by the plan.

Welfare Benefit Plan

All welfare benefit plans covered by ERISA are required to file a Form 5500 except as provided below in **Pension and Welfare Plans Excluded From Filing**. Welfare benefit plans provide benefits such as medical, dental, life insurance, apprenticeship and training, scholarship funds, severance pay, disability, etc.

See **Lines and Schedules To Complete** on page 6 for more information.

Reminder: *The administrator of an employee welfare benefit plan that provides benefits wholly or partially through a Multiple Employer Welfare Arrangement (MEWA) as defined in ERISA section 3(40) must file a Form 5500, unless otherwise exempt.*

Fringe Benefit Plan

Cafeteria plans described in Code section 125, educational assistance programs described in Code section 127, and adoption assistance programs described in Code section 137 are considered fringe benefit plans and are required to file the annual information specified by Code section 6039D. However, Code section 127 educational assistance programs that provide only job-related training which is deductible as an ordinary and necessary business expense under Code section 162 do not need to file Form 5500.

Note: *Fringe benefit plans often are associated with one or more welfare plans. A single Form 5500 may be filed for the fringe benefit plan and an associated welfare plan if all the required information is completed for both plans.*

See **Lines and Schedules To Complete** on page 6 for more information about what must be completed for fringe benefit plans.

Pension and Welfare Plans Excluded From Filing

Do Not File A Form 5500 For A Pension Benefit Plan That Is Any Of The Following:

- An unfunded excess benefit plan. See ERISA section 4(b)(5).
- An annuity or custodial account arrangement under Code section 403(b)(1) or (7) not established or maintained by an employer as described in 29 CFR 2510.3-2(f).
- A Savings Incentive Match Plan for Employees of Small Employers (SIMPLE) that involves SIMPLE IRAs under Code section 408(p).
- A simplified employee pension (SEP) or a salary reduction SEP described in Code section 408(k) that conforms to the alternative method of compliance in 29 CFR 2520.104-48 or 2520.104-49.

- A church plan not electing coverage under Code section 410(d).
- A pension plan that is a qualified foreign plan within the meaning of Code section 404A(e) that does not qualify for the treatment provided in Code section 402(e)(5).
- An unfunded pension plan for a select group of management or highly compensated employees that meets the requirements of 29 CFR 2520.104-23, including timely filing of a registration statement with the DOL.
- An unfunded dues financed pension benefit plan that meets the alternative method of compliance provided by 29 CFR 2520.104-27.
- An individual retirement account or annuity not considered a pension plan under 29 CFR 2510.3-2(d).
- A governmental plan.

Do Not File A Form 5500 For A Welfare Benefit Plan That Is Any Of The Following:

CAUTION *The exemptions below do not apply to fringe benefit plans. A Form 5500 for a fringe benefit plan must be filed under Code section 6039D even if it is associated with a welfare benefit plan that is exempt from filing under one of the categories below.*

1. A welfare benefit plan that covered fewer than 100 participants as of the beginning of the plan year and is unfunded, fully insured, or a combination of insured and unfunded.
 - a. An *unfunded welfare benefit plan* has its benefits paid as needed directly from the general assets of the employer or employee organization that sponsors the plan.

Note: *Plans that are NOT unfunded include those plans that received employee (or former employee) contributions during the plan year and/or used a trust or separately maintained fund (including a Code section 501(c)(9) trust) to hold plan assets or act as a conduit for the transfer of plan assets during the year. However, a welfare plan with employee contributions that is associated with a fringe benefit plan under Code section 125 may be treated for annual reporting purposes as an unfunded welfare plan if it meets the requirements of DOL Technical Release 92-01, 57 Fed. Reg. 23272 (June 2, 1992).*

1. A *fully insured welfare benefit plan* has its benefits provided exclusively through insurance contracts or policies, the premiums of which must be paid directly to the insurance carrier by the employer or employee organization from its general assets or partly from its general assets and partly from contributions by its employees or members (which the employer or employee organization forwards within 3 months of receipt). The insurance contracts or policies discussed above must be issued by an insurance company or similar organization (such as Blue Cross, Blue Shield or a health maintenance organization) that is qualified to do business in any state.

2. A *combination unfunded/insured welfare plan* has its benefits provided partially as an unfunded plan and partially as a fully insured plan. An example of such a plan is a welfare benefit plan that provides medical benefits as in a above and life insurance benefits as in b above.

See 29 CFR 2520.104-20.

Note: *A "voluntary employees' beneficiary association," as used in Code section 501(c)(9) ("VEBA"), should not be confused with the employer or employee organization that sponsors the plan. See ERISA section 3(4).*

3. A *governmental plan*.
4. An *unfunded or insured welfare plan for a select group of management or highly compensated employees* which meets the requirements of 29 CFR 2520.104-24.

5. An *employee benefit plan maintained only to comply with workers' compensation, unemployment compensation, or disability insurance laws*.
6. A *welfare benefit plan that participates in a group insurance arrangement that files a Form 5500 on behalf of the*

welfare benefit plan as specified in 29 CFR 2520.103-2. See 29 CFR 2520.104-43.

7. An apprenticeship or training plan meeting all of the conditions specified in 29 CFR 2520.104-22.

8. An unfunded dues financed welfare benefit plan exempted by 29 CFR 2520.104-26.

9. A church plan under ERISA section 3(33).

10. A welfare benefit plan solely for (1) an individual or an individual and his or her spouse, who wholly owns a trade or business, whether incorporated or unincorporated; or (2) partners or the partners and the partners' spouses in a partnership. See 29 CFR 2510.3-3(b).

Direct Filing Entity (DFE)

Some plans participate in certain trusts, accounts, and other investment arrangements that may file a Form 5500 as Direct Filing Entities (DFEs). These trusts, accounts, and arrangements include master trust investment accounts (MTIAs), common or collective trusts (CCTs), pooled separate accounts (PSAs), 103-12 investment entities (103-12 IEs), and group insurance arrangements (GIAs). For reporting purposes, an MTIA, CCT, PSA, 103-12 IE, or GIA is considered a DFE only when a Form 5500 and all required attachments are filed for it in accordance with the DFE instructions. The filing requirements for DFEs are described in **Lines and Schedules to Complete** on page 6 and in the instructions to the Schedule D.

Note: Special requirements also apply to Schedules D and H attached to the Form 5500 filed by plans participating in MTIAs, CCTs, PSAs, and 103-12 IEs. See the instructions for these schedules.

Common/Collective Trust (CCT) and Pooled Separate Account (PSA): A Form 5500 is not required to be filed for a CCT or PSA.

For reporting purposes, "common/collective trust" and "pooled separate account" are, respectively: (1) a trust maintained by a bank, trust company, or similar institution or (2) an account maintained by an insurance carrier, which are regulated, supervised, and subject to periodic examination by a state or Federal agency in the case of a CCT, or by a state agency in the case of a PSA, for the collective investment and reinvestment of assets contributed thereto from employee benefit plans maintained by more than one employer or controlled group of corporations as that term is used in Code section 1563. See 29 CFR 2520.103-3, 103-4, 103-5, and 103-9.

Note: For reporting purposes, a separate account that is not considered to be holding plan assets pursuant to 29 CFR 2510.3-101(h)(1)(iii) does not constitute a pooled separate account.

Master Trust Investment Account (MTIA): The administrator filing a Form 5500 for an employee benefit plan is required to file or have a designee file a Form 5500 for each MTIA in which the plan participated at any time during the plan year. For reporting purposes, a "master trust" is a trust for which a regulated financial institution (as defined below) serves as trustee or custodian (regardless of whether such institution exercises discretionary authority or control with respect to the management of assets held in the trust), and in which assets of more than one plan sponsored by a single employer or by a group of employers under common control are held. A "regulated financial institution" means a bank, trust company, or similar financial institution that is regulated, supervised, and subject to periodic examination by a state or Federal agency. "Common control" is determined on the basis of all relevant facts and circumstances (whether or not such employers are incorporated). The assets of a master trust are considered for reporting purposes to be held in one or more "investment accounts." A "master trust investment account" may consist of a pool of assets or a single asset. Each pool of assets held in a master trust must be treated as a separate master trust investment account if each plan that has an interest in the pool has the same fractional interest in each asset in the pool as its fractional interest in the pool, and if each such plan may not dispose of its interest in any asset in the pool without disposing of its interest in the pool. A master

trust may also contain assets that are not held in such a pool. Each such asset must be treated as a separate MTIA.

Note: If a master trust investment account consists solely of one plan's asset(s) during the reporting period, the plan may report the asset(s) either as an investment account on a DFE Form 5500, or as a plan asset(s) that is not part of the master trust (and therefore subject to all instructions pertaining to assets not held in a master trust).

103-12 Investment Entity (103-12 IE): DOL Regulation 2520.103-12 provides an alternative method of reporting for plans that invest in an entity (other than an MTIA, CCT, or PSA), whose underlying assets include "plan assets" within the meaning of 29 CFR 2510.3-101 of two or more plans that are not members of a "related group" of employee benefit plans. Such an entity for which a Form 5500 is filed constitutes a "103-12 IE." A Form 5500 is not required to be filed for such entities; however, the instructions for the Schedule H (Form 5500) provide reporting relief that is not available to plans and DFEs participating in entities that are eligible to but do not file a Form 5500 as a 103-12 IE. For this reporting purpose, a "related group" of employee benefit plans consists of each group of two or more employee benefit plans (1) each of which receives 10% or more of its aggregate contributions from the same employer or from a member of the same controlled group of corporations (as determined under Code section 1563(a)), without regard to Code section 1563(a)(4) thereof; or (2) each of which is either maintained by, or maintained pursuant to a collective-bargaining agreement negotiated by, the same employee organization or affiliated employee organizations. For purposes of this paragraph, an "affiliate" of an employee organization means any person controlling, controlled by, or under common control with such organization. See 29 CFR 2520.103-12.

Group Insurance Arrangement (GIA): Each welfare benefit plan that is part of a group insurance arrangement is exempted from the requirement to file a Form 5500 if a consolidated Form 5500 report for all the plans in the arrangement was filed in accordance with 29 CFR 2520.104-43. For reporting purposes, a "group insurance arrangement" provides benefits to the employees of two or more unaffiliated employers (not in connection with a multiemployer plan or a collectively-bargained multiple-employer plan), fully insures one or more welfare plans of each participating employer, uses a trust or other entity as the holder of the insurance contracts, and uses a trust as the conduit for payment of premiums to the insurance company.

When To File

Plans and GIAs. File 1999 return/reports for plan years that started in 1999. All required forms, schedules and attachments must be filed by the last day of the 7th calendar month after the end of the plan year (not to exceed 12 months in length) that began in 1999. If the plan year differs from the calendar year, fill in the fiscal year beginning and ending dates on the line provided at the top of the form.

DFEs other than GIAs. File 1999 return/reports no later than 9 1/2 months after the end of the DFE year. A Form 5500 filed for a DFE must report information for the DFE year (not to exceed 12 months in length) that ends with or within the participating plan's year.

Short Years. For a short plan year, file the form and applicable schedules by the last day of the 7th month after the short plan year ends, and also check box B(4) in Part I. For purposes of this return/report, the short plan year ends on the date of the change in accounting period or upon the complete distribution of assets of the plan. Fill in the fiscal year beginning and ending dates on the line provided at the top of the form. Also see the instructions for **Final Return/Report** on page 6 to determine if box B(3) should be checked.

Special 1999 Transition Rule. The due date for a 1999 Form 5500 filed for a DFE with a fiscal year ending in 1999 is October 16, 2000.

Note: If the filing due date falls on a Saturday, Sunday, or Federal holiday, the return/report may be filed on the next day that is not a Saturday, Sunday, or Federal holiday.

Private Delivery Service

You can use certain private delivery services that have been designated by the IRS to meet the "timely mailing as timely filing/paying" rule for tax returns and payments. The August, 1999 list of designated private delivery services published by the IRS includes only the following:

- Airborne Express (Airborne): Overnight Air Express Service, Next Afternoon Service, Second Day Service.
- DHL Worldwide Express (DHL): DHL "Same Day" Service, DHL USA Overnight.
- Federal Express (FedEx): FedEx Priority Overnight, FedEx Standard Overnight, FedEx 2Day.
- United Parcel Service (UPS): UPS Next Day Air, UPS Next Day Air Saver, UPS 2nd Day Air, UPS 2nd Day Air A.M.

The private delivery service can tell you how to get written proof of the mailing date.

See **Where To File** below for the street address when using a private delivery service.

Extension of Time To File

Using Form 5558

A one-time extension of time to file Form 5500 (up to 2½ months) may be obtained by filing **Form 5558**, Application for Extension of Time To File Certain Employee Plan Returns, before the normal due date (not including any extensions) of the return. **You MUST file Form 5558 with the IRS.**

Approved copies of the Form 5558 will not be returned to the filer. However, a photocopy of the extension request that was filed must be attached to the Form 5500.

The addresses for where to file the Form 5558 are found in the instructions to the Form 5558.

Using Extension of Time To File Federal Income Tax Return

An automatic extension of time to file Form 5500 until the due date of the Federal income tax return of the employer will be granted if all of the following conditions are met: (1) the plan year and the employer's tax year are the same; (2) the employer has been granted an extension of time to file its Federal income tax return to a date later than the normal due date for filing the Form 5500; and (3) a copy of the application for extension of time to file the Federal income tax return is attached to the Form 5500. An extension granted by using this automatic extension procedure CANNOT be extended further by filing a Form 5558.

Note: An extension of time to file the Form 5500 described above does not operate as an extension of time to file a Form 5500 filed for a DFE or the PBGC Form 1.

Where To File

File the Form 5500, with any required schedules, statements, and attachments, at the address indicated below.
by mail:

PWBA

P.O. Box 7043

Lawrence, KS 66044-7043

by private delivery service:

PWBA / NCS

Attn: EFAST

3833 Greenway Drive

Lawrence, KS 66046-1290

Electronic Filing

You may file Form 5500 using 4mm DAT, 8mm DAT, 3½ inch diskette, CD-ROM, 3490 Tape or 9-Track Tape at the above address or via modem. Electronic filers must obtain an electronic and, if filing by modem, a transmission encryption key. For more information regarding electronic filing and how to obtain

electronic signatures and transmission encryption keys, check the EFAST Web Page at www.efast.dol.gov

Paper Filing

Completion by Computer. If Electronic Filing is not used, print out the machine print version of the forms on standard 8½ by 11 inch paper using EFAST approved computer software.

Completion by Hand. Enter on the hand print version of the forms one letter or number within each green box without any overlapping of characters. If entering a negative number, enter a minus sign "—" in a box to the left of the number.

Completion by Typewriter. Ignore the green vertical lines on the hand print version of the forms and type directly through the boxes. Do NOT type more characters than the number of boxes. Do NOT use commas. See example below. If entering a negative number, enter a minus sign "—" within the boxes to the left of the number.

-	3	4	5	6	7	8	9	0	1	2	00	
1	2	3	4	5	6	7	8	9	0	1	2	00

Call **1-800-TAX-FORM** (1-800-829-3676) to order forms to be used for completion by hand or typewriter since these forms use special paper, special green drop-out ink, and are printed within precise specifications. This number is available 24 hours a day, 7 days a week.

Penalties

ERISA and the Code provide for the assessment or imposition of penalties for not giving complete information and for not filing statements and returns/reports. Certain penalties are administrative (i.e., they may be imposed or assessed by one of the governmental agencies delegated to administer the collection of the Form 5500 data). Others require a legal conviction.

Administrative Penalties

Listed below are various penalties for not meeting the Form 5500 filing requirements. One or more of the following administrative penalties may be assessed or imposed in the event of incomplete filings or filings received after the due date unless it is determined that your explanation for failure to file properly is for reasonable cause:

1. A penalty of up to \$1,100 a day for each day a plan administrator fails or refuses to file a complete report. See ERISA section 502(c)(2) and 29 CFR 2560.502c-2.
2. A penalty of \$25 a day (up to \$15,000) for not filing returns for certain plans of deferred compensation, trusts and annuities, and bond purchase plans by the due date(s). See Code section 6652(e). This penalty also applies to returns required to be filed under Code section 6039D.
3. A penalty of \$1 a day (up to \$5,000) for each participant for whom a registration statement (Schedule SSA (Form 5500)) is required but not filed. See Code section 6652(d)(1).
4. A penalty of \$1,000 for not filing an actuarial statement. See Code section 6692.

Other Penalties

1. Any individual who willfully violates any provision of Part 1 of Title I of ERISA shall be fined not more than \$5,000 or imprisoned not more than 1 year, or both. See ERISA section 501.

2. A penalty up to \$10,000, 5 years imprisonment, or both, may be imposed for making any false statement or representation of fact, knowing it to be false, or for knowingly concealing or not disclosing any fact required by ERISA. See section 1027, Title 18, U.S. Code, as amended by section 111 of ERISA.

Final Return/Report

If all assets under the plan (including insurance/ annuity contracts) have been distributed to the participants and beneficiaries or legally transferred to the control of another plan, and when all liabilities for which benefits may be paid under a welfare benefit plan have been satisfied, check the final return/report box (Part I, B(3)) at the top of the Form 5500. If a trustee is appointed for a terminated defined benefit plan pursuant to ERISA section 4042, the last plan year for which a return/report must be filed is the year in which the trustee is appointed.

Examples:

Mergers/Consolidations – A final return/report should be filed for the plan year (12 months or less) that ends when all plan assets were legally transferred to the control of another plan.

Master Trust Investment Account Final Report – A final report should be filed within 9½ months after the end of an MTIA year that ends when the account no longer holds the assets of more than one plan sponsored by a single employer or by a group of employers under common control.

Pension and Welfare Plans That Terminated Without

Distributing All Assets – If the plan was terminated but all plan assets were not distributed, a return/report must be filed for each year the plan has assets. The return/report must be filed by the plan administrator, if designated, or by the person or persons who actually control the plan's assets/property.

Welfare Plans Still Liable To Pay Benefits – A welfare plan cannot file a final return/report if the plan is still liable to pay benefits for claims that were incurred prior to the termination date, but not yet paid. See 29 CFR 2520.104b-2(g)(2)(ii).

Signature and Date

The plan administrator must sign and date a Form 5500 filed for a pension or a welfare plan under ERISA sections 104 and/or 4065. Either the plan administrator or the employer may sign and date a Form 5500 filed for a pension plan under Code section 6058. Generally, a Form 5500 filed for a pension plan is filed under both ERISA section 104 and Code section 6058.

The employer must sign and date a Form 5500 filed for a fringe benefit plan under Code section 6039D.

When a joint employer-union board of trustees or committee is the plan sponsor or plan administrator, at least one employer representative and one union representative must sign and date the Form 5500.

Any representative authorized to sign on behalf of the DFE may sign the Form 5500 submitted for the DFE.

CAUTION *The administrator is required to maintain a copy of the annual report with all required signatures, as part of the plan's records, even if the annual report is filed electronically. See 29 CFR 2520.103-1.*

Change In Plan Year

Generally only defined benefit pension plans need to get approval for a change in plan year. (See Code section 412(c)(5).) However, under Rev. Proc. 87-27, 1987-1 C.B. 769, these pension plans may be eligible for automatic approval of a change in plan year. If a change in plan year for a pension or a welfare plan creates a short plan year, box B(4) in Part I must be checked and a Form 5500, with all required attachments, must be filed by the last day of the 7th calendar month after the end of the short plan year.

Amended Return/Report

To correct errors and/or omissions on a previously filed annual return/report for the 1999 plan year, submit a completed Form 5500 with an original signature and Part I, box B(2) checked. Attach and complete only those schedules and attachments being corrected. All amendments should be marked by circling the line numbers that have been changed since the prior

submission. See the DOL Web Page at www.efast.dol.gov for information on electronic filing of amended return/reports. If you are filing a corrected annual return/report in response to correspondence received from the PWBA regarding processing of the annual return/report, do not check Part I, box B(2).

Section 2:

Lines and Schedules To Complete

All lines on the Form 5500 must be completed unless otherwise specified. All applicable schedules and attachments must also be completed.

The Form 5500 reporting requirements vary depending on whether the Form 5500 is being filed for a "large plan," a "small plan," and/or a DFE, and on the particular type of plan or DFE involved (e.g., welfare plan, pension plan, fringe benefit plan, common/collective trust, pooled separate account, master trust investment account, 103-12 IE, or group insurance arrangement).

Generally, a return/report filed for a pension benefit plan or welfare benefit plan that covered fewer than 100 participants as of the beginning of the plan year should be completed following the requirements below for a "small plan," and a return/report filed for a plan that covered 100 or more participants as of the beginning of the plan year should be completed following the requirements below for a "large plan."

Exceptions:

(1) 80-120 Participant Rule: If the number of participants reported in Part II, line 6 is between 80 and 120, and a return/report was filed for the prior plan year, you may elect to complete the 1999 return/report in the same category ("large plan" or "small plan") as was filed for the prior return/report. Thus, if a Form 5500-C/R was filed for the 1998 plan year, and the number entered in Part II, line 6 of the 1999 Form 5500 is 100 to 120, you may elect to complete the 1999 Form 5500 and schedules in accordance with the instructions for a small plan.

(2) Short Plan Year Rule: If the plan had a short plan year of 7 months or less for either the prior plan year or, the plan year being reported on the 1999 Form 5500, an election can be made to defer filing the accountant's report in accordance with 29 CFR 2520.104-50. If such an election was made for the prior plan year, the 1999 Form 5500 must be completed following the requirements for a large plan, including the attachment of the Schedule H and the accountant's reports, regardless of the number of participants entered in Part II, line 6.

Attachments

All attachments to the Form 5500 must be properly identified, and must include the name of the plan, plan sponsor's EIN, and plan number (PN) as found in lines 1a, 2b, and 1b, respectively. At the top of each attachment, indicate the schedule and line, if any (e.g., Schedule H, Line 4) to which the attachment relates. When assembling the package for filing, you can place attachments to a schedule, either directly behind that schedule or at the end of the filing.

Pension Benefit Plan

Complete the Form 5500, including the signature block, and, except as provided in **Limited Pension Plan Reporting** on page 7, attach the following schedules and information:

SMALL PENSION PLAN

The following schedules (including any additional information required by the instructions to the schedules) must be attached to a Form 5500 filed for a **Small Pension Plan**:

1. Schedule A (as many as needed), to report insurance, annuity, and investment contracts held by the plan.
2. Schedule B, to report actuarial information, if applicable.
3. Schedule D, Part I, to list any CCTs, PSAs, MTIAs and 103-12 IEs in which the plan participated at any time during the plan year.
4. Schedule E, to report ESOP annual information, if applicable.
5. Schedule I, to report small plan financial information.

6. Schedule P (as many as needed), to report trust fiduciary information, if applicable.
7. Schedule R, to report retirement plan information, if applicable.
8. Schedule SSA (as many as needed), to report separated vested participant information, if applicable.
9. Schedule T (as many as needed), to report tax qualified pension plan coverage information, if applicable.

LARGE PENSION PLAN

The following schedules (including any additional information required by the instructions to the schedules) must be attached to a Form 5500 filed for a **Large Pension Plan**:

1. Schedule A (as many as needed), to report insurance, annuity, and investment contracts held by the plan.
2. Schedule B, to report actuarial information, if applicable.
3. Schedule C, to list the 40 most highly compensated service providers and, if applicable, any terminated accountants or actuaries.
4. Schedule D, Part I, to list any CCTs, PSAs, MTIAs and 103-12 IEs in which the plan invested at any time during the plan year.
5. Schedule E, to report ESOP annual information, if applicable.
6. Schedule G, to report loans or fixed income obligations in default or determined to be uncollectible as of the end of the plan year, leases in default or classified as uncollectible, and nonexempt transactions, i.e., file Schedule G if Schedule H (Form 5500) lines 4b, 4c, and/or 4d are checked "Yes."
7. Schedule H, to report financial information.
8. Schedule P (as many as needed), to report trust fiduciary information, if applicable.
9. Schedule R, to report retirement plan information, if applicable.
10. Schedule SSA, to report separated vested participant information, if applicable.
11. Schedule T (as many as needed), to report tax qualified pension plan coverage information, if applicable.



Attach the report of the independent qualified public accountant identified on Schedule H, line 3d, unless line 3b(2) is checked.

Limited Pension Plan Reporting

The pension plans or arrangements described below are eligible for limited annual reporting:

1. **403(b) Arrangements:** A pension plan or arrangement using a tax deferred annuity arrangement under Code section 403(b)(1) and/or a custodial account for regulated investment company stock under Code section 403(b)(7) as the sole funding vehicle for providing pension benefits need complete only Form 5500 Part I and Part II, lines 1 through 5, and 8 (enter pension feature code 2L, 2M, or both).

Note: The administrator of an arrangement described above is not required to engage an independent qualified public accountant, attach an accountant's opinion to the Form 5500, or attach any schedules to the Form 5500.

2. **IRA Plans:** A pension plan utilizing individual retirement accounts or annuities (as described in Code section 408) as the sole funding vehicle for providing pension benefits need complete only Form 5500 Part I and Part II, lines 1 through 5, and 8 (enter pension feature code 2N).

3. **Fully Insured Pension Plan:** A pension benefit plan providing benefits exclusively through an insurance contract or contracts that are fully guaranteed and that meet all of the conditions of 29 CFR 2520.104-44(b)(2) during the entire plan year must complete all requirements listed for a **Pension Benefit Plan** on page 6, except that such a plan is exempt from attaching Schedule H, Schedule I, and an accountant's opinion, and from the requirement to engage an independent qualified public accountant.

A pension benefit plan that has insurance contracts of the type described in 29 CFR 2520.104-44 as well as other assets must complete all requirements for a pension benefit plan, except that the value of the plan's allocated contracts (see below) should not be reported in Part I of Schedule H or I. All other assets should be reported on Schedule H or Schedule I, and any other required schedules. If Schedule H is filed, attach an accountant's report in accordance with the Schedule H instructions.

Note: For purposes of the annual return/report and the alternative method of compliance set forth in 29 CFR 2520.104-44, a contract is considered to be "allocated" only if the insurance company or organization that issued the contract unconditionally guarantees, upon receipt of the required premium or consideration, to provide a retirement benefit of a specified amount. This amount must be provided to each participant without adjustment for fluctuations in the market value of the underlying assets of the company or organization, and each participant must have a legal right to such benefits, which is legally enforceable directly against the insurance company or organization. For example, deposit administration, immediate participation guarantee, and guaranteed investment contracts are NOT allocated contracts for Form 5500 purposes.

4. Nonqualified pension benefit plans maintained outside the United States

Nonqualified pension benefit plans maintained outside the United States primarily for nonresident aliens required to file a return/report (see **Who Must File** on page 2) must complete the Form 5500 (enter 3A in Part II, line 8a).

Welfare Benefit Plan

Complete the Form 5500, including the signature block, and attach the following schedules and information:

SMALL WELFARE PLANS

The following schedules (including any additional information required by the instructions to the schedules) must be attached to a Form 5500 filed for a **Small Welfare Plan**:

1. Schedule A (as many as needed), to report insurance contracts held by the plan.
2. Schedule D, Part I, to list any CCTs, PSAs, MTIAs and 103-12 IEs in which the plan participated at any time during the plan year.
3. Schedule I, to report small plan financial information.

LARGE WELFARE PLAN

The following schedules (including any additional information required by the instructions to the schedules) must be attached to a Form 5500 filed for a **Large Welfare Plan**:

1. Schedule A (as many as needed), to report insurance and investment contracts held by the plan.
2. Schedule C, if applicable, to list service providers and any terminated accountants or actuaries.
3. Schedule D, Part I, to list any CCTs, PSAs, MTIAs and 103-12 IEs in which the plan invested at any time during the plan year.
4. Schedule G, to report loans or fixed income obligations in default or determined to be uncollectible as of the end of the plan year, leases in default or classified as uncollectible, and nonexempt transactions, i.e., file Schedule G if Schedule H (Form 5500) lines 4b, 4c, and/or 4d are checked "Yes" or if a large welfare plan that is not required to file a Schedule H has nonexempt transactions.
5. Schedule H, to report financial information.

Caution: *Attach the report of the independent qualified public accountant identified on Schedule H, line 3d, unless line 3b(2) is checked.*

Note: Neither Schedule H nor an accountant's opinion should be attached to a Form 5500 filed for an unfunded, fully insured or combination unfunded/insured welfare plan (as defined on page 3) that covered 100 or more participants as of the beginning of the plan year which meets the requirements of 29 CFR 2520.104-44. However, Schedule G, Part III, must be attached to the Form 5500 to report any nonexempt

transactions. A welfare benefit plan that uses a "voluntary employees' beneficiary association" (VEBA) under Code section 501(c)(9) is generally not exempt from the requirement of engaging an independent qualified public accountant. See ERISA section 3(4).

Fringe Benefit Plan

Complete the Form 5500, including the signature block, and attach Schedule F to report fringe benefit plan annual information.

Note: Do not complete lines 6, 7, and 9 of Part II of a Form 5500 filed only for a fringe benefit plan.

Welfare Plan And Fringe Benefit Plan Filing Together

If one Form 5500 is filed for both, you must check lines 8c and 10c of Part II of the Form 5500, attach Schedule F for the fringe benefit plan and complete the information and schedules (listed above) for the welfare plan.

Direct Filing Entity (DFE)

The term DFE, as defined on page 4, includes common/collective trusts (CCTs), pooled separate accounts (PSAs), group insurance arrangements (GIAs), master trust investment accounts (MTIAs), and 103-12 investment entities (103-12 IEs) for which a Form 5500 is properly filed. Only one Form 5500 should be filed for each DFE year for all plans participating in the DFE; however, the DFE Form 5500, including all required schedules and attachments, must report information for the DFE year (not to exceed 12 months in length) that ends with or within the participating plan's year. The DFE Form 5500 filing is an integral part of the annual report of each participating plan and the plan administrator may be subject to penalties for failing to file a complete annual report unless both the DFE Form 5500 and the plan's Form 5500 are properly filed.

The information required for a Form 5500 filed for a DFE varies according to the type of DFE. The following paragraphs provide specific guidance for the reporting requirements for each type of DFE.

Requirements for a Form 5500 filed for a common/collective trust (CCT) or pooled separate account (PSA).

A CCT or PSA Form 5500 must comply with the Form 5500 instructions for a **Large Pension Plan**, unless otherwise specified in the forms and instructions. Complete the Form 5500 including the appropriate letter, C or P, on Part I, line A(4) and the signature block. Do not complete Part I, line C, and Part II, lines 1c, 2d, 6 through 9, and 10a. The following schedules (including any additional information required by the instructions to the schedules) must be attached to a Form 5500 filed for a CCT or PSA:

1. Schedule D, Part I, to list all CCTs, PSAs, MTIAs and 103-12 IEs in which the CCT or PSA invested at any time during its year, and Part II, to list all plans that participated in the CCT or PSA during its year.

2. Schedule H to report financial information. Do not complete Part IV of Schedule H.

Note: Special requirements also apply to Schedules D and H attached to the Form 5500 filed by plans participating in MTIAs, CCTs, PSAs, and 103-12 IEs. See the instructions for these schedules.

Requirements for a Form 5500 filed for a master trust investment account (MTIA) or a 103-12 Investment Entity (103-12 IE).

An MTIA or 103-12 IE Form 5500 must comply with the Form 5500 instructions for a **Large Pension Plan**, unless otherwise specified in the forms and instructions. Complete the Form 5500 including the appropriate letter, M or E, on Part I, line A(4) and the signature block. Do not complete Part I, line C, and Part II, lines 1c, 2d, 6 through 9, and 10a. The following schedules (including any additional information required by the instructions to the schedules) must be attached to a Form 5500 filed for an MTIA or 103-12 IE:

1. Schedule A (as many as needed), to report insurance, annuity and investment contracts held by the MTIA or 103-12 IE.

2. Schedule C, Parts I and II, to report service provider compensation information and any terminated accountants. Part II is not required if the Form 5500 is filed for an MTIA.

3. Schedule D, Part I, to list all CCTs, PSAs, MTIAs and 103-12 IEs in which the MTIA or 103-12 IE invested at any time during its year, and Part II, to list all plans that participated in the MTIA or 103-12 IE during its year.

Quick Reference Chart Form 5500 Schedules and Attachments¹

	Large Pension Plan	Small Pension Plan	Large Welfare Plan	Small Welfare Plan	DFE	Fringe Benefit Plan
Schedule A (Insurance Information)	Must complete if plan has insurance contracts.	Must complete if plan has insurance contracts.	Must complete if plan has insurance contracts.	Must complete if plan has insurance contracts.	Must complete if MTIA, 103-12 IE or GIA has insurance contracts.	Not required.
Schedule B (Actuarial Information)	Must complete if defined benefit plan and subject to minimum funding standards.	Must complete if defined benefit plan and subject to minimum funding standards.	Not required.	Not required.	Not required.	Not required.
Schedule C (Service Provider Information)	Must complete if service provider was paid \$5,000 or more and/or an accountant or actuary was terminated.	Not required.	Must complete if service provider was paid \$5,000 or more and/or an accountant or actuary was terminated.	Not required.	MTIAs, GIAs and 103-12 IEs must complete Part I if service provider paid \$5,000 or more. GIAs and 103-12 IEs must complete Part II if accountant was terminated.	Not required.
Schedule D (DFE/ Participating Plan Information)	Must complete Part I if plan participates in a CCT, PSA, MTIA, or 103-12 IE.	Must complete Part I if plan participates in a CCT, PSA, MTIA, or 103-12 IE.	Must complete Part I if plan participates in a CCT, PSA, MTIA, or 103-12 IE.	Must complete Part I if plan participates in a CCT, PSA, MTIA, or 103-12 IE.	All DFEs must complete Part II, and DFEs that invest in CCT, PSA, or 103-12 IE must also complete Part I.	Not required.

