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# **GENERAL GUIDELINES FOR COMPLETING FORM 5500 AND SCHEDULES A, C, D, G, H AND I**

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# GUIDELINES FOR COMPLETING FORM 5500

Line Item	Who Must Complete	How To Complete
Top of Form - plan year information	All filers (large and small pension plans, large and small welfare plans, fringe benefit plans and DFEs).	Enter the plan or DFE year being reported if not a calendar year (e.g., January 1, 2001, to December 31, 2001).
A(1) – A(4)	All filers.	Check only one box to indicate the type of filer. Enter the appropriate letter - M, C, P, E or G - if A(4) is checked.
B(1)	All filers.	Check this box if a Form 5500 (or Form 5500-C/R) has not been previously filed for this plan or DFE. Note: If this Form 5500 is the first Form 5500 filed for this plan check this box even if a Form 5500-EZ has been previously filed.
B(2)	All filers.	Check box if this Form 5500 amends a Form 5500 previously filed for this year, and follow the instructions for format being filed.
B(3)	All filers.	Check box if this is the last Form 5500 required to be filed for the plan or arrangement. A plan or arrangement with participants, assets and/or liabilities at the end of the plan year should not check this box.
B(4)	All filers.	Check box if this Form 5500 is for a period of less than 12 months. The beginning and ending dates of the plan or DFE year must be entered at the top of the form in Part I, above line A.
C	All plans (large and small pension plans, large and small welfare plans, fringe benefit plans).	Check box when contributions and/or benefits are subject to the collective bargaining process. The contributions and/or benefits do not have to be identical for all employees under the plan.

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## GUIDELINES FOR COMPLETING FORM 5500 (continued)

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Line Item	Who Must Complete	How To Complete
D	All plans and GIAs.	Check box if you filed for an extension of time to file Form 5500, are filing under a special exemption, or are filing under the DFVC Program. Attach a photocopy of the completed and signed Form 5558, <i>Application for Extension of Time To File Certain Employee Plan Returns</i> you filed, a copy of the employer's extension of time to file the income tax return, a statement citing the authority for a special extension; or a statement explaining that the Form 5500 is being filed under the DFVC Program, as applicable.
1a	All filers.	Enter the formal name of the plan or DFE or enough information to identify the plan or DFE. Abbreviate if necessary.
1b	All filers.	Plans and DFEs are identified by a unique twelve digit number - the 9 digit Employer Identification Number (EIN) that is entered on line 2b, followed by the 3 digit plan number (PN) entered on line 1b. The PN entered on line 1b reflects the type of plan or DFE being reported. Assign 001 to a plan with pension benefits (line 8a is checked) or a DFE (other than a GIA). If more than one Form 5500 is filed with the same EIN on line 2b for plans with pension benefits or DFEs (other than a GIA), consecutively assign higher numbers to additional plans/DFEs - 002 for the second plan or DFE, 003 for the third, etc. Assign 501 to a plan with no pension benefits (line 8a is not checked) or a GIA (line A(4) is checked and G is entered). If more than one Form 5500 is filed with the same EIN on line 2b for plans with no pension benefits or for GIAs, consecutively assign higher numbers to the additional plans or GIAs - 502 for the second plan or GIA, 503 for the third, etc. <b>Note:</b> Filers that previously used a PN of 333 or higher consecutive number may continue to use this number.

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## **GUIDELINES FOR COMPLETING FORM 5500** (continued)

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<b>Line Item</b>	<b>Who Must Complete</b>	<b>How To Complete</b>
1c	All plans.	Enter the date the plan first became effective.
2a	All filers.	Enter the name of the plan sponsor or, in the case of a Form 5500 filed for a DFE, the name of the insurance company, financial institution or other sponsor of the DFE (e.g., in the case of a GIA, the trust or other entity that holds the insurance contract or in the case of an MTIA, one of the sponsoring employers). If the plan covers only the employees of one employer, enter the employer's name.
2b	All filers.	Enter the nine-digit employer identification number (EIN) assigned to the plan sponsor/employer/DFE. For example, 00-1234567. This number, in conjunction with the PN entered on line 1b, provides a unique 12 digit number to identify this plan or DFE. See 1b above.
2c	All filers.	Enter the sponsor's telephone number.
2d	All plans.	Enter the six-digit business code that best describes the nature of the plan sponsor's business (the main business activity) from the list of business codes in the Form 5500 instructions.
Signature Block	All filers.	The Form 5500 must be signed (the name(s) of the individual(s) signing must be printed or typed under each signature) and dated by the employer/plan sponsor/DFE and/or the plan administrator, as applicable. See instructions for details.
3a – 3c	All filers.	Enter the name, address, EIN and telephone number of the plan administrator. If the administrator is the sponsor identified in item 2, or Part I, box A(4) is checked because the Form 5500 is submitted as the report of a DFE, the word "Same" should be entered on line 3a and lines 3b and 3c should be blank.

