U.S. DEPARTMENT OF COMMERCE Economics and Statistics Administration U.S. CENSUS BUREAU

FORM F-12(S) (2007) (10-24-2007)

2007 Census of Governments Supplemental Survey of Sta	ate
Administered Public-Employee Retirement Systems	

OMB No. 0607-0585: Approval Expires 06/30/2008

In correspondence pertaining to this report, please refer to the ID printed above your address.

RETURN TO: U.S. Census Bureau 1201 East 10th Street Jeffersonville, In 47132-0001	
If you have any questions please call 1-888-529-1963 weekdays, 8:00 a.m. to 5:30 p.m. EST.	
Questions can also be e-mailed to: govs.retire@census.gov	Diagon correct onu orrero in nome, address, er 7/0, Code
	Please correct any errors in name, address, or ZIP Code.
You may respond to this	INTERNET RESPONSE

You will only need your User ID to access the Internet form. Your User ID is the first 14 digits of the 18 digit ID located on the top line of the address section above.

GENERAL INSTRUCTIONS

Before filling out this form, please read carefully each part and all related definitions and instructions. Note especially:

- 1. Report for Defined Contribution and Postemployment Healthcare plans only.
- 2. Report corporate stocks and bonds at market value, and adhere to Governmental Accounting Standards Board (GASB) guidelines when reporting gains and losses on investments.
- 3. Report figures relating to all accounts and reserves of your system, including amounts for retirement, disability, survivors, and other benefits, as well as any amounts for administration of the system. Report in whole dollars. Exclude transfers between reserves of the system, and also any investment transactions relating to loans to system members.
- 4. Do not delay reporting to await finally audited figures, if substantially accurate figures can be supplied on a preliminary basis.
- 5. Use a black or blue ball point pen.

RESPONDENT INFORMATION:

Name of person completing report - Please print	Title of person completing report - Please	print							
Area Code Telephone Number Extension	E-mail Address - <i>Please print</i>								
Part 1 PLAN INFORMATION FOR DEFINED CONTRIBUTION PLANS									
A. Does your system offer a defined contribution If not, skip to Part 5.	n plan?		Yes		No				
B. Are new employees covered under this pensi	on plan?		Yes		No				
C. List all defined contribution plans that your s Report summary data combining all defined o	ystem offers below. contribution plans.								
Please continue on the next nage									

