## SCHEDULE I (Form 5500)

Department of the Treasury
Internal Revenue Service
Department of Labor

Department of Labor
Employee Benefits Security 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

2008

This Form is Open to Public Inspection.

For the calendar plan year 2008 or fiscal plan year beginning		and end	ling MM/5	D/YYYY
A Name of plan			B Three-digit plan number	•
C Plan sponsor's name as shown on lin	e 2a of Form 5500		D Employer Identif	fication Number
Complete Schedule I if the plan covered for are filing as a small plan under the 80-120	ewer than 100 participants as of the participant rule (see instructions).	ne beginning of the pl Complete Schedule H	an year. You may also com if reporting as a large plan	plete Schedule I if you or DFE.
Part I Small Plan Financial I	nformation	=		
Report below the current value of assets a value of plan assets held in more than or year to pay a specific dollar benefit at a fund(s) and any payments/receipts to/from	ne trust. Do not enter the value o future date. Include all income an	f the portion of an ins d expenses of the pla	surance contract that guara an including any trust(s) or	intees during this plan
1 Plan Assets and Liabilities:	(a) Beginning of Year	7	(b) End of Ye	ear
a Total plan assets		00		
<b>b</b> Total plan liabilities				
c Net plan assets (subtract line 1b from line 1a)				
2 Income, Expenses, and Transfers for	or this Plan Year:	(a) Amount		
a Contributions received or receivable     (1) Employers				
(2) Participants				
(3) Others (including rollovers)	·			
<b>b</b> Noncash contributions				
c Other income				
			(b) Total	
d Total income (add lines 2a(1), 2a(2),	2a(3), 2b, and 2c)			
For Paperwork Reduction Act Notice and (	OMB Control Numbers, see the ins	tructions for Form 55	00. Cat. No. 24414Y Sche	dule I (Form 5500) 2008

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			(a) Amo	unt		
2e	Benefits paid (including direct rollovers)					<b>•</b>
f	Corrective distributions (see instructions)					
g	Certain deemed distributions of participant loans (see instructions)			.00	2	
h	Other expenses			(b) To	otal	
i	Total expenses (add lines 2e, 2f, 2g, and 2h)					
j	Net income (loss) (subtract line 2i from line 2d)					
k	Transfers to (from) the plan (see instructions)					
3	Specific Assets: If the plan held assets at any time during the plan value of any assets remaining in the plan as of the end of the plan y the assets of more than one plan on a line-by-line basis unless the transfer of the plan of the	ear. All	ocate the v	alue of the plan's interest in a	commingled trust	containing
		Yes	No	Amou	ınt	
а	Partnership/joint venture interests		137			
b	Employer real property					
С	Real estate (other than employer real property)					
d	Employer securities					
е	Participant loans					
f	Loans (other than to participants)					
g	Tangible personal property					
<u> </u>	Towns the Posts Plans					
Pa	art II Transactions During Plan Year					
4	During the plan year:	Yes	No	Amou	ınt	
а	Did the employer fail to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? (See instructions					
b	and DOL's Voluntary Fiduciary Correction Program.)					
	plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by the participant's account balance					



**c** Were any leases to which the plan was a party in default or classified during the year as uncollectible? ......

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		Yes	No	Amount	
4d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a.)				
е	Was the plan covered by a fidelity bond?				
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?				
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?				
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?				
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?		<b>45</b>		
j	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?				
k	Are you claiming a waiver of the annual examination and report of an independent qualified public accountant (IQPA) under 29 CFR 2520.104-46? If no, attach an IQPA's report or 2520.104-50 statement. (See instructions on waiver eligibility and conditions.)				
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	
5a 5b	plan year or any prior plan year? If yes, enter the amount of any	n this pl	lan to another plan(s)		
	plan year or any prior plan year? If yes, enter the amount of any plan assets that reverted to the employer this year	n this pl	lan to another plan(s)		
	plan year or any prior plan year? If yes, enter the amount of any plan assets that reverted to the employer this year	n this pl	lan to another plan(s)		
	plan year or any prior plan year? If yes, enter the amount of any plan assets that reverted to the employer this year	n this pl	lan to another plan(s)		
	plan year or any prior plan year? If yes, enter the amount of any plan assets that reverted to the employer this year  If during this plan year, any assets or liabilities were transferred from identify the plan(s) to which assets or liabilities were transferred. (Set 5b(1) Name of plan	n this pl	lan to another plan(s)	,	
	plan year or any prior plan year? If yes, enter the amount of any plan assets that reverted to the employer this year	n this pl	lan to another plan(s) uctions.)	,	
	plan year or any prior plan year? If yes, enter the amount of any plan assets that reverted to the employer this year	n this pl	lan to another plan(s) uctions.)	) PN	
	plan year or any prior plan year? If yes, enter the amount of any plan assets that reverted to the employer this year	n this pl	lan to another plan(s) uctions.)  5b(3	) PN	

