

CUMULATIVE CHANGES

SCHEDULE D (Form 5500)

DFE/Participating Plan Information

Official Use Only

OMB No. 1210-0110

2008

This Form is Open to Public Inspection.

Department of the Treasury Internal Revenue Service

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

File as an attachment to Form 5500.

Department of Labor Employee Benefits Security Administration

For calendar plan year 2008 or fiscal plan year beginning

MM / DD / YYYY

and ending

MM / DD / YYYY

A Name of plan or DFE

B Three-digit plan number

C Plan or DFE sponsor's name as shown on line 2a of Form 5500

D Employer Identification Number

Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)

(a) Name of MTIA, CCT, PSA, or 103-12 IE

(b) Name of sponsor of entity listed in (a)

(c) EIN

PN

(d) Entity code

(e) Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

(a) Name of MTIA, CCT, PSA, or 103-12 IE

(b) Name of sponsor of entity listed in (a)

(c) EIN

PN

(d) Entity code

(e) Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500. Cat. No. 22774J Schedule D (Form 5500) 2008



(a) Name of MTIA, CCT, PSA, or 103-12 IE

(b) Name of sponsor of entity listed in (a)

(c) EIN - PN (d) Entity code (e) Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) .00

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(a) Name of MTIA, CCT, PSA, or 103-12 IE

(b) Name of sponsor of entity listed in (a)

(c) EIN - PN (d) Entity code (e) Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) .00

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Part II Information on Participating Plans (to be completed by DFEs)

(a) Plan name

(b) Name of plan sponsor

(c) EIN

PN

(a) Plan name

(b) Name of plan sponsor

(c) EIN

PN

(a) Plan name

(b) Name of plan sponsor

(c) EIN

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(c) EIN

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PN

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(a) Plan name

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(b) Name of plan sponsor

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(c) EIN

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PN

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