

CUMULATIVE CHANGES

SCHEDULE H (Form 5500)

Department of the Treasury Internal Revenue Service
Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation

Financial Information

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

MM / DD / YYYY

and ending

MM / DD / YYYY

A Name of plan

B Three-digit plan number

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

D Employer Identification Number

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Table with columns: Assets, (a) Beginning of Year, (b) End of Year. Rows include: a Total noninterest-bearing cash, b Receivables (less allowance for doubtful accounts), c General investments (Interest-bearing cash, U.S. Government securities, Corporate debt instruments, Corporate stocks, Partnership/joint venture interests).

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500. Cat. No. 24420C Schedule H (Form 5500) 2008



(a) Beginning of Year

(b) End of Year

1c (6) Real estate (other than employer real property)	00	00
(7) Loans (other than to participants) ...	00	00
(8) Participant loans.	00	00
(9) Value of interest in common/collective trusts ..	00	00
(10) Value of interest in pooled separate accounts	00	00
(11) Value of interest in master trust investment accounts	00	00
(12) Value of interest in 103-12 investment entities	00	00
(13) Value of interest in registered investment companies (e.g., mutual funds)	00	00
(14) Value of funds held in insurance company general account (unallocated contracts) .	00	00
(15) Other	00	00
d Employer-related investments:		
(1) Employer securities	00	00
(2) Employer real property	00	00
e Buildings and other property used in plan operation	00	00
f Total assets (add all amounts in lines 1a through 1e) ...	00	00
Liabilities		
g Benefit claims payable	00	00
h Operating payables	00	00
i Acquisition indebtedness	00	00
j Other liabilities	00	00
k Total liabilities (add all amounts in lines 1g through 1j)	00	00
Net Assets		
l Net assets (subtract line 1k from line 1f)	00	00

3RD PROOF

1 7 0 8 0 0 0 2 0 1



Part II Income and Expenses Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income

a Contributions:

(a) Amount

- (1) Received or receivable in cash from:
(A) Employers
(B) Participants
(C) Others (including rollovers)
(2) Noncash contributions

Grid for entering amounts for contributions (a)

(b) Total

(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2)

Grid for entering total contributions (b)

b Earnings on investments: (1) Interest:

- (A) Interest-bearing cash (including money market accounts and certificates of deposit)
(B) U.S. Government securities
(C) Corporate debt instruments
(D) Loans (other than to participants)
(E) Participant loans
(F) Other

Grid for entering interest earnings (b)

(G) Total interest. Add lines 2b(1)(A) through (F)

Grid for entering total interest (b)

(2) Dividends:

- (A) Preferred stock
(B) Common stock

Grid for entering dividends (b)

(C) Total dividends. Add lines 2b(2)(A) and (B)

Grid for entering total dividends (b)

(3) Rents

Grid for entering rents (b)

(4) Net gain (loss) on sale of assets:

- (A) Aggregate proceeds
(B) Aggregate carrying amount (see instructions)

Grid for entering net gain (loss) on sale of assets (b)

(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result

Grid for entering result of subtraction (b)

3RD PROOF

1 7 0 8 0 0 0 3 0 J



2b (5) Unrealized appreciation (depreciation) of assets:

(a) Amount

(A) Real estate 00

(B) Other 00

(b) Total

(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)** 00

(6) Net investment gain (loss) from common/collective trusts 00

(7) Net investment gain (loss) from pooled separate accounts 00

(8) Net investment gain (loss) from master trust investment accounts 00

(9) Net investment gain (loss) from 103-12 investment entities 00

(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) 00

c Other income 00

d Total income. Add all **income** amounts in column (b) and enter total 00

Expenses

e Benefit payment and payments to provide benefits:

(1) Directly to participants or beneficiaries, including direct rollovers 00

(2) To insurance carriers for the provision of benefits 00

(3) Other 00

(4) Total benefit payments. Add lines **2e(1)** through **(3)** 00

f Corrective distributions (see instructions) 00

g Certain deemed distributions of participant loans (see instructions) 00

h Interest expense 00

i Administrative expenses:

(1) Professional fees 00

(2) Contract administrator fees 00

(3) Investment advisory and management fees ... 00

(4) Other 00

(5) Total administrative expenses. Add lines **2i(1)** through **(4)** 00

j Total expenses. Add all **expense** amounts in column (b) and enter total 00

3RD PROOF

1 7 0 8 0 0 0 4 0 K



Yes No Amount

- 4 f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? Yes No .00
- 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? Yes No .00
- 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? Yes No .00
- i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.) Yes No .00
- j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.) Yes No .00
- k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? Yes No .00

5 a 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 year00

5 b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions).

5b(1) Name of plan

5b(2) EIN

5b(3) PN

5b(1) Name of plan

5b(2) EIN

5b(3) PN

5b(1) Name of plan

5b(2) EIN

5b(3) PN

5b(1) Name of plan

5b(2) EIN

5b(3) PN

