

**SCHEDULE P  
(Form 5500)**

Department of the Treasury  
Internal Revenue Service

**Annual Return of Fiduciary  
of Employee Benefit Trust**

This schedule may be filed to satisfy the requirements under 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 running of the statute of limitations under section 6501(a) for any trust described in section 401(a) that is exempt from tax under section 501(a).

▶ File as an attachment to Form 5500 or 5500-EZ.

Official Use Only

OMB No. 1210-0110

**1999**

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

For trust calendar year 1999  
or fiscal plan year beginning

MM / DD / YYYY

, and ending

MM / DD / YYYY

Please type or print

1a Name of trustee or custodian

Grid for name of trustee or custodian

b Number, street, and room or suite no. (If a P.O. box, see the instructions for Form 5500 or 5500-EZ.)

Grid for address

c City or town

State

ZIP code

Grid for city or town

Grid for state

Grid for ZIP code

2a Name of trust

Grid for name of trust

b Trust's employer identification number

Grid for employer identification number

3 Name of plan if different from the name of trust

Grid for name of plan

4 Have you furnished the participating employee benefit plan(s) with the trust financial information required to be reported by the plan(s)?

Yes

No

5 Enter the plan sponsor's employer identification number as shown on Form 5500 or 5500-EZ ... ▶

Grid for plan sponsor's employer identification number

Under penalties of perjury, I declare that I have examined this schedule, and to the best of my knowledge and belief it is true, correct, and complete.

Signature of fiduciary

▶ \_\_\_\_\_

Date ▶

MM / DD / YYYY

For the Paperwork Reduction Notice and OMB Control Nos., see the inst. for Form 5500 or 5500-EZ. Cat. No. 13504X Schedule P (Form 5500) 1999

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