Form **5330** (Rev. April 2009)

Department of the Treasury Internal Revenue Service Return of Excise Taxes
Related to Employee Benefit Plans

(Under sections 4965, 4971, 4972, 4973(a)(3), 4975, 4976, 4977, 4978, 4979, 4979A, 4980, and 4980F of the Internal Revenue Code)

OMB No. 1545-0575

File	tax year beginning , and ending					,				
Α	Name of filer (see instructions)	В	3 Filer's identifying number (see instructi Employer identification number (EIN)							
	Number, street, and room or suite no. (If a P.O. box or foreign address, see instructions)		Social se	curity	number (S	SSN)				
	City or town, state, and ZIP code				(-					
С	Name of plan	E	Plan spo	nsor's	EIN	i				
D	Name and address of plan sponsor	F	Plan year ending (MM/DD/YYYY)							
Н	If this is an amended return, check here	G	Plan number							
Pa	rt I Taxes. You can only complete one section of Part I for each Form 5330 f	ilec	l (see	instru	uctions).				
	Section A. Taxes that are reported by the last day of the 7th month after the end of ax year of the employer (or other person who must file the return)	the	FOR IRS USE ONLY							
1	Section 4972 tax on nondeductible contributions to qualified plans (from Schedule line 12)	A,	161	1						
2	Section 4973(a)(3) tax on excess contributions to section 403(b)(7)(A) custodial accour (from Schedule B, line 12)	nts	164	2						
	Section 4975(a) tax on prohibited transactions (from Schedule C, line 3) Section 4975(b) tax on failure to correct prohibited transactions		159 224	3a 3b						
4	Section 4976 tax on disqualified benefits for funded welfare plans		200	4			+			
	Section 4978 tax on ESOP dispositions	2	209	5a 5b						
6	Section 4979A tax on certain prohibited allocations of qualified ESOP securities		203	6			-			
7	Total Section A taxes. Add lines 1 through 6. Enter here and on Part II, line 17			7						
	Section B. Taxes that are reported by the last day of the 7th month after the end of nonths after the last day of the plan year that ends within the filer's tax year	the	empl	oyer'	s tax ye	ear or 8	1/2			
8a	Section 4971(a) tax on failure to meet minimum funding standards (from Schedule D, line 2)		163	8a						
	Section 4971(b) tax for failure to correct minimum funding standards		225	8b						
9a	Section 4971(f)(1) tax on failure to pay liquidity shortfall (from Schedule E, line 4)		226	9a						
b	Section 4971(f)(2) tax for failure to correct liquidity shortfall		227	9b						
	Section 4971(g)(2) tax on failure to comply with a funding improvement or rehabilitati plan (see instructions)		450	10a						
	Section 4971(g)(3) tax on failure to meet requirements for plans in endangered or critic status (from Schedule F, line 1c)		451	10b						
	Section 4971(g)(4) tax on failure to adopt rehabilitation plan (from Schedule F, line 2d)		452	10c		ماله مامد				
	Section B1. Tax that is reported by the last day of the 7th month after the end of the ringe benefits were paid to the employer's employees	e c	aienda	r yea	ir in Wh	ich the	excess			
11	Section 4977 tax on excess fringe benefits (from Schedule G, line 4)		201	11			+-			
12	Total Section B taxes. Add lines 8a through 11. Enter here and on Part II, line 17. Section C. Tax that is reported by the last day of the 15th month after the end of the		lan vea	12 ar						
13	Section 4979 tax on excess contributions to certain plans (from Schedule H, line Enter here and on Part II, line 17		205	13						
	Enter here and on Falt II, line II , , , , , , , , , , , , , , , , , ,		200							