	Large Pension Plan	Small Pension Plan	Large Welfare Plan	Small Welfare Plan	DFE	Fringe Benefit Plan
Schedule E (ESOP Information)	Must complete if ESOP.	Must complete if ESOP.	Not required.	Not required.	Not required.	Not required.
Schedule F (Fringe Benefit Plan Information)	Not required.	Not required.	Not required.	Not required.	Not required.	Must complete.
Schedule G (Financial Schedules)	Must complete if Schedule H, lines 4b, 4c, or 4d are "Yes." ²	Not required.	Must complete if Schedule H, lines 4b, 4c, or 4d are "Yes." ^{2,3}	Not required.	MTIAs, GIAs and 103-12 IEs must complete if Schedule H, lines 4b, 4c, and 4d are "Yes." ²	Not required.
Schedule H (Large Plan and DFE Financial Information)	Must complete.	Not required.	Must complete. ³	Not required.	All DFEs must complete Parts I, II, and III. MTIAs, 103-12 IEs, and GIAs must also complete Part IV.	Not required.
Schedule I (Small Plan Financial Information)	Not required.	Must complete.	Not required.	Must complete. ³	Not required.	Not required.
Schedule P (Annual Return of Fiduciary)	Must file to start running of statute of limitations under Code section 6501(a).	Must file to start running of statute of limitations under Code section 6501(a).	Not required.	Not required.	Not required.	Not required.
Schedule R (Retirement Plan Information)	Must complete unless plan is neither a defined benefit plan nor subject to Code section 412 or ERISA section 302 and no benefits were distributed during the plan year.	Must complete unless plan is neither a defined benefit plan nor subject to Code section 412 or ERISA section 302 and no benefits were distributed during the plan year.	Not required.	Not required.	Not required.	Not required.
Schedule SSA (Statement Identifying Separated Participants With Deferred Vested Benefits)	Must complete if plan had separated participants with deferred vested benefits to report.	Must complete if plan had separated participants with deferred vested benefits to report.	Not required.	Not required.	Not required.	Not required.
Schedule T (Qualified Pension Plan Information)	Must complete if qualified plan unless permitted to rely on coverage testing information for prior year.	Must complete if qualified plan unless permitted to rely on coverage testing information for prior year.	Not required.	Not required.	Not required.	Not required.
Accountant's Report	Must attach.	Not required.	Must attach.	Not required.	Must attach for a GIA or 103-12 IE.	Not required.

¹ This chart provides only general guidance. Not all rules and requirements are reflected. Refer to specific Form 5500 instructions for complete information on filing requirements (e.g., **Pension and Welfare Plans Excluded From Filing** on page 3 and **Lines and Schedules to Complete** on page 6).

² Schedules of assets and reportable (5%) transactions also must be filed with the Form 5500 if Schedule H, lines 4i or 4j are "Yes," but use of printed form not required.

³ Unfunded, fully insured and combination unfunded/insured welfare plans covering fewer than 100 participants at the beginning of the plan year that meet the requirements of 29 CFR 2520.104-20 are exempt from filing an annual report. (See **Pension and Welfare Plans Excluded from Filing** on page 3.) Such a plan with 100 or more participants must file an annual report, but is exempt under 29 CFR 2520.104-44 from the accountant's report requirement and completing Schedule H, but MUST complete Schedule G, Part III, to report any nonexempt transactions. See **Lines and Schedules To Complete** on page 6.

4. Schedule G, to report loans or fixed income obligations in default or determined to be uncollectible as of the end of the MTIA or 103-12 IE year, leases in default or classified as uncollectible and nonexempt transactions, i.e., file Schedule G if Schedule H (Form 5500) lines 4b, 4c, and/or 4d are checked "Yes."

5. Schedule H, to report financial information.



Attach the report of the independent qualified public accountant identified on Schedule H, line 3d, unless line 3b(1) is checked.

Requirements for a Form 5500 filed for a group insurance arrangement (GIA).

A GIA Form 5500 must comply with the Form 5500 instructions for a **Large Welfare Plan**, unless otherwise specified in the forms and instructions. Complete the Form 5500 including the letter G on Part I, line A(4), and the signature block. Do **not** complete Part I, line C, and Part II, line 2d. The following schedules (including any additional information required by the instructions to the schedules) must be attached to a Form 5500 filed for a GIA:

1. Schedule A (as many as needed), to report insurance and investment contracts held by the GIA.

2. Schedule C, Parts I and II, to report service provider compensation information, and any terminated accountants.

3. Schedule D, Part I, to list all CCTs, PSAs, and 103-12 IEs in which the GIA invested at any time during its year, and Part II, to list all plans participating in the GIA at any time during its year.

4. Schedule G, to report loans or fixed income obligations in default or determined to be uncollectible as of the end of the plan year, leases in default or classified as uncollectible, and nonexempt transactions, i.e., file Schedule G if Schedule H (Form 5500) lines 4b, 4c, and/or 4d are checked "Yes."

5. Schedule H, to report financial information.



Attach the report of the independent qualified public accountant identified on Schedule H, line 3d.

Specific Instructions

Section 3: Form 5500 Line-by-Line Instructions

Answer all questions with respect to the plan or DFE year, unless otherwise explicitly stated in the line-by-line instructions or on the form itself. Therefore, responses usually apply to the year entered or printed at the top of the first page of the form.

"Yes" or "No" questions on the forms and schedules must be marked either "Yes" or "No," but not both. "N/A" cannot be used to respond to a "Yes" or "No" question unless specifically permitted by the forms, schedules or instructions.

Use black or blue ink. Check boxes should be filled in completely or clearly marked with an "X." If entering a negative number, enter a minus sign "—" in a box to the left of the number. Do not add dollar signs, commas, or use decimal points. Do not write on or near the barcode or in the upper right corner of the form as this will interfere with the processing of the forms.

The return/report must be completed in accordance with the following specific instructions.

Part I - Annual Report Identification Information

File Form 5500 with "1999" printed in the upper right hand corner for a plan year that began in 1999 or a DFE year that ended in 1999. If the plan year is not the 1999 calendar year, enter the dates in Part I. A form printed for a prior year may not be used to report for this plan year.

Kinds of Filers One Form 5500 is generally filed for each plan or entity described in the instructions to boxes A(1) through A(4) below.

Note: A separate Form 5500, with box A(2) checked, must be filed by each employer participating in a plan or program of benefits in which the funds attributable to each employer are available to pay benefits only for that employer's employees, even if the plan is maintained by a controlled group.

A "controlled group" is generally considered one employer for Form 5500 reporting purposes. A "controlled group" is a controlled group of corporations under Code section 414(b), a group of trades or businesses under common control under Code section 414(c), or an affiliated service group under Code section 414(m).

Box A(1). Multiemployer Plan. Check this box if the Form 5500 is filed for a multiemployer plan. A plan is a multiemployer plan if: (1) more than one employer is required to contribute, (2) the plan is maintained pursuant to one or more collective bargaining agreements, and (3) an election under Code section 414(f)(5) and ERISA section 3(37)(E) has not been made. Participating employers do not file individually for these plans. See 29 CFR 2510.3-37.

Box A(2). Single-Employer Plan. Check this box if the Form 5500 is filed for a single-employer plan. A single-employer plan is an employee benefit plan maintained by one employer or one employee organization.

Box A(3). Multiple-Employer Plan. Check this box if the Form 5500 is being filed for a multiple-employer plan. A multiple-employer plan is a plan that is maintained by more than one employer and is not one of the plans already described. Multiple-employer plans can be collectively bargained and collectively funded, but if covered by PBGC termination insurance, must have properly elected before September 27, 1981, not to be treated as a multiemployer plan under Code section 414(f)(5) or ERISA sections 3(37)(E) and 4001(a)(3). Participating employers do not file individually for these plans. *Do NOT check this box if the employers maintaining the plan are members of the same controlled group.*

Box A(4). Direct Filing Entity. Check this box and enter the correct letter from the chart below to indicate the type of entity in the space provided.

Type of entity	Enter the letter
Master Trust	
Investment account	M
Common/collective trust	C
Pooled separate account	P
103-12 Investment Entity	E
Group Insurance Arrangement	G

Box B(1). Check this box if an annual return/report has not been previously filed for this plan or DFE. For the purpose of completing box B(1), the Form 5500-EZ is not considered an annual return/report.

Box B(2). Check this box if this Form 5500 is being submitted to correct errors and/or omissions on a previously filed Form 5500 for the 1999 plan year.

Box B(3). Check this box if this Form 5500 is the last Form 5500 required to be submitted for this plan. (See **Final Return/Report** on page 6.)

Box B(4). Check this box if this Form 5500 is filed for a plan year of less than 12 months.

Note: For purposes of completing boxes B(1) and B(3), check Form 5500, Part I, line B(3) and enter "4R" on Part II, line 8b, for a welfare plan that is not required to file a Form 5500 for the next plan year because the welfare plan has become eligible for an annual reporting exemption. For example, certain unfunded and insured welfare plans may be required to file the 1999 Form 5500 and be exempt from filing a Form 5500 for the plan year

2000 if the number of participants covered as of the beginning of the 2000 plan year drops below 100. See **Pension and Welfare Plans Excluded From Filing** on page 3. Should the number of participants covered by such a plan increase to 100 or more in a future year, the plan should check Form 5500, Part I, line B(1) on that year's Form 5500 and enter "4S" on Part II, line 8b. See 29 CFR 2520.104-20.

Box C. Check box C when the contributions to the plan and/or the benefits paid by the plan are subject to the collective bargaining process (even if the plan is not established and administered by a joint board of trustees and even if only some of the employees covered by the plan are members of a collective bargaining unit that negotiates contributions and/or benefits). The contributions and/or benefits do not have to be identical for all employees under the plan.

Box D. Check this box if you filed for an extension of time to file this form. Attach a photocopy of either the completed and signed **Form 5558**, Application for Extension of Time To File Certain Employee Plan Returns you filed, or if you are using the automatic extension of time to file Form 5500 until the due date of the Federal income tax return of the employer, a copy of the employer's extension of time to file the income tax return. See **Extension of Time To File** on page 5.

Part II - Basic Plan Information

Line 1a. Enter the formal name of the plan or DFE or enough information to identify the plan or DFE. Abbreviate if necessary.

Line 1b. Enter the three-digit plan or entity number (PN) the employer or plan administrator assigned to the plan or DFE. This three digit number, in conjunction with the employer identification number (EIN) entered on line 2b, is used by the IRS, DOL, and PBGC as a unique 12 digit number to identify the plan or DFE.

Start at 001 for plans providing pension benefits or DFEs as illustrated in the table below. Start at 501 for welfare or fringe benefit plans and GIAs. Do not use 888 or 999.

Once you use a plan or DFE number, continue to use it for that plan or DFE on all future filings with the IRS, DOL and PBGC. Do not use it for any other plan or DFE, even if the first plan or DFE is terminated.

For each Form 5500 with the same EIN (line 2b), when ▼	Assign PN ▼
Part II, box 8a is checked, or Part I, A(4) is checked and an M, C, P, or E is entered	001 to the first plan or DFE. Consecutively number others as 002, 003...
Part II, box 8b and/or 8c is checked and 8a is not checked, or Part I, A(4) is checked and a G is entered	501 to the first plan or GIA. Consecutively number others as 502, 503...

Exception: If Part II, box 8a is checked and 333 (or a higher number in a sequence beginning with 333) was previously assigned to the plan, that number may be entered on line 1b.

Line 1c. Enter the date the plan first became effective.

Line 2a. Enter the name and address of the plan sponsor or, in the case of a Form 5500 filed for a DFE, the name and address of the insurance company, financial institution or other sponsor of the DFE (e.g., the trust or other entity that holds the insurance contract for a group insurance arrangement). If the plan covers only the employees of one employer, enter the employer's name. If the Post Office does not deliver mail to the street address and the sponsor has a P.O. box, enter the box number with the street address.

The term "plan sponsor" means:

- The employer, for an employee benefit plan that a single employer established or maintains, and for a fringe benefit plan;

- The employee organization in the case of a plan of an employee organization; or
- The association, committee, joint board of trustees, or other similar group of representatives of the parties who establish or maintain the plan, if the plan is established or maintained jointly by one or more employers and one or more employee organizations, or by two or more employers.

Include enough information on line 2a to describe the sponsor adequately, e.g., "Joint Board of Trustees of Local 187 Machinists" rather than just "Joint Board of Trustees." A plan of a controlled group of corporations should enter the name of only one of the sponsoring members.

Line 2b. Enter the nine-digit employer identification number (EIN) assigned to the plan sponsor/employer/entity. For example, 00-1234567.

Employers and plan administrators who do not have an EIN should apply for one on Form SS-4, Application for Employer Identification Number as soon as possible. Form SS-4 can be obtained at most IRS or Social Security Administration (SSA) offices. The PWBA does NOT issue EINs.

A plan of a controlled group of corporations should use the EIN of one of the sponsoring members. The EIN must be used in all subsequent filings of the Form 5500 for the controlled group.

If the plan sponsor is a group of individuals, get a single EIN for the group. When you apply for a number, enter on line 1 of Form SS-4 the name of the group, such as "Joint Board of Trustees of the Local 187 Machinists' Retirement Plan." EINs may be obtained by filing Form SS-4 as explained above.

Note: EINs for funds (trusts or custodial accounts) associated with plans are generally not required to be furnished on the Form 5500; the IRS will issue EINs for such funds for other reporting purposes. EINs may be obtained by filing Form SS-4 as explained above.

Plan sponsors should use the trust EIN described in the **Note** above when opening a bank account or conducting other transactions for a trust that require an EIN.

Line 2d. Enter the six-digit business code that best describes the nature of the plan sponsor's business from the list of business codes on pages 17, 18, and 19. If more than one employer or employee organization is involved, enter the business code for the main business activity of the employers and/or employee organizations.

Line 3a. Enter the name and address of the plan administrator, unless (a) the administrator is the sponsor identified in item 2, or (b) Part I, box A(4) is checked because the Form 5500 is submitted as the report of a DFE. If (a) or (b) applies, the word "Same" should be entered on line 3a and lines 3b and 3c should be blank. Plan administrator means:

- The person or group of persons specified as the administrator by the instrument under which the plan is operated;
- The plan sponsor/employer if an administrator is not so designated; or
- Any other person prescribed by regulations if an administrator is not designated and a plan sponsor cannot be identified.

Line 3b. Enter the plan administrator's nine-digit EIN. A plan administrator must have an EIN for Form 5500 reporting purposes. If the plan administrator does not have an EIN, apply for one as explained in the instructions for line 2b. One EIN should be entered for a group of individuals who are, collectively, the plan administrator.

Note: Employees of the plan sponsor who perform administrative functions for the plan are generally not the plan administrator unless specifically designated in the plan document. If an employee of the plan sponsor is designated as the plan administrator, that employee must get an EIN.

Line 4. If the plan sponsor's name and EIN have changed since the last return/report was filed for this plan enter the plan sponsor's name, EIN, and the plan number as it appeared on the last return/report filed for this plan.

Line 5. (Optional) You may use this line to designate the person or entity that is principally responsible for the preparation of the annual return/report.

Lines 6 and 7. The description of "participant" in the instructions below is only for purposes of these lines.

For welfare plans, the number of participants should be determined by reference to 29 CFR 2510.3-3(d). Dependents are considered to be neither participants nor beneficiaries. A child who is an "alternate recipient" entitled to health benefits under a qualified medical child support order should not be counted as a participant for lines 6 and 7. For pension benefit plans, "alternate payees" entitled to benefits under a qualified domestic relations order are not to be counted as participants for these lines.

"Participant" means any individual who is included in one of the categories below.

1. Active participants include any individuals who are currently in employment covered by a plan and who are earning or retaining credited service under a plan. This category includes any individuals who are eligible to elect to have the employer make payments to a Code section 401(k) qualified cash or deferred arrangement. Active participants also include any nonvested individuals who are earning or retaining credited service under a plan. This category does not include (a) nonvested former employees who have incurred the break in service period specified in the plan or (b) former employees who have received a "cash-out" distribution or deemed distribution of their entire nonforfeitable accrued benefit.

2. Retired or separated participants receiving benefits are any individuals who are retired or separated from employment covered by the plan and who are receiving benefits under the plan. This includes former employees who are receiving group health continuation coverage benefits pursuant to Part 6 of ERISA and who are covered by the employee welfare benefit plan. This category does not include any individual to whom an insurance company has made an irrevocable commitment to pay all the benefits to which the individual is entitled under the plan.

3. Other retired or separated participants entitled to future benefits are any individuals who are retired or separated from employment covered by the plan and who are entitled to begin receiving benefits under the plan in the future. This category does not include any individual to whom an insurance company has made an irrevocable commitment to pay all the benefits to which the individual is entitled under the plan.

4. Deceased individuals who had one or more beneficiaries who are receiving or are entitled to receive benefits under the plan. This category does not include an individual if an insurance company has made an irrevocable commitment to pay all the benefits to which the beneficiaries of that individual are entitled under the plan.

Line 7g. Enter the number of participants included on line 7f (total participants at the end of the plan year) who have account balances. For example, for a Code section 401(k) plan the number entered on line 7g should be the number of participants counted on line 7f who have made a contribution to the plan for this plan year or any prior plan year. Defined benefit plans should leave line 7g blank.

Line 7h. Include any individual who terminated employment during this plan year, whether or not he or she (a) incurred a break in service, (b) received an irrevocable commitment from an insurance company to pay all the benefits to which he or she is entitled under the plan, and/or (c) received a cash distribution

or deemed cash distribution of his or her nonforfeitable accrued benefit. Multiemployer plans and multiple-employer plans that are collectively bargained do not have to complete line 7h.

Line 7i. If a number is entered on line 7i, you must file Schedule SSA (Form 5500) as an attachment to the Form 5500.

 *Code section 6057(e) provides that the plan administrator must give each participant a statement showing the same information reported on Schedule SSA for that participant.*

Line 8 - Benefits Provided Under the Plan. Check 8a, 8b and/or 8c, as appropriate. In addition, enter in the boxes provided all applicable plan characteristic codes from the table on page 13 that describe the characteristics of the plan being reported.

Line 9 - Funding and Benefit Arrangements. Check all boxes that apply to indicate the funding and benefit arrangements used during the plan year. The "funding arrangement" is the method for the receipt, holding, investment, and transmittal of plan assets prior to the time the plan actually provides benefits. The "benefit arrangement" is the method by which benefits were actually provided to participants by the plan. For the purposes of line 9:

"**Insurance**" means the plan has an account, contract, or policy with an insurance company, insurance service, or other similar organization (such as Blue Cross, Blue Shield, or a health maintenance organization) during the plan or DFE year. (This includes investments with insurance companies such as guaranteed investment contracts (GICs).) Do not check "insurance" if the sole function of the insurance company was to provide administrative services.

"**Code section 412(i) insurance contracts**" are contracts that provide retirement benefits under a plan which are guaranteed by an insurance carrier. In general, such contracts must provide for level premium payments over the individual's period of participation in the plan (to retirement age), premiums must be timely paid as currently required under the contract, no rights under the contract may be subject to a security interest and no policy loans may be outstanding. If a plan is funded exclusively by the purchase of such contracts, the otherwise applicable minimum funding requirements of section 412 of the Code and section 302 of ERISA do not apply for the year and a Schedule B is not required to be filed.

"**Trust**" includes any fund or account that receives, holds, transmits, or invests plan assets other than an account or policy of an insurance company.

"**General assets of the sponsor**" means the plan either had no assets or some assets were commingled with the general assets of the plan sponsor prior to the time the plan actually provided the benefits promised.

Example: If the plan held all its assets invested in registered investment companies and other non-insurance company investments until it purchased annuities to pay out the benefits promised under the plan, box 9a(3) should be checked as the funding arrangement and box 9b(1) should be checked as the benefit arrangement.

Note: An employee benefit plan that checks boxes 9a(1), 9a(2), 9b(1), and/or 9b(2) must attach a Schedule A (Form 5500), Insurance Information, to provide information pertaining to each contract year ending with or within the plan year. See the instructions to the Schedule A and enter the number of Schedules A on line 10b(3), if applicable.

PLAN CHARACTERISTICS CODES FOR LINES 8a AND 8b

CODE	Defined Benefit Pension Features	CODE	Defined Contribution Pension Features	CODE	Other Pension Benefit Features	CODE	Welfare Benefit Features
1A	Benefits are primarily pay related	2N	Code section 408 accounts and annuities - See the instructions for pension plan utilizing individual Code section 408 retirement accounts or annuities as the funding vehicle for providing benefits.	3A	Non-U.S. plan - Pension plan maintained outside the United States primarily for nonresident aliens.	4A	Health (other than dental or vision)
1B	Benefits are primarily flat dollar (includes dollars per year of service)	2O	ESOP other than a leveraged ESOP - A completed Schedule E must be attached to a Form 5500 filed for an Employee Stock Ownership Plan (ESOP).	3B	Plan covering Self-Employed individuals.	4B	Life insurance
1C	Cash balance or similar plan - Plan has a "cash balance" formula. For this purpose, a "cash balance" formula is a benefit formula in a defined benefit plan by whatever name (e.g., personal account plan, pension equity plan, life cycle plan, cash account plan, etc.) that rather than, or in addition to, expressing the accrued benefit as a life annuity commencing at normal retirement age, defines benefits for each employee in terms more common to a defined contribution plan such as a single sum distribution amount (e.g., 10 percent of final average pay times years of service, or the amount of the employee's hypothetical account balance).	2P	Leveraged ESOP - An ESOP that acquires employer securities with borrowed money or other debt-financing techniques. A completed Schedule E must be attached to a Form 5500 filed for an ESOP.	3C	Plan not intended to be qualified - A plan not intended to be qualified under Code sections 401, 403, or 408.	4C	Supplemental unemployment
1D	Offset arrangement - Plan benefits are subject to offset for retirement benefits provided in another plan or arrangement of the employer.	3D	Master plan - A pension plan that is made available by a sponsoring organization for adoption by employers; that is the subject of a favorable opinion letter under Revenue Procedure 89-9, 1989-1 C.B. 780, as modified by Rev. Proc. 90-21, 1990-1 C.B. 499; and for which a single funding medium (for example, a trust or custodial account) is established for the joint use of all adopting employers.	3E	Prototype plan - A pension plan that is made available by a sponsoring organization for adoption by employers; that is the subject of a favorable opinion letter under Revenue Procedures 90-21, 1990-1 C.B. 780, as modified by Rev. Proc. 90-21, 1990-1 C.B. 499; and under which a separate funding medium (for example, a separate trust or custodial account) is established for each adopting employer. See the preceding paragraph regarding the meaning of "sponsoring organization."	4D	Dental
1E	Code section 401(h) arrangement - Plan contains separate accounts under Code section 401(h) to provide employee health benefits.	3F	Regional prototype plan - A pension plan that is made available by a regional sponsor for adoption by employers and that is the subject of a favorable notification letter under Rev. Proc. 89-13, 1989-1 C.B. 801, as modified by Rev. Proc. 90-21, 1990-1 C.B. 499. For this purpose, regional sponsors include individuals and organizations, other than organizations that are permitted to sponsor master or prototype plans.	3G	One-participant plan - A plan without employees as defined in 29 CFR 2510.3-3(b).	4E	Vision
1F	Code section 414(k) arrangement - Benefits are based partly on the balance of the separate account of the participant (also include appropriate defined contribution pension feature codes).	3H	Plan sponsor(s) is (are) a member(s) of a controlled group (Code sections 414(b), (c), or (m)).	4F	Temporary disability (accident and sickness)		
1G	Covered by PBGC - Plan is covered under the PBGC insurance program (see ERISA section 4021).	CODE	Defined Contribution Pension Features	4G	Prepaid legal		
1H	Plan covered by PBGC that was terminated and closed out for PBGC purposes - Before the end of the plan year (or a prior plan year), (1) the plan terminated in a standard (or distress) termination and completed the distribution of plan assets in satisfaction of all benefit liabilities (or all ERISA Title IV benefits for distress termination); or (2) a trustee was appointed for a terminated plan pursuant to ERISA section 4042.	2A	Allocations based upon age, service, or age and service	4H	Long-term disability		
2A	Target benefit plan	2B	Target benefit plan	4I	Severance pay		
2C	Money purchase (other than target benefit)	2D	Offset plan - Plan benefits are subject to offset for retirement benefits provided in another plan or arrangement of the employer.	4J	Apprenticeship and training		
2D	Profit-sharing	2E	ERISA section 404(c) Plan - This plan, or any part of it is intended to meet the conditions of 29 CFR 2550.404c-1.	4K	Scholarship (funded)		
2E	ERISA section 404(c) Plan - This plan, or any part of it is intended to meet the conditions of 29 CFR 2550.404c-1.	2F	Total participant-directed account plan - Participants have the opportunity to direct the investment of all the assets allocated to their individual accounts, regardless of whether 29 CFR 2550.404c-1 is intended to be met.	4L	Death benefits (include travel accident but not life insurance)		
2F	Partial participant-directed account plan - Participants have the opportunity to direct the investment of a portion of the assets allocated to their individual accounts, regardless of whether 29 CFR 2550.404c-1 is intended to be met.	2G	Code section 401(k) feature - A cash or deferred arrangement described in Code section 401(k) that is part of a qualified defined contribution plan that provides for an election by employees to defer part of their compensation or receive these amounts in cash.	4P	Taft-Hartley Financial Assistance for Employee Housing Expenses		
2G	Code section 401(m) arrangement - Employee contributions are allocated to separate accounts under the plan or employer contributions are based, in whole or in part, on employee deferrals or contributions to the plan. Not applicable if plan is 401(k) plan with only QNECs and/or QMACs. Also not applicable if Code section 403(b)(1), 403(b)(7) or 408 arrangements/accounts/annuities.	2H	Stock bonus	4Q	Other		
2H	Code section 403(b)(1) arrangement - See instructions for Code section 403(b)(1) arrangements for certain exempt organizations.	2J	Code section 403(b)(7) accounts - See instructions for Code section 403(b)(7) custodial accounts for regulated investment company stock for certain exempt organizations.	4R	Unfunded, fully insured, or combination unfunded/insured welfare plan that will not file a Form 5500 for next plan year pursuant to 29 CFR 2520.104-20.		
2J	Code section 403(b)(7) accounts - See instructions for Code section 403(b)(7) custodial accounts for regulated investment company stock for certain exempt organizations.	2L	Code section 403(b)(7) accounts - See instructions for Code section 403(b)(7) custodial accounts for regulated investment company stock for certain exempt organizations.	4S	Unfunded, fully insured, or combination unfunded/insured welfare plan that stopped filing Form 5500s in an earlier plan year pursuant to 29 CFR 2520.104-20.		

Specific Instructions to Form 5500

Examples:

1. A Form 5500 filed for a qualified defined benefit pension plan covered by the PBGC which provides a benefit of 2% of average annual compensation per year of service with an offset arrangement should check box 8a and enter the codes "1A", "1D" and "1G" in the boxes under box 8a as illustrated below:

- a 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) below).

2. A Form 5500 filed for a welfare plan providing health insurance, life insurance, dental insurance, and eye examinations should check box 8b and enter the codes "4A", "4B", "4D", and "4E" in the boxes under box 8b as illustrated below:

- b 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) below).

4 A 4 B 4 D 4 E

3. A Form 5500 filed for a prototype profit-sharing plan with 401(k) features, providing participant direction with voluntary employee contributions and regular employer matching contributions which is intended to meet ERISA section 404(c), and which provides ancillary life insurance, should check boxes 8a and 8b and enter the codes "2E", "2F", "2J", "2K", "3E" and "4B" in the boxes under 8a and 8b as illustrated below:

- a 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) below).

2 E 2 F 2 J 2 K 3 E

- b 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) below).

4 B

Form 5500 Schedules

Line 10. All attachments to the Form 5500, including schedules, must include both the EIN and the plan number entered on lines 2b and 1b of the Form 5500. Check the boxes on line 10 to indicate the schedules being filed and, where applicable, enter the number of schedules attached on the space provided. The schedules are described below.

Pension Benefit Schedules

Schedule R (Retirement Plan Information) must be completed if the Form 5500 is being filed for a pension benefit plan unless the plan is neither a defined benefit plan nor subject to Code section 412 or ERISA section 302 and no benefits were distributed during the plan year, or unless otherwise specified under **Limited Pension Plan Reporting** on page 7. For additional information, see the Schedule R instructions.

Schedule T (Qualified Pension Plan Coverage Information) generally must be completed for a pension benefit plan that is intended to be qualified under Code section 401(a) or section 403(a). However, Schedule T may not be required every year. For additional information, see the Schedule T instructions.

Schedule B (Actuarial Information) is required for most defined benefit pension plans and for defined contribution pension plans that currently amortize a waiver of the minimum funding specified the instructions for the Schedule B. For additional information, see the instructions for the Schedules B and R.

Schedule E (ESOP Annual Information) is required for all pension benefit plans with ESOP benefits. For additional information, see the Schedule E instructions.

Schedule SSA (Annual Registration Statement Identifying Separated Participants With Deferred Vested Benefits) may be needed to report separated participants. For additional information, see the Schedule SSA instructions.

Financial Schedules

Schedule H (Financial Information) must be attached to a Form 5500 filed for pension benefit plans and welfare benefit plans that covered 100 or more participants as of the beginning of the plan year, and to a Form 5500 filed for a MTIA, CCT, PSA, 103-12, or GIA. Employee benefit plans, 103-12 IEs, and GIAs filing the Schedule H are generally required to engage an independent qualified public accountant and attach a report of the accountant pursuant to ERISA section 103(a)(3)(A). These plans and DFEs are also generally required to attach to the Form 5500 a "Schedule of Assets Held For Investment Purposes," "Schedule of Assets Acquired and Disposed of Within the Plan Year," and, if applicable, a "Schedule of Reportable Transactions." For additional information, see the Schedule H instructions for lines 4i and 4j and the Form 5500 instructions for **Direct Filing Entity (DFE)** on page 4.

Exceptions: *Insured, unfunded, or combination unfunded/insured welfare plans as described in 29 CFR 2520.104-44(b)(1), and fully insured pension plans as described in 29 CFR 2520.104-44(b)(2) and under Limited Pension Plan Reporting on page 7, are exempt from completing the Schedule H. Also, if a Form 5500-C/R was filed for the plan for the 1998 plan year and the plan covered fewer than 121 participants as of the beginning of the 1999 plan year, the Schedule I may be completed instead of the Schedule H.*

Schedule I (Financial Information - Small Plan) is required for all pension benefit plans and welfare benefit plans filing as "small plans," unless the plan is exempt as an insured, unfunded, or

combination insured/unfunded welfare plan as described in 29 CFR 2520.104-20, or a fully insured pension plan as described in 29 CFR 2520.104-44(b)(2) and under **Limited Pension Plan Reporting** on page 7. For additional information, see the Schedule I instructions.

Schedule A (Insurance Information) is required if any benefits under an employee benefit plan are provided by an insurance company, insurance service or other similar organization (such as Blue Cross, Blue Shield, or a health maintenance organization). (This includes investment contracts with insurance companies, such as guaranteed investment contracts and pooled separate accounts.) For additional information, see the Schedule A instructions.

Note: *Do not file Schedule A for Administrative Services Only (ASO) contracts. Do not file Schedule A if a Schedule A is filed for the contract as part of the Form 5500 filed directly by a master trust investment account or 103-12 IE. Do not file Schedule A if the plan covers only: (1) an individual or an individual and his or her spouse who wholly own a trade or business, whether incorporated or unincorporated; or (2) partners, or partners and one or more of the partner's spouses in a partnership.*

Schedule C (Service Provider Information) is required when the Form 5500 is filed for a large plan, MTIA, 103-12 IE, or GIA and (1) any service provider who rendered services to the plan or DFE during the plan or DFE year received \$5,000 or more in compensation, directly or indirectly from the plan or DFE or (2) an accountant and/or actuary has been terminated. For additional information, see the Schedule C instructions.

Schedule D (DFE/Participating Plan Information). *Part I* is required when the Form 5500 is filed for a plan or DFE that invested or participated in any MTIAs, 103-12 IEs, CCTs, and/or PSAs to provide information about these entities. *Part II* is required when the Form 5500 is filed for a DFE to provide information about the investing or participating plans. For additional information, see the Schedule D instructions.

Schedule G (Financial Transaction Schedules) is required when the Form 5500 is filed for a large plan, MTIA, 103-12 IE, or GIA and Schedule H (Financial Information) lines 4b, 4c, and/or 4d are checked "Yes." *Part I* of the Schedule G reports loans or fixed income obligations in default or classified as uncollectible. *Part II* of the Schedule G reports leases in default or classified as uncollectible. *Part III* of the Schedule G reports non-exempt transactions. For additional information, see the Schedule G instructions.

 *An unfunded, fully insured, or combination unfunded/insured welfare plan with 100 or more participants exempt under 29 CFR 2520.104-44 from Schedule H must still complete Schedule G, Part III, to report nonexempt transactions.*

Schedule P (Annual Return of Fiduciary of Employee Benefit Trust) may be filed to satisfy the requirements under Code section 6033(a) for an annual information return from every section 401(a) organization exempt from tax under section 501(a). Filing this form will start the statute of limitations under section 6501(a) for any trust described in section 401(a), which is exempt from tax under section 501(a).

Fringe Benefit Schedule

Schedule F (Fringe Benefit Plan Annual Information) must be attached to the Form 5500 for all fringe benefit plans. For additional information, see the Schedule F instructions.

ERISA COMPLIANCE QUICK CHECKLIST

Compliance with the Employee Retirement Income Security Act (ERISA) begins with knowing the rules. Plan administrators and other plan officials can use this checklist as a quick diagnostic tool for assessing a plan's compliance with certain important ERISA rules; it is not a complete description of all ERISA's rules and it is not a substitute for a comprehensive compliance review. Use of this checklist is voluntary, and it should not be filed with your Form 5500.

If you answer "No" to any of the questions below, you should review your plan's operations because you may not be in full compliance with ERISA's requirements.

1. Have you provided plan participants with a summary plan description, summaries of any material modifications of the plan, and annual summary financial reports?
2. Do you maintain copies of plan documents at the principal office of the plan administrator for examination by participants and beneficiaries?
3. Do you respond to written participant inquiries for copies of plan documents and information within 30 days?
4. Does your plan include written procedures for making benefit claims and appealing denied claims, and are you complying with those procedures?
5. Is your plan covered by a fidelity bond against losses due to fraud or dishonesty?
6. Are the plan's investments diversified so as to minimize the risk of large losses?
7. If the plan permits participants to select the investments in their plan accounts, has the plan provided them with enough information to make informed decisions?
8. Has a plan official determined that the investments are prudent and solely in the interest of the plan's participants and beneficiaries, and evaluated the risks associated with plan investments before making the investments?
9. Did the employer or other plan sponsor send participant contributions to the plan on a timely basis?
10. Did the plan pay participant benefits on time and in the correct amounts?

If you answer "Yes" to any of the questions below, you should review your plan's operations because you may not be in full compliance with ERISA's requirements.

