SCHEDULE I (Form 5500)

Department of the Treasury Internal Revenue Service

Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Department of Labor

For calendar plan year 2012 or fiscal plan year beginning

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.

and ending

OMB No. 1210-0110

2012

This Form is Open to Public Inspection

A Name of plan					Three-digit olan numb		•				
C Plan sponsor's name as shown on line 2a of Form 5500					D Employer Identification Number (EIN)						
	nplete Schedule I if the plan covered fewer than 100 participants as of II plan under the 80-120 participant rule (see instructions). Complete S						lete Sche	dule I if you are filing as a			
Pa	rt I Small Plan Financial Information										
ass ben	ort below the current value of assets and liabilities, income, expense the sets held in more than one trust. Do not enter the value of the portion efit at a future date. Include all income and expenses of the plan income carriers. Round off amounts to the nearest dollar.	of an in	surance contrac	t that g	uarantees	during th	is plan ye	ear to pay a specific dollar			
1	Plan Assets and Liabilities:		(a) Be	ginning	g of Year			(b) End of Year			
а	Total plan assets	. 1a									
b	Total plan liabilities	. 1b									
С	Net plan assets (subtract line 1b from line 1a)	1c									
2	Income, Expenses, and Transfers for this Plan Year:		(a) Amo	unt			(b) Total			
а	Contributions received or receivable:										
	(1) Employers	. 2a(1)									
	(2) Participants	. 2a(2)									
	(3) Others (including rollovers)	. 2a(3)									
b	Noncash contributions										
С	Other income										
d	Total income (add lines 2a(1), 2a(2), 2a(3), 2b, and 2c)	. 2d									
е	Benefits paid (including direct rollovers)	. 2e									
f	Corrective distributions (see instructions)										
g	Certain deemed distributions of participant loans (see instructions)	. 2g									
h	Administrative service providers (salaries, fees, and commissions)	. 2h									
i	Other expenses	. 2i									
j	Total expenses (add lines 2e, 2f, 2g, 2h, and 2i)	. 2j									
k	Net income (loss) (subtract line 2j from line 2d)	. 2k									
ı	Transfers to (from) the plan (see instructions)	. 2I									
3	Specific Assets: If the plan held assets at anytime during the plan year remaining in the plan as of the end of the plan year. Allocate the value o by-line basis unless the trust meets one of the specific exceptions descr	f the pla	n's interest in a co	ategorie ommingl	s, check "\ ed trust co	es" and e	enter the c ne assets	urrent value of any assets of more than one plan on a line-			
			r		Yes	No		Amount			
а	Partnership/joint venture interests			3a							
b	Employer real property			3b							
С	Real estate (other than employer real property)			3с							
d	Employer securities			3d							
е	Participant loans			3e							

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		1	Yes	No		Amount	
3f	Loans (other than to participants)	3f	163	140		Amount	
g	Tangible personal property	3g					
D:	art II Compliance Questions						
<u>' '</u>	During the plan year:		Yes	No		Amount	
а	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a	100			, and and	
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of plan year or classified during the year as uncollectible? Disregard participant loans secured by the participant's account balance.	4b					
С	Were any leases to which the plan was a party in default or classified during the year as uncollectible?	4c					
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a.)	4d					
е	Was the plan covered by a fidelity bond?	4e					
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f					
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?	4g					
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?	4h					
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?	4i					
j	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4j					
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.)	4k					
I	Has the plan failed to provide any benefit when due under the plan?	41					
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m					
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	4n					
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	Ye	es 🗌 N	lo A	mount:		
5b	If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identransferred. (See instructions.)	entify t	the plan	n(s) to w	hich assets	or liabilities we	ere
	5b(1) Name of plan(s)			5b(2)	EIN(s)	5b(3) PN(s)
Pa	t III Trust Information (optional)					1	
6a	Name of trust			6b Tru	ıst's EIN		