Page 2 Form 5330 (Rev. 4-2009) Filer's identifying number: Name of Filer: Section D. Tax that is reported by the last day of the month following the month in which the reversion occurred Section 4980 tax on reversion of qualified plan assets to an employer (from Schedule I, line 3). Enter here and on Part II, line 17 14 Section E. Tax that is reported by the last day of the month following the month in which the failure occurred Section 4980F tax on failure to provide notice of significant reduction in future accruals (from Schedule J, line 5). Enter here and on Part II, line 17 15 Section F. Taxes reported on or before the 15th day of the 5th month following the close of the entity manager's taxable year during which the plan became a party to a prohibited tax shelter transaction Section 4965 tax on prohibited tax shelter transactions for entity managers (from Schedule K, line 2). Enter here and on Part II, line 17 16 237 Part II Tax Due 17 Enter the amount from Part I, line 7, 12, 13, 14, 15, or 16 (whichever is applicable) 18 Enter amount of tax paid with Form 5558 or any other tax paid prior to filing this return . . . Tax due. Subtract line 18 from line 17. If the result is greater than zero, enter here, and attach check or money order payable to "United States Treasury." Write your name, identifying number, plan number, and "Form 5330, Section(s) " on your payment 19 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign Here Your signature Telephone number Date Date Preparer's SSN or PTIN Preparer's **Paid** Check if signature self-employed ___ Preparer's Firm's name (or EIN **Use Only** yours if self-employed), address, and ZIP code

Form **5330** (Rev. 4-2009)

Phone no.

Name of Filer: Filer's identifying number:

Schedule A. Tax on Nondeductible Employer Contributions to Qualified Employer Plans (Section 4972) Reported by the last day of the 7th month after the end of the tax year of the employer (or other person who must file the return)									
1	Total contributions for your tax year to your qualified employer plan (under section 401(a), 403(a), 408(k), or 408(p))	1							
2	Amount allowable as a deduction under section 404	2							
3	Subtract line 2 from line 1	3							
4	Enter amount of any prior year nondeductible contributions made for years beginning after 12/31/86								
5	Amount of any prior year nondeductible contributions for years beginning after 12/31/86 returned to you in this tax year for any prior tax year 5								
6	Subtract line 5 from line 4								
7	Amount of line 6 carried forward and deductible in this tax year								
8	Subtract line 7 from line 6	8							
9	Tentative taxable excess contributions. Add lines 3 and 8	9							
10	Nondeductible section 4972(c)(6) or (7) contributions exempt from excise tax	10							
11	Taxable excess contributions. Subtract line 10 from line 9	11							
	Multiply line 11 by 10%. Enter here and on Part I, line 1								
Rep	Schedule B. Tax on Excess Contributions to Section 403(b)(7)(A) Custodial Accounts (Section 4973(a)(3)) Reported by the last day of the 7th month after the end of the tax year of the employer (or other person who must file the return)								
	return)			е					
1	·	1		e 					
1	Total amount contributed for current year less rollovers (see instructions)			e					
	Total amount contributed for current year less rollovers (see instructions)	2		e					
2	Total amount contributed for current year less rollovers (see instructions)	2		e					
2	Total amount contributed for current year less rollovers (see instructions)	3							
2 3 4	Total amount contributed for current year less rollovers (see instructions)	3 4							
2 3 4 5	Total amount contributed for current year less rollovers (see instructions)	3 4 5							
2 3 4 5 6	Total amount contributed for current year less rollovers (see instructions)	2 3 4 5							
2 3 4 5 6	Total amount contributed for current year less rollovers (see instructions)	2 3 4 5 6							
2 3 4 5 6	Total amount contributed for current year less rollovers (see instructions)	2 3 4 5 6 7 8							

Excess contributions tax. Enter the lesser of line 9 or line 11 here and on Part I, line 2

(xii)

Add amounts in column (e); enter here and on Part I, line 3a

Have you corrected all of the prohibited transactions that you are reporting on this return? If "Yes,"

complete Schedule C, line 5, on the next page. If "No," attach statement (see instructions)

Form 5330 (Rev. 4-2009) Page 4 Filer's identifying number: Name of Filer: Schedule C. Tax on Prohibited Transactions (Section 4975) (see instructions) Reported by the last day of the 7th month after the end of the tax year of the employer (or other person who must file the return) (continued) Is the excise tax a result of a prohibited transaction that was (box "a" or box "b" must be checked): **b** other than discrete (a lease or a loan) 2 Complete the table below to disclose the prohibited transactions and figure the initial tax (see instructions) (e) Initial tax on prohibited (d) Amount involved transaction (multiply each (a) (b) Date in prohibited Transaction of transaction (c) Description of prohibited transaction transaction in column (d) by transaction number (see instructions) the appropriate rate (see (see instructions) instructions)) (i) (ii) (iii) (iv) (v) (vi) (vii) (viii) (ix)(x) (xi)

Name of Filer: Filer's identifying number:

Schedule C. Tax on Prohibited Transactions (Section 4975) Reported by the last day of the 7th month after the end of the tax year of the employer (or other person who must file the return) (continued)