1. Has the plan engaged in any financial transactions with persons related to the plan or any plan official, for example, has the plan made a loan to or participated in an investment with the employer?
2. Has the plan official used the assets of the plan for his/her own interest?
3. Have plan assets been used to pay expenses that were not authorized in the plan document, were not necessary to the proper administration of the plan, or were more than reasonable in amount?

If you need help answering these questions or want additional guidance about ERISA requirements, a plan official should contact the U.S. Department of Labor Pension and Welfare Benefits Administration office in your region or consult with the plan's legal counsel or professional employee benefit advisor.

Forms 5500 and 5500-EZ**Codes for Principal Business Activity**

This list of principal business activities and their associated codes is designed to classify an enterprise by type of activity in which it is engaged. These principal activity codes are based on the North American Industry Classification System.

Agriculture, Forestry, Fishing and Hunting**Code****Crop Production**

- 111100 Oilseed & Grain Farming
111210 Vegetable & Melon Farming (including potatoes & yams)
111300 Fruit & Tree Nut Farming
111400 Greenhouse, Nursery, & Floriculture Production
111900 Other Crop Farming (including tobacco, cotton, sugarcane, hay, peanut, sugar beet & all other crop farming)

Animal Production

- 112111 Beef Cattle Ranching & Farming
112112 Cattle Feedlots
112120 Dairy Cattle & Milk Production
112210 Hog & Pig Farming
112300 Poultry & Egg Production
112400 Sheep & Goat Farming
112510 Animal Aquaculture (including shellfish & finfish farms & hatcheries)

112900 Other Animal Production**Forestry and Logging**

- 113110 Timber Tract Operations

113210 Forest Nurseries & Gathering of Forest Products**113310 Logging****Fishing, Hunting and Trapping**

- 114110 Fishing

- 114210 Hunting & Trapping

Support Activities for Agriculture and Forestry

- 115110 Support Activities for Crop Production (including cotton ginning, soil preparation, planting, & cultivating)
115210 Support Activities for Animal Production
115310 Support Activities For Forestry

Mining

- 211110 Oil & Gas Extraction
212110 Coal Mining
212200 Metal Ore Mining
212310 Stone Mining & Quarrying
212320 Sand, Gravel, Clay, & Ceramic & Refractory Minerals Mining & Quarrying
212390 Other Nonmetallic Mineral Mining & Quarrying
213110 Support Activities for Mining

Utilities

- 221100 Electric Power Generation, Transmission & Distribution
221210 Natural Gas Distribution
221300 Water, Sewage & Other Systems

Construction**Code****Building, Developing, and General Contracting**

- 233110 Land Subdivision & Land Development
233200 Residential Building Construction
233300 Nonresidential Building Construction

Code**Heavy Construction**

- 234100 Highway, Street, Bridge, & Tunnel Construction
234900 Other Heavy Construction
235110 Plumbing, Heating, & Air-Conditioning Contractors
235210 Painting & Wall Covering Contractors
235310 Electrical Contractors
235400 Masonry, Drywall, Insulation, & Tile Contractors
235500 Carpentry & Floor Contractors
235610 Roofing, Siding, & Sheet Metal Contractors
235710 Concrete Contractors
235810 Water Well Drilling Contractors
235900 Other Special Trade Contractors

Manufacturing**Food Manufacturing**

- 311110 Animal Food Mfg
311200 Grain & Oilseed Milling
311300 Sugar & Confectionery Product Mfg
311400 Fruit & Vegetable Preserving & Specialty Food Mfg
311500 Dairy Product Mfg
311610 Animal Slaughtering and Processing
311710 Seafood Product Preparation & Packaging
311800 Bakeries & Tortilla Mfg
311900 Other Food Mfg (including coffee, tea, flavorings & seasonings)

Beverage and Tobacco Product Manufacturing

- 312110 Soft Drink & Ice Mfg
312120 Breweries
312130 Wineries
312140 Distilleries
312200 Tobacco Manufacturing

Textile Mills and Textile Product Mills

- 313000 Textile Mills

314000 Textile Product Mills**Apparel Manufacturing**

- 315100 Apparel Knitting Mills
315210 Cut & Sew Apparel Contractors
315220 Men's & Boys' Cut & Sew Apparel Mfg

315230 Women's & Girls' Cut & Sew Apparel Mfg**315290 Other Cut & Sew Apparel Mfg****315990 Apparel Accessories & Other Apparel Mfg****Leather and Allied Product Manufacturing**

- 316110 Leather & Hide Tanning & Finishing
316210 Footwear Mfg (including rubber & plastics)
316990 Other Leather & Allied Product Mfg
321110 Sawmills & Wood Preservation
321210 Veneer, Plywood, & Engineered Wood Product Mfg

Code**321900 Other Wood Product Mfg****Paper Manufacturing**

- 322100 Pulp, Paper, & Paperboard Mills

322200 Converted Paper Product Mfg**Printing and Related Support Activities**

- 323100 Printing & Related Support Activities

Petroleum and Coal Products Manufacturing

- 324110 Petroleum Refineries (including integrated)
324120 Asphalt Paving, Roofing, & Saturated Materials Mfg
324190 Other Petroleum & Coal Products Mfg

Chemical Manufacturing

- 325100 Basic Chemical Mfg
325200 Resin, Synthetic Rubber, & Artificial & Synthetic Fibers & Filaments Mfg
325300 Pesticide, Fertilizer, & Other Agricultural Chemical Mfg
325410 Pharmaceutical & Medicine Mfg
325500 Paint, Coating, & Adhesive Mfg
325600 Soap, Cleaning Compound, & Toilet Preparation Mfg
325900 Other Chemical Product & Preparation Mfg

Plastics and Rubber Products Manufacturing

- 326100 Plastics Product Mfg
326200 Rubber Product Mfg
327100 Nonmetallic Mineral Product Manufacturing

327200 Clay Product & Refractory Mfg**327300 Glass & Glass Product Mfg****327400 Cement & Concrete Product Mfg****327900 Lime & Gypsum Product Mfg****327900 Other Nonmetallic Mineral Product Mfg****Primary Metal Manufacturing**

- 331110 Iron & Steel Mills & Ferroalloy Mfg
331200 Steel Product Mfg from Purchased Steel

331310 Aluminum & Aluminum Production & Processing**331400 Nonferrous Metal (except Aluminum) Production & Processing****331500 Foundries****Fabricated Metal Product Manufacturing**

- 332110 Forging & Stamping
332210 Cutlery & Handtool Mfg
332300 Architectural & Structural Metals Mfg

332400 Boiler, Tank, & Shipping Container Mfg**332510 Hardware Mfg****332610 Spring & Wire Product Mfg****332700 Machine Shops; Turned Product; & Screw, Nut, & Bolt Mfg****332810 Coating, Engraving, Heat Treating, & Allied Activities****332900 Other Fabricated Metal Product Mfg****Machinery Manufacturing**

- 333100 Agriculture, Construction, & Mining Machinery Mfg
333200 Industrial Machinery Mfg

333310 Commercial & Service Industry Machinery Mfg**333410 Ventilation, Heating, Air-Conditioning, & Commercial Refrigeration Equipment Mfg****333510 Metalworking Machinery Mfg****333610 Engine, Turbine & Power Transmission Equipment Mfg****Code****333900 Other General Purpose Machinery Mfg****Computer and Electronic Product Manufacturing**

- 334110 Computer & Peripheral Equipment Mfg
334200 Communications Equipment Mfg

334310 Audio & Video Equipment Mfg**334410 Semiconductor & Other Electronic Component Mfg****334500 Navigational, Measuring, Electromedical, & Control Instruments Mfg****334610 Manufacturing & Reproducing Magnetic & Optical Media****Electrical Equipment, Appliance, and Component Manufacturing**

- 335100 Electric Lighting Equipment Mfg
335200 Household Appliance Mfg

335310 Electrical Equipment Mfg**335900 Other Electrical Equipment & Component Mfg****Transportation Equipment Manufacturing**

- 336100 Motor Vehicle Mfg
336210 Motor Vehicle Body & Trailer Mfg
336300 Motor Vehicle Parts Mfg
336410 Aerospace Product & Parts Mfg
336510 Railroad Rolling Stock Mfg
336610 Ship & Boat Building
336990 Other Transportation Equipment Mfg

Furniture and Related Product Manufacturing

- 337000 Furniture & Related Product Manufacturing

Miscellaneous Manufacturing

- 339110 Medical Equipment & Supplies Mfg

339900 Other Miscellaneous Manufacturing**Wholesale Trade****Wholesale Trade, Durable Goods**

- 421100 Motor Vehicle & Motor Vehicle Parts & Supplies Wholesalers
421200 Furniture & Home Furnishing Wholesalers
421300 Lumber & Other Construction Materials Wholesalers
421400 Professional & Commercial Equipment & Supplies Wholesalers
421500 Metal & Mineral (except Petroleum) Wholesalers
421600 Electrical Goods Wholesalers
421700 Hardware, & Plumbing & Heating Equipment & Supplies Wholesalers
421800 Machinery, Equipment, & Supplies Wholesalers
421910 Sporting & Recreational Goods & Supplies Wholesalers
421920 Toy & Hobby Goods & Supplies Wholesalers
421930 Recyclable Material Wholesalers
421940 Jewelry, Watch, Precious Stone, & Precious Metal Wholesalers
421990 Other Miscellaneous Durable Goods Wholesalers

Code Wholesale Trade, Nondurable Goods 422100 Paper & Paper Product Wholesalers 422210 Drugs & Druggists' Sundries Wholesalers 422300 Apparel, Piece Goods, & Notions Wholesalers 422400 Grocery & Related Product Wholesalers 422500 Farm Product Raw Material Wholesalers 422600 Chemical & Allied Products Wholesalers 422700 Petroleum & Petroleum Products Wholesalers 422800 Beer, Wine, & Distilled Alcoholic Beverage Wholesalers 422910 Farm Supplies Wholesalers 422920 Book, Periodical, & Newspaper Wholesalers 422930 Flower, Nursery Stock, & Florists' Supplies Wholesalers 422940 Tobacco & Tobacco Product Wholesalers 422950 Paint, Varnish, & Supplies Wholesalers 422990 Other Miscellaneous Nondurable Goods Wholesalers	Code Clothing and Clothing Accessories Stores 448110 Men's Clothing Stores 448120 Women's Clothing Stores 448130 Children's & Infants' Clothing Stores 448140 Family Clothing Stores 448150 Clothing Accessories Stores 448190 Other Clothing Stores 448210 Shoe Stores 448310 Jewelry Stores 448320 Luggage & Leather Goods Stores Sporting Goods, Hobby, Book, and Music Stores 451110 Sporting Goods Stores 451120 Hobby, Toy, & Game Stores 451130 Sewing, Needlework, & Piece Goods Stores 451140 Musical Instrument & Supplies Stores 451211 Book Stores 451212 News Dealers & Newsstands 451220 Prerecorded Tape, Compact Disc, & Record Stores General Merchandise Stores 452110 Department stores 452900 Other General Merchandise Stores Miscellaneous Store Retailers 453110 Florists 453210 Office Supplies & Stationery Stores 453220 Gift, Novelty, & Souvenir Stores 453310 Used Merchandise Stores 453910 Pet & Pet Supplies Stores 453920 Art Dealers 453930 Manufactured (Mobile) Home Dealers 453990 All Other Miscellaneous Store Retailers (including tobacco, candle, & trophy shops)	Code Support Activities for Transportation 488100 Support Activities for Air Transportation 488210 Support Activities for Rail Transportation 488300 Support Activities for Water Transportation 488410 Motor Vehicle Towing 488490 Other Support Activities for Road Transportation 488510 Freight Transportation Arrangement 488990 Other Support Activities for Transportation Couriers and Messengers 492110 Couriers 492210 Local Messengers & Local Delivery Warehousing and Storage 493100 Warehousing & Storage (except lessors of miniwarehouses & self-storage units)	Code 523210 Securities & Commodity Exchanges 523900 Other Financial Investment Activities (including portfolio management & investment advice)
Retail Trade Motor Vehicle and Parts Dealers 441110 New Car Dealers 441120 Used Car Dealers 441210 Recreational Vehicle Dealers 441221 Motorcycle Dealers 441222 Boat Dealers 441229 All Other Motor Vehicle Dealers 441300 Automotive Parts, Accessories, & Tire Stores Furniture and Home Furnishings Stores 442110 Furniture Stores 442210 Floor Covering Stores 442291 Window Treatment Stores 442299 All Other Home Furnishings Stores Electronics and Appliance Stores 443111 Household Appliance Stores 443112 Radio, Television, & Other Electronics Stores 443120 Computer & Software Stores 443130 Camera & Photographic Supplies Stores Building Material and Garden Equipment and Supplies Dealers 444110 Home Centers 444120 Paint & Wallpaper Stores 444130 Hardware Stores 444190 Other Building Material Dealers 444200 Lawn & Garden Equipment & Supplies Stores Food and Beverage Stores 445110 Supermarkets and Other Grocery (except Convenience) Stores 445120 Convenience Stores 445210 Meat Markets 445220 Fish & Seafood Markets 445230 Fruit & Vegetable Markets 445291 Baked Goods Stores 445292 Confectionery & Nut Stores 445299 All Other Specialty Food Stores 445310 Beer, Wine, & Liquor Stores Health and Personal Care Stores 446110 Pharmacies & Drug Stores 446120 Cosmetics, Beauty Supplies, & Perfume Stores 446130 Optical Goods Stores 446190 Other Health & Personal Care Stores Gasoline Stations 447100 Gasoline Stations (including convenience stores with gas)	Code Transportation and Warehousing Air, Rail, and Water Transportation 481000 Air Transportation 482110 Rail Transportation 483000 Water Transportation Truck Transportation 484110 General Freight Trucking, Local 484120 General Freight Trucking, Long-distance 484200 Specialized Freight Trucking Transit and Ground Passenger Transportation 485110 Urban Transit Systems 485210 Interurban & Rural Bus Transportation 485310 Taxi Service 485320 Limousine Service 485410 School & Employee Bus Transportation 485510 Charter Bus Industry 485990 Other Transit & Ground Passenger Transportation Pipeline Transportation 486000 Pipeline Transportation Scenic & Sightseeing Transportation 487000 Scenic & Sightseeing Transportation	Code Information Publishing Industries 511110 Newspaper Publishers 511120 Periodical Publishers 511130 Book Publishers 511140 Database & Directory Publishers 511190 Other Publishers 511210 Software Publishers Motion Picture and Sound Recording Industries 512100 Motion Picture & Video Industries (except video rental) 512200 Sound Recording Industries Broadcasting and Telecommunications 513100 Radio & Television Broadcasting 513200 Cable Networks & Program Distribution 513300 Telecommunications (including paging, cellular, satellite, & other telecommunications) Information Services and Data Processing Services 514100 Information Services (including news syndicates, libraries, & on-line information services) 514210 Data Processing Services Finance and Insurance Depository Credit Intermediation 522110 Commercial Banking 522120 Savings Institutions 522130 Credit Unions 522190 Other Depository Credit Intermediation Nondepositary Credit Intermediation 522210 Credit Card Issuing 522220 Sales Financing 522291 Consumer Lending 522292 Real Estate Credit (including mortgage bankers & originators) 522293 International Trade Financing 522294 Secondary Market Financing 522298 All Other Nondepositary Credit Intermediation Activities Related to Credit Intermediation 522300 Activities Related to Credit Intermediation (including loan brokers) Securities, Commodity Contracts, and Other Financial Investments and Related Activities 523110 Investment Banking & Securities Dealing 523120 Securities Brokerage 523130 Commodity Contracts Dealing 523140 Commodity Contracts Brokerage Legal Services 541110 Offices of Lawyers 541190 Other Legal Services Accounting, Tax Preparation, Bookkeeping, and Payroll Services 541211 Offices of Certified Public Accountants 541213 Tax Preparation Services 541214 Payroll Services 541219 Other Accounting Services Architectural, Engineering, and Related Services 541310 Architectural Services 541320 Landscape Architecture Services 541330 Engineering Services 541340 Drafting Services 541350 Building Inspection Services	

<p>Code</p> <p>541360 Geophysical Surveying & Mapping Services</p> <p>541370 Surveying & Mapping (except Geophysical) Services</p> <p>541380 Testing Laboratories</p> <p>Specialized Design Services</p> <p>541400 Specialized Design Services (including interior, industrial, graphic, & fashion design)</p> <p>Computer Systems Design and Related Services</p> <p>541511 Custom Computer Programming Services</p> <p>541512 Computer Systems Design Services</p> <p>541513 Computer Facilities Management Services</p> <p>541519 Other Computer Related Services</p> <p>Other Professional, Scientific, and Technical Services</p> <p>541600 Management, Scientific, & Technical Consulting Services</p> <p>541700 Scientific Research & Development Services</p> <p>541800 Advertising & Related Services</p> <p>541910 Marketing Research & Public Opinion Polling</p> <p>541920 Photographic Services</p> <p>541930 Translation & Interpretation Services</p> <p>541940 Veterinary Services</p> <p>541990 All Other Professional, Scientific, & Technical Services</p>	<p>Code</p> <p>561500 Travel Arrangement & Reservation Services</p> <p>561600 Investigation & Security Services</p> <p>561710 Exterminating & Pest Control Services</p> <p>561720 Janitorial Services</p> <p>561730 Landscaping Services</p> <p>561740 Carpet & Upholstery Cleaning Services</p> <p>561790 Other Services to Buildings & Dwellings</p> <p>561900 Other Support Services (including packaging & labeling services, & convention & trade show organizers)</p> <p>Waste Management and Remediation Services</p> <p>562000 Waste Management & Remediation Services</p>	<p>Code</p> <p>Other Ambulatory Health Care Services</p> <p>621900 Other Ambulatory Health Care Services (including ambulance services & blood & organ banks)</p> <p>Hospitals</p> <p>622000 Hospitals</p> <p>Nursing and Residential Care Facilities</p> <p>623000 Nursing & Residential Care Facilities</p> <p>Social Assistance</p> <p>624100 Individual & Family Services</p> <p>624200 Community Food & Housing, & Emergency & Other Relief Services</p> <p>624310 Vocational Rehabilitation Services</p> <p>624410 Child Day Care Services</p>	<p>Code</p> <p>Food Services and Drinking Places</p> <p>722110 Full-Service Restaurants</p> <p>722210 Limited-Service Eating Places</p> <p>722300 Special Food Services (including food service contractors & caterers)</p> <p>722410 Drinking Places (Alcoholic Beverages)</p>
<p>Management of Companies (Holding Companies)</p> <p>551111 Offices of Bank Holding Companies</p> <p>551112 Offices of Other Holding Companies</p> <p>Administrative and Support and Waste Management and Remediation Services</p> <p>Administrative and Support Services</p> <p>561110 Office Administrative Services</p> <p>561210 Facilities Support Services</p> <p>561300 Employment Services</p> <p>561410 Document Preparation Services</p> <p>561420 Telephone Call Centers</p> <p>561430 Business Service Centers (including private mail centers & copy shops)</p> <p>561440 Collection Agencies</p> <p>561450 Credit Bureaus</p> <p>561490 Other Business Support Services (including repossession services, court reporting, & stenotype services)</p>	<p>Code</p> <p>611000 Educational Services (including schools, colleges, & universities)</p> <p>Health Care and Social Assistance</p> <p>Offices of Physicians and Dentists</p> <p>621111 Offices of Physicians (except mental health specialists)</p> <p>621112 Offices of Physicians, Mental Health Specialists</p> <p>621210 Offices of Dentists</p> <p>Offices of Other Health Practitioners</p> <p>621310 Offices of Chiropractors</p> <p>621320 Offices of Optometrists</p> <p>621330 Offices of Mental Health Practitioners (except Physicians)</p> <p>621340 Offices of Physical, Occupational & Speech Therapists, & Audiologists</p> <p>621391 Offices of Podiatrists</p> <p>621399 Offices of All Other Miscellaneous Health Practitioners</p> <p>Outpatient Care Centers</p> <p>621410 Family Planning Centers</p> <p>621420 Outpatient Mental Health & Substance Abuse Centers</p> <p>621491 HMO Medical Centers</p> <p>621492 Kidney Dialysis Centers</p> <p>621493 Freestanding Ambulatory Surgical & Emergency Centers</p> <p>621498 All Other Outpatient Care Centers</p> <p>Medical and Diagnostic Laboratories</p> <p>621510 Medical & Diagnostic Laboratories</p> <p>Home Health Care Services</p> <p>621610 Home Health Care Services</p>	<p>Code</p> <p>Performing Arts, Spectator Sports, and Related Industries</p> <p>711100 Performing Arts Companies</p> <p>711210 Spectator Sports (including sports clubs & racetracks)</p> <p>711300 Promoters of Performing Arts, Sports, & Similar Events</p> <p>711410 Agents & Managers for Artists, Athletes, Entertainers, & Other Public Figures</p> <p>711510 Independent Artists, Writers, & Performers</p> <p>Museums, Historical Sites, and Similar Institutions</p> <p>712100 Museums, Historical Sites, & Similar Institutions</p> <p>Amusement, Gambling, and Recreation Industries</p> <p>713100 Amusement Parks & Arcades</p> <p>713200 Gambling Industries</p> <p>713900 Other Amusement & Recreation Industries (including golf courses, skiing facilities, marinas, fitness centers, & bowling centers)</p> <p>Accommodation and Food Services</p> <p>Accommodation</p> <p>721110 Hotels (except casino hotels) & Motels</p> <p>721120 Casino Hotels</p> <p>721191 Bed & Breakfast Inns</p> <p>721199 All Other Traveler Accommodation</p> <p>721210 RV (Recreational Vehicle) Parks & Recreational Camps</p> <p>721310 Rooming & Boarding Houses</p>	<p>Code</p> <p>Other Services</p> <p>Repair and Maintenance</p> <p>811110 Automotive Mechanical & Electrical Repair & Maintenance</p> <p>811120 Automotive Body, Paint, Interior, & Glass Repair</p> <p>811190 Other Automotive Repair & Maintenance (including oil change & lubrication shops & car washes)</p> <p>811210 Electronic & Precision Equipment Repair & Maintenance</p> <p>811310 Commercial & Industrial Machinery & Equipment (except Automotive & Electronic) Repair & Maintenance</p> <p>811410 Home & Garden Equipment & Appliance Repair & Maintenance</p> <p>811420 Reupholstery & Furniture Repair</p> <p>811430 Footwear & Leather Goods Repair</p> <p>811490 Other Personal & Household Goods Repair & Maintenance</p> <p>Personal and Laundry Services</p> <p>812111 Barber Shops</p> <p>812112 Beauty Salons</p> <p>812113 Nail Salons</p> <p>812190 Other Personal Care Services (including diet & weight reducing centers)</p> <p>812210 Funeral Homes & Funeral Services</p> <p>812220 Cemeteries & Crematories</p> <p>812310 Coin-Operated Laundries & Drycleaners</p> <p>812320 Drycleaning & Laundry Services (except Coin-Operated)</p> <p>812330 Linen & Uniform Supply</p> <p>812910 Pet Care (except Veterinary) Services</p> <p>812920 Photofinishing</p> <p>812930 Parking Lots & Garages</p> <p>812990 All Other Personal Services</p> <p>Religious, Grantmaking, Civic, Professional, and Similar Organizations</p> <p>813000 Religious, Grantmaking, Civic, Professional, & Similar Organizations</p>

1999 – Insurance Information Instructions for Schedule A (Form 5500)

General Instructions

Who Must File

Schedule A, Insurance Information, must be attached to the Form 5500 filed for every defined benefit pension plan, defined contribution pension plan, and welfare benefit plan if any benefits under the plan are provided by an insurance company, insurance service, or other similar organization (such as Blue Cross, Blue Shield, or a health maintenance organization). (This includes investments with insurance companies such as guaranteed investment contracts (GICs).)

For example, if Form 5500 lines 9a(1), 9a(2), 9b(1), or 9b(2) is checked, indicating that either the plan funding arrangement or plan benefit arrangement includes an account, policy, or contract with an insurance company (or similar organization), at least one Schedule A (Form 5500) would be required to be attached to the Form 5500 filed for a pension or welfare plan to provide information concerning the contract year ending with or within the plan year.

In addition, Schedules A must be attached to a Form 5500 filed for GIAs, MTIAs, and 103-12 IEs for each insurance or annuity contract held in the MTIA, or 103-12 IE or by the GIA. See the Form 5500 instructions for specific requirements for GIAs, MTIAs, and 103-12 IEs.

Do not file Schedule A if: (1) the contract is an Administrative Services Only (ASO) contract; (2) the Form 5500 is being filed for a plan participating in an MTIA or 103-12 IE for which a Form 5500 is being filed that reports the contract on a Schedule A filed with the MTIA or 103-12 IE Form 5500; or (3) the Form 5500 is being filed for a plan that covers only: (A) an individual or an individual and his or her spouse who wholly own a trade or business, whether incorporated or unincorporated; or (B) partners, or partners and one or more of the partner's spouses in a partnership.

Check the Schedule A box on the Form 5500 (Part II, line 10b(3)), and enter the number attached in the space provided if one or more Schedules A are attached to the Form 5500.

Important Reminder: *The insurance company (or similar organization) is required to provide the plan administrator with the information needed to complete the return/report, pursuant to ERISA section 103(a)(2). If you do not receive this information in a timely manner, contact the insurance company (or similar organization). If information is missing on Schedule A (Form 5500) due to a refusal to provide this information, note this on the Schedule A.*

Specific Instructions

Information entered on Schedule A (Form 5500) should pertain to the insurance contract or policy year ending with or within the plan year (for reporting purposes, a year cannot exceed 12 months).

Example: If an insurance contract year begins on July 1 and ends on June 30, and the plan year begins on January 1, and ends on December 31, the information on the Schedule A attached to the 1999 Form 5500 should be for the insurance contract year ending on June 30, 1999.

Exception: *If the insurance company maintains records on the basis of a plan year rather than a policy or contract year, the information entered on Schedule A (Form 5500) may pertain to the plan year instead of the policy or contract year.*

Include only the contracts issued to the plan, GIA, MTIA or 103-12 IE for which the Form 5500 is being filed.

Lines A, B, C, and D. This information should be the same as reported in Part II of the Form 5500 to which this Schedule A is attached.

Part I - Information Concerning Insurance Contract Coverage, Fees, and Commissions

Line 1(c). Enter the code number assigned by the National Association of Insurance Commissioners (NAIC) to the insurance company. If none has been assigned, enter zeros (-0-) in the spaces provided.

Line 1(d). If individual policies with the same carrier are grouped as a unit for purposes of this report, and the group does not have one identification number, you may use the contract or identification number of one of the individual contracts provided this number is used consistently to report these contracts as a group and the plan administrator maintains the records necessary to disclose all the individual contract numbers in the group upon request. Use separate Schedules A to report individual contracts that cannot be grouped as a unit.

Line 1(e). Since plan coverage may fluctuate during the year, the administrator should estimate the number of persons that were covered by the contract at the end of the policy or contract year. Where contracts covering individual employees are grouped, compute entries as of the end of the plan year.

Lines 1(f) and (g). Enter the beginning and ending dates of the policy year for the contract identified in 1(d). Enter "N/A" in 1(f) if separate contracts covering individual employees are grouped.

Line 2. Additional pages may be necessary to list all persons. You can get additional green ink copies by calling 1-800-TAX-FORM (1-800-829-3676).

Totals. Enter the total of all commissions and fees paid to persons listed on line 2.

Complete a separate item (elements (a) through (e)) for each person. Enter the name and address of the person identified in element (a) and complete elements (b) through (e) for each person as specified below.

Element (b). Report all sales commissions regardless of the identity of the recipient. Do not report override commissions, salaries, bonuses, etc., paid to a general agent or manager for managing an agency, or for performing other administrative functions.

Element (c). Fees to be reported represent payments by insurance carriers to agents, brokers and other persons for items other than commissions (e.g., service fees, consulting fees, and finders fees). Fees paid by insurance carriers to persons other than agents and brokers should be reported here, **NOT** in Parts II and III on Schedule A as acquisition costs, administrative charges, etc. For plans, GIAs, MTIAs and 103-12 IEs required to file Part I of Schedule C, fees paid by employee benefit plans or these DFEs to agents, brokers, and other persons are also to be reported on Schedule C (Form 5500), unless the only compensation in relation to the plan or DFE consists of insurance fees and commissions listed on the Schedule A.

Note: For purposes of line 2, commissions and fees include amounts paid by an insurance company on the basis of the aggregate value (e.g., policy amounts, premiums) of contracts or policies (or classes thereof) placed or retained. The amount (or pro rata share of the total) of such commissions or fees attributable to the contract or policy placed with or retained by the plan must be reported in element (b) or (c), as appropriate.

Element (e). Enter the most appropriate code

Code Type of Organization

1	Banking, Savings & Loan Association, Credit Union or other similar financial institution
2	Trust Company
3	Insurance Agent or Broker
4	Agent or Broker other than insurance
5	Third party administrator
6	Investment Company/Mutual Fund
7	Investment Manager/Adviser
8	Labor Union
9	Foreign entity (e.g., an agent or broker, bank, insurance company, etc., not operating within the jurisdictional boundaries of the United States)
0	Other

Part II - Investment and Annuity Contract Information

Line 3. Enter the current value of the plan's interest at year end in the contract identified on line 6, e.g., deposit administration (DA), immediate participation guarantee (IPG), or guaranteed investment contracts (GIC).

Exception: Contracts reported on line 6 need not be included on line 3 if (1) the Schedule A is filed for a defined benefit pension plan and the contract was entered into before March 20, 1992, or (2) the Schedule A is filed for a defined contribution pension plan and the contract is a fully benefit-responsive contract, i.e., it provides a liquidity guarantee by a financially responsible third party of principal and previously accrued interest for liquidations, transfers, loans, or hardship withdrawals initiated by plan participants exercising their rights to withdraw, borrow, or transfer funds under the terms of a defined contribution plan that do not include substantial restrictions to participants' access to plan funds.

Line 5a. The rate information called for here may be furnished by attaching the appropriate schedules of current rates filed with the appropriate state insurance department or by providing a statement regarding the basis of the rates. Enter "see attached" if appropriate.

Lines 6a through 6f. Report contracts with unallocated funds. Do not include portions of these contracts maintained in separate accounts. Show deposit fund amounts rather than experience credit records when both are maintained.

Part III - Welfare Benefit Contract Information

Line 7i. Report a stop-loss insurance policy that is an asset of the plan.

Note: Employers sponsoring welfare plans may purchase a stop loss insurance policy with the employer as the insured to facilitate the employer in managing its risk associated with its liabilities under the plan. These employer contracts with premiums paid exclusively out of the employer's general assets without any employee contributions generally are not plan assets and are not reportable on Schedule A.

1999 – *Actuarial Information* Instructions for Schedule B (Form 5500)

General Instructions

Who Must File

The employer or plan administrator of a defined benefit plan that is subject to the minimum funding standards (see Code section 412 and Part 3 of Title I of ERISA) must file this schedule as an attachment to the Form 5500 or Form 5500-EZ. The Schedule B does not have to be filed if Form 5500-EZ is not required to be filed (in accordance with the instructions for Form 5500-EZ); however, the funding standard account for the plan must continue to be maintained, even if the Schedule B is not filed.

Check the Schedule B box on the Form 5500 (Part II, line 10a(3)) if a Schedule B is attached to the Form 5500.

Lines A through E and G (most recent enrollment number) **must** be completed for ALL plans. If the Schedule B is attached to a Form 5500, lines A, B, C and D should include the same information as reported in Part II of the Form 5500.

Check the box in line F if the plan has 100 or fewer participants in the prior plan year. A plan has 100 or fewer participants in the prior plan year only if there were 100 or fewer participants (both active and nonactive) on each day of the preceding plan year, taking into account participants in all defined benefit plans maintained by the same employer (or any member of such employer's controlled group) who are also employees of that employer or member. Nonactive participants include vested terminated and retired employees.

All defined benefit plans, regardless of size or type, **must** complete and file Part I. Part II **must** be filed for all plans other than those specified in 1 and 2 below:

1. Part II should not be filed for multiemployer plans for which box 2 in line E is checked.

2. Part II should not be filed for plans that have 100 or fewer participants in the prior plan year as described above.

In addition, please note that "TRA '97" refers to the Taxpayer Relief Act of 1997, "RPA '94" refers to the Retirement Protection Act of 1994 and that "OBRA '87" refers to the Omnibus Budget Reconciliation Act of 1987.

Note: (1) For split-funded plans, the costs and contributions reported on Schedule B should include those relating to both trust funds and insurance carriers. (2) For plans with funding standard account amortization charges and credits see the instructions for lines 9c, 9j, 12j, and 13i, as applicable, regarding attachment.

Statement by Enrolled Actuary

An enrolled actuary must sign Schedule B. The signature of the enrolled actuary may be qualified to state that it is subject to attached qualifications. See Income Tax Regulations section 301.6059-1(d) for permitted qualifications. If the actuary has not fully reflected any final or temporary regulation, revenue ruling or notice promulgated under the statute in completing the Schedule B, check the box on the last line of page 1. If this box is checked, indicate on an attachment whether an accumulated funding deficiency or a contribution that is not wholly deductible would result if the actuary had fully reflected such regulation, revenue ruling or notice. A stamped or machine produced signature is not acceptable. The most recent enrollment number must be entered in line G. In addition, the actuary may offer any other comments related to the information contained in Schedule B.

Attachments

All attachments to the Schedule B must be properly identified, and must include the name of the plan, plan sponsor's EIN, and plan number. Put "Schedule B" and the line item to which the schedule relates at the top of each attachment. When assembling the package for filing, you can place attachments for

a schedule, either directly behind that schedule or at the end of the filing.

Specific Instructions for Part I

Line 1. All entries must be reported as of the valuation date.

Line 1a. Actuarial Valuation Date. The valuation for a plan year may be as of any date in the plan year, including the first or last day of the plan year. Valuations must be performed within the period specified by ERISA section 103(d) and Section 412(c)(9).

Line 1b(1). Current Value of Assets. Enter the current value of assets as of the valuation date. The current value is the same as the fair market value. Do not adjust for items such as the existing credit balance or the outstanding balances of certain amortization bases. Contributions designated for 1999 should not be included in this amount. Note that this entry may be different than the entry in line 2a. Such a difference may result, for example, if the valuation date is not the first day of the plan year, or if insurance contracts are excluded from assets reported on line 1b(1) but not on line 2a.