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## **GUIDELINES FOR COMPLETING FORM 5500** (continued)

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<b>Line Item</b>	<b>Who Must Complete</b>	<b>How To Complete</b>
4	All filers.	If name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and PN from the last return/report.
5	All filers (optional).	Identify the person or entity that is principally responsible for the preparation of the annual return/report.
6	Pension plans (unless entitled to limited pension plan reporting), welfare plans and GIAs.	Enter the correct number.
7a – 7f	Pension plans (unless entitled to limited pension plan reporting), welfare plans and GIAs.	Enter the correct number. (Welfare plans complete only lines 7a, 7b, 7c and 7d.)
7g	Defined contribution pension plans.	Enter the correct number.
7h	Pension plans except multiemployer plans or multiple-employer plans that are collectively bargained.	Enter the correct number.
7i	Pension plans required to attach Schedule SSA.	Enter the correct number.
8a	Plans providing pension benefits.	Check the box and enter all applicable plan characteristics codes.
8b	Plans providing welfare benefits and GIAs.	Check the box and enter all applicable plan characteristics codes.
8c	Plans providing certain fringe benefits.	Do not check the box. See page 17.
9a	Pension plans, welfare plans and GIAs.	Check all applicable boxes. If 9a(1) or (2) is checked and an insurance contract year ends within the plan year, attach the appropriate number of Schedule A's.

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## **GUIDELINES FOR COMPLETING FORM 5500** (continued)

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<b>Line Item</b>	<b>Who Must Complete</b>	<b>How To Complete</b>
9b	Pension plans, welfare plans and GIAs.	Check all applicable boxes. If 9b(1) or (2) is checked and an insurance contract year ends within the plan year, attach the appropriate number of Schedule A's.
10a – 10c	Pension plans, welfare plans, fringe benefit plans and DFEs.	Check all applicable boxes and, if applicable, enter the number of schedules attached or year of coverage testing information.
10a(1)	Defined benefit and other pension plans subject to the minimum funding standards of ERISA section 302 or Code section 412 and all other pension plans that distributed benefits during the year, except plans entitled to "limited pension plan reporting" (certain 403(b)(1), 403(b)(7) and IRA plans).	Check box, if applicable, and attach Schedule R.
10a(2)	Qualified pension plans.	Check box, if applicable, and enter the number of Schedule T's attached. If a Schedule T is not attached because the plan is relying on coverage testing information for a prior year, enter the year.
10a(3)	Defined benefit pension plans subject to minimum funding standards and certain money purchase defined contribution plans required to complete Schedule B lines 3, 9 and 10 in accordance with the instructions for Schedule R (Form 5500), line 5.	Check box, if applicable, and attach Schedule B.
10a(4)	All plans with ESOP features.	Check box, if applicable, and attach Schedule E.

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## **GUIDELINES FOR COMPLETING FORM 5500** (continued)

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<b>Line Item</b>	<b>Who Must Complete</b>	<b>How To Complete</b>
10a(5)	Pension plans.	Check box, if applicable, and attach Schedule SSA.
10b(1)	Large pension plans (unless entitled to limited pension plan reporting), large welfare plans (unless exempt) and DFEs.	Check box, if applicable, and attach Schedule H.
10b(2)	Small pension plans (unless entitled to limited pension plan reporting) and small welfare plans.	Check box, if applicable, and attach Schedule I.
10b(3)	All filers (except CCTs and PSAs) with insurance contracts.	Check box, if applicable, and enter number of Schedule A's attached.
10b(4)	Large pension plans, large welfare plans, MTIAs, GIAs and 103-12 IEs.	Check box, if applicable, and attach Schedule C. Part I is required if any service provider was paid \$5,000 or more. Part II is required if an accountant or actuary was terminated. (Part II not required for MTIAs.)
10b(5)	All pension and welfare plans participating in MTIAs, CCTs, PSAs and 103-12 IEs, and all DFEs.	Check box, if applicable, and attach Schedule D. Part I is required for plans and DFEs to report information on interests in MTIAs, CCTs, PSAs and 103-12 IEs. Part II is required for DFEs to report information on participating plans.
10b(6)	Large pension plans, large welfare plans, MTIAs, GIAs and 103-12 IEs.	Check box, if applicable, and attach Schedule G if Schedule H, lines 4b, 4c or 4d are "Yes." Also check box, and attach Schedule G if an unfunded, fully insured or unfunded/insured welfare plan exempt from completing Schedule H had any nonexempt transactions.