continue on the next page

P	art	2	MEMBERSHIP AND B	ENEFITS FOR DEFINED CON	NTRIB	U	TION PLANS	
to	that	t perm	t the figures requested beli itted by your records. If de I mark it with an asterisk (*	ow, as of the last month of your f tailed figures are not available for).	iscal yo an iter	ear m, ∣	or the month n please enter an	earest
			RS OF YOUR RETIREMENT beneficiaries.	SYSTEM -				Number of Participants
	1.	AC or e	TIVE MEMBERS - Current co employees in non-contributory	ontributors in contributory systems,				
	2.	exte	ended leave without pay havi	employees and employees on militang retained retirement credits, but n ayments.	ot curr	ent	ly	
Ρ	art	3	RECEIPTS/PAYMENTS	S FOR DEFINED CONTRIBUT	TION I	PL	ANS	
Α.	RE Exc	CEIPT:	S DURING FISCAL YEAR - mounts received from repart	Report receipts for your fiscal year. ayment of loans made to members	s.			
		Total a	DYEE CONTRIBUTIONS - mounts contributed by all me alaries for financing benefits.	ember employees or withheld from			Employee Cor	ntributions
		inclu	uding employees of state coll	vees of the state government, eges and other state institutions	.X02DC	\$.00
		b. Loc	al employees - From employees	yees of the counties, cities, cal government agencies	.X01DC	\$.00
		receive	DYER (GOVERNMENT) CON ad from state and local govern , including any taxes credited	TRIBUTIONS - Total amounts mments for financial support of your d directly to the system.				
		a. Stat	te government contribution e colleges and other state ins	s - From state government, includin stitutions and agencies.	g		Government Co	
		1. \$	State contributions to own sy	stem on behalf of state employees.	. Z99DC	\$.00
		2. 🤅	State contributions to own sy	stem on behalf of local employees.	. V87DC	\$.00
		3.	Total State Contributions -	Sum of items 2a1 and 2a2	. X06DC	\$.00
		b. Loc sch	al government contribution	ns - From counties, cities, local publi nent agencies	iC . X05DC	\$.00
		earning	s on investments. Exclude a	nterest, dividends, rents, and other ny recorded profits or recorded nd report in Section B below.			Investment and Other F	Receipts
		a. Rer	tals from the state governme	nt	. Z98DC	\$.00
		b. Inte	rest Earnings		. Z71DC	\$.00
		c. Divi	dend Earnings		. Z72DC	\$.00
		d. Oth Spe	er Investment Earnings		Z73DC	\$.00
		e. Tot	al Earnings on Investments	s - Sum of items 3a through 3d	. X08DC	\$.00
		- · ·	R RECEIPTS - gifts or donations, and			\$.00
		the like	gifts or donations, and e. Specify		Z95DC	Ψ		
_							Net Gains (Losses)
В.				NTS IN MARKET/FAIR VALUE - ains (losses)	Z96DC . Z91DC	\$.00
C.	PA pur	YMEN chase	IS DURING FISCAL YEAR - of investments and for loans	• Exclude amounts paid out for made to members.			2	
				mployees, former employees, or their utions made by employees during the		\$	Payme	
				erest on such amounts	. X12DC			.00
	2.		IISTRATIVE EXPENSES - In	clude investment fees	. Z93DC	\$.00
	3.	OTHER	R PAYMENTS - Specify		Z90DC	\$.00
				Please continue on the next page	<u>_</u>			