Rollover amounts or other assets held in individual accounts that are not available to provide defined benefits under the plan should not be included on line 1b(1) regardless of whether they are reported on the 1999 Schedule H (Form 5500) (line 1i, column (a)) or Schedule I (Form 5500) (line 1c, column (a)), or, alternatively, the 1999 Form 5500-EZ (line 11a, column (a): total assets at the beginning of the year). Additionally, asset and liability amounts must be determined in a consistent manner. Therefore, if the value of any insurance contracts have been excluded from the amount reported on line 1b(1), liabilities satisfied by such contracts should also be excluded from the liability values reported on lines 1c(1), 1c(2), 1d(2), and 1d(3).

Line 1b(2). Actuarial Value of Assets. Enter the value of assets determined in accordance with Code section 412(c)(2) or ERISA section 302(c)(2). Do not adjust for items such as the existing credit balance or the outstanding balances of certain amortization bases, and do not include contributions designated for 1999 in this amount.

Line 1c(1). Accrued Liability for Immediate Gain Methods.

Complete this line only if you use an immediate gain method (see Rev. Rul. 81-213, 1981-2 C.B. 101, for a definition of immediate gain method).

Lines 1c(2)(a), (b), and (c). Information for Plans Using

Spread Gain Methods. Complete these lines only if you use a spread gain method (see Rev. Rul. 81-213 for a definition of spread gain method).

Line 1c(2)(a). Unfunded Liability for Methods with Bases.

Complete this line only if you use the frozen initial liability or attained age normal cost method.

Lines 1c(2)(b) and (c). Entry Age Normal Accrued Liability and Normal Cost. For spread gain methods, the full funding limitation is calculated using the entry age normal method (see Rev. Rul. 81-13, 1981-1 C.B. 229).

Line 1d(1). Amount Excluded from Current Liability. In computing current liability for purposes of Code section 412(l) (but not for purposes of section 412(c)(7)), certain service is disregarded under Code section 412(l)(7)(D) and ERISA section 302(d)(7)(D). If the plan has participants to whom those provisions apply, only a percentage of the years of service before such individuals became participants in the plan is taken into account. Enter the amount excluded from "RPA '94" current liability. If an employer has made an election under section 412(l)(7)(D)(iv) not to disregard such service, enter zero. Note that such an election, once made, cannot be revoked without the consent of the Secretary of the Treasury.

Lines 1d(2)(a) and 1d(3)(a). "RPA '94" Current Liability and "OBRA '87" Current Liability. All plans regardless of the number of participants must provide the information indicated in accordance with these instructions. The interest rate used to compute the "RPA '94" current liability must be in accordance with guidelines issued by the IRS, using the 90% to 105% interest rate corridor of Code section 412(l)(7)(C)(i) for plan years beginning in 1999.

The "RPA '94" current liability must be computed using the 1983 G.A.M. mortality table for non-disabled lives published in Rev. Rul. 95-28, 1995-1 C.B. 74, and may be computed taking into account the mortality tables for disabled lives published in Rev. Rul. 96-7, 1996-1 C.B. 59. The "OBRA '87" current liability is the current liability as defined in Code section 412(l)(7)(C) as enacted by "RPA '94." See Q&A-9(1) of Rev. Rul. 96-21, 1996-1 C.B. 64, for the specific circumstances under which the "OBRA '87" current liability interest rate may be different from the "RPA '94" current liability interest rate.

Each other actuarial assumption used in calculating the "RPA '94" and "OBRA '87" current liabilities must be the same assumptions used for calculating other costs for the funding standard account. See Notice 90-11, 1990-1 C.B. 319. The actuary must take into account rates of early retirement and the plan's early retirement and turnover provisions as they relate to benefits, where these would significantly affect the results. Regardless of the valuation date, "RPA '94" and "OBRA '87" current liabilities are computed taking into account only credited service through the end of the prior plan year. No salary scale projections should be used in these computations. Do not include the expected increase in current liability due to benefits accruing during the plan year reported in lines 1d(2)(b) and 1d(3)(b) in these computations.

Lines 1d(2)(b) and 1d(3)(b). Expected Increase in Current Liability. Enter the amounts by which the "RPA '94" and "OBRA '87" current liabilities are expected to increase due to benefits accruing during the plan year on account of credited service and/or salary changes for the current year. One year's salary scale may be reflected.

Line 1d(2)(c). Current Liability Computed at Highest Allowable Interest Rate. Enter the current liability computed using the highest allowable interest rate (105% of the weighted average interest rate for plan years beginning in 1999). All other assumptions used should be identical to those used for lines 1d(2)(a) and (b). It is not necessary to complete line 1d(2)(c) if the plan is a multiemployer plan or if the plan had 100 or fewer participants in the prior plan year. Whether or not a plan had 100 or fewer participants in the prior plan year is determined in accordance with the instructions under **Who Must File**. This line need not be completed if the actuarial value of assets (line 1b(2)) divided by the "RPA '94" current liability (line 1d(2)(a)) is greater than or equal to 90%. However, if this line is not completed, sufficient records should be retained so that the current liability amount that would otherwise have been entered on this line can be computed at a later time if required.

Lines 1d(2)(d) and 1d(3)(c). Do not complete these lines if Code section 412(l) does not apply to the plan for this plan year under Code sections 412(l)(1), 412(l)(6), or 412(l)(9).

Line 1d(2)(d). Expected Release from "RPA '94" Current Liability for the Plan Year. If applicable, enter the expected release from "RPA '94" current liability on account of disbursements (including single sum distributions) from the plan expected to be paid after the valuation date but prior to the end of the plan year (see also Q&A-7 of Rev. Rul. 96-21). This line is applicable if the employer has elected the Transition Rule of Code section 412(l)(11) for the plan year.

Line 1d(3)(c). Expected Release from "OBRA '87" Current Liability for the Plan Year. If applicable, enter the expected release from "OBRA '87" current liability on account of disbursements (including single sum distributions) from the plan expected to be paid after the valuation date but prior to the end of the plan year (see also Q&A-7 of Rev. Rul. 96-21).

Line 1d(4). Expected Plan Disbursements. Enter the amount of plan disbursements expected to be paid for the plan year (plans for which the Transition Rule of section 412(l)(11) is being elected, see also Q&A-8 of Rev. Rul. 96-21).

Line 2. All entries must be reported as of the beginning of the 1999 plan year. Lines 2a and 2b should include all assets and liabilities under the plan except for assets and liabilities attributable to: (1) rollover amounts or other amounts in individual accounts that are not available to provide defined

benefits, or (2) benefits for which an insurer has made an irrevocable commitment as defined in 29 CFR 4001.2.

Line 2a. Current Value of Assets. Enter the current value of net assets as of the first day of the plan year. Except for plans with excluded assets as described above, this entry should be the same as reported on the 1999 Schedule H (Form 5500) (line 11, column (a)) or Schedule I (Form 5500) (line 1c, column (a)), or, alternatively, the 1999 Form 5500-EZ (line 11a, column (a); total assets at the beginning of the year). Note that contributions designated for the 1999 plan year are not included on those lines.

Line 2b. "RPA '94" Current Liability (beginning of plan year). Enter the "RPA '94" current liability as of the first day of the plan year. Do not include the expected increase in current liability due to benefits accruing during the plan year. See the instructions for lines 1d(2)(a) and 1d(3)(a) for actuarial assumptions used in determining "RPA '94" current liability.

Column (1)—Enter the number of participants and beneficiaries as of the beginning of the plan year. If the current liability figures are derived from a valuation that follows the first day of the plan year, the participant and beneficiary count entries should be derived from the counts used in that valuation in a manner consistent with the derivation of the current liability reported in columns (2) and (3).

Column (2)—Include only the portion of the current liability attributable to vested benefits.

Column (3)—Include the current liability attributable to all benefits, both vested and nonvested.

Line 2c. This calculation is required under ERISA section 103(d)(11). Do not complete if line 2a divided by line 2b(4), column (3), is 70% or greater.

Line 3. Contributions Made to Plan. Show all employer and employee contributions for the plan year. Include employer contributions made not later than 2½ months (or the later date allowed under Code section 412(c)(10) and ERISA section 302(c)(10)) after the end of the plan year. Show only contributions actually made to the plan by the date Schedule B is signed. Certain employer contributions must be made in quarterly installments. See Code section 412(m). Note that contributions that are made to meet the liquidity requirement of Code section 412(m)(5) should be reported.

Add the amounts in both columns (b) and (c) and enter both results on the total line. All contributions must be credited toward a particular plan year.

Line 4a. Quarterly Contributions. In accordance with "RPA '94", only plans that have a funded current liability percentage (as provided in Rev. Rul. 95-31, 1995-1 C.B. 76) for the preceding plan year of less than 100 percent are subject to the quarterly contribution requirement of Code section 412(m) and ERISA section 302(e). For 1999, the funded current liability percentage for the preceding plan year is equal to line 1b(2) (actuarial value of assets) divided by line 1d(2)(a) ("RPA '94" current liability), both lines as reported on the 1998 Schedule B (Q&A-3, 4 and 5 of Rev. Rul. 95-31, also provide guidance on this computation).

Line 4b. Multiemployer plans, plans with funded current liability percentages (as provided in Code section 412(m)(1)) of 100 percent or more for the preceding plan year, and plans that on every day of the preceding plan year had 100 or fewer participants (as defined under **Who Must File**) are not subject to the liquidity requirement of Code section 412(m)(5) and ERISA section 302(e)(5) and should not complete this line. See Q&A's 7 through 17 of Rev. Rul. 95-31 for guidance on the liquidity requirement. Note that a certification by the enrolled actuary must be attached if the special rule for nonrecurring circumstances is used (see Code section 412(m)(5)(E)(ii)(II) and Q&A-13 of Rev. Rul. 95-31).

If the plan has a liquidity shortfall for any quarter of the plan year (see Q&A-10 of Rev. Rul. 95-31), enter the amount of the liquidity shortfall for each such quarter. If the plan was subject to the liquidity requirement, but did not have a liquidity shortfall, enter zero. File **Form 5330**, Return of Excise Taxes Related to Employee Benefit Plans, with the IRS to pay the 10% excise

tax(es) if there is a failure to pay the liquidity shortfall by the required due date, unless a waiver of the 10% tax under Code section 4971(f) has been granted.

Line 5. Actuarial Cost Method. Enter only the primary method used. If the plan uses one actuarial cost method in one year as the basis of establishing an accrued liability for use under the frozen initial liability method in subsequent years, answer as if the frozen initial liability method was used in all years. The projected unit credit method is included in the "Accrued benefit (unit credit)" category of line 5c. If a method other than a method listed in lines 5a through 5g is used, check the box for line 5h and specify the method. For example, if a modified individual level premium method for which actuarial gains and losses are spread as a part of future normal cost is used, check the box for 5h and describe the cost method. For the shortfall method, check the appropriate box for the underlying actuarial cost method used to determine the annual computation charge.

Changes in funding methods include changes in actuarial cost method, changes in asset valuation method, and changes in the valuation date of plan costs and liabilities or of plan assets.

Changes in the funding method of a plan include not only changes to the overall funding method used by the plan but also changes to each specific method of computation used in applying the overall method. Generally, these changes require IRS approval. If the change was made pursuant to Rev. Proc. 95-51, 1995-2 C.B. 430 (as modified by Rev. Proc. 98-10, 1998-2 I.R.B. 35 and Rev. Proc. 99-45, 1999-49 I.R.B. 603), check "yes" in line 5j. If approval was granted by either an individual ruling letter or a class ruling letter for this plan, enter the date of the applicable ruling letter in line 5k. Note that the plan sponsor's agreement to a change in funding method (made pursuant to Rev. Proc. 95-51 or a class ruling letter) should be reported on line 7 of Schedule R (Form 5500).

Line 6. Actuarial Assumptions. If gender-based assumptions are used in developing plan costs, enter those rates where appropriate in line 6. Note that requests for gender-based cost information do not suggest that gender-based benefits are legal. If unisex tables are used, enter the values in both "Male" and "Female" lines. Complete all blanks. Check "N/A" if not applicable.

Attach a statement of actuarial assumptions (if not fully described by line 6), and actuarial methods used to calculate the figures shown in lines 1 and 9 (if not fully described by line 5).

Also attach a summary of the principal eligibility and benefit provisions on which the valuation was based, an identification of benefits not included in the valuation, a description of any significant events that occurred during the year, a summary of any changes in principal eligibility or benefit provisions since the last valuation, a description (or reasonably representative sample) of plan early retirement factors, and any change in actuarial assumptions or cost methods and justifications for any such change (see section 103(d) of ERISA).

Also, include any other information needed to fully and fairly disclose the actuarial position of the plan.

Line 6a(1). "RPA '94" Current Liability Interest Rate. Enter the interest rate used to determine "RPA '94" current liability. For plan years beginning in 1999, the interest rate used must not fall outside the corridor of 90% to 105% of the weighted average interest rate (See Code section 412(l)(7)(C)(i)). The rate used must be in accordance with the guidelines issued by the IRS. See Notice 90-11 and Rev. Rul. 96-21. Enter rate to the nearest .01 percent.

Line 6a(2). "OBRA '87" Current Liability Interest Rate. Enter the interest rate used to determine "OBRA '87" current liability. The interest rate used must not fall outside the corridor of 90% to 110% of the weighted average interest rate. The rate used must be in accordance with the guidelines issued by the IRS. See Notice 90-11 and Rev. Rul. 96-21. Enter rate to the nearest .01 percent.

Line 6b. Weighted Average Retirement Age. If each participant is assumed to retire at his/her normal retirement age, enter the age specified in the plan as normal retirement age. If the normal retirement age differs for individual participants, enter the age that is the weighted average normal retirement age; do

not enter "NRA." Otherwise, enter the assumed retirement age. If the valuation uses rates of retirement at various ages, enter the nearest whole age that is the weighted average retirement age. On an attachment to Schedule B, list the rate of retirement at each age and describe the methodology used to compute the weighted average retirement age, including a description of the weight applied at each potential retirement age.

Line 6c. Check "Yes," if the rates in the contract were used (e.g., purchase rates at retirement).

Line 6d. Mortality Table. The 1983 G.A.M. mortality table published in Rev. Rul. 95-28 must be used in the calculation of "RPA '94" current liability for non-disabled lives. The mortality tables published in Rev. Rul. 96-7 may be used in the calculation of "RPA '94" current liability for disabled lives. Enter the mortality table code for non-disabled lives used for "OBRA '87" current liability (see instructions for lines 1d(2)(a) and 1d(3)(a)) and for valuation purposes as follows:

Mortality Table	Code
1951 Group Annuity	1
1971 Group Annuity Mortality (G.A.M.)	2
1971 Individual Annuity Mortality (I.A.M.)	3
UP-1984	4
1983 I.A.M.	5
1983 G.A.M.	6
1983 G.A.M. (solely per Rev. Rul. 95-28)	7
UP-1994	8
Other	9
None	0

Code 6 includes all sex-distinct versions of the 1983 G.A.M. table other than the table published in Rev. Rul. 95-28. Thus, for example, Code 6 also would include the 1983 G.A.M. male-only table used for males, where the 1983 G.A.M. male-only table with a 6-year setback is used for females. Code 9 includes mortality tables other than those listed in Codes 1 through 8, including any unisex version of the 1983 G.A.M. table including the table published by the Service in Rev. Rul. 95-6, 1995-1 C.B. 80.

Where an indicated table consists of separate tables for males and females, add F to the female table (e.g., 1F). When a projection is used with a table, follow the code with "P" and the year of projection (omit the year if the projection is unrelated to a single calendar year); the identity of the projection scale should be omitted. When an age setback or set forward is used, indicate with "-" or "+" and the number of years. For example, if for females the 1951 Group Annuity Table with Projection C to 1971 is used with a 5-year setback, enter "1P71-5." If the table is not one of those listed, enter "9" with no further notation. If the valuation assumes a maturity value to provide the post-retirement income without separately identifying the mortality, interest and expense elements, under "post-retirement," enter on line 6d the value of \$1.00 of monthly pension beginning at the age shown on line 6b, assuming the normal form of annuity for an unmarried person; in this case check "N/A" on lines 6e and 6f.

Line 6e. Valuation Liability Interest Rate. Enter the assumption as to the expected interest rate (investment return) used to determine all the calculated values with the exception of current liability and liabilities determined under the alternative funding standard account (see instructions for line 8b). If the assumed rate varies with the year, enter the weighted average of the assumed rate for 20 years following the valuation date. Enter rates to the nearest .01 percent.

Line 6f. Expense Loading. If there is no expense loading, enter -0-. For instance, there would be no expense loading attributable to investments if the rate of investment return on assets is adjusted to take investment expenses into account. If there is a single expense loading not separately identified as pre-retirement or post-retirement, enter it under pre-retirement and check "N/A" under post-retirement. Where expenses are assumed other than as a percentage of plan costs or liabilities, enter the assumed pre-retirement expense as a percentage of

the plan's normal cost, and enter the post-retirement expense as a percentage of plan liabilities. If the normal cost of the plan is zero, enter the assumed pre-retirement expense as a percentage of the sum of the lines 9c(1) and 9c(2), minus line 9j. Enter rates to the nearest .1 percent.

Line 6g. Annual Withdrawal Rates. Enter rates to the nearest .01 percent. Enter the rate assumed for a new entrant to the plan at the age shown. Enter "S" before the rate if that rate is different for participants with the same age but longer service. Enter "U" before the rate if all participants of that age are assumed to experience the same withdrawal rates, regardless of service. Enter "C" before the rate if criteria other than service apply to the rates used.

Line 6h. Salary Scale. If a uniform level annual rate of salary increase is used, enter that annual rate. Otherwise, enter the level annual rate of salary increase that is equivalent to the rate(s) of salary increase used. Enter the annual rate as a percentage to the nearest .01 percent, used for a participant from age 25 to assumed retirement age. If the plan's benefit formula is not related to compensation, check "N/A".

Line 6i. Estimated Investment Return. Enter the estimated rate of return on the actuarial value of plan assets for the 1-year period ending on the valuation date. For this purpose, the rate of return is determined by using the formula $2I/(A + B - I)$, where I is the dollar amount of the investment return under the asset valuation method used for the plan, A is the actuarial value of the assets one year ago, and B is the actuarial value of the assets on the current valuation date. Enter rates to the nearest .1 percent. If entering a negative number, enter a minus sign "—" to the left of the number.

Note: Use the above formula even if the actuary feels that the result of using the formula does not represent the true estimated rate of return on the actuarial value of plan assets for the 1-year period ending on the valuation date. The actuary may attach a statement showing both the actuary's estimate of the rate of return and the actuary's calculations of that rate.

Line 7. New Amortization Bases Established. List all new amortization bases established in the current plan year (prior to the combining of bases, if bases were combined). Use the following table to indicate the type of base established, and enter the appropriate code under "Type of Base." List amortization bases and charges and/or credits as of the valuation date. Bases that are considered fully amortized because there is a credit for the plan year on line 9l(4) should be listed. If entering a negative number, enter a minus sign "—" to the left of the number.

Code Type of Amortization Base

- 1 Experience gain or loss
- 2 Shortfall gain or loss
- 3 Change in unfunded liability due to plan amendment
- 4 Change in unfunded liability due to change in actuarial assumptions
- 5 Change in unfunded liability due to change in actuarial cost method
- 6 Waiver of the minimum funding standard
- 7 Switchback from alternative funding standard account
- 8 Initial unfunded liability (for new plan)
- 9 155% current liability full funding limitation base

Line 8a. Funding Waivers or Extensions. If a funding waiver or extension request is approved after the Schedule B is filed, an amended Schedule B should be filed with Form 5500 to report the waiver or extension approval (also see instructions for line 9m(1)).

Line 8b. Alternative Methods or Rules. Enter the appropriate code from the table below if one or more of the alternative methods or rules were used for this plan year.

Code Method or Rule

- 1 Shortfall method
- 2 Alternative funding standard account (AFSA)
- 3 Shortfall method used with AFSA
- 4 Plan is in reorganization status
- 5 Shortfall method used when in reorganization status

Shortfall Method: Only certain collectively bargained plans may elect the shortfall funding method (see regulations under Code section 412). Advance approval from the IRS for the election of the shortfall method of funding is NOT required if it is first adopted for the first plan year to which Code section 412 applies. However, advance approval from the IRS is required if the shortfall funding method is adopted at a later time, if a specific computation method is changed, or if the shortfall method is discontinued.

Alternative Minimum Funding Standard Account: A worksheet must be attached if the alternative minimum funding standard account is used. The worksheet should show:

1. The prior year alternate funding deficiency (if any).
2. Normal cost.
3. Excess, if any, of the value of accrued benefits over the market value of assets.
4. Interest on 1, 2, and 3 above.
5. Employer contributions (total from columns (b) of line 3 of Schedule B).
6. Interest on 5 above.
7. Funding deficiency: if the sum of 1 through 4 above is greater than the sum of 5 and 6 above, enter the difference.

If the entry age normal cost method was not used as the valuation method, the plan may not switch to the alternative minimum funding standard account for this year. Additionally, in line 3 of the worksheet, the value of accrued benefits should exclude benefits accrued for the current plan year. The market value of assets should be reduced by the amount of any contributions for the current plan year.

Reorganization Status: Attach an explanation of the basis for the determination that the plan is in reorganization for this plan year. Also, attach a worksheet showing for this plan year:

1. The amounts considered contributed by employers,
2. Any amount waived by the IRS,
3. The development of the minimum contribution requirement (taking into account the applicable overburden credit, cash-flow amount, contribution bases and limitation on required increases on the rate of employer contributions), and
4. The resulting accumulated funding deficiency, if any, which is to be reported on line 9p.

Line 8c. All multiemployer plans check "No". Plans other than multiemployer plans check "Yes" only if the plan is covered by Title IV of ERISA.

If line 8c is "Yes" attach a schedule of the active plan participant data used in the valuation for this plan year. Use the same size paper as the Schedule B and the format shown on the next page and label the schedule "**Schedule B, Line 8c-Schedule of Active Participant Data.**"

Expand this schedule by adding columns after the "5 to 9" column and before the "40 & up" column for active participants with total years of credited service in the following ranges: 10 to 14; 15 to 19; 20 to 24; 25 to 29; 30 to 34; and 35 to 39. For each column, enter the number of active participants with the specified number of years of credited service divided according to age group. For participants with partial years of credited service, round the total number of years of credited service to the next lower whole number.

Plans reporting 1,000 or more active participants on line 2b(3) must also provide average compensation data. For each grouping, enter the average compensation of the active participants in that group. For this purpose, compensation is the compensation taken into account for each participant under the plan's benefit formula, limited to the amount defined under section 401(a)(17) of the Code. Years of credited service are the years credited under the plan's benefit formula. Do not enter the

Schedule B, Line 8c—Schedule of Active Participant Data

Attained Age	YEARS OF CREDITED SERVICE				40 & up	
	Under 1		1 to 4			
	Avg. No.	Comp. No.	Avg. No.	Comp. No.	Avg. No.	Comp. No.
Under 25						
25 to 29						
30 to 34						
35 to 39						
40 to 44						
45 to 49						
50 to 54						
55 to 59						
60 to 64						
65 to 69						
70 & up						

average compensation in any grouping that contains fewer than 20 participants.

If the plan is a multiple-employer plan, complete one or more schedules of active-participant data in a manner consistent with the computations for the funding requirements reported on line 9. See the specific instructions for **Lines 9a through 9q**. For example, if the funding requirements are computed as if each participating employer maintained a separate plan, attach a separate schedule for each participating employer in the multiple-employer plan.

Line 9. Shortfall Method. Under the shortfall method of funding, the normal cost in the funding standard account is the charge per unit of production (or per unit of service) multiplied by the actual number of units of production (or units of service) that occurred during the plan year. Each amortization installment in the funding standard account is similarly calculated.

Lines 9a through 9q. Multiple Employer Plans. If the plan is a multiple employer plan subject to the rules of Code section 413(c)(4)(A) for which minimum funding requirements are to be computed as if each employer were maintaining a separate plan, complete one Schedule B for the plan. Also submit an attachment completed in the same format as lines 9a through 9q showing, for this plan year, for each individual employer maintaining the plan, the development of the minimum contribution requirement (taking into account the applicable normal cost, amortization charges and credits, and all other applicable charges or credits to the funding standard account that would apply if the employer were maintaining a separate plan). Compute the entries on Schedule B, except for the entries on lines 9a, 9h, 9o, and 9p, as the sum of the appropriate individual amounts computed for each employer. Compute the entry on line 9a as the sum of the prior year's funding deficiency, if any, for each individual employer and the entry on line 9p as the sum of the separately computed funding deficiency, if any, for the current year for each employer. Credit balance amounts on lines 9h and line 9o are separately computed in the same manner. (Note that it is possible for the Schedule B to show both a funding deficiency and a credit balance for section 413(c) plans. This could not appear for other plans.)

Lines 9c and 9j. Amortization Charges and Credits. If there are any amortization charges or credits, attach a maintenance schedule of funding standard account bases. The attachment should clearly indicate the type of base (i.e., original unfunded liability, amendments, actuarial losses, etc.), the outstanding balance of each base, the number of years remaining in the amortization period, and the amortization amount. If bases were combined in the current year, the attachment should show information on bases both prior to and after the combining of bases.

The outstanding balance and amortization charges and credits must be calculated as of the valuation date for the plan year.

Line 9c(1). 155% Current Liability Full Funding Limitation

Base. If a credit was entered on line 9l(5) on the prior year's Schedule B, establish a new base equal to the amount of the credit (increased with interest to the current valuation date at the valuation rate) and amortize the base over a 20-year period at the valuation rate.

Note: For any such base remaining at the end of the 1998 plan year, the remaining amortization period is 20 years minus the number of years since the base was established.

Line 9c(2). Amortization for funding waivers must be based on the interest rate provided in Section 412(d) ("mandated rate").

Line 9d. Interest as Applicable. Interest as applicable should be charged to the last day of the plan year. The mandated rates must be used when calculating interest on any amortization charges for funding waivers.

Line 9e. If the funded current liability percentage for the preceding year reported in line 4a is at least 100%, quarterly contributions are not required for the current plan year.

Interest is charged for the entire period of underpayment. Refer to IRS Notice 89-52, 1989-1 C.B. 692, for a description of how this amount is calculated.

Note: Notice 89-52 was issued prior to the amendment of section 412(m)(1) by the Revenue Reconciliation Act of 1989. Rather than using the rate in the Notice, the applicable interest rate for this purpose is the greater of:

1. 175% of the Federal mid-term rate at the beginning of the plan year, or

2. The rate used to determine the "RPA '94" current liability.

All other descriptions of the additional interest charge contained in Notice 89-52 still apply.

Line 9f. Enter the required additional funding charge from line 12u. Enter "N/A" if line 12 is not applicable.

Line 9h. Note that the credit balance or funding deficiency at the end of "Year X" should be equal to the credit balance or funding deficiency at the beginning of "Year X+1." If such credit balances or funding deficiencies are not equal, attach an explanation. For example, if the difference is because contributions for a prior year which were not previously reported are received this plan year, attach a listing of the amounts and dates of such contributions.

Line 9l(1). ERISA Full Funding Limitation. Instructions for this line are reserved pending published guidance.

Line 9l(2). 155% Current Liability Full Funding Limitation. Instructions for this line are reserved pending published guidance.

Line 9l(3). "RPA '94" Override. Instructions for this line are reserved pending published guidance.

Line 9l(4). Full Funding Credit before reflecting "OBRA '87" Full Funding Limitation. Enter the excess of (1) the accumulated funding deficiency, disregarding the credit balance and contributions for the current year, if any, over (2) the greater of lines 9l(1) or 9l(3).

Line 9l(5). Additional Credit due to "OBRA '87" Full Funding Limitation. Enter (1) the excess, if any, of the accumulated funding deficiency, disregarding the credit balance and contributions for the current plan year, over the greater of lines 9l(2) or 9l(3), minus (2) the amount in line 9l(4). If the result is negative, enter zero.

Line 9m(1). Waived Funding Deficiency Credit. Enter a credit for a waived funding deficiency for the current plan year (Code section 412(b)(3)(C)). If a waiver of a funding deficiency is pending, report a funding deficiency. If the waiver is granted after Form 5500 is filed, file Form 5500, page one only with an amended Schedule B to report the funding waiver.

Line 9m(2). Other Credits. Enter a credit in the case of a plan for which the accumulated funding deficiency is determined under the funding standard account if such plan year follows a plan year for which such deficiency was determined under the alternative minimum funding standard.

Line 9q. Reconciliation Account. The reconciliation account is made up of those components that upset the balance equation of Income Tax Regulations section 1.412(c)(3)-1(b). Valuation assets should not be adjusted by the reconciliation account balance when computing the required minimum funding.

Line 9q(1). The accumulation of additional funding charges for prior plan years must be included. Enter the sum of line 9q(1) (increased with interest at the valuation rate to the first day of the current plan year) and line 9f, both from the prior year's Schedule B (Form 5500).

Line 9q(2). The accumulation of additional interest charges due to late or unpaid quarterly installments for prior plan years must be included. Enter the sum of line 9q(2) (increased with interest at the valuation rate to the first day of the current plan year) and line 9e, both from the prior year's Schedule B (Form 5500).

Line 9q(3)(a). If a waived funding deficiency is being amortized at an interest rate that differs from the valuation rate, enter the prior year's "reconciliation waiver outstanding balance" increased with interest at the valuation rate to the current valuation date and decreased by the year end amortization amount based on the mandated interest rate. Enter the amounts as of the valuation date.

Line 9q(4). Enter the sum of lines 9q(1), 9q(2), and 9q(3)(b) (each adjusted with interest at the valuation rate to the current valuation date, if necessary).

Note: The net outstanding balance of amortization charges and credits minus the prior year's credit balance minus the amount on line 9q(4) (each adjusted with interest at the valuation rate, if necessary) must equal the unfunded liability.

Line 10. Contribution Necessary to Avoid Deficiency. Enter the amount from line 9p. However, if the alternative funding standard account is elected and the accumulated funding deficiency under that method is smaller than line 9p, enter such amount (also see instructions for line 8b). For multiemployer plans in reorganization, see the instructions for line 8b. File Form 5330 with the IRS to pay the 10% excise tax (5% in the case of a multiemployer plan) on the funding deficiency.

Line 11. In accordance with ERISA section 103(d)(3), attach a justification for any change in actuarial assumptions for the current plan year. The preceding sentence applies for all plans.

The following instructions are applicable only to changes in current liability assumptions for plans (other than multiemployer plans) subject to Title IV of ERISA which resulted in a decrease in the unfunded current liability (UCL). If the current liability assumptions (other than a change in the assumptions required under Code section 412(l)(7)(C)) were changed for the current plan year and such change resulted in a decrease in UCL, approval for such a change may be required. However, if one

of the following three conditions is satisfied with respect to a change in assumptions for a plan year, then the plan sponsor is not required to obtain approval from the IRS for such change(s):

Condition 1: Aggregate Unfunded Vested Benefits

The aggregate unfunded vested benefits as of the close of the plan year preceding the year in which assumptions were changed (as determined under section 4006(a)(3)(E)(iii) of ERISA) for the plan, and all other plans maintained by contributing sponsors (as defined in section 4001(a)(13) of ERISA) and members of such sponsor's controlled group (as defined in section 4001(a)(14) of ERISA) which are covered by Title IV of ERISA (disregarding plans with no unfunded vested benefits) is less than or equal to \$50 million.

Condition 2: Amount of Decrease in UCL

The change in assumptions (other than a change required under Code section 412(l)(7)(C)) resulted in a decrease in the UCL of the plan for the plan year in which the assumptions were changed of less than or equal to \$5 million.

Condition 3: Amount of Decrease in UCL, and CL Before Change in Assumptions

Although the change in assumptions (other than a change required under Code section 412(l)(7)(C)) resulted in a decrease in the UCL of the plan for the plan year in which the assumptions were changed which was greater than \$5 million and less than or equal to \$50 million, the decrease was less than five percent of the current liability of the plan before such change.

If the current liability assumptions for the plan have been changed, and such change requires approval of the Service, enter on an attachment the date(s) of the ruling letter(s) granting approval.

If the current liability assumptions for the plan have been changed, and such change would have required approval in the absence of satisfaction of one of the conditions outlined above, enter on an attachment the number of the applicable condition and the plan year for which it applies. If condition 1 or 2 applies, also enter the amount of the decrease in UCL. Note that only one of the conditions needs to be entered.

Specific Instructions for Part II

Line 12. Additional Required Funding Charge. There is no additional funding charge for plans that have 100 or fewer participants in the prior plan year (as defined under **Who Must File**). Do not complete Part II for such plans.

Line 12a. A plan's "Gateway %" is equal to the actuarial value of assets (line 1b(2), unreduced by any credit balance) divided by the current liability computed with the highest allowable interest rate (line 1d(2)(c)). If line 1d(2)(c) is not completed in accordance with instructions for that line, use "RPA '94" current liability reported on line 1d(2)(a). There is no additional funding charge for plan years beginning in 1999 if the "Gateway %" is at least 90%. In such cases, enter -0- on line 12u. There is no additional funding charge for plan years beginning in 1999 if (a) the "Gateway %" (for 1999) is at least 80% but less than 90%, and (b) the "Gateway %" for the plan years beginning in 1998 and 1997 were at least 90%, or, the "Gateway %" for the plan years beginning in 1997 and 1996 were at least 90% (in such case, enter -0- on line 12u).

Note: Section 1508 of TRA '97 provided transition rules for certain plans sponsored by companies engaged primarily in the interurban or interstate passenger bus service that have "Gateway" percentages that are greater than certain prescribed minimum percentages. These transition rules are effective for such plans for any plan year beginning after 1996 and before 2010. If one of these transition rules is used, line 12a should be completed, and, if appropriate, a zero should be entered in line 12u. Attach a demonstration of the use of this transition rule to the Schedule B.

Line 12c. Enter the actuarial value of assets (line 1b(2)), reduced by the prior year's credit balance (line 9h). If line 9h was determined at a date other than the valuation date, adjust the credit balance for interest at the valuation rate to the current valuation date before subtracting. Do not add a prior year's funding deficiency to the assets.

Line 12d. Current Liability Percentage. Enter the actuarial value of the assets expressed as a percentage of "RPA '94" current liability. Enter the result to the nearest .01% (e.g., 28.72%).

Line 12f. Enter the liability for any unpredictable contingent event (other than events that occurred before the first plan year beginning after 1988) that was included in line 12b, whether or not such unpredictable contingent event has occurred.