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## **GUIDELINES FOR COMPLETING FORM 5500** (continued)

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<b>Line Item</b>	<b>Who Must Complete</b>	<b>How To Complete</b>
10c	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.	Do not check the box or attach Schedule F. IRS Notice 2002-24 suspended the requirement to file Schedule F attached to a completed Form 5500 pursuant to Code section 6039D, including for years prior to 2001 for which an annual information return has not been filed. Any future reporting obligations under Code section 6039D will apply only to plan years beginning on or after the date IRS publishes further guidance.

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**NOTE:** IRS Notice 2002-24 does not affect annual reporting requirements under Title I of ERISA, or relieve administrators of employee benefit plans from any obligation to file a Form 5500 and any required schedules (other than Schedule F) under that title. See “Caution” on page 17.



# GUIDELINES FOR COMPLETING SCHEDULE A

## (INSURANCE INFORMATION)

Line Item	Who Must Complete	How To Complete
Top of Form	All pension and welfare plans, MTIAs, GIAs and 103-12 IEs with insurance contracts.	This information must be the same (plan name may be abbreviated) as entered on the Form 5500 to which the Schedule A is attached. See Form 5500 Part I and Part II, lines 1a, 1b, 2a and 2b.
1(a)	All pension and welfare plans, MTIAs, GIAs and 103-12 IEs with insurance contracts.	Report the name of the insurance carrier.
1(b)	All pension and welfare plans, MTIAs, GIAs and 103-12 IEs with insurance contracts.	Report the EIN of the insurance carrier named on line 1(a).
1(c)	All pension and welfare plans, MTIAs, GIAs and 103-12 IEs with insurance contracts.	Enter the code number assigned by the National Association of Insurance Commissioners (NAIC) to the insurance carrier named on line 1(a). Enter zeros ("0") in the spaces provided if none has been assigned.
1(d)	All pension and welfare plans, MTIAs, GIAs and 103-12 IEs with insurance contracts.	Report the contract or identification number.
1(e)	All pension and welfare plans, MTIAs, GIAs and 103-12 IEs with insurance contracts.	Report the number of persons.
1(f) – 1(g)	All pension and welfare plans, MTIAs, GIAs and 103-12 IEs with insurance contracts.	Report the beginning and ending dates of the policy or contract year. Enter "N/A" in 1(f) if separate contracts covering individual employees are grouped.
2 - Totals	All pension and welfare plans, MTIAs, GIAs and 103-12 IEs with insurance contracts.	Enter totals of all commissions and fees paid to all persons listed on line 2.

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# **GUIDELINES FOR COMPLETING SCHEDULE A** (continued)

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<b>Line Item</b>	<b>Who Must Complete</b>	<b>How To Complete</b>
2 -Elements (a) – (e)	All pension and welfare plans, MTIAs, GIAs and 103-12 IEs with insurance contracts.	Enter in each element (a) the name and address of one agent, broker or other person to whom commissions or fees were paid. Report the required information in elements (b) through (e) with respect to the person named in each element (a) and list all persons in descending order by the amount of commissions and fees paid. If more than three persons were paid commissions or fees, use additional pages to list all persons.
3	All pension and welfare plans, MTIAs, GIAs and 103-12 IEs with insurance contracts.	Report the current value of plan's interest under this contract in the general account at year end. Line 3 may be left blank 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.
4	All pension and welfare plans, MTIAs, GIAs and 103-12 IEs with insurance contracts.	Report the current value of the plan's interest at year end in separate accounts under the contract.
5 and 6	All pension and welfare plans, MTIAs, GIAs and 103-12 IEs with insurance contracts.	Report the requested information, as applicable.

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## **GUIDELINES FOR COMPLETING SCHEDULE A** (continued)

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<b>Line Item</b>	<b>Who Must Complete</b>	<b>How To Complete</b>
7, 8 and 9	All pension and welfare plans, MTIAs, GIAs and 103-12 IEs with insurance contracts.	Report the requested information, as applicable.