Pa	ırt 4	HOLDINGS AND INVESTMENTS FOR DEFINED CONTRIBUTION PLANS	Cash and Short-term Investments
Α.	CAS	SH AND SHORT-TERM INVESTMENTS	t
	1.	CASH ON HAND AND DEMAND DEPOSITS	\$
	2.	TIME OR SAVINGS DEPOSITS - Include certificates of deposit Z87DC	\$.00
	3.	ALL OTHER SHORT-TERM INVESTMENTS - Include securities in repurchase agreements, commercial and finance company paper and bankers acceptances, and miscellaneous money market funds	\$.00
	4.	TOTAL CASH AND SHORT-TERM INVESTMENTS - Sum of items A1 through A3.	\$.00
В.	FED	DERAL GOVERNMENT SECURITIES	Federal Government Securities
	1.	FEDERAL TREASURY SECURITIES - Obligations of U.S. Treasury (including short-term notes) and Federal Financing Bank	\$.00
	2.	FEDERAL AGENCY SECURITIES - Bonds and mortgage-backed securities (where applicable) issued by CCC, Export-Import Bank, FHA, GNMA, Postal Service, and TVA. Report directly held mortgages in Section E belowx33Dc	\$.00
	3.	TOTAL FEDERAL GOVERNMENT SECURITIES - Sum of items B1 and B2	\$.00
C.	COI	RPORATE BONDS	Corporate Bonds
	1.	FEDERALLY-SPONSORED AGENCIES - Bonds and mortgage-backed securities (where applicable) issued by FHLB, FHLMC, FNMA, Farm credit banks, and SLMAz _{62DC}	\$ 00
	2.	CORPORATE BONDS, OTHER - Include debentures, convertible bonds, and railroad equipment certificates	\$.00
	3.	TOTAL CORPORATE BONDS - Sum of items C1 and C2	\$.00
			Corporate Stocks
D.	COI	RPORATE STOCKS -	\$.00
	Incl	ude common and preferred stocks, and warrantszr8DC	\$.00
	Incl	ude common and preferred stocks, and warrants	Mortgages Held Directly
E.	MO to b	ude common and preferred stocks, and warrants	Mortgages Held Directly
E. F.	MO to b to b	RTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, be reported at B2, C1, or C2; also exclude directly held real property	Mortgages Held Directly
	MO to b to b	RTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, be reported at B2, C1, or C2; also exclude directly held real property be reported at item G1	Mortgages Held Directly
	MO to b to b	PRTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, be reported at B2, C1, or C2; also exclude directly held real property be reported at item G1	Mortgages Held Directly
	MO to b to b OTH 1.	RTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, be reported at B2, C1, or C2; also exclude directly held real property be reported at item G1	Mortgages Held Directly \$.00 Other Securities .00 \$.00 \$.00
	MO to b to b OTH 1.	RTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, be reported at B2, C1, or C2; also exclude directly held real property be reported at item G1	Mortgages Held Directly \$.00 Other Securities .00 \$.00 \$.00
	MO to b to b OTH 1. 2. 3.	RTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, be reported at B2, C1, or C2; also exclude directly held real property be reported at item G1	Mortgages Held Directly \$.00 Other Securities .00 \$.00 \$.00
	MO to b to b OTH 1. 2. 3.	RTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, be reported at B2, C1, or C2; also exclude directly held real property be reported at item G1	Mortgages Held Directly \$.00 Other Securities \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00
	MO to b to b OTH 1. 2. 3. 4. 5.	RTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, be reported at B2, C1, or C2; also exclude directly held real property be reported at item G1	Mortgages Held Directly \$.00 Other Securities \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00
F.	MO to b to b OTH 1. 2. 3. 4. 5.	RTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, be reported at B2, C1, or C2; also exclude directly held real property be reported at item G1	Mortgages Held Directly \$.00 Other Securities .00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00
F.	MO to b to b OTH 1. 2. 3. 4. 5. OTH	RTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, be reported at B2, C1, or C2; also exclude directly held real property be reported at item G1	Mortgages Held Directly \$.00 Other Securities .00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00
F.	MO to b to b OTH 1. 2. 3. 4. 5. OTH 1.	RTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, be reported at B2, C1, or C2; also exclude directly held real property be reported at item G1	Mortgages Held Directly \$.00 Other Securities .00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00
F.	MO to b to b OTH 1. 2. 3. 4. 5. OTH 1.	RTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, be reported at B2, C1, or C2; also exclude directly held real property be reported at item G1xazdc HER SECURITIES INVESTMENTS HELD IN TRUST BY OTHER AGENCIES - Include funds administered by private agencies, guaranteed investment accounts, and your share of funds in governmental investment accounts	Mortgages Held Directly \$.00 Other Securities .00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00
F.	MO to b to b OTH 1. 2. 3. 4. 5. OTH 1. 2.	RTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, be reported at B2, C1, or C2; also exclude directly held real property be reported at item G1	Mortgages Held Directly \$.00 Other Securities .00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00
F.	MO to b to b OTH 1. 2. 3. 4. 5. OTH 1. 2. 3. 3.	RTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, be reported at B2, C1, or C2; also exclude directly held real property be reported at item G1	Mortgages Held Directly \$.00 Other Securities .00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00 \$.00