5 Complete the table below, if applicable, of other participating disqualified persons and description of correction

(see instr	uctions).					
(a) Item no. from line 2	(b) Name and address of disqualified person	(c) EIN or SSN	(d) Date of correction	Desc	ription	e) of correction
Schedule D. 7th month af the filer's tax	Tax on Failure to Meet Minimum F ter the end of the employer's tax y year	Funding Standards (Section 4 year or 8 ½ months after th	⊔ 4971(a)) Rep e last day d	oorted by of the plai	the la	ast day of the r that ends within
1 Aggregate	e unpaid required contributions (ace instructions)				1 2	

Filer's identifying number:

	edule E. Tax on Failure to Pay Li end of the employer's tax year o								
			(a) 1st Quarter	(b) 2nd Quarter	(c) 3rd Quarter	(d) 4th Qu	ıarter	(e) Total Add cols. a-d fo	or line 3
4	Amount of shortfall	1						7144 0010. 4 4 10	
1 2	Shortfall paid by the due date	2						-	
3	Net shortfall amount	3							
4	Multiply line 3 column (e) by 10	<u> </u>							
0-1	line 9a						4	4\\ D	
last	edule F. Tax on Multiemployer Pl day of the 7th month after the e s within the filer's tax year								
1	Section 4971(g)(3) tax on failure to me	eet red	guirements for pla	ns in endangered	or critical status		1		
_	a Enter the amount of contributions n			•			1a		
	b Enter the amount of the accum			•	•		1b		
	c Enter the greater of line 1a or line						1c		
2	Section 4971(g)(4) tax on failure to	o ado	pt rehabilitation	plan			2		
	a Enter the amount of the excise	tax o	n the accumulat	ed funding defic	ciency under sec	tion			
	4971(a)(2) from Schedule D, line	2					2a		
	b Enter the number of days during the	e tax	vear which are in	cluded in the peri-	od beainnina on t	he first dav			
	of the 240 day period and ending o						2b		
	c Multiply line 2b by \$1,100		<u>.</u> .				2c		
	d Enter the greater of line 2a or line						2d		
	edule G. Tax on Excess Fringe Ber endar year in which the excess fring					th month a	after 1	the end of the	
1	Did you make an election to be to	axed	under section 4	977?	☐ Yes	No			
2	If "Yes," enter the calendar year (Y								
3	If line 1 is "Yes," enter the excess	s fring	ge benefits on th	nis line (see instr	uctions)		3		
4	Enter 30% of line 3 here and on	Part I	, line 11	<u> </u>	<u></u>	▶	4		
	edule H. Tax on Excess Contribution of the plan year	ons to	Certain Plans (Section 4979) R	eported by the I	ast day of	the 1	5th month afte	r the
1	Enter the amount of an excess contr	ributio	n under a cash o	r deferred arrange	ement that is part	of a plan			
_	qualified under section 401(a), 403(a),	403(k	o), 408(k), or 501(c	(18) or excess ag	gregate contribution	ons	1		
2	Multiply line 1 by 10% and enter						2		
	edule I. Tax on Reversion of Quanth following the month in which				Section 4980) F	Reported b	y the	last day of th	ne
1	Date reversion occurred			► MM	_ DD Y	Y			
2 a	Employer reversion amount			b Excise tax	rate				
3	Multiply line 2a by line 2b and en	ter th	e amount here a	and on Part I, lin	e 14	. •	3		
4	Explain below why you qualify for	a ra	te other than 50	%:					
	edule J. Tax on Failure to Provid day of the month following the r					als (Sectio	n 498	0F) Reported	by the
1	Enter the number of applicable individ	luals v	who were not prov	rided ERISA section	n 204(h) notice 🕨		1		
2	Enter the effective date of the am						2		
3	Enter the number of days in the n	onco	mpliance period	 •			3		
4	Enter the total number of failures to p	rovide	e ERISA section 20	04(h) notice (see in	structions)		4		
5	Multiply line 4 by \$100. Enter here					. •	5		
6	Provide a brief description of the								
	edule K. Tax on Prohibited Tax She owing the close of the entity manage								tion
1	Enter the number of prohibited	tax s	helter transaction	ons you caused	the same plan	to be a	1		
2	party to ►	the re	esult here and o	n Part I, line 16		. •	2		