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### **NOTES:**

- (1) Not all Schedule A line items are discussed above. Some lines are self-explanatory.
- (2) The insurance company (or similar organization) that provides benefits is required to provide the plan administrator with the information needed to complete the annual 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). The Form 5500 may be rejected if you do not submit the information on an approved form. Therefore, if an insurance company provides Schedule A information, this information must be entered onto an approved Schedule A (Form 5500). You should receive correspondence if, based on the number entered on Form 5500, line 10b(3), additional Schedule A's should be attached to the Form 5500.
- (3) Schedule A information is for the policy or contract year ending with or within the plan year unless the insurance company maintains records on the basis of the plan year. See Schedule A instructions.
- (4) Schedule A is not required for plans without employees, e.g., Form 5500-EZ filers.

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# GUIDELINES FOR COMPLETING SCHEDULE C

## (SERVICE PROVIDER INFORMATION)

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Line Item	Who Must Complete	How To Complete
Top of Form	Large pension plans, large welfare plans and all MTIAs, GIAs and 103-12 IEs required to check Form 5500, line 10b(4).	This information must be the same (plan name may be abbreviated) as provided on the Form 5500 to which the Schedule C is attached. See Form 5500 Part I and Part II, lines 1a, 1b, 2a and 2b.
1	Large pension plans, large welfare plans and all MTIAs, GIAs and 103-12 IEs required to complete Schedule C, line 2.	Enter the total dollar amount paid.
2	Large pension plans, large welfare plans and all MTIAs, GIAs and 103-12 IEs if a service provider was paid \$5,000 or more.	Enter the correct information in elements (a) through (g). List up to the 40 most highly compensated service providers, including any contract administrator who is listed first, with the remaining service providers listed in the order of compensation received (highest to lowest). See the Form 5500 instructions, <i>Lines and Schedules To Complete</i> , and the Schedule C instructions.
Part II	Large pension plans, large welfare plans and all GIAs and 103-12 IEs if an accountant or actuary was terminated.	Complete elements (a) through (e) for each terminated person. See the Form 5500 instructions, <i>Lines and Schedules To Complete</i> , and the Schedule C instructions.

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### NOTES:

- (1) An EIN must be provided for each service provider and terminated person listed. The filer should take steps to obtain missing service provider EINs in sufficient time to ensure that they are available by the time the form is required to be filed. The recording of a social security number (SSN) may result in correspondence.
- (2) Use additional pages if necessary to list additional persons in Parts I and/or II.

# GUIDELINES FOR COMPLETING SCHEDULE D

## (DFE/PARTICIPATING PLAN INFORMATION)

Line Item	Who Must Complete	How To Complete
Top of Form	All DFEs and plans participating in MTIAs, CCTs, PSAs and 103-12 IEs, i.e., filers required to check Form 5500, line 10b(5).	This information must be the same (plan name may be abbreviated) as provided on the Form 5500 to which the Schedule D is attached. See Form 5500 Part I and Part II, lines 1a, 1b, 2a and 2b.
Part I	All pension plans, welfare plans and DFEs that participated at any time during the plan or DFE year in an MTIA, CCT, PSA or 103-12 IE.	Complete a separate item (elements (a) through (e)) for each MTIA, CCT, PSA or 103-12 IE in which the plan or DFE participated. The EIN/PN/Entity code (elements (c) and (d)) provides a unique 13 character identification number for each entity named in element (a). If a DFE is listed, elements (a) through (d) must report the applicable information entered on the DFE's Form 5500, lines 1a, 2a, 2b, 1b and A(4). If a CCT or PSA is listed for which a DFE Form 5500 was not filed, enter "000" as the PN after entering the EIN of the CCT or PSA in element (c).
Part II	All DFEs.	List all plans that invested or participated in the DFE during the DFE year. Complete a separate item (elements (a) through (c)) for each plan. GIAs need not complete element (a) or enter the PN in element (c).