Line 12g. Enter the outstanding balance of the unfunded old liability as of the valuation date. This is line 12(g) of the 1998 Schedule B reduced by the prior year's amortization amount, and adjusted for interest at the prior year's current liability interest rate from the prior year's valuation date to the current valuation date. The unfunded old liability (and therefore all its components) will be considered fully amortized in accordance with Q&A-7 of Rev. Rul. 96-20, 1996-1 C.B. 62.

Note: *In the case of a collectively bargained plan, this amount must be increased by the unamortized portion of any "unfunded existing benefit increase liability" in accordance with Code section 412(l)(3)(C).*

Line 12h. This amount is the unfunded new liability. It is recomputed each year. If a negative result is obtained, enter zero.

Line 12i. If the unfunded new liability is zero, enter zero for the unfunded new liability amount. If the unfunded new liability is greater than zero, first calculate the amortization percentage as follows:

1. If the funded current liability percentage (line 12d) is less than or equal to 60%, the amortization percentage is 30%.

2. If the current liability percentage exceeds 60%, the amortization percentage is determined by reducing 30% by the product of 40% and the amount of such excess. Enter the resulting amortization percentage to the nearest 0.01 percent.

The unfunded new liability amount is equal to the above-calculated percentage of the unfunded new liability.

Line 12j. Enter the amortization amount for line 12g based on the "RPA '94" current liability interest rate (line 6a(1)) in effect for the plan year and the following amortization period:

In general: For the 1999 plan year, the remaining amortization period is 8 years.

Special rule: In the case of a collectively bargained plan, the amortization amount must be increased by the amortization of any "unfunded existing benefit increase liability" in accordance with Code section 412(l)(3)(C)(ii). For any such amortization, the amortization period is equal to the remainder of the original 18-year period that applied when the amortization began.

Base maintenance: On a separate attachment, show the initial amount of each DRC amortization base (as defined in Rev. Rul. 96-20) being amortized under the general or special rule, the outstanding balance of each DRC amortization base, the number of years remaining in the amortization period, and the amortization amount (with the valuation date as the due date of the amortization amount). It is not necessary to separately list the unfunded old liability base and the additional unfunded old liability base. Do not enter base maintenance required for line 13 here. See instructions for line 13(i) only if applicable.

Line 12l. Enter the result determined by subtracting the amortization credits (line 9j) from the sum of the normal cost and the amortization charges (lines 9b, 9c(1) and 9c(2)). Use the valuation date as the due date for the amortization amounts. If entering a negative number, enter a minus sign "—" to the left of the number.

Note: *Any amortization installments established under Code section 412(b) for plan years beginning after December 31, 1987, and before January 1, 1993, by reason of nonelective changes under the frozen initial liability method shall not be included in the calculation of the offset for the first 5 plan years beginning after December 31, 1994.*

Line 12m. Unpredictable Contingent Event Amount. Line 12m does not apply to the unpredictable contingent event benefits (and related liabilities) for an event that occurred before the first plan year beginning after December 31, 1988.

Line 12m(1). Enter the total of all benefits paid during the plan year that were paid solely because an unpredictable event occurred.

Line 12m(5). Amortization of All Unpredictable Contingent Event Liabilities. Amortization should be based on the "RPA '94" current liability interest rate (line 6a(1)), using the valuation date as the due date. The initial amortization period for each base established in a plan year is generally 7 years, however see Code section 412(l)(5) for special rules.

Note: *An alternative calculation of an unpredictable contingent amount is available for the first year of amortization. Refer to Code section 412(l)(5)(D) for a description. If this alternative calculation is used, include an attachment describing the calculation.*

Line 12m(6). "RPA '94" Additional Amount. Subtract line 12g from line 12e. If the result is zero or less than zero, enter -0-. If the result is a positive number, multiply the result by the percentage used to calculate line 12i. Enter the excess, if any, of this amount over the amount on line 12i.

Line 12n. Preliminary charge. Adjust with interest using the "RPA '94" current liability interest rate.

Line 12o. Contributions needed to increase current liability percentage to 100%. This amount is calculated in the same manner as the "target amount" except that 100 percent is substituted for the "target percentage" (see Announcement 96-18, 1996-15 I.R.B. 15). Instructions for computing the target amount are provided at line 14c.

Lines 12q, 12r, and 12s. Complete only the one applicable line.

Line 12u. If the plan had 150 or more participants on each day of the preceding plan year, enter 100%. If the plan had less than 150 participants but more than 100 participants on each day of the preceding plan year, enter the applicable percentage. The same participant aggregation rule described in the instructions for line 12 applies. The applicable percentage is calculated as follows: (1) Determine the greatest number of participants on any day during the preceding plan year in excess of 100. (2) The applicable percentage is 2% times the number of such participants in excess of 100. The percentage should not exceed 100%. The amount on line 12u is also the amount entered on line 9f.

Line 13. Additional Funding Charge under Prior Law (for Use with the Optional and/or Transition Rules). The line is completed if the plan sponsor elected in 1995 to use the Optional rule under Code section 412(l)(3)(E) or is using the Transition rule under Code section 412(l)(11) in 1999. Do not complete line 13 for plans that are not subject to section 412(l) in 1999 (i.e., plans that entered zero on line 12u immediately after completing the Gateway % in line 12a). All calculations in line 13 must be done using the law pertaining to the additional funding charge as it existed prior to "RPA '94" (see Q&A-9 of Rev. Rul. 96-21).

Line 13a. Enter the "OBRA '87" current liability as of the valuation date.

Line 13b. Enter the actuarial value of assets (line 1b(2)), reduced by the prior year's credit balance (line 9h). If line 9h was determined at a date other than the valuation date, adjust the credit balance for interest at the valuation rate to the current valuation date before subtracting. Do not add a prior year's funding deficiency to the assets.

Line 13c. Enter the adjusted actuarial value of assets expressed as a percentage of current liability. Round off to two decimal places (e.g., 59.41%).

Line 13e. Enter the outstanding balance of the unfunded old liability as of the valuation date. To compute the outstanding balance, lines 13e and 13i from the 1998 Schedule B should be used.

Line 13f. Enter the liability for any unpredictable contingent event benefit that was included on line 13a, whether or not such event has occurred.

Computation of Target Percentage (line 14b)

If line 14a is...	Then enter on line 14b:
line 14a ≤ 63%	line 14a + 15%
63% < line 14a ≤ 66%	90% × line 14a + 21.3%
66% < line 14a ≤ 69%	81% × line 14a + 27.24%
69% < line 14a ≤ 72%	72.9% × line 14a + 32.83%
72% < line 14a ≤ 74.55%	65.61% × line 14a + 38.08%
74.55% < line 14a ≤ 75%	72.9% × line 14a + 32.64%
75% < line 14a ≤ 77.56%	65.61% × line 14a + 38.11%
77.56% < line 14a ≤ 80.30%	72.9% × line 14a + 32.46%
80.30% < line 14a ≤ 82.77%	81% × line 14a + 25.95%
82.77% < line 14a < 85%	90% × line 14a + 18.5%
85% ≤ line 14a	line 14a + 10%

Line 13g. This amount is the unfunded new liability. It will be recalculated each year. If the result is negative, enter -0-.

Line 13h. If the unfunded new liability is zero, enter -0- for the unfunded new liability amount. If the unfunded new liability is greater than zero, first calculate the amortization percentage as follows:

1. If the funded current liability percentage (line 13c) is less than or equal to 35%, the amortization percentage is 30%.
2. If the funded current liability percentage exceeds 35%, the amortization percentage is determined by reducing 30% by the product of 25% and the amount of such excess. Enter the resulting amortization percentage to the nearest 0.01 percent.

The unfunded new liability amount is equal to the above-calculated percentage of the unfunded new liability.

Line 13i. Enter the amortization of the outstanding balance of the unfunded old liability as of the valuation date (line 13e). In the case of a collectively bargained plan, the unfunded old liability amount to enter on line 13i must include the amortization of any unfunded existing benefit increase liability calculated in accordance with Code section 412(l)(3)(C)(ii). On a separate attachment, show the breakdown of the various liabilities being amortized, the outstanding balance of each liability, the number of years remaining in the amortization period, and the amortization amount.

Any such amortization amount must be determined based on:

1. The "OBRA '87" current liability interest rate in effect at the beginning of the plan year, and
2. The valuation date as the due date of the amortization payment.

The amortization period must be the remainder of the original 18-year period that applied when the amortization began.

Any such amortization amount must be redetermined each year based on the outstanding balance (line 13e). If the plan becomes fully funded on a current liability basis, the unfunded old liability (including any liability arising from collectively bargained plans) will be considered fully amortized (see Q&A-7 of Rev. Rul. 96-20).

Line 13j. Deficit Reduction Contribution. Enter the sum of lines 13h and 13i. This amount is the deficit reduction contribution at the valuation date.

Line 13k. When entering the net amortization amounts for certain bases include only charges (included on line 9c) and credits (included on line 9j) attributable to original unfunded liability, amendments, funding waivers, and charges resulting from a "switchback" from the alternative minimum account to the funding standard account.

If a base resulted from combining and/or offsetting pre-existing bases among which were bases not designated in the preceding paragraph, and such base was not uncombined in 1989 in accordance with Announcement 90-87, 1990-30 I.R.B. 23, then such resulting base may not be included in this line 13k.

Line 13l. Line 13l does not apply to the unpredictable contingent event benefits (and the attributable liabilities) for an event that occurred before the first plan year beginning after December 31, 1988.

Line 13l(1). Enter the total of all benefits paid during the plan year that were paid solely because the unpredictable contingent event occurred.

Line 13l(5). Amortization should be based on the "OBRA '87" current liability interest rate and should assume beginning of the year payments for a 7-year period.

Note: Alternative calculation of an unpredictable contingent event amount is available for the first year of amortization. Refer to Code section 412(l)(5)(D) for a description. If this alternative calculation is used, include an attachment describing the calculation.

Line 13p. Enter the applicable amount of interest, based on the "OBRA '87" current liability interest rate, to bring the additional funding charge (line 13o) to the end of the plan year.

Line 14. Transition Rule. The transition rule of Code section 412(l)(11) provides an alternative method of computing the additional required funding charge. The rule may be elected by the employer as part of Schedule R (Form 5500), line 8, in any year up to the year 2001. The charge for a year is the amount necessary to increase the funded current liability percentage to the target percentage preset for that year, with adjustments to meet the two following conditions: (1) the charge must not be less than the additional funding charge under the law as it existed prior to "RPA '94", and (2) in any event, the charge under the Transition rule must not be greater than the charge under present law (ignoring the effect of the Transition rule).

The transition rule of Code section 412(l)(11) may only be elected by the employer sponsoring an "eligible plan" (see Q&A-2 of Rev. Rul. 96-21).

Note: In accordance with Q&A-2 of Rev. Rul. 96-21, a plan that was not in existence in 1995 is not eligible to use the Transition rule.

Line 14b. Transition Rule Target Percentage. To compute the target percentage, refer to the table above and enter the appropriate percentage on line 14b.

Line 14c. Target Amount. The target amount is the additional amount necessary to increase the funded current liability percentage to the "target percentage" of line 14b. The target amount is equal to the excess, if any, of the product of line 14b and the "adjusted current liability", over the "adjusted assets." The adjusted current liability is computed in accordance with Q&A-7 of Rev. Rul. 96-21, and is equal to the excess of (1) the sum of lines 1d(2)(a) and 1d(2)(b), over (2) line 1d(2)(d), each adjusted to the end of the plan year using the "RPA '94" current liability interest rate. The adjusted assets are computed in accordance with Q&A-8 of Rev. Rul. 96-21.

1999 – Service Provider Information Instructions for Schedule C (Form 5500)

General Instructions

Who Must File

The Schedule C (Form 5500) must be attached to a Form 5500 filed for a large pension or welfare benefit plan and to a Form 5500 filed for a MTIA, 103-12, or GIA to report information concerning service providers. See the instructions to the Form 5500 for **Form 5500 Schedules and Direct Filing Entity (DFE)**.

Check the Schedule C box on the Form 5500 (Part II, line 10b(4)) if a Schedule C is attached to the Form 5500. Multiple Schedule C pages must be attached to the Form 5500 if necessary to report the required information.

Lines A, B, C, and D. This information should be the same as reported in Part II of the Form 5500 to which this Schedule C is attached.

Line 1 of Part I Line 1 must be completed if line 2 of Part I is required to be completed as specified below.

Line 2 of Part I Line 2 of Part I must be completed to report contract administrators and persons receiving, directly or indirectly, \$5,000 or more in compensation for all services rendered to the plan or DFE during the plan or DFE year except:

1. Employees of the plan whose only compensation in relation to the plan was less than \$1,000 for each month of employment during the plan year;
2. Employees of the plan sponsor who did not receive direct or indirect compensation from the plan;
3. Employees of a business entity (e.g., corporation, partnership, etc.), other than the plan sponsor, who provided services to the plan; or
4. Persons whose only compensation in relation to the plan consists of insurance fees and commissions listed in a Schedule A attached to the Form 5500 filed for this plan.

Generally, indirect compensation would not include compensation that would have been received had the service not been rendered and that cannot be reasonably allocated to the services performed. Indirect compensation includes, among other things, payment of "finder's fees" or other fees and commissions by a service provider to an independent agent or employee for a transaction or service involving the plan.

Notes:

- Either the cash or accrual basis may be used for the recognition of transactions reported on the Schedule C as long as you use one method consistently.
- The compensation listed should only reflect the amount of compensation received by the service provider from the plan or DFE filing the Form 5500, not the aggregate amount received for providing services to several plans or DFEs.
- The term "persons" on the Schedule C instructions includes individuals, trades and businesses (whether incorporated or unincorporated). See ERISA section 3(9).

Specific Instructions

Part I - Service Provider Information

Line 1. Enter the total dollar amount of compensation received by all persons who provided services to the plan who are not listed in line 2 (except for those persons described in 2, 3, or 4 in the General Instructions).

Example: A plan had service providers, A, B, C, and D, who received \$12,000, \$6,000, \$4,500, and \$430, respectively, from the plan. Service providers A and B must be identified separately in line 2 by name, EIN, official plan position, etc. As service providers C and D each received less than \$5,000, the amount they received must be combined and \$4,930 entered in line 1.

Line 2. List up to 40 service providers, including the contract administrator, as specified below.

First, list the contract administrator, if any, on the first item (complete elements (a) through (g)) on line 2 where indicated. A contract administrator is any individual, trade or business (whether incorporated or unincorporated) responsible for managing the clerical operations of the plan on a contractual basis (e.g., handling membership rosters, claims payment, maintaining books and records), except for salaried staff or employees of the plan or banks or insurance carriers.

Next, complete a separate item for each person required to be reported in line 2 in the order of compensation received. Start with the most highly compensated and end with the lowest compensated. Enter in element (a) the person's name and complete elements (b) through (g) as specified below. Additional pages may be necessary to list all service providers. You can get additional green ink copies by calling 1-800-TAX-FORM (1-800-829-3676).

Element (b). An EIN must be entered. If the name of an individual is entered in element (a), the EIN to be entered in element (b) should be the EIN of the individual's employer.

Element (c). Enter, for example, employee, trustee, accountant, attorney, etc.

Element (d). Enter, for example, employee, vice-president, union president, etc.

Elements (e) and (f).

Plan Filers. Include the plan's share of compensation for services paid during the year to an MTIA or 103-12 IE trustee and to persons providing services to the MTIA or 103-12 IE, if such compensation is not subtracted from the total income in determining the net income (loss) reported on the MTIA or 103-12 IE's Schedule H, line 2k.

Include brokerage commissions or fees only if the broker is granted some discretion (see 29 CFR 2510.3-21 paragraph (d), regarding "discretion"). Include all other commissions and fees on investments, whether or not they are capitalized as investment costs.

MTIA and 103-12 IEs. Include compensation for services paid by the MTIA or 103-12 IE during its fiscal year to persons providing services to the MTIA or 103-12 IE if such compensation is subtracted from the total income in determining the net income (loss) reported by the MTIA or 103-12 IE on Schedule H, line 2k.

Element (g). Select and enter all codes that describe the nature of services provided from the list below. If more than one service was provided, list the code for the primary service first. If necessary, use a properly identified attachment to list all applicable service codes.

Note: Do not list PBGC or IRS as a service provider on Part I of Schedule C.

Code	Service
10	Accounting (including auditing)
11	Actuarial
12	Contract Administrator
13	Administration
14	Brokerage (real estate)
15	Brokerage (stocks, bonds, commodities)
16	Computing, tabulating, ADP, etc.
17	Consulting (general)
18	Custodial (securities)
19	Insurance agents and brokers
20	Investment advisory
21	Investment management
22	Legal
23	Printing and duplicating
24	Recordkeeping
25	Trustee (individual)
26	Trustee (corporate)
27	Pension insurance advisor
28	Valuation services (appraisals, asset valuations, etc.)
29	Investment evaluations
30	Medical
31	Legal services to participants
99	Other (specify)

Part II - Termination Information on Accountants and Enrolled Actuaries

Complete Part II if there was a termination in the appointment of an accountant or enrolled actuary. In case the service provider is not an individual (i.e., when the service provider is a legal entity such as a corporation, partnership, etc.), report when the service provider (not the individual) has been terminated.

Provide an explanation of the reasons for the termination of an accountant or enrolled actuary. Include a description of any material disputes or matters of disagreement concerning the termination, even if resolved prior to the termination. If an individual is listed, the EIN to be entered should be the EIN of the individual's employer. The plan administrator must also provide the terminated accountant or enrolled actuary with a copy of the explanation for the termination provided in Part II of the Schedule C, with a completed copy of the notice below.

**Notice To Terminated Accountant
Or Enrolled Actuary**

I, as plan administrator, verify that the explanation that is reproduced below or attached to this notice is the explanation concerning your termination reported on the Schedule C (Form 5500) attached to the 1999 Annual Return/Report Form 5500 for the _____ (enter name of plan). This Form 5500 is identified in line 2b by the nine-digit EIN _____ (enter sponsor's EIN), and in line 1b by the three-digit PN _____ (enter plan number).

You have the opportunity to comment to the Department of Labor concerning any aspect of this explanation. Comments should include the name, EIN, and PN of the plan and be submitted to: Office of Enforcement, Pension and Welfare Benefits Administration, U.S. Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210.

Signed
Dated

1999 – DFE/Participating Plan Information Instructions for Schedule D (Form 5500)

General Instructions

Who Must File

Employee Benefit Plans: Schedule D must be attached to a Form 5500 filed for an employee benefit plan that participated or invested in one or more common/collective trusts (CCTs), pooled separate accounts (PSAs), master trust investment accounts (MTIAs), or 103-12 Investment Entities (103-12 IEs) at any time during the plan year.

Direct Filing Entities: Schedule D must be attached to a Form 5500 filed for a CCT, PSA, MTIA, 103-12 IE or Group Insurance Arrangement (GIA), as a Direct Filing Entity (i.e., when Form 5500 Part I, line A(4) is checked). For more information, see instructions for **Direct Filing Entity (DFE)** on pages 4 and 8 of the instructions for the Form 5500.

Check the Schedule D box on the Form 5500 (Part II, line 10b(5)) if a Schedule D is attached to the Form 5500. Multiple Schedule D pages must be attached to the Form 5500 if necessary to report the required information. You can get additional green ink copies by calling **1-800-TAX-FORM** (1-800-829-3676).

Purpose of Schedule

When the Form 5500 is filed for a plan or DFE that invested or participated in any MTIAs, 103-12 IEs, CCTs and/or PSAs, Part I provides information about these entities. When the Form 5500 is filed for a DFE, Part II provides information about plans participating in the DFE.

Lines A, B, C, and D. The information entered on these lines should be the same as the information entered on the Form 5500 to which this Schedule D is attached (Part II, lines 1a, 1b, 2a, and 2b, respectively).

Specific Instructions For Part I

Use as many pages as necessary to enter the information specified below for all MTIAs, CCTs, PSAs, and 103-12 IEs in which the plan or DFE filing the Form 5500 participated at any time during the plan or DFE year.

Complete a separate item (elements (a) through (e)) for each MTIA, CCT, PSA, or 103-12 IE.

Element (a). Enter the name of the MTIA, CCT, PSA, or 103-12 IE in which the plan or DFE filing the Form 5500 participated at any time during the plan or DFE year.

Element (b). Enter the sponsoring organization (financial institution, insurance company, etc.) of the MTIA, CCT, PSA, or 103-12 IE named in (a).

Element (c). Enter the nine-digit employer identification number (EIN) and three-digit plan/entity number (PN) for each MTIA, CCT, PSA, or 103-12 IE named in (a). This **must** be the same EIN/PN as reported on lines 2b and 1b of the Form 5500 filed for the DFE. If a Form 5500 was **not** filed for a CCT or PSA named in element (a), enter the EIN for the CCT or PSA and enter 000 for the PN.

Element (d). Enter an M, C, P, or E, as appropriate, (see table below) to identify the type of entity (MTIA, CCT, PSA, or 103-12 IE).

Type of entity	Enter in (d)
▼	▼
MTIA	M
CCT	C
PSA	P
103-12 IE	E

Element (e). Enter the value of the plan's or DFE's interest as of the end of the year. If the plan or DFE for which this Schedule D is filed had no interest in the MTIA, CCT, PSA, or 103-12 IE listed at the end of the year, enter "0".

Example for Part I: If a plan participates in an MTIA, the MTIA is named in element (a); the MTIA's sponsoring financial institution is named in element (b); the MTIA's EIN and PN is entered in element (c) (such as: 12-3456789-001); an "M" is entered in element (d); and the dollar value of the plan's interest in the MTIA as of the end of the plan year is entered in element (e). If the plan also participates in a CCT for which a Form 5500 was **not** filed, the CCT is named in another element (a); the name of the CCT sponsor is named in element (b), the nine-digit number EIN for the CCT, followed by 000 is entered in element (c) (such as: 99-8765432-000); a "C" is entered in element (d); and the dollar value of the plan's interest in the CCT is entered in element (e). If the plan also participates in a PSA for which a Form 5500 **was** filed, the PSA is named in a third element (a); the name of the PSA sponsor is named in element (b), the PSA's EIN and PN is entered in element (c) (such as: 98-7655555-001); a "C" is entered in element (d); and the dollar value of the plan's interest in the CCT is entered in element (e).

See the filled-in example for Part I on the following page.

Specific Instructions For Part II

Use as many pages as necessary to enter the information specified below for all plans that invested or participated in the DFE at any time during the DFE year.

Complete a separate item (elements (a) through (c)) for each plan.

Element (a). Enter the name of each plan that invested or participated in the DFE at any time during the DFE year. GIAs need not complete element (a).

Element (b). Enter the sponsor of each investing or participating plan.

Element (c). Enter the nine-digit EIN and three-digit PN for each plan named in element (a). This is the EIN and PN entered on lines 2b and 1b of the plan's Form 5500. GIAs should enter the EIN of the sponsor listed in element (b).

See the filled-in example for Part II on the following page.

Filled-in Example for Part I

(a) Name of MTIA, CCT, PSA, or 103-12 IE	(b) Name of Sponsor	(c) EIN/PN of entity listed in (a)	(d) Entity Code	(e) Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year
Master Trust For Plans of XYZ Corporation	Trustee Bank for Master Trust	12-3456789-001	M	1,250,000
AAA Bank CCT	AAA Bank of North America	99-8765432-000	C	250,000
BBB insurance Company PSA	BBB insurance Company	98-7655555-001	P	275,000

Filled-in Example for Part II

Examples for Part II: A Schedule D filed for a DFE (other than a GIA) should be completed as in the following example ▼

(a) Plan Name	(b) Name of Plan Sponsor	(c) EIN/PN of plan named in (a)
ABC Widget Profit Sharing Plan	ABC Widget Company	12-3456789-001
ABC Widget Pension Plan	ABC Widget Company	12-3456789-002
ABC Sister Company Profit Sharing Plan	ABC Sister Company	12-3456799-001
ABC Sister Company Pension Plan	ABC Sister Company	12-3456799-002

A Schedule D filed for a GIA may be completed as above or as in the following example ▼

(a) Plan Name	(b) Name of Plan Sponsor	(c) EIN/PN of plan
	ABC Widget Company	12-3456789
	AAA Shoe Company	98-7654321
	XYZ Corporation	88-7712342

1999 – ESOP Annual Information Instructions for Schedule E (Form 5500)

General Instructions

Purpose of Form

Use this schedule to satisfy the requirements under Code section 6047(e) for an annual information return for an employee stock ownership plan (ESOP).

Who Must File

Every employer or plan administrator of a pension benefit plan that contains ESOP benefits must file a Schedule E (Form 5500).

How To File

File Schedule E (Form 5500) annually as an attachment to Form 5500 or 5500-EZ. If more than one securities acquisition loan (see specific instructions for lines 6 through 11) is outstanding, you must file one Schedule E (Form 5500) and an attachment for each additional securities acquisition loan. Each attachment must provide answers to questions 6 through 11, be in a similar format to, and on the same size paper as the Schedule E.

Check the Schedule E box on the Form 5500 (Part II, line 10a(4)) if a Schedule E is attached to the Form 5500.

Note: The Small Business Job Protection Act repealed the partial interest exclusion of Code section 133 effective, in general, with respect to loans made after August 20, 1996. However, Schedule E (Form 5500) must be filed for securities acquisition loans made to ESOPs before August 21, 1996, loans made pursuant to a written binding contract in effect before June 10, 1996, and at all times thereafter before the loan was made, and certain loans made after August 20, 1996, to refinance a securities acquisition loan originally made on or before August 20, 1996.

Specific Instructions

Lines A, B, C, and D. This information should be the same as reported in Part II of the Form 5500 to which this Schedule E is attached.

Line 3. If the schedule does not provide enough space, enter "ATTACHED" and provide the required formula as an attachment to Schedule E.

Lines 6 through 11. A "securities acquisition loan" is an exempt loan to an ESOP to the extent that the proceeds are used to acquire employer securities for the plan.

Line 6. A "back to back loan" is a securities acquisition loan from a lender to an employer corporation followed by a loan from the corporation to the ESOP maintained by the employer corporation. A "back to back loan" constitutes a "securities acquisition loan" under Code section 133 if the following requirements are satisfied:

1. The loan from the employer corporation to the ESOP qualifies as an exempt loan under Excise Tax Regulations sections 54.4975-7 and 54.4975-11;

2. The repayment terms of the loan from the corporation to the ESOP are "substantially similar" (as defined in Temporary Income Tax Regulations section 1.133-1T) to the repayment terms of the loan from the corporation to the lender; and

3. If the loan from the corporation to the ESOP provides for more rapid repayment of principal and interest, the allocations

under the ESOP attributable to such repayments do not discriminate in favor of highly compensated employees (within the meaning of Code section 414(q)).

Line 7. An immediate allocation loan is any loan to an employer corporation to the extent that, within 30 days, employer securities are transferred to the ESOP maintained by the corporation in an amount equal to the proceeds of the loan and the securities are allocable to the accounts of plan participants within one year of the date of the loan. (See Code section 133(b)(1)(B).)

Line 8c. The transition rules of Act section 7301(f)(2) through (6) of the Omnibus Budget Reconciliation Act of 1989 (OBRA), P.L. 101-239, provide that the amendments made to Code section 133 by OBRA will not apply to certain loans that satisfy the requirements of those paragraphs. In general, the amendments made by OBRA will not apply to:

1. Loans made pursuant to a binding written commitment in effect on June 6, 1989, and at all times thereafter before the loan was made, or pursuant to a written binding contract (or tender offer registered with the Securities and Exchange Commission (SEC)) in effect on June 6, 1989, and at all times thereafter before such securities were acquired.

2. If subparagraph 1 does not apply, loans made pursuant to a binding written commitment in effect on July 10, 1989, and at all times thereafter before the loan was made, but only to the extent that the proceeds were used to acquire employer securities pursuant to a certain binding written contract (or tender offer registered with the SEC) in effect on July 10, 1989, and at all times thereafter before the securities are acquired.

3. Any loan made on or before July 10, 1992, pursuant to a written agreement entered into before July 10, 1989, if the agreement evidences the intent of the borrower to enter, on a periodic basis, into securities acquisition loans described in Code section 133(b)(1)(B) (as in effect before December 19, 1989). This rule applies only if one or more securities acquisition loans were made to the borrower on or before July 10, 1989.

See Act section 7301(f)(2) to determine the specific requirements of the transition rules described above. See Act section 7301(f)(3) through (6) for additional transition rules on refinancings, collective-bargaining agreements, filings with the United States, and the 30% test for certain loans.

Line 9. If the loan is a back to back loan or an immediate allocation loan, enter the amount of interest paid by the employer corporation to the lender(s) during the plan year.

Line 11b. The repeal of Code section 133 by Act section 1602 of SBJPA 1996 does not apply to a refinancing of an ESOP securities acquisition loan made after August 20, 1996 or pursuant to a binding contract in effect before June 10, 1996, if:

1. The refinancing loan meets the requirements of Code section 133 in effect on August 20, 1996,

2. The outstanding principal amount of the loan is not increased, and

3. The term of the original loan is not extended.

Line 15(d). In determining the dividend rate for a class of common stock, use the percentage of the average dividends paid on the class of common stock during the plan year over the average value of the class of common stock during the plan year.

In determining the dividend rate for a class of preferred stock, use the dividend rate stated in the terms of the stock, or if a dividend rate is not stated, use the percentage of the average dividends paid on the class of preferred stock during the plan year over the par value of the class of preferred stock.

**1999 – Fringe Benefit Plan
Annual Information Return
Instructions for Schedule F (Form 5500)****General Instructions****Purpose of Schedule**

Schedule F must be attached to the Form 5500 filed for every fringe benefit plan required to file under Code section 6039D. This includes:

- A cafeteria plan described in Code section 125,
- An educational assistance program described in Code section 127, and
- An adoption assistance program described in Code section 137.

Note: If an employer offers an adoption assistance program as a benefit under a cafeteria plan, file one Schedule F for the cafeteria plan. If one Schedule F is filed for both a Code section 125 plan and a Code section 137 plan, check both the 125 box and the 137 box. Do not file Schedule F for an educational assistance program that provides only job-related training, which is deductible as an ordinary and necessary business expense under Code section 162.

Check the Schedule F box on the Form 5500 (Part II, line 10c) if a Schedule F is attached to the Form 5500.

Specific Instructions

Lines A, B, C, and D. This information should be the same as reported in Part II of the Form 5500 to which this Schedule F is attached.

Fringe benefit plans filing only to satisfy the requirements of Code section 6039D(a) must complete the following items on Form 5500: Boxes A, B, D, and lines 1 through 5, 8c, and 10c. The completed Form 5500 and the attached Schedule F are filed as the plan's information return.

Line 4. For reporting purposes under Code section 6039D, the term "employees participating in the plan" means any employee who, for a plan year, has had at least \$1 excluded from gross income by reason of Code section 125, 127, or 137.

Line 5. The total cost of the fringe benefit plan includes:

- For a Code section 125 cafeteria plan, the amount employees elect to have an employer contribute to provide for the benefits under the plan.
- Administrative expenses including any legal, accounting, or consulting fees attributable to the plan, whether paid directly by the employer or through the plan. Overhead expenses such as utilities and photocopying costs are not to be included for this reporting purpose.

Note: For a Code section 125 cafeteria plan, enter the amount of the salary reductions and other employer contributions. Other employer contributions include nonelective contributions and flexible credits. Nonelective contributions and flexible credits are the employer's portion of the cost or premium contributed as employer-provided coverage under a cafeteria plan arrangement. Do not subtract benefits paid out from the plan and amounts forfeited.

Line 6. Do not complete this line if the return/report is being filed for both a welfare benefit plan and a fringe benefit plan and both have terminated during this plan year and are filing a final return/report. Enter the termination information in Form 5500, Part I, line B(3) and lines 4k and 5a of the Schedule H or lines 4j and 5a of the Schedule I, as applicable.

1999 – Financial Transaction Schedules Instructions for Schedule G (Form 5500)

General Instructions

Who Must File

The Schedule G (Form 5500) must be attached to a Form 5500 filed for a plan, MTIA, 103-12 IE, or GIA to report loans or fixed income obligations in default or determined to be uncollectible as of the end of the plan year, leases in default or classified as uncollectible, and nonexempt transactions. See Schedule H (Form 5500) lines 4b, 4c, and/or 4d.

Check the Schedule G box on the Form 5500 (Part II, line 10b(6)) if a Schedule G is attached to the Form 5500. Multiple Schedule G pages must be attached to the Form 5500 if necessary to report the required information. You can get additional green ink copies by calling 1-800-TAX-FORM (1-800-829-3676).

The Schedule G consists of three parts. Part I of the Schedule G reports any loans or fixed income obligations in default or determined to be uncollectible as of the end of the plan year. Part II of the Schedule G reports any leases in default or classified as uncollectible. Part III of the Schedule G reports nonexempt transactions.

Specific Instructions

Lines A, B, C, and D. This information should be the same as reported in Part II of the Form 5500 to which this Schedule G is attached.

Part I - LOANS OR FIXED INCOME OBLIGATIONS IN DEFAULT OR CLASSIFIED AS UNCOLLECTIBLE

List all loans by the plan or fixed income obligations in default or determined to be uncollectible as of the end of the plan year, or the fiscal year of the GIA, MTIA, or 103-12 IE. Include:

- Obligations where the required payments have not been made by the due date;
- Fixed income obligations that have matured, but have not been paid, for which it has been determined that payment will not be made; and
- Loans by the plan that were in default even if renegotiated later during the plan year.

Identify in (a) each obligator known to be a party-in-interest to the plan.

Provide, on a separate attachment, an explanation of what steps have been taken or will be taken to collect overdue amounts for each loan listed.

The due date, payment amount and conditions for determining default in the case of a note or loan are usually contained in the documents establishing the note or loan. A loan by the plan is in default when the borrower is unable to pay the obligation upon maturity. Obligations that require periodic repayment can default at any time. Generally loans and fixed income obligations are considered uncollectible when payment has not been made and there is little probability that payment will be made. A fixed income obligation has a fixed maturity date at a specified interest rate.

Do not report in Part I participant loans under an individual account plan with investment experience segregated for each account, that are made in accordance with 29 CFR 2550.408b-1, and that are secured solely by a portion of the participant's vested accrued benefit. Report all other participant loans in default or classified as uncollectible on Part I, and list each such loan individually.