Pa	art 5	PLAN INFORMATION FOR POSTEMPLOYMENT HEALTHCA	RE	PLANS		
A.		es your system offer a postemployment healthcare plan? ot, skip to Part 9.		Yes		No
В.	Are	new employees covered under this pension plan?		Yes		No
C.	List Rep	all postemployment healthcare plans that your system offers below. Fort summary data combining all postemployment healthcare plans.				
Pa	art 6	MEMBERSHIP AND BENEFITS FOR POSTEMPLOYMENT HE	EAL	THCARE	E PL	ANS
Ple tha	ase r t perr	eport the figures requested below, as of the last month of your fiscal year o mitted by your records. If detailed figures are not available for an item, pleas	r the	e month ne	eares	t to
Ple tha	ase ro t perr rk it v MEN	eport the figures requested below, as of the last month of your fiscal year o	r the	e month ne	eares	t to e and
Ple tha	ase ro t perr rk it v MEN	eport the figures requested below, as of the last month of your fiscal year o mitted by your records. If detailed figures are not available for an item, pleas with an asterisk (*). MBERS OF YOUR RETIREMENT SYSTEM -	r the	e month ne	eares timate	t to
Ple tha	ase ro t perr rk it v MEN Exc	eport the figures requested below, as of the last month of your fiscal year o mitted by your records. If detailed figures are not available for an item, pleas with an asterisk (*). MBERS OF YOUR RETIREMENT SYSTEM - lude beneficiaries. ACTIVE MEMBERS - Current contributors in contributory systems,	r the	e month nonter an est	eares timate	t to e and nber of
Ple tha	ase ro t perr rk it v MEN Exc	eport the figures requested below, as of the last month of your fiscal year of mitted by your records. If detailed figures are not available for an item, pleas with an asterisk (*). MBERS OF YOUR RETIREMENT SYSTEM - lude beneficiaries. ACTIVE MEMBERS - Current contributors in contributory systems, or employees in non-contributory plans.	r the se ei	e month nonter an est	eares timate	t to e and nber of
Ple tha	ase ro t perr rk it v MEN Exc	 eport the figures requested below, as of the last month of your fiscal year of mitted by your records. If detailed figures are not available for an item, pleas with an asterisk (*). MBERS OF YOUR RETIREMENT SYSTEM - lude beneficiaries. ACTIVE MEMBERS - Current contributors in contributory systems, or employees in non-contributory plans. a. Members who are at least 65 years of age. 	r the se ei	e month nenter an est	eares timate	t to e and nber of
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Ple tha	ase ro t perr rk it v MEN Exc 1.	 eport the figures requested below, as of the last month of your fiscal year of mitted by your records. If detailed figures are not available for an item, pleas with an asterisk (*). MBERS OF YOUR RETIREMENT SYSTEM - lude beneficiaries. ACTIVE MEMBERS - Current contributors in contributory systems, or employees in non-contributory plans. a. Members who are at least 65 years of age. b. Members who are under the age of 65. c. Total active members - Sum of items 1a and 1b INACTIVE MEMBERS - Former employees and employees on military or other 	r the se ei	e month nenter an est	eares timate	t to e and nber of
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Ple tha	ase ro t perr rk it v MEN Exc 1.	 eport the figures requested below, as of the last month of your fiscal year of mitted by your records. If detailed figures are not available for an item, pleas with an asterisk (*). MBERS OF YOUR RETIREMENT SYSTEM - lude beneficiaries. ACTIVE MEMBERS - Current contributors in contributory systems, or employees in non-contributory plans. a. Members who are at least 65 years of age. b. Members who are under the age of 65. c. Total active members - Sum of items 1a and 1b INACTIVE MEMBERS - Former employees and employees on military or other extended leave without pay having retained retirement credits, but not currently receiving retirement benefit payments. a. Inactive members who are at least 65 years of age. b. Inactive members who are under the age of 65. 		e month ne nter an est z20HC [z21HC [z01HC [z22HC [eares timate	t to e and nber of
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Ple tha	ase ro t perr rk it v MEN Exc 1.	 eport the figures requested below, as of the last month of your fiscal year of mitted by your records. If detailed figures are not available for an item, pleas with an asterisk (*). MBERS OF YOUR RETIREMENT SYSTEM - lude beneficiaries. ACTIVE MEMBERS - Current contributors in contributory systems, or employees in non-contributory plans. a. Members who are at least 65 years of age. b. Members who are under the age of 65. c. Total active members - Sum of items 1a and 1b INACTIVE MEMBERS - Former employees and employees on military or other extended leave without pay having retained retirement credits, but not currently receiving retirement benefit payments. a. Inactive members who are at least 65 years of age. b. Inactive members who are under the age of 65. c. Total inactive members - Current benefit payments. 		e month ne nter an est z20HC [z21HC [z01HC [z22HC [eares timate	t to e and nber of