# GUIDELINES FOR COMPLETING SCHEDULE G

## (FINANCIAL TRANSACTION SCHEDULES)

Line Item	Who Must Complete	How To Complete
Top of Form	Large pension plans, large welfare plans and all MTIAs, GIAs and 103-12 IEs required to check Form 5500, line 10b(6).	This information must be the same (plan name may be abbreviated) as provided on the Form 5500 to which the Schedule G is attached. See Form 5500 Part I and Part II, lines 1a, 1b, 2a and 2b.
Part I	Large pension plans, large welfare plans and all MTIAs, GIAs and 103-12 IEs with loans or fixed income obligations in default or classified as uncollectible. See Schedule G instructions that provide special rules for participant loans.	Complete a separate item (elements (a) through (i)) for each loan or fixed income obligation in default or determined to be uncollectible as of the end of the plan year (fiscal year for a GIA, MTIA or 103-12 IE). 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. Also see Schedule H, line 4b.
Part II	Large pension plans, large welfare plans and all MTIAs, GIAs and 103-12 IEs with leases in default or classified as uncollectible.	Complete a separate item (elements (a) through (j)) for each lease in default or classified as uncollectible. 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. See Schedule G instructions for definitions. Also see Schedule H, line 4c.
Part III	Large pension plans, large welfare plans and all MTIAs, GIAs and 103-12 IEs with nonexempt party-in-interest transactions.	Complete a separate item (elements (a) through (j)) for each nonexempt party-in-interest transaction unless the nonexempt transaction is: (1) statutorily exempt under Part IV of ERISA; (2) administratively exempt under ERISA section 408(a); (3) exempt under Code sections 4975 (c) or (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. Also see Schedule H, line 4d.

# GUIDELINES FOR COMPLETING SCHEDULE H

## (FINANCIAL INFORMATION)

Line Item	Who Must Complete	How To Complete
Top of Form	Pension benefit plans and welfare benefit plans filing as "large plans," and all DFEs. Exceptions: Insured, unfunded or combination unfunded/insured welfare plans as described in 29 CFR 2520.104-44(b)(1), and the Large Welfare Plan instructions and certain pension plans and arrangements described in 29 CFR 2520.104-44(b)(2) and the <i>Limited Pension Plan Reporting</i> instructions.	This information must be the same (plan name may be abbreviated) as provided on the Form 5500 to which the Schedule H is attached. See Form 5500 Part I and Part II, lines 1a, 1b, 2a and 2b. Do not attach both a Schedule H and a Schedule I to the same Form 5500.
Parts I and II	All plans and DFEs required to complete Schedule H.	Enter all required information in the asset and liability statement (Part I) and income and expenses statement (Part II) accurately. Refer to the instructions for line item definitions. Correct procedures for certain line items are described below. Do not mark through any line item(s) and insert your own description. Round off all amounts to the nearest dollar. DO NOT WRITE "THOUSANDS OF DOLLARS" AT THE TOP OF ANY PAGE.
1b(1)–1b(3)	Large pension plans and large welfare plans with receivables (less allowance for doubtful accounts) and all DFEs.	Enter the amount as of the beginning and end of year. DFEs complete only 1b(3).
1f	Large pension plans and large welfare plans with assets at any time during the plan year and all DFEs.	Add items 1a, 1b(1), 1b(2), 1b(3), 1c(1), 1c(2), 1c(3)(A), 1c(3)(B), 1c(4)(A), 1c(4)(B), 1c(5), 1c(6), 1c(7), 1c(8), 1c(9), 1c(10), 1c(11), 1c(12), 1c(13), 1c(14), 1c(15), 1d(1), 1d(2) and 1(e) and enter the total, beginning and end of year. Enter "0" if there are no assets.

# GUIDELINES FOR COMPLETING SCHEDULE H (continued)

Line Item	Who Must Complete	How To Complete
1k	Large pension plans and large welfare plans and all DFEs.	Add items 1g through 1j and enter the total, beginning and end of year. Enter "0" if there are no liabilities.
1l	Large pension plans and large welfare plans and all DFEs.	Subtract line 1k from 1f and enter the result, beginning and end of year. Enter "0" if there are no net assets. Line 1l column (a) + 2k + 2l(1) + 2l(2) must equal 1l column (b).
2a(3) column (b)	Large pension plans and large welfare plans with contributions.	Add lines 2a(1)(A) through (C) and 2a(2) in column (a) and enter the total in line 2a(3) column (b). (DFEs do not report contributions - see line item 2l on page 41.)
2b(1)(G) column (b)	Large pension plans, large welfare plans and DFEs with interest earnings on investments.	Add lines 2b(1)(A) through 2b(1)(F) and enter the total in column (b).
2b(2)(C) column (b)	Large pension plans, large welfare plans and DFEs with dividend earnings on investments.	Add lines 2b(2)(A) and 2b(2)(B) and enter the total in column (b).
2b(4)(C) column (b)	Large pension plans, large welfare plans and DFEs with gain (loss) on the sale of assets for the year.	Subtract column (a), line 2b(4)(B) from 2b(4)(A), and enter the results in column (b). Negative numbers should be preceded by a negative "-" sign.
2d	Large pension plans and large welfare plans and DFEs with income.	Add column (b), lines 2a(3), 2b(1)(G), 2b(2)(C), 2b(3), 2b(4)(C), 2b(5)(C) through 2c, and enter the total.
2e(4) column (b)	Large pension plans and large welfare plans with benefit payments or payments to provide benefits.	Add column (a), lines 2e(1) through 2e(3) and enter the total in column (b). (DFEs - see 2l on page 41.) Negative numbers are not permitted on this line.