Part II - LEASES IN DEFAULT OR CLASSIFIED AS UNCOLLECTIBLE

List any leases in default or classified as uncollectible. A lease is an agreement conveying the right to use property, plant or equipment for a stated period. A lease is in default when the required payment(s) has not been made. An uncollectible lease is one where the required payments have not been made and

for which uncollectible lease is one where the required payments have not been made and for which there is little probability that payment will be made. Provide, on a separate attachment, an explanation of what steps have been taken or will be taken to collect overdue amounts for each lease listed.

Part III - NONEXEMPT TRANSACTIONS

All nonexempt party-in-interest transactions must be reported, regardless of whether disclosed in the accountant's report, unless the nonexempt transaction is:

1. Statutorily exempt under Part 4 of Title I of ERISA;
2. Administratively exempt under ERISA; section 408(a);
3. Exempt under Code sections 4975(c) or 4975(d);
4. The holding of participant contributions for a welfare plan that meets the conditions of ERISA Technical Release 92-01; or
5. A transaction of a 103-12 IE with parties other than the plan.

Nonexempt transactions with a party-in-interest include any direct or indirect:

- A. Sale or exchange, or lease, of any property between the plan and a party-in-interest.
- B. Lending of money or other extension of credit between the plan and a party-in-interest.
- C. Furnishing of goods, services, or facilities between the plan and a party-in-interest.
- D. Transfer to, or use by or for the benefit of, a party-in-interest, of any income or assets of the plan.
- E. Acquisition, on behalf of the plan, of any employer security or employer real property in violation of Code section 407(a).
- F. Dealing with the assets of the plan for a fiduciary's own interest or own account.
- G. Acting in a fiduciary's individual or any other capacity in any transaction involving the plan on be half of a party (or represent a party) whose interests are adverse to the interests of the plan or the interests of its participants or beneficiaries.
- H. Receipt of any consideration for his or her own personal account by a party-in-interest who is a fiduciary from any party dealing with the plan in connection with a transaction involving the income or assets of the plan.

Note: Amounts paid by a participant or beneficiary to an employer and/or withheld by an employer for contribution to the plan are participant contributions that become plan assets as of the earliest date on which such contributions can reasonably be segregated from the employer's general assets (see 29 CFR 2510.3-102). An employer holding these assets after that date commingled with its general assets, will have engaged in a prohibited use of plan assets for purposes of the nonexempt transactions described above (see ERISA section 406). See above for reporting by welfare plans that meet the conditions of ERISA Technical Release 92-01.

If you are unsure as to whether a transaction is exempt or not, you should consult with either the plan's independent qualified public accountant or legal counsel or both.

You may indicate that an application for an administrative exemption is pending.

If the plan is a qualified pension plan and a nonexempt prohibited transaction occurred with respect to a disqualified person, a **Form 5330**, Return of Excise Taxes Related to Employee Benefit Plans, should be filed with IRS to pay the excise tax on the transaction.

For purposes of this form, party-in-interest is deemed to include a disqualified person see Code section 4975(e)(2). The term "party-in-interest" means, as to an employee benefit plan:

- A. Any fiduciary (including, but not limited to, any administrator, officer, trustee or custodian), counsel, or employee of the plan;
- B. A person providing services to the plan;
- C. An employer, any of whose employees are covered by the plan;

- D.** An employee organization, any of whose members are covered by the plan;
- E.** An owner, direct or indirect, of 50% or more of: **(1)** the combined voting power of all classes of stock entitled to vote, or the total value of shares of all classes of stock of a corporation, **(2)** the capital interest or the profits interest of a partnership, or **(3)** the beneficial interest of a trust or unincorporated enterprise that is an employer or an employee organization described in C or D;
- F.** A relative of any individual described in A, B, C, or E;
- G.** A corporation, partnership, or trust or estate of which (or in which) 50% or more of: **(1)** the combined voting power of all classes of stock of such corporation, **(2)** the capital interest or profits interest of such partnership, or **(3)** the beneficial interest of such trust or estate is owned directly or indirectly, or held by, persons described in A, B, C, D, or E;
- H.** An employee, officer, director (or an individual having powers or responsibilities similar to those of officers or directors), or a 10% or more shareholder, directly or indirectly, of a person described in B, C, D, E, or G, or of the employee benefit plan; or
- I.** A 10% or more (directly or indirectly in capital or profits) partner or joint venturer of a person described in B, C, D, E, or G.

1999 – Financial Information Instructions for Schedule H (Form 5500)

General Instructions

Who Must File

The Schedule H (Form 5500) must be attached to a Form 5500 filed for a pension benefit plan or a welfare benefit plan that covered 100 or more participants as of the beginning of the plan year and a Form 5500 filed for a MTIA, CCT, PSA, 103-12 IE, or GIA. See the instructions to the Form 5500 for **Direct Filing Entity (DFE)**.

Exceptions: (1) Insured, unfunded, or a combination of unfunded/insured welfare plans and fully insured pension plans that meet the requirements of 29 CFR 2520.104-44 are exempt from completing the Schedule H. (2) If a Form 5500-C/R was filed for the plan for the 1998 plan year and the plan covered fewer than 121 participants as of the beginning of the 1999 plan year, the Schedule I may be completed instead of a Schedule H. See page 6 of the Form 5500 instructions for **Lines and Schedules To Complete**.

Check the Schedule H box on the Form 5500 (Part II, line 10b(1)) if a Schedule H is attached to the Form 5500. Do not attach both a Schedule H and a Schedule I to the same Form 5500.

Specific Instructions

Lines A, B, C, and D. This information should be the same as reported in Part II of the Form 5500 to which this Schedule H is attached.

Note: *Do not mark through the printed line descriptions on the Schedule H and insert your own description as this may cause additional correspondence due to a computerized review of the Schedule H.*

The cash, modified cash, or accrual basis may be used for recognition of transactions in Parts I and II, as long as you use one method consistently. Round off all amounts reported on the Schedule H to the nearest dollar. Any other amounts are subject to rejection. Check all subtotals and totals carefully.

If the assets of two or more plans are maintained in a fund that is not a DFE, a registered investment company, or the general account of an insurance company under an unallocated contract, complete by entering the plan's allocable part of each line item in Parts I and II of the Schedule H. (See the instructions for lines 1c(9) through 1c(14), including the **1999 Transition Rule for CCTs and PSAs**.)

Exception: When completing the Schedule H for a plan or DFE that participates in a CCT or PSA for which a Form 5500 has not been filed, do not allocate the income of the CCT or PSA and expenses that were subtracted from the gross income of the CCT or PSA in determining their net investment gain (loss).

Instead, enter the CCT or PSA net gain (loss) on line 2b(6) or (7) in accordance with the instructions for these lines.

If assets of one plan are maintained in two or more trust funds, report the combined financial information in Parts I and II.

Current value means fair market value where available. Otherwise, it means the fair value as determined in good faith under the terms of the plan by a trustee or a named fiduciary, assuming an orderly liquidation at time of the determination. See ERISA section 3(26).

Part I - ASSET AND LIABILITY STATEMENT

Columns (a) and (b). Enter the current value on each line as of the beginning and end of the plan year.

Note: *Amounts reported in column (a) must be the same as reported for the end of the plan year for corresponding line items on the 1998 return/report for the plan. Do not include contributions designated for the 1999 plan year in column (a).*

Line 1a. Total noninterest bearing cash includes, among other things, cash on hand or cash in a noninterest bearing checking account.

Line 1b(1). Noncash basis filers should include contributions due the plan by the employer but not yet paid. Do not include other amounts due from the employer such as the reimbursement of an expense or the repayment of a loan.

Line 1b(2). Noncash basis filers should include contributions withheld by the employer from participants and amounts due directly from participants that have not yet been received by the plan. Do not include the repayment of participant loans.

Line 1b(3). Noncash basis filers should include amounts due to the plan which are not includable in lines 1b(1) or 1b(2). These amounts may include investment income earned but not yet received by the plan and other amounts due to the plan such as amounts due from the employer or another plan for expense reimbursement or from a participant for the repayment of an overpayment of benefits.

Line 1c(1). Include all assets that earn interest in a financial institution account such as interest bearing checking accounts, passbook savings accounts, or in money market accounts.

Line 1c(2). Include securities issued or guaranteed by the U.S. Government or its designated agencies such as U.S. Savings Bonds, Treasury bonds, Treasury bills, FNMA, and GNMA.

Line 1c(3). Include investment securities (other than employer securities defined in 1d(1) below) issued by a corporate entity at a stated interest rate repayable on a particular future date such as most bonds, debentures, convertible debentures, commercial paper and zero coupon bonds. Do not include debt securities of governmental units that should be reported on line 1c(2) or 1c(15).

"Preferred" means any of the above securities that are publicly traded on a recognized securities exchange and the securities have a rating of "A" or above. If the securities are not "Preferred" they are listed as "Other."

Line 1c(4)(A). Include stock issued by corporations (other than employer securities defined in 1d(1) below) which is accompanied by preferential rights such as the right to share in distributions of earnings at a higher rate or which has general priority over the common stock of the same entity. Include the value of warrants convertible into preferred stock.

Line 1c(4)(B). Include any stock (other than employer securities defined in 1d(1) below) that represents regular ownership of the corporation and is not accompanied by preferential rights. Include the value of warrants convertible into common stock.

Line 1c(5). Include the value of the plan's participation in a partnership or joint venture if the underlying assets of the partnership or joint venture are not considered to be plan assets under 29 CFR 2510.3-101. Do not include the value of a plan's interest in a partnership or joint venture that is a 103-12 IE. Include the value of a 103-12 IE in 1c(12).

Line 1c(6). Include the current value of both income and non-income producing real property owned by the plan. Do not include the value of property that is employer real property or property used in plan operations which should be reported on lines 1d and 1e, respectively.

Line 1c(7). Enter the current value of all loans made by the plan, except participant loans reportable on line 1c(8). Include the sum of the value of loans for construction, securities loans, commercial and/or residential mortgage loans that are not subject to Code section 72(p) (either by making or participating in the loans directly or by purchasing loans originated by a third party), and other miscellaneous loans.

Line 1c(8). Enter the current value of all loans to participants including residential mortgage loans that are subject to Code section 72(p). Include the sum of the value of the unpaid principal balances, plus accrued but unpaid interest, if any, for participant loans made under an individual account plan with investment experience segregated for each account, that are made in accordance with 29 CFR 2550.408b-1 and secured solely by a portion of the participant's vested accrued benefit. When applicable, combine this amount with the current value of any other participant loans. Do not include in column (b) a participant loan that has been deemed distributed during the plan year or any prior plan year under the provisions of Code

section 72(p) and proposed IRS regulation section 1.72(p)-1, if both of the following circumstances apply:

1. Under the plan, the participant loan is treated as a directed investment solely of the participant's individual account; and
2. As of the end of the plan year, the participant is not continuing repayment under the loan.

If the deemed distributed participant loan is included in column (a) and both of these circumstances apply, report the loan as a deemed distribution on line 2g. However, if either of these circumstances does not apply, the current value of the participant loan (including interest accruing thereon after the deemed distribution) should be included in column (b) without regard to the occurrence of a deemed distribution.

Note: For a Form 5500 that is filed for any plan year after the 1999 plan year, the entry on line 1c(8), column (b), of Schedule H (participant loans - end of year) or on line 1a, column (b), of Schedule I (plan assets - end of year) must include the current value of any participant loan that was reported as a deemed distribution on line 2g for any earlier year if, the participant resumes repayment under the loan during the plan year. In addition, the amount to be entered on line 2g must be reduced by the amount of the participant loan that was reported as a deemed distribution on line 2g for the earlier year.

After a participant loan that has been deemed distributed is reported on line 2g, it is no longer to be reported as an asset on Schedule H or Schedule I unless, in a later year, the participant resumes repayment under the loan. However, such a loan (including interest accruing thereon after the deemed distribution) that has not been repaid is still considered outstanding for purposes of applying Code section 72(p)(2)(A) to determine the maximum amount of subsequent loans. The loan is also considered outstanding for other purposes, such as the qualification requirements of Code section 401, including, for example, the determination of top-heavy status under Code section 416. See Q & As 12 and 19 of proposed IRS regulation section 1.72(p)-1.

Lines 1c(9), (10), (11), and (12). Enter the total current value of the plan's interest in DFEs on the appropriate lines as of the beginning and end of the plan year. The value of the plan's interest in each DFE at the end of the plan year must be reported on the Schedule D (Form 5500).



For plan and DFE years beginning on or after January 1, 2000, the plan's or DFE's interest in CCTs and PSAs for which a Form 5500 has not been filed may not be included on lines 1c(9) or 1c(10). The plan's or DFE's interest in the underlying assets of such CCTs and PSAs must be allocated and reported in the appropriate categories on a line-by-line basis on Part I of the Schedule H.

1999 Transition Rule - When completing the 1999 Schedule H for a plan or DFE that participates in a CCT or PSA for which a Form 5500 has not been filed, you may enter the current value of the plan's interest in all CCTs and PSAs on line 1c(9) or (10), as appropriate.

Note: For reporting purposes, a separate account that is not considered to be holding plan assets pursuant to 29 CFR 2510.3-101(h)(1)(iii) does not constitute a pooled separate account.

Line 1c(14). Use the same method for determining the value of the insurance contracts reported here as you used for line 3 of Schedule A (Form 5500), or, if line 3 is not required, line 6.

Line 1c(15). Include all other investments not includable in lines 1c(1) through (14), such as options, index futures, repurchase agreements, state and municipal securities, collectibles, and other personal property.

Line 1d(1). An employer security is any security issued by an employer (including affiliates) of employees covered by the plan. These may include common stocks, preferred stocks, bonds, zero coupon bonds, debentures, convertible debentures, notes and commercial paper.

Line 1d(2). The term "employer real property" means real property (and related personal property) that is leased to an employer of employees covered by the plan, or to an affiliate of

such employer. For purposes of determining the time at which a plan acquires employer real property for purposes of this line, such property shall be deemed to be acquired by the plan on the date on which the plan acquires the property or on the date on which the lease to the employer (or affiliate) is entered into, whichever is later.

Line 1e. Include the current (not book) value of the buildings and other property used in the operation of the plan. Buildings or other property held as plan investments should be reported in 1c(6) and 1d(2).

Do not include the value of future pension payments on lines 1g, h, i, j or k.

Line 1g. Noncash basis plans should include the total amount of benefit claims that have been processed and approved for payment by the plan. Welfare plans should also include "incurred but not reported" benefit claims.

Line 1h. Noncash basis plans should include the total amount of obligations owed by the plan which were incurred in the normal operations of the plan and have been approved for payment by the plan but have not been paid.

Line 1i. "Acquisition indebtedness", for debt-financed property other than real property, means the outstanding amount of the principal debt incurred:

1. By the organization in acquiring or improving the property;

2. Before the acquisition or improvement of the property if the debt was incurred only to acquire or improve the property; or

3. After the acquisition or improvement of the property if the debt was incurred only to acquire or improve the property and was reasonably foreseeable at the time of such acquisition or improvement. For further explanation, see Code section 514(c).

Line 1j. Noncash basis plans should include amounts owed for any liabilities that would not be classified as benefit claims payable, operating payables, or acquisition indebtedness.

Line 1l. The entry in column (b) must equal the sum of the entry in column (a) plus lines 2k, 2l(1), and 2l(2).

Part II - INCOME AND EXPENSE STATEMENT

Line 2a. Include the total cash contributions received and/or (for accrual basis plans) due to be received.

Note: Plans using the accrual basis of accounting should not include contributions designated for years before the 1999 plan year on line 2a.

Line 2a(1)(B). For welfare plans, report all employee contributions, including all elective contributions under a cafeteria plan (Code section 125). For pension plans, participant contributions, for purposes of this item, also include elective contributions under a qualified cash or deferred arrangement (Code section 401(k)).

Line 2a(2). Use the current value, at date contributed, of securities or other noncash property.

Line 2b(1)(A). Enter interest earned on interest-bearing cash, including earnings from sweep accounts, STIF accounts, money market accounts, certificates of deposit, etc. This is the interest earned on the investments that are reported on line 1c(1).

Line 2b(1)(B). Enter interest earned on U.S. Government Securities. This is the interest earned on the investments that are reported on line 1c(2).

Line 2b(1)(C). Generally, this is the interest earned on securities that are reported on lines 1c(3)(A) and (B) and 1d(1).

Line 2b(2). Generally, the dividends are for investments reported on line 1c(4)(A) and (B) and 1d(1). For accrual basis plans, include any dividends declared for stock held on the date of record, but not yet received as of the end of the plan year.

Line 2b(3). Generally, rents represent the income earned on the real property that is reported in items 1c(6) and 1d(2). Rents should be entered as a "Net" figure. Net rents are determined by taking the total rent received and subtracting all expenses directly associated with the property. If the real property is jointly used as income producing property and for the operation of the plan, that portion of the expenses attributable to the income producing portion of the property should be netted against the total rents received.

Line 2b(4). Enter in column (b), the total of net gain (loss) on sale of assets. This equals the sum of the net realized gain (or loss) on each asset held at the beginning of the plan year which was sold or exchanged during the plan year, and on each asset that was both acquired and disposed of within the plan year.

Note: As current value reporting is required for the Form 5500, assets are revalued to current value at the end of the plan year. For purposes of this form, the increase or decrease in the value of assets since the beginning of the plan year (if held on the first day of the plan year) or their acquisition date (if purchased during the plan year) is reported in line 2b(5) below, with two exceptions: (1) the realized gain (or loss) on each asset that was disposed of during the plan year is reported in 2b(4) (NOT on line 2b(5)), and (2) the net investment gain (or loss) from CCTs, PSAs, MTIAs, 103-12 IEs, and registered investment companies is reported in lines 2b(6) through (10).

The sum of the realized gain (or loss) of assets sold or exchanged during the plan year is to be calculated as follows:

1. Enter in 2b(4)(A), column (a), the sum of the amount received for these former assets;
2. Enter in 2b(4)(B), column (a), the sum of the current value of these former assets as of the beginning of the plan year and the purchase price for assets both acquired and disposed of during the plan year; and
3. Enter in 2b(4)(C), column (b), the result obtained when 2b(4)(B) is subtracted from 2b(4)(A). If entering a negative number, enter a minus sign “-” to the left of the number.

Note: Bond write-offs should be reported as realized losses.

Line 2b(5). Subtract the current value of assets at the beginning of the year plus the cost of any assets acquired during the plan year from the current value of assets at the end of the year to obtain this figure. If entering a negative number, enter a minus sign “-” to the left of the number. Do not include the value of assets reportable in lines 2b(4) and 2b(6) through 2b(10).

Lines 2b(6), (7), (8), and (9). Report all earnings, expenses, gains or losses, and unrealized appreciation or depreciation that were included in computing the net investment gain (or loss) from all CCTs, PSAs, MTIAs, and 103-12 IEs here. If some plan funds are held in any of these entities and other plan funds are held in other funding media, complete all applicable subitems of line 2 to report plan earnings and expenses relating to the other funding media. The net investment gain (or loss) allocated to the plan for the plan year from the plan's investment in these entities is equal to:

1. The sum of the current value of the plan's interest in each entity at the end of the plan year;
2. Minus the current value of the plan's interest in each entity at the beginning of the plan year;
3. Plus any amounts transferred out of each entity by the plan during the plan year, and
4. Minus any amounts transferred into each entity by the plan during the plan year.

Enter the net gain as a positive number or the net loss as a negative number.

Note: Enter the combined net investment gain or loss from all CCTs and PSAs, regardless of whether a DFE Form 5500 was filed for the CCTs and PSAs.

Line 2b(10). Enter net investment gain (loss) from registered investment companies here. Compute in the same manner as discussed above for lines 2b(6) through (9).

Line 2c. Include all other plan income earned that is not included in 2a or 2b. Do not include transfers from other plans that should be reported in line 2i.

Line 2e(1). Include the current value of all cash, securities, or other property at the date of distribution. Include all eligible rollover distributions as defined in Code section 401(a)(31)(C) that have been paid at the participant's election to an eligible retirement plan (including an IRA within the meaning of section 401(a)(31)(D)).

Line 2e(2). Include payments to insurance companies and similar organizations such as Blue Cross, Blue Shield, and health maintenance organizations for the provision of plan

benefits (e.g., paid-up annuities, accident insurance, health insurance, vision care, dental coverage, stop-loss insurance whose claims are paid to the plan (or which is otherwise an asset of the plan)), etc.

Line 2e(3). Include all payments made to other organizations or individuals providing benefits. Generally, these are individual providers of welfare benefits such as legal services, day care services, training and apprenticeship services.

Line 2f. Include on this line all distributions paid during the plan year of excess deferrals under Code section 402(g)(2)(A)(ii), excess contributions under section 401(k)(8), and excess aggregate contributions under section 401(m)(6). Include allocable income distributed. Also include on this line any elective deferrals and employee contributions that were distributed or returned to employees during the plan year in accordance with section 1.415-6(b)(6)(iv) of the Income Tax Regulations, as well as any attributable gains that were also distributed.

Line 2g. Report on line 2g a participant loan that is included in line 1c(8), column (a) (participant loans - beginning of year) and that has been deemed distributed during the plan year or any prior plan year under the provisions of Code section 72(p) and proposed IRS regulation section 1.72(p)-1 only if both of the following circumstances apply:

1. Under the plan, the participant loan is treated as a directed investment solely of the participant's individual account; and
2. As of the end of the plan year, the participant is not continuing repayment under the loan.

If either of these circumstances does not apply, a deemed distribution of a participant loan should not be reported on line 2g. Instead, the current value of the participant loan (including interest accruing thereon after the deemed distribution) should be included on line 1c(8), column (b) (participant loans - end of year), without regard to the occurrence of a deemed distribution.

Note: For a Form 5500 that is filed for any plan year after the 1999 plan year, the amount to be reported on line 2g of Schedule H or Schedule I must be reduced if, during the plan year, a participant resumes repayment under a participant loan that was reported as a deemed distribution on line 2g for any earlier year. The amount of the required reduction is the amount of the participant loan that was reported as a deemed distribution on line 2g for the earlier year. If entering a negative number, enter a minus sign “-” to the left of the number. The current value of the participant loan must then be included in line 1c(8), column (b), of Schedule H (participant loans - end of year) or in line 1a, column (b), of Schedule I (plan assets - end of year).

Although certain participant loans that are deemed distributed are to be reported on line 2g of the Schedule H or Schedule I, and are not to be reported on the Schedule H or Schedule I as an asset thereafter (unless the participant resumes repayment under the loan in a later year), they are still considered outstanding loans and are not treated as actual distributions for certain purposes. See Q&As 12 and 19 of proposed IRS regulation section 1.72(p)-1.

Line 2h. Interest expense is a monetary charge for the use of money borrowed by the plan. This amount should include the total of interest paid or to be paid (for accrual basis plans) during the plan year.

Line 2i. Report all administrative expenses (by specified category) paid by or charged to the plan, including those that were not subtracted from the gross income of CCTs, PSAs, MTIAs, and 103-12 IEs in determining their net investment gain(s) or loss(es). Expenses incurred in the general operations of the plan are classified as administrative expenses.

Line 2i(1). Include the total fees paid (or in the case of accrual basis plans costs incurred during the plan year but not paid as of the end of the plan year) by the plan for outside accounting, actuarial, legal, and valuation/appraisal services. Include fees for the annual audit of the plan by an independent qualified public accountant; for payroll audits; for accounting/bookkeeping services; for actuarial services rendered to the plan, and to a lawyer for rendering legal opinions, litigation, and advice (but not for providing legal services as a benefit to plan participants).

Include the fee(s) for valuations or appraisals to determine the cost, quality, or value of an item such as real property, personal property (gemstones, coins, etc.), and for valuations of closely held securities for which there is no ready market. Do not include amounts paid to plan employees to perform bookkeeping/accounting functions which should be included in 2i(4).

Line 2i(2). Enter the total fees paid (or in the case of accrual basis plans, costs incurred during the plan year but not paid as of the end of the plan year) to a contract administrator for performing administrative services for the plan. For purposes of the return/report, a contract administrator is any individual, partnership or corporation, responsible for managing the clerical operations (e.g., handling membership rosters, claims payments, maintaining books and records) of the plan on a contractual basis. Do not include salaried staff or employees of the plan or banks or insurance carriers.

Line 2i(3). Enter the total fees paid (or in the case of accrual basis plans, costs incurred during the plan year but not paid as of the end of the plan year) to an individual, partnership or corporation (or other person) for advice to the plan relating to its investment portfolio. These may include fees paid to manage the plan's investments, fees for specific advice on a particular investment, and fees for the evaluation of the plan's investment performance.

Line 2i(4). Other expenses are those that cannot be included in 2i(1) through 2i(3). These may include plan expenditures such as salaries and other compensation and allowances (e.g., payment of premiums to provide health insurance benefits to plan employees), expenses for office supplies and equipment, cars, telephone, postage, rent, expenses associated with the ownership of a building used in the operation of the plan, all miscellaneous expenses and trustees' fees and reimbursement of expenses associated with trustees such as lost time, seminars, travel, meetings, etc.

Line 2l. Include in these reconciliation figures the value of all transfers of assets or liabilities into or out of the plan resulting from, among other things, mergers and consolidations. A transfer of assets or liabilities occurs when there is a reduction of assets or liabilities with respect to one plan and the receipt of these assets or the assumption of these liabilities by another plan. A transfer is not a shifting of one plan's assets or liabilities from one investment to another. A transfer is not a distribution of all or part of an individual participant's account balance that is reportable on Form 1099-R (see the instructions for line 2e). Transfers out at the end of the year should be reported as occurring during the plan year.

Note: If this Schedule H is filed for a DFE, report the value of all asset transfers to the DFE, including those resulting from contributions to participating plans on line 2l(1), and report the total value of all assets transferred out of the DFE, including assets withdrawn for disbursement as benefit payments by participating plans, on line 2l(2). Contributions and benefit payments are considered to be made to/by the plan (not to/by a DFE).

Part III - ACCOUNTANT'S OPINION

Line 3. The administrator of an employee benefit plan who files a Schedule H (Form 5500) generally must engage an independent qualified public accountant pursuant to ERISA 103(a)(3)(A) and 29 CFR 2520.103-1(b). This requirement also applies to a Form 5500 filed for a 103-12 IE and for a GIA (see 29 CFR 2520.103-12 and 29 CFR 2520.103-2). The accountant's report must be attached to the Form 5500 when a Schedule H (Form 5500) is attached unless line 3b(1) or 3b(2) on the Schedule H is checked.

29 CFR 2520.103-1(b) requires that any separate financial statements prepared in order for the independent qualified public accountant to form the opinion and notes to these financial statements must be attached to the Form 5500. Any separate statements must include the information required to be disclosed in Parts I and II of the Schedule H; however, they may be aggregated into categories in a manner other than that used on the Schedule H. The separate statements should be either typewritten or printed and consist of reproductions of Parts I and

II or statements incorporating by references Parts I and II. See ERISA section 103(a)(3)(A), and the DOL regulations 29 CFR 2520.103-1(a)(2) and (b), 2520.103-2, and 2520.104-50.

If the required accountant's report is not attached to the Form 5500, the filing is subject to rejection as incomplete and penalties may be assessed.



Plans that are NOT unfunded include those plans that received employee (or former employee) contributions during the plan year and/or used a trust or separately maintained fund (including a Code section 501(c)(9) trust) to hold plan assets or act as a conduit for the transfer of plan assets during the plan year. See page 6 of the Form 5500 instructions under Lines and Schedules To Complete.

Lines 3a(1) through 3a(4). These boxes identify the type of opinion offered by the accountant. Enter the name and EIN of the accountant (or accounting firm) in the space provided on line 3d.

Line 3a(1). Check if an unqualified opinion was issued.

Generally, an unqualified opinion is issued when the independent qualified public accountant concludes that the plan's financial statements present fairly, in all material respects, the financial status of the plan as of the end of the period audited and the changes in its financial status for the period under audit in conformity with generally accepted accounting principles.

Line 3a(2). Check if a qualified opinion was issued. Generally a qualified opinion is issued by an independent qualified public accountant when the plan's financial statements present fairly, in all material respects, the financial status of the plan as of the end of the audit period and the changes in its financial status for the period under audit in conformity with generally accepted accounting principles, except for the effects of one or more matters that are described in the opinion.

Line 3a(3). Check if a disclaimer of opinion was issued. A disclaimer of opinion is issued when the independent qualified public accountant does not express an opinion on the financial statements because he or she has not performed an audit sufficient in scope to enable him or her to form an opinion on the financial statements.

Line 3a(4). Check if the plan received an adverse accountant's opinion. Generally an adverse opinion is issued by an independent qualified public accountant when the plan's financial statements do not present fairly, in all material respects, the financial status of the plan as of the end of the audit period and the changes in its financial status for the period under audit in conformity with generally accepted accounting principles.

Line 3b(1). Check this box only if the Schedule H is being filed for a CCT, PSA, or MTIA.

Line 3b(2). Check this box if the plan has elected to defer attaching the accountant's opinion for the first of 2 consecutive plan years, one of which is a short plan year of 7 months or less. The Form 5500 for the first of the 2 years must be complete and accurate, with all attachments except for the accountant's report; and the Form 5500 for the second year must include: (a) financial schedules and statements for both plan years; (b) a report of an independent qualified public accountant with respect to the financial schedules and statements for each of the 2 plan years (regardless of the number of participants covered at the beginning of each plan year); and (c) a statement identifying any material differences between the unaudited financial information submitted with the first Form 5500 and the audited financial information submitted with the second Form 5500. See 29 CFR 2520.104-50.

Note: Do not check the box on line 3a(2) if the Form 5500 is filed for a 103-12 IE or a GIA. A deferral of the accountant's opinion is not permitted for a 103-12 IE or a GIA. If an E or G is entered on Form 5500, Part I, line A(4), an accountant's opinion must be attached to the Form 5500 and the type of opinion must be reported on Schedule H line 3a.

Line 3c. Check this box only if the scope of the plan's audit was limited pursuant to DOL regulations 29 CFR 2520.103-8 and 2520.103-12(d) because the examination and report of an independent qualified accountant did not extend to: (a) information prepared and certified to by a bank or similar

institution or by an insurance carrier which is regulated and supervised and subject to periodic examination by a state or Federal agency, or (b) information included with the Form 5500 filed for a 103-12 IE. See 29 CFR 2520.103-8 and 2520.103-12(d).

Note: *These regulations do not exempt the plan administrator from engaging an accountant or from attaching the accountant's report to the Form 5500.*

Part IV - TRANSACTIONS DURING PLAN YEAR

Plans with assets held in a CCT, PSA, MTIA, or 103-12 IE should complete Part IV and report their investment in these entities, but not the investments made by these entities. Plans with all of their funds held in a master trust should check "No" on Schedule H, lines 4b, c, i, and j. CCTs and PSAs filing as DFEs are not required to complete Part IV, or any schedules required by Part IV.

Line 4a. Amounts paid by a participant or beneficiary to an employer and/or withheld by an employer for contribution to the plan are participant contributions that become plan assets as of the earliest date on which such contributions can reasonably be segregated from the employer's general assets (see 29 CFR 2510.3-102). An employer holding these assets after that date commingled with its general assets will have engaged in a prohibited use of plan assets (see ERISA section 406). If such a nonexempt prohibited transaction occurred with respect to a disqualified person (see Code section 4975(e)(2)), file Form 5330 with the IRS to pay any applicable excise tax on the transaction. If no participant contributions were received or withheld by the employer during the plan year, answer "No."

Line 4b. Plans that check "Yes" must enter the amount and complete Part I of Schedule G. The due date, payment amount and conditions for determining default in the case of a note or loan are usually contained in the documents establishing the note or loan. A loan by the plan is in default when the borrower is unable to pay the obligation upon maturity. Obligations that require periodic repayment can default at any time. Generally loans and fixed income obligations are considered uncollectible when payment has not been made and there is little probability that payment will be made. A fixed income obligation has a fixed maturity date at a specified interest rate. Do not include participant loans made under an individual account plan with investment experience segregated for each account that were made in accordance with 29 CFR 2550.408b-1 and secured solely by a portion of the participant's vested accrued benefit.

Line 4c. Plans that check "Yes" must enter the amount and complete Part II of Schedule G. A lease is an agreement conveying the right to use property, plant or equipment for a stated period. A lease is in default when the required payment(s) has not been made. An uncollectible lease is one where the required payments have not been made and for which there is little probability that payment will be made.

Line 4d. Plans that check "Yes" must enter the amount and complete Part III of Schedule G. Check "Yes" if any nonexempt transaction with a party-in-interest occurred regardless of whether the transaction is disclosed in the accountant's report, unless the transaction is: (1) statutorily exempt under Part 4 of Title I of ERISA; (2) administratively exempt under ERISA section 408(a) or exempt under Code sections 4975(c) and 4975(d); (3) a transaction of a 103-12 IE with parties other than the plan; or (4) the holding of participant contributions in the employer's general assets for a welfare plan that meets the conditions of ERISA Technical Release 92-01.

Note: *See the instructions for Part III of the Schedule G (Form 5500) concerning non-exempt transactions and party-in-interest.*

You may indicate that an application for an administrative exemption is pending. If you are unsure as to whether a transaction is exempt or not, you should consult with either the plan's independent qualified public accountant or legal counsel or both.

Line 4e. Plans that check "Yes" must enter the aggregate amount of coverage for all claims. Check "Yes" only if the plan itself (as opposed to the plan sponsor or administrator) is a named insured under a fidelity bond covering plan officials and if the plan is protected as described in 29 CFR 2580.412-18.

Generally, every plan official of an employee benefit plan who "handles" funds or other property of such plan must be bonded. Generally, a person shall be deemed to be "handling" funds or other property of a plan, so as to require bonding, whenever his or her other duties or activities with respect to given funds are such that there is a risk that such funds could be lost in the event of fraud or dishonesty on the part of such person, acting either alone or in collusion with others. Section 412 of ERISA and DOL regulations 29 CFR 2580 provide the bonding requirements, including the definition of "handling" (29 CFR 2580.412-6), the permissible forms of bonds (29 CFR 2580.412-10), the amount of the bond (29 CFR 2580, subpart C), and certain exemptions such as the exemption for unfunded plans, certain banks and insurance companies (ERISA section 412), and the exemption allowing plan officials to purchase bonds from surety companies authorized by the Secretary of the Treasury as acceptable reinsurers on Federal bonds (29 CFR 2580.412-23).