Ρ	art	7	RECEIPTS/PAYMENT	S FOR POSTEMPLOYMENT	HEAL	TH	CARE PLANS	
A. RECEIPTS DURING FISCAL YEAR - Report receipts for your fiscal year. Exclude amounts received from repayment of loans made to members.								
	1.	Total a	DYEE CONTRIBUTIONS - mounts contributed by all m alaries for financing benefits	ember employees or withheld from			Employee Contributions	
		a. Sta	te employees - From emplo uding employees of state co	oyees of the state government, Illeges and other state institutions	. X02HC	\$		00
				oyees of the counties, cities, local government agencies	. X01HC	\$		00
	2.	receive	OYER (GOVERNMENT) CC ed from state and local gove , including any taxes credite	NTRIBUTIONS - Total amounts rnments for financial support of your ad directly to the system.				
		a. Sta stat	te government contribution e colleges and other state in	ns - From state government, includin nstitutions and agencies.	g		Government Contributions	
			Ũ	ystem on behalf of state employees.	. Z99HC	\$).	00
		2.	State contributions to own s	ystem on behalf of local employees.	. V87HC	\$		00
		3.	Total State Contributions	- Sum of items 2a1 and 2a2	. X06HC	\$).	00
		b. Loc sch	cal government contribution ools, and other local govern	ons - From counties, cities, local publ	іс . хо5нс	\$.(00
	3.	earning	gs on investments. Exclude	Interest, dividends, rents, and other any recorded profits or recorded and report in Section B below.			Investment Earnings and Other Receipts	
				ent.	. Z98HC	\$		00
						\$		00
			Ŭ			\$.(00
			dend Earnings		. Z72HC			
			er investment ⊏arnings ecify		Z73HC	\$		00
		e. Tot	al Earnings on Investment	t s - Sum of items 3a through 3d	. X08HC	\$		00
	4.		R RECEIPTS -		1			
		Private the like	gifts or donations, and B. Specify		Z95HC	\$		00
							Net Gains (Losses)	
В.				ENTS IN MARKET/FAIR VALUE - gains (losses)	Z96HC	\$).	00
~					. 291HC			
С.	pu	rchase	of investments and for loans	- Exclude amounts paid out for s made to members.			Payments	_
						\$		00
	1.	HEAL	THCARE PREMIUMS TO IN	ISURANCE CARRIERS	. Z94HC			_
	2.	CLAIM	IS PAID		. Z95HC	\$		00
	3.		IISTRATIVE EXPENSES - I	nclude investment fees	. Z93HC	\$		00
	4.	OTHE	R PAYMENTS - Specify		Z90HC	\$		00
				Discos				
				Please continue on the next page	;			