# **GUIDELINES FOR COMPLETING SCHEDULE H** (continued)

<b>Line Item</b>	<b>Who Must Complete</b>	<b>How To Complete</b>
2i(5) column (b)	Large pension plans, large welfare plans and DFEs with administrative expenses.	Add column (a), lines 2i(1) through 2i(4) and enter the total in column (b).
2j	Large pension plans, large welfare plans and DFEs with expenses.	Add column (b), lines 2e(4), 2f, 2g, 2h and 2i(5), and enter the total.
2k	Large pension plans, large welfare plans and DFEs with income and/or expenses.	Subtract line 2j from 2d and enter the result. Negative numbers should be preceded by a negative "-" sign.
2l	Large pension plans, large welfare plans and DFEs with transfers of assets.	Enter transfers to and from plans and DFEs here. Include on a DFE Schedule H all asset transfers to/from participating plans, including amounts transferred to plans for benefit payments and amounts transferred from plans resulting from contributions to the participating plans.
Part III	All plans and DFEs required to complete Schedule H.	Enter all required information.
3a	Large pension plans and large welfare plans except those entitled to check 3b(2), GIAs and 103-12 IEs.	Check the appropriate box and attach any required information.
3b	Large pension plans and large welfare plans deferring the attachment of the accountant's opinion, and CCTs, PSAs and MTIAs.	Check the appropriate box and attach any required information.
3c	Large pension plans and large welfare plans except those entitled to check 3b(2), GIAs and 103-12 IEs.	Check if applicable.

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## **GUIDELINES FOR COMPLETING SCHEDULE H** (continued)

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<b>Line Item</b>	<b>Who Must Complete</b>	<b>How To Complete</b>
Part IV	All plans and DFEs required to check a box in Part III, line 3a.	Enter all required information.
4a	Large pension plans and large welfare plans.	Check yes or no and, if "yes," enter amount. See the Schedule H instructions.
4b	Large pension plans, large welfare plans, MTIAs, 103-12 IEs and GIAs.	Check yes or no and, if "yes," enter amount and attach Schedule G. See the Schedule H instructions.
4c	Large pension plans, large welfare plans, MTIAs, 103-12 IEs and GIAs.	Check yes or no and, if "yes," enter amount and attach Schedule G. See the Schedule H instructions.
4d	Large pension plans, large welfare plans, MTIAs, 103-12 IEs and GIAs.	Check yes or no and, if "yes," enter amount and attach Schedule G. See the Schedule H instructions.
4e, 4f, 4g and 4h	Large pension plans and large welfare plans.	Check yes or no and, if "yes," enter amount. See the Schedule H instructions.
4i	Large pension plans and large welfare plans and all MTIAs, 103-12 IEs and GIAs.	Check yes or no and, if "yes," 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. See the Schedule H instructions.
4j	Large pension plans and large welfare plans and all MTIAs and GIAs.	Check yes or no and, if "yes," attach a schedule of reportable transactions. See the Schedule H instructions.

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## GUIDELINES FOR COMPLETING SCHEDULE H (continued)

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Line Item	Who Must Complete	How To Complete
4k	Large pension plans and large welfare plans.	Check yes or no.
5a	Large pension plans and large welfare plans.	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.
5b(1), 5b(2) and 5b(3)	Large pension plans and large welfare plans.	Complete, as applicable.