Note: *Plans are permitted under certain conditions to purchase fiduciary liability insurance. These policies do not protect the plan from dishonest acts and are not bonds which should be reported in line 4e.*

Line 4f. Check "Yes," if the plan had suffered or discovered any loss as a result of any dishonest or fraudulent act(s) even if the loss was reimbursed by the plan's fidelity bond or from any other source. If "Yes" is checked enter the full amount of the loss. If the full amount of the loss has not yet been determined, provide and disclose that the figure is an estimate, such as "@ \$1000."

Note: *Willful failure to report is a criminal offense. See ERISA section 501.*

Lines 4g and 4h. *Current value* means fair market value where available. Otherwise, it means the fair value as determined in good faith under the terms of the plan by a trustee or a named fiduciary, assuming an orderly liquidation at time of the determination. See ERISA section 3(26).

An accurate assessment of fair market value is essential to a pension plan's ability to comply with the requirements set forth in the Code (e.g., the exclusive benefit rule of Code section 401(a)(2), the limitations on benefits and contributions under Code section 415, and the minimum funding requirements under Code section 412) and must be determined annually.

Examples of assets that may not have a readily determinable value on an established market (e.g., NYSE, AMEX, over the counter, etc.) include real estate, nonpublicly traded securities, shares in a limited partnership, and collectibles. Do not check "Yes" on line 4g if the plan is a defined contribution plan and the only assets the plan holds, that do not have a readily determinable value on an established market, are: (1) participant loans not in default, or (2) assets over which the participant exercises control within the meaning of section 404(c) of ERISA.

Although the current value of plan assets must be determined each year, there is no requirement that the assets (other than certain nonpublicly traded employer securities held in ESOPs) be valued every year by independent third-party appraisers.

Enter in the amount column the fair market value of the assets referred to on line 4g whose value was not readily determinable on an established market and which were not valued by an independent third-party appraiser in the plan year. Generally, as it relates to these questions, an appraisal by an independent third party is an evaluation of the value of an asset prepared by an individual or firm who knows how to judge the value of such assets and does not have an ongoing relationship with the plan or plan fiduciaries except for preparing the appraisals.

Line 4i. Check "Yes" if the plan had any assets held for investment purposes, and attach a schedule of assets held for investment purposes at end of year, a schedule of assets held for investment purposes that were both acquired and disposed of within the plan year, or both, as applicable. The schedules must use the format set forth below or a similar format and the same size paper as the Form 5500. See 29 CFR 2520.103-11.

Assets held for investment purposes shall include:

- Any investment asset held by the plan on the last day of the plan year; and

Instructions for Schedule H (Form 5500)

The following schedule must be clearly labeled **"Schedule of Assets Held for Investment Purposes At End of Year."**

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value

- Any investment asset purchased during the plan year and sold before the end of the plan year except:
 1. Debt obligations of the U.S. or any U.S. agency.
 2. Interests issued by a company registered under the Investment Company Act of 1940 (e.g., a mutual fund).
 3. Bank certificates of deposit with a maturity of one year or less.
 4. Commercial paper with a maturity of 9 months or less if it is valued in the highest rating category by at least two nationally recognized statistical rating services and is issued by a company required to file reports with the Securities and Exchange Commission under section 13 of the Securities Exchange Act of 1934.
 5. Participations in a bank common or collective trust.
 6. Participations in an insurance company pooled separate account.
 7. Securities purchased from a broker-dealer registered under the Securities Exchange Act of 1934 and either: (1) listed on a national securities exchange and registered under section 6 of the Securities Exchange Act of 1934, or (2) quoted on NASDAQ.

Assets held for investment purposes shall not include any investment that was not held by the plan on the last day of the plan year if that investment is reported in the annual report for that plan year in any of the following:

1. The schedule of loans or fixed income obligations in default required by Schedule G, Part I;
2. The schedule of leases in default or classified as uncollectible required by Schedule G, Part II;
3. The schedule of non-exempt transactions required by Schedule G, Part III; and
4. The schedule of reportable transactions required by Schedule H, line 4j.

The first schedule required to be attached to the Form 5500 is a schedule of all assets held for investment purposes at the end of the plan year, aggregated and identified by issue, maturity date, rate of interest, collateral, par or maturity value, cost and current value, and, in the case of a loan, the payment schedule. The schedule must use the format shown above (or similar format) and the same size paper as the Form 5500. The schedule must be clearly labeled **"Schedule of Assets Held for Investment Purposes At End of Year."**

Note: In column (a), place an asterisk (*) on the line of each identified person known to be a party-in-interest to the plan. In column (c), include any restriction on transferability of corporate securities. (Include lending of securities permitted under Prohibited Transactions Exemption 81-6.)

Special rule for the following two schedules of assets for certain participant-directed transactions. Column (d) cost information may be omitted when reporting transactions of an individual account plan that a participant or beneficiary directed with respect to assets allocated to his or her account (including a negative election authorized under the terms of the plan).

The second schedule required to be attached to the Form 5500 is a schedule of investment assets that were both acquired and disposed of within the plan year. This schedule must be clearly labeled **"Schedule of Investment Assets Both Acquired and Disposed of Within the Plan Year."**

Note: Participant loans under an individual account plan with investment experience segregated for each account, that are made in accordance with 29 CFR 2550.408b-1 and that are secured solely by a portion of the participant's vested accrued benefit, may be aggregated for reporting purposes in item 4i. Under identity of borrower enter "Participant loans," under rate of interest enter the lowest rate and the highest rate charged during the plan year (e.g., 8%-10%), under the cost and proceeds columns enter zero, and under current value enter the total amount of these loans.

Line 4j. Check "Yes" and attach to the Form 5500 the following schedule if the plan had any reportable transactions (see 29 CFR 2520.103-6 and the examples provided in the regulation). The schedule must use the format set forth below or a similar format and the same size paper as the Form 5500. See 29 CFR 2520.103-11.

A *reportable transaction* includes:

1. A single transaction within the plan year in excess of 5% of the current value of the plan assets;
2. Any series of transactions with or in conjunction with the same person, involving other property other than securities, which amount in the aggregate within the plan year (regardless of the category of asset and the gain or loss on any transaction) to more than 5% of the current value of plan assets;
3. Any transaction within the plan year involving securities of the same issue if within the plan year any series of transactions with respect to such securities amount in the aggregate to more than 5% of the current value of the plan assets; and
4. Any transaction within the plan year with respect to securities with, or in conjunction with, a person if any prior or subsequent single transaction within the plan year with such person, with respect to securities, exceeds 5% of the current value of plan assets.

The 5% figure is determined by comparing the current value of the transaction at the transaction date with the current value of the plan assets at the beginning of the plan year.

If the assets of two or more plans are maintained in one trust, the plan's allocable portion of the transactions of the trust shall be combined with the other transactions of the plan, if any, to determine which transactions (or series of transactions) are reportable (5%) transactions.

This does not apply to investments in common/collective trusts, pooled separate accounts, master trust investment accounts, 103-12 IEs and registered investment companies, whose current value was reported in lines 1c(9) through 1c(13). Instead, for investments in these entities, determine the 5% figure by the comparing the transaction date value of the acquisition and/or disposition of units of participation or shares in the entity with the current value of the plan assets at the beginning of the plan year. If the Schedule H is attached to a

The following schedule must be clearly labeled **"Schedule of Investment Assets Both Acquired and Disposed of Within the Plan Year."**

(a) Identity of issue, borrower, lessor, or similar party	(b) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(c) Costs of acquisitions	(d) Proceeds of dispositions

The schedule must be clearly labeled "Schedule of Reportable Transactions."

(a) Identity of party involved	(b) Description of asset (include interest rate and maturity in case of a loan)	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transaction	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or (loss)

Form 5500 filed for a plan with all plan funds held in a master trust, check "No" on line 4j. Plans with assets in a master trust which have other transactions should determine the 5% figure by subtracting the current value of plan assets held in the master trust from the current value of all plan assets at the beginning of the plan year and check "Yes" or "No," as appropriate. Do not include individual transactions of investment arrangements reported in items 1c(9) through 1c(13).

In the case of a purchase or sale of a security on the market, do not identify the person from whom purchased or to whom sold.

Special rule for certain participant-directed transactions. Transactions under an individual account plan that a participant or beneficiary directed with respect to assets allocated to his or her account (including a negative election authorized under the terms of the plan) should not be taken into account for purposes of preparing the Schedule of Reportable Transactions. The current value of all assets of the plan, including these transactions, should be included in determining the 5% figure for all other transactions.

The schedule must be clearly labeled "Schedule of Reportable Transactions."

Line 4k. Check "Yes" if all the plan assets (including insurance/annuity contracts) were distributed to the participants and beneficiaries, legally transferred to the control of another plan, or brought under the control of the PBGC.

Check "No" for a welfare benefit plan that is still liable to pay benefits for claims that were incurred prior to the termination date, but not yet paid. See 29 CFR 2520.104b-2(g)(2)(ii).

Note: If "Yes" was checked on line 4k because all plan assets were distributed to participants and/or beneficiaries, you are encouraged to complete Schedule SSA (Form 5500), listing each participant reported on a previous Schedule SSA (Form 5500) who has received all of his/her plan benefits, and therefore, is no longer entitled to receive deferred vested

benefits. This will ensure that SSA's records are correct, and help eliminate confusion for participants and plan administrators in the future. See the instructions to the Schedule SSA (Form 5500) for greater detail.

Line 5a. Check "Yes" if a resolution to terminate the plan was adopted during this or any prior plan year, unless the termination was revoked and no assets reverted to the employer. If "Yes" is checked, enter the amount of plan assets that reverted to the employer during the plan year in connection with the implementation of such termination. Enter "-0" if no reversion occurred during the current plan year.

Caution: A Form 5500 must be filed for each year the plan has assets, and, in the case of a welfare benefit plan, if the plan is still liable to pay benefits for claims that were incurred prior to the termination date, but not yet paid. See 29 CFR 2520.104b-2(g)(2)(ii).

Line 5b. Enter information concerning assets and/or liabilities transferred from this plan to another plan(s) (including spin-offs) during the plan year. A transfer of assets or liabilities occurs when there is a reduction of assets or liabilities with respect to one plan and the receipt of these assets or the assumption of these liabilities by another plan. Enter the name, PN, and EIN of the other plan(s) involved on lines 5b(1), (2) and (3).

Note: A distribution of all or part of an individual participant's account balance that is reportable on Form 1099-R should not be included on line 5b.

Caution: Form 5310-A, Notice of Merger or Consolidation, Spinoff, or Transfer of Plan Assets or Liabilities; Notice of Qualified Separate Lines of Business, must be filed at least 30 days before any plan merger or consolidation or any transfer of plan assets or liabilities to another plan. There is a penalty for not filing Form 5310-A on time. In addition, a transfer of benefit liabilities involving a plan covered by PBGC insurance may be reportable to the PBGC (see PBGC Form 10 and Form 10-Advance).

1999 – Financial Information – Small Plan Instructions for Schedule I (Form 5500)

General Instructions

Who Must File

The Schedule I (Form 5500) must be attached to a Form 5500 filed for pension benefit plans and welfare benefit plans that covered fewer than 100 participants as of the beginning of the plan year.

Exception: If a Form 5500-C/R was filed for the plan for the 1998 plan year and the plan covered fewer than 121 participants as of the beginning of the 1999 plan year, the Schedule I may be completed instead of a Schedule H.

Note: Certain insured, unfunded or combination unfunded/insured welfare plans are exempt from filing the Form 5500 and the Schedule I. In addition, certain fully insured pension plans are exempt from completing the Schedule I. See the Form 5500 instructions for **Pension and Welfare Plans Excluded From Filing** on page 3 and **Limited Pension Plan Reporting** on page 7 for more information.

Check the Schedule I box on the Form 5500 (Part II, line 10b(2)) if a Schedule I is attached to the Form 5500. Do not attach both a Schedule I and a Schedule H to the same Form 5500.

Specific Instructions

Lines A, B, C, and D. This information should be the same as reported in Part II of the Form 5500 to which this Schedule I is attached.

Note: Do not mark through the printed line descriptions on the Schedule I and insert your own description as this may cause additional correspondence due to a computerized review of the Schedule I.

Use either the cash, modified cash, or accrual basis for recognition of transactions, as long as you use one method consistently. Round off all amounts reported on the Schedule I to the nearest dollar. Any other amounts are subject to rejection. Check all subtotals and totals carefully.

If the assets of two or more plans are maintained in one fund, such as when an employer has two plans that are funded through a single trust (except a DFE), complete Parts I and II by entering the plan's allocable part of each line item.

If assets of one plan are maintained in two or more trust funds, report the combined financial information in Part I.

Current value means fair market value where available. Otherwise, it means the fair value as determined in good faith under the terms of the plan by a trustee or a named fiduciary, assuming an orderly liquidation at time of the determination. See ERISA section 3(26).

Part I - Small Plan Financial Information

Total plan assets at the beginning of the plan year plus the net income (loss) and any net transfers for the plan year must equal the total plan assets at the end of the plan year.

PLAN ASSETS AND LIABILITIES

Amounts reported on line 1a, 1b, and 1c for the beginning of the plan year must be the same as reported for the end of the plan year for corresponding lines on the 1998 return/report.

Do not include contributions designated for the 1999 plan year in column (a).

Line 1a. A plan with assets held in common/collective trusts, pooled separate accounts, master trust investment accounts, and/or 103-12 IEs must also attach Schedule D (Form 5500).

Use the same method for determining the value of the plan's interest in an insurance company general account (unallocated contracts) which you used for line 3 of Schedule A (Form 5500), or, if line 3 is not required, line 6.

Instructions for Schedule I (Form 5500)

Note: Do not include in column (b) a participant loan that has been deemed distributed during the plan year or any prior plan year under the provisions of Code section 72(p) and proposed IRS regulation section 1.72(p)-1, if both of the following circumstances apply:

1. Under the plan, the participant loan is treated as a direct investment solely of the participant's individual account; and

2. As of the end of the plan year, the participant is not continuing repayment under the loan.

If the deemed distributed participant loan is included in column (a) and both of these circumstances apply, report the loan as a deemed distribution on line 2g. However, if either of these circumstances does not apply, the current value of the participant loan (including interest accruing thereon after the deemed distribution) should be included in column (b) without regard to the occurrence of a deemed distribution.

For a Form 5500 that is filed for any plan year after the 1999 plan year, the entry on line 1a, column (b), of Schedule I (plan assets - end of year) or on line 1c(8), column (b), of Schedule H (participant loans - end of year) must include the current value of any participant loan that was reported as a deemed distribution on line 2g for any earlier year if, during the plan year, the participant resumes repayment under the loan. In addition, the amount to be entered on line 2g must be reduced by the amount of the participant loan that was reported as a deemed distribution on line 2g for the earlier year.

After a participant loan that has been deemed distributed is reported on line 2g, it is no longer to be reported as an asset on Schedule H or Schedule I unless, in a later year, the participant resumes repayment under the loan. However, such a loan (including interest accruing thereon after the deemed distribution) that has not been repaid is still considered outstanding for purposes of applying Code section 72(p)(2)(A) to determine the maximum amount of subsequent loans. The loan is also considered outstanding for other purposes, such as the qualification requirements of Code section 401, including, for example, the determination of top-heavy status under Code section 416. See Q&As 12 and 19 of proposed IRS regulation section 1.72(p)-1.

Line 1b. Enter the total liabilities at the beginning and end of the plan year. Liabilities to be entered here do not include the value of future pension payments to plan participants; however, the amount to be entered in line 1b for accrual basis filers includes, among other things:

1. Benefit claims that have been processed and approved for payment by the plan but have not been paid (including all incurred but not reported welfare benefit claims);

2. Accounts payable obligations owed by the plan that were incurred in the normal operations of the plan but have not been paid; and

3. Other liabilities such as acquisition indebtedness and any other amount owed by the plan.

Line 1c. Enter the net assets as of the beginning and end of the plan year. (Subtract line 1b from 1a.)

INCOME, EXPENSES, AND TRANSFERS FOR THIS PLAN YEAR

Line 2a. Include the total cash contributions received and/or (for accrual basis plans) due to be received.

Line 2a(1). Plans using the accrual basis of accounting should not include contributions designated for years before the 1999 plan year on line 2a(1).

Line 2a(2). For welfare plans, report all employee contributions, including all elective contributions under a cafeteria plan (Code section 125). For pension plans, participant contributions, for purposes of this item, also include elective contributions under a qualified cash or deferred arrangement (Code section 401(k)).

Line 2b. Use the current value, at date contributed, of securities or other noncash property.

Line 2d. Enter the total of all cash contributions (line 2a(1) through (3)), noncash contributions (line 2b), and other plan income during the plan year. If entering a negative number, enter a minus sign “-” to the left of the number. Plan income received and/or receivable may include, among other things:

1. Interest on investments (including money market accounts, sweep accounts, STIF accounts, etc.).
2. Dividends. (Accrual basis plans should include dividends declared for all stock held by the plan even if the dividends have not been received as of the end of the plan year.)
3. Rents from income-producing property owned by the plan.
4. Royalties.
5. Net gain or loss from the sale of assets.
6. Other income such as unrealized appreciation (depreciation) in plan assets. To compute this amount subtract the current value of all assets at the beginning of the year plus the cost of any assets acquired during the plan year from the current value of all assets at the end of the year minus assets disposed of during the plan year.

Line 2e. Include: (1) payments made (and for accrual basis filers payments due) to or on behalf of participants or beneficiaries in cash, securities, or other property (including rollovers of an individual's accrued benefit or account balance). Include all eligible rollover distributions as defined in Code section 401(a)(31)(C) that have been paid at the participant's election to an eligible retirement plan (including an IRA within the meaning of section 401(a)(31)(D)); (2) payments to insurance companies and similar organizations such as Blue Cross, Blue Shield, and health maintenance organizations for the provision of plan benefits (e.g., paid-up annuities, accident insurance, health insurance, vision care, dental coverage, etc.); and (3) payments made to other organizations or individuals providing benefits. Generally, these payments discussed in (3) are made to individual providers of welfare benefits such as legal services, day care services, and training and apprenticeship services. If securities or other property are distributed to plan participants or beneficiaries, include the current value on the date of distribution.

Line 2f. Include all distributions paid during the plan year of excess deferrals under Code section 402(g)(2)(A)(ii), excess contributions under section 401(k)(8), and excess aggregate contributions under section 401(m)(6), allocable income distributed, and any elective deferrals and employee contributions that were distributed or returned to employees during the plan year in accordance with section 1.415-6(b)(6)(iv) of the Income Tax Regulations, as well as any attributable gains that were also distributed.

Line 2g. Report on line 2g a participant loan that is included in line 1a, column (a) (participant loans - beginning of year) and that has been deemed distributed during the plan year or any prior plan year under the provisions of Code section 72(p) and proposed IRS regulation section 1.72(p)-1 only if both of the following circumstances apply:

1. Under the plan, the participant loan is treated as a directed investment solely of the participant's individual account; and
2. As of the end of the plan year, the participant is not continuing repayment under the loan.

If either of these circumstances does not apply, a deemed distribution of a participant loan should not be reported on line 2g. Instead, the current value of the participant loan (including interest accruing thereon after the deemed distribution) should be included on line 1a, column (b) (plan assets - end of year), without regard to the occurrence of a deemed distribution.

Note: For a Form 5500 that is filed for any plan year after the 1999 plan year, the amount to be reported on line 2g of Schedule H or Schedule I must be reduced if, during the plan year, a participant resumes repayment under a participant loan that was reported as a deemed distribution on line 2g for any earlier year. The amount of the required reduction is the amount of the participant loan that was reported as a deemed distribution on line 2g for the earlier year. If entering a negative number, enter a minus sign “-” to the left of the number. The current value of the participant loan must then be included in line 1c(8), column (b), of Schedule H (participant loans - end of year) or in line 1a, column (b), of Schedule I (plan assets - end of year).

Although certain participant loans that are deemed distributed are to be reported on line 2g of the Schedule H or Schedule I, and are not to be reported on the Schedule H or Schedule I as an asset thereafter (unless the participant resumes repayment under the loan in a later year), they are still considered outstanding loans and are not treated as actual distributions for certain purposes. See Q&As 12 and 19 of proposed IRS regulation section 1.72(p)-1.

Line 2h. Other expenses (paid and/or payable) may include, among others:

1. Salaries to employees of the plan;
2. Expenses for accounting, actuarial, legal, and investment services;
3. Fees and expenses for trustees including reimbursement for travel, seminars, and meeting expenses;
4. Fees paid for valuations and appraisals, and

5. Other administrative and miscellaneous expenses paid by or charged to the plan, including those that were not subtracted from the gross income of master trust investment accounts and 103-12IEs in determining their net investment gain(s) or loss(es).

Line 2i. Enter the total of all benefits paid or due as reported on lines 2e, 2f, and 2g and all other plan expenses (line 2h) during the year.

Line 2k. Enter the net value of all assets transferred to and from the plan during the plan year including those resulting from mergers and spin-offs. A transfer of assets or liabilities occurs when there is a reduction of assets or liabilities with respect to one plan and the receipt of these assets or the assumption of these liabilities by another plan. Transfers out at the end of the year should be reported as occurring during the plan year.

Note: A distribution of all or part of an individual participant's account balance that is reportable on Form 1099-R should not be included on line 2k but must be included in benefit payments reported on line 2e.

SPECIFIC ASSETS

Lines 3a through 3g. Check "Yes" and enter the amount or "No" as specified below. Do not include the plan's interest in CCTs, PSAs, MTIAs, and 103-12 IEs. (See instructions for **Direct Filing Entity (DFE)** on page 4 of the instructions for the Form 5500.)

Line 3a. Enter the value of the plan's participation in a partnership or joint venture, unless the partnership or joint venture is a 103-12 IE.

Line 3b. The term "employer real property" means real property (and related personal property) that is leased to an employer of employees covered by the plan, or to an affiliate of such employer. For purposes of determining the time at which a plan acquires employer real property for purposes of this line, such property shall be deemed to be acquired by the plan on the date on which the plan acquires the property or on the date on which the lease to the employer (or affiliate) is entered into, whichever is later.

Line 3d. An employer security is any security issued by an employer (including affiliates) of employees covered by the plan. These may include common stocks, preferred stocks, bonds, zero coupon bonds, debentures, convertible debentures, notes and commercial paper.

Line 3e. Enter the current value of all loans to participants including residential mortgage loans that are subject to Code section 72(p). Include the sum of the value of the unpaid principal balances, plus accrued but unpaid interest, if any, for participant loans made under an individual account plan with investment experience segregated for each account, that are made in accordance with 29 CFR 2550.408b-1 and secured solely by a portion of the participant's vested accrued benefit. When applicable, combine this amount with the current value of any other participant loans. Do not include any amount of a participant loan that has been deemed distributed during this or any prior plan year under the provisions of Code section 72(p) and proposed IRS regulation section 1.72(p)-1.

Note: After participant loans have been deemed distributed and reported on line 2g of the Schedule I or H, they are no longer required to be reported as assets on the Schedule I or H.

However, such loans (including interest accruing thereon after the deemed distribution) that have not been repaid are still considered outstanding for purposes of applying Code section 72(p)(2)(A) to determine the maximum amount of subsequent loans.

Line 3f. Enter the current value of all loans made by the plan, except participant loans reportable on line 3e. Include the sum of the value of loans for construction, securities loans, commercial and/or residential mortgage loans that are not subject to Code section 72(p) (either by making or participating in the loans directly or by purchasing loans originated by a third party), and other miscellaneous loans.

Line 3g. Include all property that has concrete existence and is capable of being processed, such as goods, wares, merchandise, furniture, machines, equipment, animals, automobiles, etc. This includes collectibles, such as works of art, rugs, antiques, metals, gems, stamps, coins, alcoholic beverages, musical instruments, and historical objects (documents, clothes, etc.). Do not include the value of a plan's interest in property reported on lines 3a through 3f, or intangible property, such as patents, copyrights, goodwill, franchises, notes, mortgages, stocks, claims, interests, or other property that embodies intellectual or legal rights.

Part II - Transactions During Plan Year

Plans with assets held in a CCT, PSA, MTIA, or 103-12 IE should complete Part I and report their investment in these entities, but not the investments made by these entities. Plans with all of their funds held in a master trust should check "No" on Schedule I, lines 4b, c, and i.

Line 4a. Amounts paid by a participant or beneficiary to an employer and/or withheld by an employer for contribution to the plan are participant contributions that become plan assets as of the earliest date on which such contributions can reasonably be segregated from the employer's general assets (see 29 CFR 2510.3-102). An employer holding these assets after that date commingled with its general assets will have engaged in a prohibited use of plan assets (see ERISA section 406). If such a nonexempt prohibited transaction occurred with respect to a disqualified person (see Code section 4975(e)(2)), file Form 5330 with the IRS to pay any applicable excise tax on the transaction. If no participant contributions were received or withheld by the employer during the plan year, answer "No."

Line 4b. Plans that check "Yes" must enter the amount. The due date, payment amount and conditions for determining default in the case of a note or loan are usually contained in the documents establishing the note or loan. A loan by the plan is in **default** when the borrower is unable to pay the obligation upon maturity. Obligations that require periodic repayment can default at any time. Generally, loans and fixed income obligations are considered **uncollectible** when payment has not been made and there is little probability that payment will be made. A fixed income obligation has a fixed maturity date at a specified interest rate. Do not include participant loans made under an individual account plan with investment experience segregated for each account that were made in accordance with 29 CFR 2550.408b-1 and secured solely by a portion of the participant's vested accrued benefit.

Line 4c. Plans that check "Yes" must enter the amount. A lease is an agreement conveying the right to use property, plant or equipment for a stated period. A lease is in default when the required payment(s) has not been made. An uncollectible lease is one where the required payments have not been made and for which there is little probability that payment will be made.

Line 4d. Plans that check "Yes" must enter the amount. Check "Yes" if any non exempt transaction with a party-in-interest occurred, unless the transaction is: (1) statutorily exempt under Part 4 of Title I of ERISA, (2) administratively exempt under ERISA section 408(a) or exempt under Code sections 4975(c) and 4975(d), (3) a transaction of a 103-12 IE with parties other than the plan; or (4) the holding of participant contributions for a welfare plan that meets the conditions of ERISA Technical Release 92-01. You may indicate that an application for an administrative exemption is pending. If you are unsure as to

whether a transaction is exempt or not, you should consult with either a qualified public accountant, legal counsel or both. If the plan is a qualified pension plan and a nonexempt prohibited transaction occurred with respect to a disqualified person, a Form 5330 should be filed with IRS to pay the excise tax on the transaction.

Party-in-Interest. For purposes of this form, party-in-interest is deemed to include a disqualified person see Code section 4975(e)(2). The term "party-in-interest" means, as to an employee benefit plan:

- A. Any fiduciary (including, but not limited to, any administrator, officer, trustee or custodian), counsel, or employee of the plan;
- B. A person providing services to the plan;
- C. An employer, any of whose employees are covered by the plan;
- D. An employee organization, any of whose members are covered by the plan;
- E. An owner, director indirect, of 50% or more of the combined voting power of all classes of stock entitled to vote, or the total value of shares of all classes of stock of a corporation, (2) the capital interest or the profits interest of a partnership, or (3) the beneficial interest of a trust or unincorporated enterprise that is an employer or an employee organization described in C or D;
- F. A relative of any individual described in A, B, C, or E;
- G. A corporation, partnership, or trust or estate of which (or in which) 50% or more of: (1) the combined voting power of all classes of stock entitled to vote or the total value of shares of all classes of stock of such corporation, (2) the capital interest or profits interest of such
- H. An employee, officer, director (or an individual having powers or responsibilities similar to those of officers or directors), or a 10% or more shareholder, directly or indirectly, of a person described in B, C, D, E, or G, or of the employee benefit plan; or
- I. A 10% or more (directly or indirectly in capital or profits) partner or joint venturer of a person described in B, C, D, E, or G.

Nonexempt transactions with a party-in-interest include any direct or indirect:

- A. Sale or exchange, or lease, of any property between the plan and a party-in-interest.
- B. Lending of money or other extension of credit between the plan and a party-in-interest.
- C. Furnishing of goods, services, or facilities between the plan and a party-in-interest.
- D. Transfer to, or use by or for the benefit of, a party-in-interest, of any income or assets of the plan.
- E. Acquisition, on behalf of the plan, of any employer security or employer real property in violation of Code section 407(a).
- F. Dealing with the assets of the plan for a fiduciary's own interest or own account.
- G. Acting in a fiduciary's individual or any other capacity in any transaction involving the plan on behalf of a party (or represent a party) whose interests are adverse to the interests of the plan or the interests of its participants or beneficiaries.
- H. Receipt of any consideration for his or her own personal account by a party-in-interest who is a fiduciary from any party dealing with the plan in connection with a transaction involving the income or assets of the plan.

Note: Amounts paid by a participant or beneficiary to an employer and/or withheld by an employer for contribution to the plan are participant contributions that become plan assets as of the earliest date on which such contributions can reasonably be segregated from the employer's general assets (see 29 CFR 2510.3-102). An employer holding these assets after that date commingled with its general assets will have engaged in a prohibited use of plan assets for purposes of the nonexempt transactions described above (see ERISA section 406).

Line 4e. Plans that check "Yes" must enter the aggregate amount of coverage for all claims. Check "Yes" only if the plan itself (as opposed to the plan sponsor or administrator) is a named insured under a fidelity bond covering plan officials and if the plan is protected as described in 29 CFR 2580.412-18. Generally, every plan official of an employee benefit plan who "handles" funds or other property of such plan must be bonded. Generally, a person shall be deemed to be "handling" funds or other property of a plan, so as to require bonding, whenever his or her other duties or activities with respect to given funds are such that there is a risk that such funds could be lost in the event of fraud or dishonesty on the part of such person, acting either alone or in collusion with others. Section 412 of ERISA and DOL regulations 29 CFR 2580 provide the bonding requirements, including the definition of "handling" (29 CFR 2580.412-6), the permissible forms of bonds (29 CFR 2580.412-10), the amount of the bond (29 CFR 2580, subpart C), and certain exemptions such as the exemption for unfunded plans, certain banks and insurance companies (ERISA section 412), and the exemption allowing plan officials to purchase bonds from surety companies authorized by the Secretary of the Treasury as acceptable reinsurers on Federal bonds (29 CFR 2580.412-23).

Note: Plans are permitted under certain conditions to purchase fiduciary liability insurance. These policies do not protect the plan from dishonest acts and are not bonds which should be reported in line 4e

Line 4f. Check "Yes," if the plan had suffered or discovered any loss as a result of any dishonest or fraudulent act(s) even if the loss was reimbursed by the plan's fidelity bond or from any other source. If "Yes" is checked enter the full amount of the loss. If the full amount of the loss has not yet been determined, provide and disclose that the figure is an estimate, such as "@ \$1000."

Note: Willful failure to report is a criminal offense. See ERISA section 501.

Lines 4g and 4h. *Current value* means fair market value where available. Otherwise, it means the fair value as determined in good faith under the terms of the plan by a trustee or a named fiduciary, assuming an orderly liquidation at time of the determination. See ERISA section 3(26).

An accurate assessment of fair market value is essential to a pension plan's ability to comply with the requirements set forth in the Code (e.g., the exclusive benefit rule of Code section 401(a)(2), the limitations on benefits and contributions under Code section 415, and the minimum funding requirements under Code section 412) and must be determined annually.

Examples of assets that may not have a readily determinable value on an established market (e.g., NYSE, AMEX, over the counter, etc.) include real estate, nonpublicly traded securities, shares in a limited partnership, and collectibles. Do not check "Yes" on line 4g if the plan is a defined contribution plan and the only assets the plan holds, that do not have a readily determinable value on an established market, are: (1) participant loans not in default, or (2) assets over which the participant exercises control within the meaning of section 404(c) of ERISA.

Although the current value of plan assets must be determined each year, there is no requirement that the assets (other than certain nonpublicly traded employer securities held in ESOPs) be valued every year by independent third-party appraisers.

Enter in the amount column the fair market value of the assets referred to on line 4g whose value was not readily determinable on an established market and which were not valued by an

independent third-party appraiser in the plan year. Generally, as it relates to these questions, an appraisal by an independent third party is an evaluation of the value of an asset prepared by an individual or firm who knows how to judge the value of such assets and does not have an ongoing relationship with the plan or plan fiduciaries except for preparing the appraisals.

Line 4i. Include as a single security all securities of the same issue. An example of a single issue is a certificate of deposit issued by the XYZ Bank on July 1, 1998, which matures on June 30, 1999, and yields 5.5%. For the purposes of line 4i, do not check "Yes" for securities issued by the U.S. Government or its agencies.

Line 4j. Check "Yes" if all the plan assets (including insurance/annuity contracts) were distributed to the participants and beneficiaries, legally transferred to the control of another plan, or brought under the control of the PBGC.

Check "No" for a welfare benefit plan that is still liable to pay benefits for claims that were incurred prior to the termination date, but not yet paid. See 29 CFR 2520.104b-2(g)(2)(ii).

Note: If "Yes" was checked on line 4k because all plan assets were distributed to participants and/or beneficiaries, you are encouraged to complete Schedule SSA (Form 5500), listing each participant reported on a previous Schedule SSA (Form 5500) who has received all of his/her plan benefits, and therefore, is no longer entitled to receive deferred vested benefits. This will ensure that SSA's records are correct, and help eliminate confusion for participants and plan administrators in the future. See the instructions to the Schedule SSA (Form 5500) for greater detail.

Line 5a. Check "Yes" if a resolution to terminate the plan was adopted during this or any prior plan year, unless the termination was revoked and no assets reverted to the employer. If "Yes" is checked, enter the amount of plan assets that reverted to the employer during the plan year in connection with the implementation of such termination. Enter "-0-" if no reversion occurred during the current plan year.

Caution: A Form 5500 must be filed for each year the plan has assets, and, in the case of a welfare benefit plan, if the plan is still liable to pay benefits for claims that were incurred prior to the termination date, but not yet paid. See 29 CFR 2520.104b-2(g)(2)(ii).

Line 5b. Enter information concerning assets and/or liabilities transferred from this plan to another plan(s) (including spin-offs) during the plan year. A transfer of assets or liabilities occurs when there is a reduction of assets or liabilities with respect to one plan and the receipt of these assets or the assumption of these liabilities by another plan. Enter the name, PN, and EIN of the other plan(s) involved on lines 5b(1), 5b(2) and 5b(3).