Pa	art 8	HOLDINGS AND INVESTMENTS FOR POSTEMPLOYMENT HEALTHCARE PLANS		Cash and Short-term Investments
Α.		SH AND SHORT-TERM INVESTMENTS	[\$.00
	1.	CASH ON HAND AND DEMAND DEPOSITS	.288HC (\$.00
	2.	TIME OR SAVINGS DEPOSITS - Include certificates of deposit	.Z87HC	φ
	3.	ALL OTHER SHORT-TERM INVESTMENTS - Include securities in repurchase agreements, commercial and finance company paper and bankers acceptances, and miscellaneous money market funds	. Z68HC	\$.00
	4.	TOTAL CASH AND SHORT-TERM INVESTMENTS - Sum of items A1 through A3.	. X21HC	\$.00
в.	FED	ERAL GOVERNMENT SECURITIES	[Federal Government Securities
	1.	FEDERAL TREASURY SECURITIES - Obligations of U.S. Treasury (including short-term notes) and Federal Financing Bank	. Z89HC	\$.00
	2.	FEDERAL AGENCY SECURITIES - Bonds and mortgage-backed securities (where applicable) issued by CCC, Export-Import Bank, FHA, GNMA, Postal Service, and TVA. Report directly held mortgages in Section E below	. хззнс	\$.00
	3.	TOTAL FEDERAL GOVERNMENT SECURITIES - Sum of items B1 and B2	. хзонс	\$.00
C.	COF	RPORATE BONDS	ĺ	Corporate Bonds
	1.	FEDERALLY-SPONSORED AGENCIES - Bonds and mortgage-backed securities (where applicable) issued by FHLB, FHLMC, FNMA, Farm credit banks, and SLMA	. Z62HC	\$.00
	2.	CORPORATE BONDS, OTHER - Include debentures, convertible bonds, and railroad equipment certificates	. Z63HC	\$.00
	3.	TOTAL CORPORATE BONDS - Sum of items C1 and C2	. Z77HC	\$.00
			[Corporate Stocks
D.	COF Inclu	PORATE STOCKS - ude common and preferred stocks, and warrants	. Z78HC	\$.00
			[Mortgages Held Directly
E.	to be	RTGAGES HELD DIRECTLY - Exclude mortgage-backed securities, e reported at B2, C1, or C2; also exclude directly held real property e reported at item G1	. X42HC	\$.00
F.	OTH	IER SECURITIES		
	1.	INVESTMENTS HELD IN TRUST BY OTHER AGENCIES - Include funds administered by private agencies, guaranteed investment accounts, and your share of funds in governmental investment accounts	. Z84HC	Other Securities \$.00
	2.	STATE AND LOCAL GOVERNMENT SECURITIES	.X35HC	\$.00
	3.	FOREIGN AND INTERNATIONAL SECURITIES - Include corporate equities and corporate stocks	. Z70HC	\$.00
	4.	OTHER SECURITIES - Include shares held in mutual funds, conditional sales contracts, direct loans,	ſ	
		loans to members, etc. Specify	Z83HC	\$.00
	5.	TOTAL OTHER SECURITIES - Sum of items F1 through F4	. X44HC	\$.00
G.	OTH	IER INVESTMENTS	[Other Investments
	1.	REAL PROPERTY - Report only directly held property; report property held in investment trusts and in pooled or partnership agreements at G2	d . _{X46HC}	\$.00
	2.	OTHER INVESTMENTS - Include venture capital, partnerships, real estate investment trusts,		
		and leveraged buyouts. Specify	X47HC	\$.00
	3.	TOTAL OTHER INVESTMENTS - Sum of items G1 and G2	.Z82HC	\$.00
			[Heldinge and humanite
			l	Holdings and Investments
н.	TOT RET	AL CASH AND SECURITY HOLDINGS OF PUBLIC EMPLOYEE IREMENT SYSTEM - Sum of totals A through G Please continue on the next page	. z81HC	\$.00

Part 9	REMARKS

Thank you for your report. Please return to:

U.S. Census Bureau 1201 East 10th Street Jeffersonville, IN 47132-0001

Jeffersonville, IN 47132-0001 This form has been approved by the Office of Management and Budget (OMB) and has been given the number 0607-0585. Please note that we have displayed this number in the upper right hand corner of this form. Display of this number confirms that we have approval from OMB to conduct this survey. If this number were not displayed, we could not request your participation in this survey. Please note that this is a national form that applies to governments with wide differences in size of their service areas, the amount of population served, and the extent and complexity of their financial accounts. We estimate public reporting burden for this collection of information to vary from 1.5 to 8.0 hours per response, with an average of 2.0 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Paperwork Project 0607-0585, U.S. Census Bureau, 4600 Silver Hill Road, Room 3K138, Washington, D.C. 20233. You may e-mail comments to Paperwork@census.gov; use **"Paperwork Project 0607-0585"** as the subject.

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