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### NOTES:

- (1) Correspondence may occur if the financial consistency check applied to Schedule H determines that the "end-of-year" assets from the prior year's report do not match the "beginning-of-year" assets reported on this year's report.
- (2) If an amount is entered on Schedule H, lines 1c(9) through 1c(12), or 2b(6) through 2b(9), then Form 5500, line 10b(5), must be checked, and a Schedule D must be attached.
- (3) If an amount is entered on Schedule H, line 1c(14) (funds held in insurance company general account (unallocated contracts)), you must check Form 5500 lines 9a(1), 9a(2), 9b(1) and/or 9b(2), as applicable, and enter the appropriate number of Schedule(s) A attached to the Form 5500 on Form 5500, line 10b(3).
- (4) If any information is entered on Schedule H, Form 5500, line 8a and/or 8b, MUST be completed.
- (5) *DO NOT ENTER INFORMATION OUTSIDE OF THE BOXES OR COLUMNS.*

# GUIDELINES FOR COMPLETING SCHEDULE I

## (FINANCIAL INFORMATION - SMALL PLAN)

Line Item	Who Must Complete	How To Complete
Top of Form	All pension benefit plans and welfare benefit plans filing as "small plans," except for certain pension plans and arrangements described in 29 CFR 2520.104-44(b)(2) and <i>Limited Pension Plan Reporting</i> .	This information must be the same (plan name may be abbreviated) as provided on the Form 5500 to which the Schedule I is attached. See Form 5500 Part I and Part II, lines 1a, 1b, 2a and 2b. Do not attach both a Schedule I and a Schedule H to the same Form 5500.
Part I	All plans required to complete Schedule I.	Enter all required plan assets and liabilities information (line 1), income, expenses and transfers for this plan year information (line 2), and specific assets information (line 3) accurately. Refer to the instructions for line item definitions. Correct procedures for certain line items are described below. Do not mark through any line item(s) and insert your own description. Round off all amounts to the nearest dollar. <b>DO NOT WRITE "THOUSANDS OF DOLLARS" AT THE TOP OF ANY PAGE.</b>
1a	Small pension and welfare plans.	Enter beginning and end of year total assets. (If zero, enter "0".)
1b	Small pension and welfare plans.	Enter beginning and end of year total liabilities. (If zero, enter "0".)
1c	Small pension and welfare plans.	Subtract line 1b from line 1a and enter result. (If zero, enter "0".)
2a	Small pension and welfare plans.	Enter contributions received or receivable. Negative entries are not permitted and may generate correspondence.
2d	Small pension and welfare plans.	Enter total plan income (add all contributions - 2a(1), 2a(2) and 2a(3); noncash contributions - 2b; and other income - 2c; and enter the result).
2e	Small pension and welfare plans with benefit payments or payments to provide benefits.	Enter plan benefits paid, including direct rollovers. Do not include amounts entered on lines 2f and 2g. Negative entries are not permitted and may generate correspondence.

# GUIDELINES FOR COMPLETING SCHEDULE I (continued)

Line Item	Who Must Complete	How To Complete
2f	Small pension plans with corrective distributions.	Enter the amount.
2g	Small pension plans with certain deemed distributions of participant loans.	Enter the amount.
2i	Small pension and welfare plans with expenses.	Add 2e, 2f, 2g and 2h and enter total expenses in line 2i, column (b).
2j	Small pension and welfare plans with income and/or expenses.	Subtract line 2i from 2d and enter the plan net income (loss). Enter a negative "-" sign before a negative number.
2k	Small pension and welfare plans with income and/or expenses.	Enter the net value of all assets transferred to and from the plan during the plan year.
3a – 3g	Small pension and welfare plans.	Check yes or no and, if "yes," enter amount.
Part II	Small pension and welfare plans.	Enter all required information.
4a – 4i	Small pension and welfare plans.	Check yes or no and, if "yes," enter amount.
4j	Small pension and welfare plans.	Check yes or no.
4k	Small pension and welfare plans.	Check yes or no and, if "no," attach required information.
5a	Small pension and welfare plans.	Check yes or no and, if "yes," enter amount.
5b(1), 5b(2) and 5b(3)	Small pension and welfare plans.	Complete, as applicable.

## NOTES:

(1) Correspondence may occur if the financial consistency check applied to Schedule I determines that the "end-of-year" assets from the prior year's report do not match the "beginning-of-year" assets reported on this year's report. If any information is entered on Schedule I, Form 5500, line 8a and/or 8b, MUST be completed.

(2) Line 4k was added in 2001.