Note: A distribution of all or part of an individual participant's account balance that is reportable on Form 1099-R should not be included on line 5b.

Caution: Form 5310-A, Notice of Merger or Consolidation, Spinoff, or Transfer of Plan Assets or Liabilities; Notice of Qualified Separate Lines of Business, must be filed at least 30 days before any plan merger or consolidation or any transfer of plan assets or liabilities to another plan. There is a penalty for not filing Form 5310-A on time. In addition, a transfer of benefit liabilities involving a plan covered by PBGC insurance may be reportable to the PBGC (see PBGC Form 10 and Form 10-Advance).

1999 – Annual Return of Fiduciary of Employee Benefit Trust Instructions for Schedule P (Form 5500)

General Instructions**Purpose of Form**

You may use this schedule to satisfy the requirements under Code section 6033(a) for an annual information return from every section 401(a) organization exempt from tax under section 501(a). The statute of limitations under section 6501(a) for any trust described in section 401(a), which is exempt from tax under section 501(a), will not start to run until you file this schedule.

Who May File

Every trustee of a trust created as part of an employee benefit plan as described in Code section 401(a), and every custodian of a custodial account described in Code section 401(f).

How To File

File Schedule P for the trust year ending with or within any participating plan's plan year. Attach it to the Form 5500 or 5500-EZ filed by the plan for that plan year. A separately filed Schedule P will not be accepted. If the trust or custodial account is used by more than one plan, file one Schedule P. If a plan uses more than one trust or custodial account for its funds, file one Schedule P for each trust or custodial account.

Check the Schedule P box on the Form 5500 (Part II, line 10b(7)), and enter the number attached in the space provided if one or more Schedules P are attached to the Form 5500.

Trust's Employer Identification Number

Enter the trust employer identification number (EIN) assigned to the employee benefit trust or custodial account, if one has been

issued to you. The trust EIN should be used for transactions conducted for the trust. If you do not have a trust EIN, enter the EIN you would use on **Form 1099-R**, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc., to report distributions from employee benefit plans and on **Form 945**, Annual Return of Withheld Federal Income Tax, to report withheld amounts of income tax from those payments.

Note: *Trustees who do not have an EIN may apply for one on Form SS-4, Application for Employer Identification Number. You must be consistent and use the same EIN for all trust reporting purposes.*

Signature

The fiduciary (trustee or custodian) must sign this schedule. If there is more than one fiduciary, the fiduciary authorized by the others may sign.

Other Returns and Forms That May Be Required

Form 990-T. For trusts described in Code section 401(a), a tax is imposed on income derived from business that is unrelated to the purpose for which the trust received a tax exemption. Report this income and tax on **Form 990-T**, Exempt Organization Business Income Tax Return. (See Code sections 511 through 514 and the related regulations.)

Form 1099-R. If you made payments or distributions to individual beneficiaries of a plan, report those payments on Form 1099-R. (See the Instructions for Forms 1099, 1098, 5498, and W-2G.)

Form 945. If you made payments or distributions to individual beneficiaries of a plan, you may be required to withhold income tax from those payments. Use Form 945 to report taxes withheld from nonpayroll items. (See **Circular E**, Employer's Tax Guide (Pub. 15), for more information.)

1999 – Retirement Plan Information Instructions for Schedule R (Form 5500)

General Instructions

Purpose of Schedule

The Schedule R reports certain information on plan distributions, and funding, and the adoption of amendments increasing the value of benefits in a defined benefit pension plan.

Who Must File

The Schedule R (Form 5500) must be attached to a Form 5500 filed for both tax qualified and nonqualified pension benefit plans. The parts of the Schedule R that must be completed depend on whether the plan is subject to the minimum funding standards of Code section 412 or ERISA section 302.

Exceptions: (1) The Schedule R should not be completed when the Form 5500 is filed for a pension plan that uses, as the sole funding vehicle for providing benefits, a tax deferred annuity arrangement under Code section 403(b)(1), a custodial account for regulated investment company stock under Code section 403(b)(7), and/or individual retirement accounts or annuities (as described in Code section 408). See the Form 5500 instructions for **Limited Pension Plan Reporting** on page 7 for more information.

(2) The Schedule R also should not be completed if the plan is not a defined benefit plan or otherwise subject to the minimum funding standards of Code section 412 or ERISA section 302 and no plan benefits were distributed during the plan year.

Check the Schedule R box on the Form 5500 (Part II, line 10a(1)) if a Schedule R is attached to the Form 5500.

Specific Instructions

Lines A, B, C, and D. This information should be the same as reported in Part II of the Form 5500 to which this Schedule R is attached.

Part I - Distributions

Distribution includes only payments of benefits during the plan year, in cash, in kind, or by purchase for the distributee of an annuity contract from an insurance company. It does not include corrective distributions of excess deferrals, excess contributions, or excess aggregate contributions. It does not include a loan treated as a distribution under Code section 72(p).

Participant means any present or former employee who at any time during the plan year had an accrued benefit (account balance in a defined contribution plan) in the plan.

Line 1. Enter the total value of all distributions made during the year (regardless of when the distribution began) in any form other than cash, annuity contracts issued by an insurance company, or publicly traded employer securities.

Line 2. Enter the EIN(s) of any payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the plan year. If more than two payors made such payments during the year, enter the EINs of the two payors who paid the greatest dollar amounts during the year. For purposes of this line 2, include all payments made in cash, regardless of when the payments began. Include payments from an insurance company under an annuity only in the year the contract was purchased. Do not include distributions in kind reported on line 1.

Line 3. Enter the number of living or deceased participants whose benefits under the plan were distributed during the plan year in the form of a single sum distribution. For this purpose, a distribution of a participant's benefits will not fail to be a single sum distribution merely because, after the date of the distribution, the plan makes a supplemental distribution as a result of earnings or other adjustments made after the date of the single sum distribution. Also include any participants whose benefits were distributed in the form of a direct rollover to the trustee or custodian of a qualified plan or individual retirement account.

Part II - Funding Information

Complete Part II if the plan is subject to the minimum funding requirements of Code section 412 or ERISA section 302.

All qualified defined benefit and defined contribution plans are subject to the minimum funding requirements of Code section 412 unless they are described in the exceptions listed under section 412(h). These exceptions include profit-sharing or stock bonus plans, insurance contract plans described in section 412(i), and certain plans to which no employer contributions are made.

Nonqualified employee pension benefit plans are subject to the minimum funding requirements of ERISA section 302 unless specifically exempted under ERISA sections 4(a) or 301(a).

The employer or plan administrator of a defined benefit plan that is subject to the minimum funding requirements must file Schedule B as an attachment to Form 5500. Schedule B is not required to be filed for a money purchase defined contribution plan that is subject to the minimum funding requirements unless the plan is currently amortizing a waiver of the minimum funding requirements.

Line 4. Check "yes" if, for purposes of computing the minimum funding requirements for the plan year, the plan administrator is making an election intended to satisfy the requirements of Code section 412(c)(8) or ERISA section 302(c)(8). Under Code section 412(c)(8) and ERISA section 302(c)(8), a plan administrator may elect to have any amendment that is adopted after the beginning of the plan year for which it applies treated as having been made on the first day of the plan year if all of the following requirements are met:

1. The amendment is adopted no later than two and one-half months after the close of such plan year (two years for a multiemployer plan);

2. The amendment does not reduce the accrued benefit of any participant determined as of the beginning of such plan year; and

3. The amendment does not reduce the accrued benefit of any participant determined as of the adoption of the amendment unless the plan administrator notified the Secretary of the Treasury of the amendment and the Secretary either approved the amendment or failed to disapprove the amendment within 90 days after the date the notice was filed.

Line 5. If a money purchase defined contribution plan has received a waiver of the minimum funding standard, and the waiver is currently being amortized, lines 3, 9, and 10 of Schedule B must be completed. The Schedule B must be attached to Form 5500 but it need not be signed by an enrolled actuary.

Line 6a. The minimum required contribution for a money purchase defined contribution plan for a plan year is the amount required to be contributed for the year under the formula set forth in the plan document. If there is an accumulated funding deficiency for a prior year that has not been waived, that amount should also be included as part of the contribution required for the current year.

Line 6b. Include all contributions for the plan year that are made not later than 8½ months after the end of the plan year. Show only contributions actually made to the plan by the date the form is filed, i.e., do not include receivable contributions for this purpose.

Line 6c. If this amount is greater than zero there is an accumulated funding deficiency for the plan year and Form 5330 should be filed with the IRS to pay the excise tax on the deficiency. There is a penalty for not filing Form 5330 on time.

Line 7. A revenue procedure providing for automatic approval for a change in funding method for a plan year generally does not apply unless the plan administrator or an authorized representative of the plan sponsor explicitly agrees to the change. If a change in funding method that is made pursuant to such a revenue procedure (or a class ruling letter) is to be applicable for the current plan year, this line generally must be checked "Yes." In certain situations, however, the requirement that the plan administrator or an authorized representative of the

plan sponsor agree to the change in funding method will be satisfied if the plan administrator or an authorized representative of the plan sponsor is made aware of the change. In these situations, this line must be checked "N/A." See Section 4.02 of Rev. Proc. 99-45, 1999-49 I.R.B. 603.

Line 8. The transition rule of Code section 412(l)(11) and ERISA section 302(d)(11) provides an alternative method of computing the additional required funding charge. For such an election to apply for the current plan year check "yes" for this line.

Part III - Amendments

Line 9. Check "Yes" if an amendment was adopted during the plan year that increased the value of benefits in any way. This includes an amendment providing for an increase in the amount of benefits or rate of accrual, more generous lump sum factors, cost of living adjustments, more rapid vesting, additional payment forms, and earlier eligibility for some benefits.

**1999 – Annual Registration Statement
Identifying Separated Participants With
Deferred Vested Benefits
Instructions for Schedule SSA (Form 5500)**

General Instructions

Purpose of Form

Use Schedule SSA to report all participants with deferred vested benefit rights who separated from your company during the plan year. Also use Schedule SSA to correct information previously reported concerning participants with deferred vested benefits. The information reported on this schedule is given to the Social Security Administration which in turn provides it to participants when they file for Social Security benefits. Check the Schedule SSA box on the Form 5500 (Part II, line 10a(5)) if a Schedule SSA is attached to the Form 5500.

Who Must File

The plan administrator is responsible for filing Schedule SSA. Plans that cover only owners and their spouses do not have to file this schedule.

Note: *Government, church, or other plans that elect to voluntarily file the Schedule SSA must check the appropriate box on the schedule and complete lines 2 through 3c.*

What To File

File this schedule and complete all line items. All attachments to Schedule SSA should have entries only on the front of the page. If you need more space, use either: (1) additional copies of Schedule SSA, or (2) additional sheets the same size as the schedule containing all the information requested on the schedule. The information required in line 4 boxes (a) through (j) should be listed in the same format as line 4 on Schedule SSA.

You may send a machine-generated computer listing showing the information required on line 4 instead of completing line 4 on the schedule. Use the same format as line 4 on Schedule SSA. Complete A through D on Schedule SSA and enter on line 4 a statement that a list is attached. On each page of the computer listing, enter all the information from A through D.

When to Report a Separated Participant

In general, *for a plan to which only one employer contributes*, a participant must be reported on Schedule SSA if:

1. The participant separates from service covered by the plan in a plan year, and
2. The participant is entitled to a deferred vested benefit under the plan.

The separated participant must be reported no later than on the Schedule SSA filed for the plan year following the plan year in which separation occurred. However, you can report the separation in the plan year in which it occurs, if you want to report earlier. Do not report a participant more than once unless you wish to revise or update a prior Schedule SSA (see instructions for line 4, box (a), under codes B, C, or D).

In general, *for a plan to which more than one employer contributes*, a participant must be reported on Schedule SSA if:

1. The participant incurs two successive 1-year breaks in service (as defined in the plan for vesting purposes), and
2. The participant is (or may be) entitled to a deferred vested benefit under the plan.

The participant must be reported no later than on the Schedule SSA filed for the plan year in which the participant completed the second of the two consecutive 1-year breaks in service. The participant may be reported earlier (i.e., on the Schedule SSA filed for the plan year in which he or she

separated from service or completed the first 1-year break in service).

When NOT to Report a Participant

A participant is not required to be reported on Schedule SSA if, before the date the Schedule SSA is required to be filed (including any extension of time for filing), the participant:

1. Is paid some or all of the deferred vested retirement benefit (see the **Caution** below), or
2. Returns to service covered by the plan and/or accrues additional retirement benefits under the plan, or
3. Forfeits all the deferred vested retirement benefit.

Caution: *If payment of the deferred vested retirement benefit ceases before ALL of the benefit to which the participant is entitled is paid to the participant, information relating to the deferred vested retirement benefit to which the participant remains entitled shall be filed on the Schedule SSA filed for the year following the last plan year within which a portion of the benefit is paid to the participant.*

Separation of a Re-Employed Employee

If the deferred vested benefit of a separated employee is different from that previously reported, you may use code B (see below) to report that employee's total vested benefit.

Revising Prior Report

You may use Schedule SSA to report revisions to pension information for a participant you reported on a previous Schedule SSA. This will ensure that SSA's records are correct. This is important since SSA provides Schedule SSA information that it has on file to participants when they file for Social Security benefits. If this information is not up-to-date, the participant may contact the plan administrator to resolve the difference.

You are encouraged to report changes or corrections to previously reported information (such as plan number), as this allows the Social Security Administration to provide accurate information to participants or their beneficiaries. You do not need to report changes in the value of the employees' accounts, since that is likely to change. However, you may report these changes if you want.

Split Plan Mergers

There are conditions where some employees covered by an existing plan are transferred to a different plan, or all of the employees of an existing plan are split between two or more different plans. The new administrator for each group of employees should complete a code C entry (see below) for each employee previously reported on a Schedule SSA for the other plan.

Where and How to File

File as an attachment to Form 5500.

Caution: *A penalty may be assessed if Schedule SSA (Form 5500) is not timely filed.*

Specific Instructions

Line D. Enter the sponsor's employer identification number (EIN) shown on Form 5500, line 2b.

Line 2. If the Post Office does not deliver mail to the street address and you have a P.O. box, enter the box number instead of the street address.

Line 4, box (a). From the following list, select the code that applies and enter that code in line 4, box (a).

Code A — Use this code for a participant not previously reported. Also complete boxes (b) through (h).

Code B — Use this code for a participant previously reported under the plan number shown on this schedule to modify some of the previously reported information. Enter all the current information for boxes (b) through (h).

Code C — Use this code for a participant previously reported under another plan number who will now be receiving his/her future benefit from the plan reported on this schedule. Also complete boxes (b), (c), (i), and (j).

Code D — Use this code for a participant previously reported under the plan number shown on this schedule who is no longer entitled to those deferred vested benefits. Also complete boxes (b) and (c). If you wish, you may also use this code to report those participants who are already receiving benefits as previously reported.

Line 4, box (b). Enter the exact social security number (SSN) of each participant listed. If the participant is a foreign national employed outside the United States who does not have an SSN, enter the word "FOREIGN."

Line 4, box (c). Enter each participant's name exactly as it appears on the participant's social security card.

Line 4, box (d). From the following list, select the code that describes the type of annuity that will be provided for the participant. Enter the code that describes the type of annuity that normally accrues under the plan at the time of the participant's separation from service covered by the plan (or for a plan to which more than one employer contributes at the time the participant incurs the second consecutive 1-year break in service under the plan).

Type of Annuity Code

- A A single sum
- B Annuity payable over fixed number of years
- C Life annuity
- D Life annuity with period certain
- E Cash refund life annuity
- F Modified cash refund life annuity
- G Joint and last survivor life annuity
- M Other

Line 4, box (e). From the following list, select the code that describes the benefit payment frequency during a 12-month period.

Type of Payment Code

- A Lump sum
- B Annually
- C Semiannually
- D Quarterly
- E Monthly
- M Other

Line 4, box (f). For a defined benefit plan, enter the amount of the periodic payment that a participant is entitled to receive under line 4, box (f).

For a plan to which more than one employer contributes, if the amount of the periodic payment cannot be accurately determined because the plan administrator does not maintain complete records of covered service, enter an estimated amount.

Line 4, box (g). For a defined contribution plan, if the plan states that a participant's share of the fund will be determined on the basis of units, enter the number of units credited to the participant.

If, under the plan, participation is determined on the basis of shares of stock of the employer, enter the number of shares and add the letters "SH" to indicate shares. A number without the "SH" will be interpreted to mean units.

Line 4, box (h). For defined contribution plans, enter the value of the participant's account at the time of separation.

Line 4, boxes (i) and (j). Show the EIN and plan number of the plan under which the participant was previously reported.

Signature. This form must be signed by the plan administrator. If more than one Schedule SSA is filed for one plan, only page one should be signed.

**1999 – Qualified Pension Plan
Coverage Information
Instructions for Schedule T (Form 5500)**

General Instructions

Purpose of Schedule

Schedule T (Form 5500) is used by certain qualified pension benefit plans to provide information concerning the plan's compliance with the minimum coverage requirements of Code section 410(b).

Substantiation Guidelines

Revenue Procedure 93-42, 1993-2 C.B. 540, provides guidelines designed to reduce the burdens of substantiating compliance with the coverage and nondiscrimination requirements that apply to qualified pension benefit plans. Generally, Rev. Proc. 93-42 sets forth guidelines for: (1) the quality of data used in substantiating compliance with the coverage and nondiscrimination rules, (2) the timing of coverage and nondiscrimination testing, (3) the testing cycle of a plan, and (4) the qualified separate lines of business (QSLOB) rules. The substantiation guidelines may be used in completing Schedule T, if applicable.

Who Must File

The Schedule T (Form 5500) must generally be attached to the Form 5500 to report coverage information for a pension benefit plan (including profit-sharing and stock bonus plans) that is intended to be qualified under Code section 401(a) or 403(a). More than one Schedule T may be required. See the specific instructions for lines 1 and 2.

Schedule T may not be required every year. Check the Schedule T box on the Form 5500 (Part II, line 10a(2)), and enter the number attached in the space provided, **ONLY** if one or more Schedules T are attached to the Form 5500. If a Schedule T is not attached to the Form 5500 because the employer is using the three-year testing cycle rule in Revenue Procedure 93-42, and relying on the fact that the plan satisfied coverage in an earlier year, do not check the Schedule T box on Form 5500. Instead, enter in the space provided on Form 5500 line 10a(2) the year on which the employer is relying. See the instructions under **When to File** below. If the plan benefits the employees of more than one employer or if the employer operates QSLOBs, also see the instructions for lines 1 and 2.

When to File

Employers using the three-year testing cycle rule in Revenue Procedure 93-42 must file Schedule T for the first year in the plan's testing cycle. Schedule T need not be filed for the second or third year in the cycle if the employer is permitted to rely on the earlier year's testing. If the employer does not or cannot use the three-year testing rule, the Schedule T must be filed annually.

Specific Instructions

Lines A, B, C, and D. This information should be the same as reported in Part II of the Form 5500 to which this Schedule T is attached.

Note: For purposes of the Schedule T (Form 5500), all employers that are members of the same controlled group (that is, they are aggregated under Code section 414(b), (c), or (m)) are treated as a single employer. For purposes of the Schedule T (Form 5500), "employee" includes any self-employed individual, common-law employee, or leased employee (within the meaning of Code section 414(n)) of any member of the controlled group.

Line 1. If a plan benefits the employees of more than one employer and all the employers are members of the same controlled group, file only one Schedule T, treating all the employers as a single employer. However, if a plan benefits the

employees of more than one employer and any of the employers are not members of the same controlled group, file as follows. File separate Schedules T for each controlled group and each other employer that have noncollectively bargained employees benefiting under the plan, as if the portions of the plan benefiting each controlled group's employees and each other employer's employees constituted separate plans. For this purpose, none of the employees benefiting under a plan are considered collectively bargained employees if more than 2% of the employees covered by the plan are professional employees. (See Regulations section 1.410(b)-6(d)(2) for the definition of collectively bargained employee and Regulations section 1.410(b)-9 for the definition of professional employee.) Schedule T need not be filed, however, for any controlled group or other employer that is permitted to rely on an earlier year's testing, as explained under **When to File** above. Instead, attach a list showing each controlled group and other employer that is relying on prior year testing, including name, employer identification number, and the testing year being relied on.

For purposes of Schedule T, each controlled group and each other employer that have employees benefiting under a plan that benefits the employees of more than one employer are referred to as "participating employers" in a plan "maintained by more than one employer." If applicable, enter on lines 1a and 1b the name and employer identification number of the participating employer to which the coverage information in lines 3 and 4 relates. Otherwise, leave lines 1a and 1b blank.

Alternatively, where two or more participating employers meet any of the exceptions in line 3, attach a list of such participating employers, including each participating employer's name and employer identification numbers and the line (3a, 3b, 3d, or 3e) that describes the exception that applies to that participating employer. This list may be combined with the list of participating employers that are relying on prior year testing, if applicable. Under this alternative, file separate Schedules T only for those participating employers that do not satisfy any of the exceptions in line 3 and are not relying on prior year testing.

Line 2. See Income Tax Regulations section 1.414(r). Do not complete lines 2a through 2d unless the employer maintaining the plan operates QSLOBs.

Line 2c. See Regulations sections 1.414(r)-1(c) and 1.414(r)-8.

Line 2d. If the plan benefits the employees of more than one QSLOB, and the employer applies the minimum coverage requirements on a QSLOB basis, file a separate Schedule T for each QSLOB that has employees benefiting under the plan for which the Form 5500 is being filed, as if each portion of the plan that benefits the employees of a particular QSLOB constituted a separate plan. Identify on line 2d the particular QSLOB to which the coverage information in lines 3 and 4 relates. Otherwise, leave line 2d blank. (Schedule T need not be filed, however, for any QSLOB that is permitted to rely on a prior year's testing, as explained under **When To File** above. Instead, attach a list showing each QSLOB relying on prior year testing and the testing year being relied on.)

Line 3. Check box 3a, 3b, 3c, or 3d to indicate if you meet any of the exceptions they describe. If box 3a, 3b, 3c, or 3d is checked, skip line 4.

Box 3a. Check this box if, during the plan year, the employer employed only highly compensated employees (within the meaning of Code section 414(q)), excluding employees who were collectively bargained employees (within the meaning of Regulations section 1.410(b)-6(d)(2)).

Box 3b. Check this box if, during the plan year, the plan benefited no highly compensated employees (within the meaning of Code section 414(q)), excluding employees who were collectively bargained employees (within the meaning of Regulations section 1.410(b)-6(d)(2)). See the instructions for line 4c(5) for the definition of "benefiting." This line should also be checked if no employee received an allocation or accrued a benefit under the plan for the plan year.

Box 3c. Check this box if, during the plan year, the plan benefited only collectively bargained employees (within the meaning of Regulations section 1.410(b)-6(d)(2)). However, do not check this box if more than 2% of the employees covered

by the plan were professional employees (within the meaning of Regulations section 1.410(b)-9).

Box 3d. Check this box if, during the plan year, the plan benefited 100% of the nonexcludable nonhighly compensated employees of the employer. The nonhighly compensated employees of the employer include all the self-employed individuals, common-law employees, and leased employees (within the meaning of Code section 414(n)) employed by the employer or any entity aggregated with the employer under Code section 414(b), (c) or (m) at any time during the plan year, excluding highly compensated employees (within the meaning of Code section 414(q)). Any such employee is a nonexcludable employee unless the employee is in one of the following categories:

1. Employees who have not attained the minimum age and service requirements of the plan.
2. Collectively bargained employees within the meaning of Regulations section 1.410(b)-6(d)(2).
3. Nonresident aliens who receive no U.S. source income.
4. Employees who fail to accrue a benefit solely because they: (a) fail to satisfy a minimum hour of service or a last day requirement under the plan; (b) do not have more than 500 hours of service for the plan year; and (c) are not employed on the last day of the plan year.
5. Employees of QSLOBs other than the one with respect to which this Schedule T is being filed.

Box 3e. Check this box if, for the plan year, the plan is treated as satisfying the minimum coverage requirements of Code section 410(b) under the "acquisition or disposition" rule in Code section 410(b)(6)(C).

Line 4. In general, a plan must satisfy the coverage requirements under one of three testing options. Under the daily testing option, the plan must satisfy the coverage requirements on each day of the plan year taking into account only employees who are employees on that day. A plan will satisfy the coverage requirements under the quarterly testing option if it satisfies them on at least one day in each quarter, taking into account only employees who are employees on that day, provided the quarterly testing dates reasonably represent the coverage of the plan over the entire plan year. Finally, a plan will satisfy the coverage requirements under the annual testing option if it satisfies them as of the last day of the plan year, taking into account all employees who were employees on any day during the plan year.

Rev. Proc. 93-42 also allows an employer to substantiate that a plan satisfies the coverage requirements on the basis of the employer's workforce on a single day during a plan year, taking into account only employees who are employees on that day, if that day is reasonably representative of the employer's workforce and the plan's coverage throughout the year. This is referred to as "snapshot" testing.

If a plan satisfies the coverage and nondiscrimination requirements for a plan year, the employer may generally rely on this for the two succeeding plan years and will not have to test the plan in those years, provided there have not been significant changes.

If the employer is using single day, "snapshot" testing, the data given on lines 4a through 4f should be for the most recent snapshot day.

Enter on line 4 the beginning date of the plan year with respect to which the data on lines 4a through 4f was gathered.

Line 4a. The definition of leased employee is in Code section 414(n).

Line 4b. Employers can satisfy coverage by aggregating generally any qualified plans that are not mandatorily disaggregated. See the instructions for lines 4c and 4e regarding mandatory disaggregation. The aggregated plans must also satisfy the nondiscrimination requirements of Code section 401(a)(4) on an aggregated basis. If the employer aggregates this plan with any other plan(s) for the coverage and nondiscrimination requirements, enter the information requested and complete the rest of line 4 for the plans, as aggregated.

Line 4c. Certain single plans must be disaggregated into two or more separate parts. Each of the disaggregated parts of the plan must then satisfy the coverage and nondiscrimination requirements as if it were a separate plan. Under the regulations, the following plans must be disaggregated:

1. A plan that includes a Code section 401(k) arrangement (a qualified cash or deferred arrangement) and a portion that is not a section 401(k) arrangement.
2. A plan that includes a Code section 401(m) feature (employee and matching contributions) and a portion that is not a Code section 401(m) feature.
3. A plan that includes an ESOP and a portion that is not an ESOP.

4. A plan that benefits both collectively bargained employees and noncollectively bargained employees. None of the employees benefiting under a plan are considered collectively bargained employees if more than 2% of the employees covered by the plan are professional employees. (See Regulations section 1.410(b)-6(d)(2) for the definition of collectively bargained employee and Regulations section 1.410(b)-9 for the definition of professional employee.)

If the plan is disaggregated solely because it benefits both collectively bargained employees and noncollectively bargained employees, complete lines 4c and 4d for the part of the plan that benefits noncollectively bargained employees. Do not complete line 4e. No information is required with respect to the part of the plan that benefits collectively bargained employees. If the plan is disaggregated for other reasons, complete lines 4c and 4d for one disaggregated part of the plan. Complete line 4e to report the ratio percentage(s) for the other disaggregated part(s) of the plan, regardless if identical to the entry on line 4d. For example, if the plan is a profit sharing plan that provides nonelective contributions, Code section 401(k) contributions, and Code section 401(m) contributions, you may complete lines 4c and 4d for the nonelective part of the plan and enter on line 4e the ratio percentages for the 401(k) and 401(m) parts of the plan.

Line 4c(1). Enter the total number of employees of the employer.

Line 4c(2). Enter the total number of excludable employees in the following categories:

1. Employees who have not attained the minimum age and service requirements of the plan.
2. Collectively bargained employees within the meaning of Regulations section 1.410(b)-6(d)(2).
3. Nonresident aliens who receive no U.S. source income.
4. Employees who fail to accrue a benefit solely because they: (a) fail to satisfy a minimum hour of service or a last day requirement under the plan; (b) do not have more than 500 hours of service for the plan year; and (c) are not employed on the last day of the plan year. See Regulations section 1.410(b)-6.

5. Employees of QSLOBs other than the one with respect to which this Schedule T is being filed.

Line 4c(4). The definition of highly compensated employee is contained in Code section 414(q) and its related regulations.

Line 4c(5). In general, an employee is "benefiting" if the employee receives an allocation of contributions or forfeitures, or accrues a benefit under the plan for the plan year. Certain other employees are treated as benefiting even if they fail to receive an allocation of contributions or forfeitures or to accrue a benefit solely because the employee is subject to plan provisions that limit plan benefits, such as a provision for maximum years of service, maximum retirement benefits, or limits designed to satisfy Code section 415. An employee is treated as benefiting under a plan (or portion of a plan) that provides for elective contributions under Code section 401(k) if the employee is eligible to make elective contributions to the Code section 401(k) arrangement even if he or she does not actually make elective contributions. Similarly, an employee is treated as benefiting under a plan (or portion of a plan) that provides for after-tax employee contributions or matching contributions under Code section 401(m) if the employee is eligible to make after-tax employee contributions or receive

allocations of matching contributions even if none are actually made or received.

Line 4d. In general, to compute the ratio percentage, divide the number of nonexcludable employees who benefit under the plan and are not highly compensated by the total number of nonexcludable nonhighly compensated employees; put this result in the numerator (top of the fraction). Divide the number of nonexcludable employees who benefit under the plan and who are highly compensated by the total number of nonexcludable highly compensated employees; put this result in the denominator (bottom of the fraction). Divide the numerator by the denominator, multiply by 100, and enter the result in line 4d. Enter to the nearest 0.1%.

If the information on lines 4c and 4d pertains to one part of a disaggregated plan, identify, in the space provided, the disaggregated part of the plan to which the information on lines 4c and 4d pertains as follows: "nonelective," "401(k)," "401(m)," "ESOP," "non-ESOP."

Line 4e. See the instructions for line 4c. Calculate the ratio percentage for the other disaggregated part(s) of the plan as described above and enter on line 4e. If entering information on line 4e, identify the disaggregated part(s) of the plan as follows: "401(k)," "401(m)," "nonelective," "ESOP," "non-ESOP."

If there are more than three other disaggregated parts of the plan, provide their ratio percentages on an attachment in the same format as line 4(e).

Line 4f. If the ratio percentage for the plan, or any disaggregated part of the plan, entered on line 4d or line 4e is less than 70%, the plan does not satisfy the ratio percentage test. An employer that is using single day "snapshot" testing may, in certain circumstances, need to adjust the 70% figure to compensate for the fact that the substantiation quality data or snapshot population does not reflect employee turnover and may overstate the plan's coverage. See section 3 of Rev. Proc.

93-42. If the plan, or any disaggregated part of the plan, does not satisfy the ratio percentage test, the plan will satisfy the minimum coverage requirements of the Code only if it satisfies the average benefit test.

A plan satisfies the average benefit test if it satisfies both the nondiscriminatory classification test and the average benefit percentage test. A plan satisfies the nondiscriminatory classification test if the plan benefits such employees as qualify under a classification set up by the employer and found by the Secretary not to be discriminatory in favor of highly compensated employees. Under Regulations section 1.410(b)-4, a classification will be deemed nondiscriminatory if the ratio percentage for the plan is equal to or greater than the safe harbor percentage. The safe harbor percentage is 50%, reduced by $\frac{1}{4}$ of a percentage point for each percentage point by which the nonhighly compensated employee concentration percentage exceeds 60%. The nonhighly compensated employee concentration percentage is the percentage of all the employees of the employer who are not highly compensated employees.

In general, a plan satisfies the average benefit percentage test if the actual benefit percentage for nonhighly compensated employees is at least 70% of the actual benefit percentage for highly compensated employees. See Regulations section 1.410(b)-5. All qualified plans of the employer, including ESOPs, Code section 401(k) plans, and plans with employee or matching contributions (Code section 401(m) plans) are aggregated in determining the actual benefit percentages. Do not aggregate plans that may not be aggregated for purposes of satisfying the ratio percentage test, other than ESOPs and Code section 401(k) and 401(m) plans. In addition, all nonexcludable employees, including those with no benefit under any qualified plan of the employer, are included in determining the actual benefit percentages.

OMB Control Numbers

Agency	OMB Number	Agency	OMB Number
Pension and Welfare Benefits Administration	.1210-0110	Pension Benefit Guaranty Corporation	.1212-0057
	1210-0089	Social Security Administration	.0960-0606
Internal Revenue Service	.1545-1610		

Paperwork Reduction Act Notice

We ask for the information on this form to carry out the law as specified in ERISA and Code sections 6039D, 6047(e), 6057(b), and 6058(a). You are required to give us the information. We need it to determine whether the plan is operating according to the law.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books and records relating to a form or its instructions must be retained as long as their contents may become material in the administration of the Internal Revenue Code or are required to be maintained pursuant to Title I or IV or ERISA. Generally, the Form 5500 return/reports are open to public inspection. However, Schedules E, F, and SSA (Form 5500) are confidential, as required by Code section 6103.

The time needed to complete and file the forms listed below reflects the combined requirements of the Internal Revenue Service, Department of Labor, Pension Benefit Guaranty Corporation, and the Social Security Administration. These times will vary depending on individual circumstances. The estimated average times are:

	Pension Plans		Welfare Plans	
	Large	Small	Large	Small
Form 5500	1 hr., 44 min.	1 hr., 6 min.	1 hr., 38 min.	1 hr., 5 min.
Schedule A	1 hr., 41 min.	53 min.	8 hr., 10 min.	2 hr., 11 min.
Schedule B	6 hr., 38 min.	31 min.		
Schedule C	1 hr., 17 min.		52 min.	
Schedule D	10 hr.	10 hr.		
Schedule E	3 hr., 18 min.	3 hr., 18 min.		
Schedule F			45 min.	26 min.
Schedule G	11 hr., 58 min.		6 hr., 28 min.	
Schedule H	7 hr., 56 min.		3 hr., 22 min.	
Schedule I		1 hr., 28 min.		1 hr., 28 min.
Schedule P	13 min.	2 min.		
Schedule R	1 hr.	30 min.		
Schedule SSA	6 hr., 10 min.	1 hr., 42 min.		
Schedule T	4 hr., 40 min.	37 min.		

If you have comments concerning the accuracy of these time estimates or suggestions for making these forms simpler, we would be happy to hear from you. You can write to the Tax Forms Committee, Western Area Distribution Center, Rancho Cordova, CA 95743-0001. **DO NOT** send any of these forms or schedules to this address. Instead, see **Where To File** on page 5.

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