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# **GENERAL GUIDELINES**

## **FOR COMPLETING OTHER FORM 5500 SCHEDULES**

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# Guidelines for Completing Other Form 5500 Schedules

The following schedules are generally filed to comply with the Internal Revenue Code or Title IV of ERISA. Contact the IRS for additional information.

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Schedule	Who Must Complete	How To Complete
SCHEDULE B (ACTUARIAL INFORMATION)	Pension plans required to check Form 5500, line 10a(3), or required to attach Schedule B to Form 5500-EZ. This includes defined benefit pension plans subject to minimum funding standards and certain money purchase defined contribution plans required to complete Schedule B, lines 3, 9 and 10, in accordance with the instructions for Schedule R, line 5.	The plan year information and lines A through D must be the same (plan name may be abbreviated) as provided on the Form 5500 or 5500-EZ to which Schedule B is attached. Be certain to properly label any attachments. See the instructions for Schedule B. Enrolled actuary's signature required unless filed for money purchase defined contribution plan. Contact IRS for additional information.
SCHEDULE E (ESOP ANNUAL INFORMATION)	Plans with Employee Stock Ownership Pension benefits required to check Form 5500, line 10a(4), or required to attach Schedule E to Form 5500-EZ.	The plan year information and lines A through D must be the same (plan name may be abbreviated) as provided on the Form 5500 or 5500-EZ to which Schedule E is attached. Be certain to properly label any attachments. See the instructions for Schedule E. Contact IRS for additional information.
SCHEDULE F (FRINGE BENEFIT PLAN ANNUAL INFORMATION RETURN)	Fringe benefit plans required to check Form 5500, line 10c. The requirement to file a fringe benefit plan annual information return has been suspended by IRS Notice 2002-24 until IRS publishes further guidance.	Form 5500 and Schedule F need not be filed for a fringe benefit plan until IRS publishes further guidance. Contact IRS for additional information.

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# Guidelines for Completing Other Form 5500 Schedules

The following schedules are generally filed to comply with the Internal Revenue Code or Title IV of ERISA. Contact the IRS for additional information.

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Schedule	Who Must Complete	How To Complete
<b>SCHEDULE P (ANNUAL RETURN OF FIDUCIARY OF EMPLOYEE BENEFIT TRUST)</b>	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). This schedule may be used 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.	Enter trust year information. The fiduciary (trustee or custodian) must sign this schedule. If there is more than one fiduciary, the fiduciary authorized by the others may sign. Attach to Form 5500 or 5500-EZ, as appropriate. If attached to Form 5500, check and enter the correct number on line 10b(7) of the Form 5500. See the instructions for Schedule P. Contact IRS for additional information.
<b>SCHEDULE R (RETIREMENT PLAN INFORMATION)</b>	Large and small pension plans required to check Form 5500, line 10a(1). These include pension plans subject to the minimum funding standards and all other pension plans that distributed benefits during the year, except plans entitled to "limited pension plan reporting" (certain 403(b)(1), 403(b)(7) and IRA plans).	The plan year information and lines A through D must be the same (plan name may be abbreviated) as provided on the Form 5500 to which Schedule R is attached. See the instructions for Schedule R. Contact IRS for additional information.



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# Guidelines for Completing Other Form 5500 Schedules

The following schedules are generally filed to comply with the Internal Revenue Code or Title IV of ERISA. Contact the IRS for additional information.

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Schedule	Who Must Complete	How To Complete
SCHEDULE SSA (ANNUAL REGISTRATION STATEMENT IDENTIFYING SEPARATED PARTICIPANTS WITH DEFERRED VESTED BENEFITS)	Large and small pension plans required to check Form 5500, line 10a(5).	The plan year information and lines A through D must be the same as provided on the Form 5500 to which Schedule SSA is attached. Note: Government, church or other plans that elect to voluntarily file the Schedule SSA are not required to attach their Schedule SSA to a Form 5500, but <b>MUST</b> check the appropriate box on the schedule. See the instructions for Schedule SSA. Contact IRS for additional information. Also see Form 5500, line 7i.
SCHEDULE T (QUALIFIED PENSION PLAN COVERAGE INFORMATION)	Large and small pension plans required to check and enter the correct information on Form 5500, line 10a(2).	The plan year information and lines A through D must be the same (plan name may be abbreviated) as provided on the Form 5500 to which Schedule T is attached. See the instructions for Schedule T. Contact IRS for additional information.

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