## Form **5330** (Rev. December 2013)

Department of the Treasury Internal Revenue Service

## **Return of Excise Taxes Related to Employee Benefit Plans**

(Under sections 4965, 4971, 4972, 4973(a)(3), 4975, 4976, 4977, 4978, 4979, 4979A, 4980, and 4980F of the Internal Revenue Code)

▶ Information about Form 5330 and its instructions is at www.irs.gov/form5330.

OMB No. 1545-0575

Filer	tax year beginning , and ending				,				
Α	Name of filer (see instructions)	B Filer's identifying number (Enter either the EIN or SSN, but not both. See instructions.)							
	Number, street, and room or suite no. (If a P.O. box or foreign address, see instructions.)	Emplo	oyer id	entifica	tion number (EIN	۷)			
	City or town, state or province, country, and ZIP or foreign postal code	Socia	Social security number (SSN)						
С	Name of plan	E Plan sponsor's EIN							
D	Name and address of plan sponsor	F Plan y	Plan year ending (MM/DD/YYYY)						
Н	If this is an <b>amended return,</b> check here	<b>G</b> Plan r	n number						
Pai	Taxes. You can only complete one section of Part I for each Form 5330 filed	(see i	nstru	ıctior	ıs).				
	ction A. Taxes that are reported by the last day of the 7th month after the end of the ta ar of the employer (or other person who must file the return)	ax	FOR IRS USE ONLY						
1	Section 4972 tax on nondeductible contributions to qualified plans (from Schedule	e A,							
	line 12)		161	1					
2	Section 4973(a)(3) tax on excess contributions to section 403(b)(7)(A) custodial accounts								
-	(from Schedule B, line 12)		164	2					
20	Section 4075(a) tay on prohibited transactions (from Schodule C. line 2)			20					
3a	Section 4975(a) tax on prohibited transactions (from Schedule C, line 3)	-	159	3a 3b					
b	Section 4975(b) tax on failure to correct profibiled transactions	•	224	SD					
4	Section 4976 tax on disqualified benefits for funded welfare plans	.	200	4					
5a	Section 4978 tax on ESOP dispositions			5a					
b	The tax on line 5a is a result of the application of: Sec. 664(g) Sec. 1042	209	5b						
D	The tax of fine 3a is a result of the application of. $\Box$ 3ec. 004(g)	H		30					
6	Section 4979A tax on certain prohibited allocations of qualified ESOP securities or owner	shin							
U	of synthetic equity		6						
		•	203	0					
7	Total Section A taxes. Add lines 1 through 6. Enter here and on Part II, line 17			7					
	ction B. Taxes that are reported by the last day of the 7th month after the end of the		over'		vear or 81/	months			
	er the last day of the plan year that ends within the filer's tax year	Cilibi	Oyeı	s lax	year or 6 72	1110111113			
	Section 4971(a) tax on failure to meet minimum funding standards (from Schedule D, line 2)		400	8a					
	Section 4971(b) tax for failure to correct minimum funding standards			8b					
	ocotion 407 (b) tax for failure to correct minimum randing standards		225						
9a	Section 4971(f)(1) tax on failure to pay liquidity shortfall (from Schedule E, line 4)		226	9a					
b			227	9b					
	ocotion 407 (i)(2) tax for failure to correct inquianty shortiali	•	221	35					
10a	Section 4971(g)(2) tax on failure to comply with a funding improvement or rehabilitation	plan							
	(see instructions)		450	10a					
b									
_	Section 4971(g)(4) tax on failure to adopt rehabilitation plan (from Schedule F, line 2d)	L	451	10b					
	ction B1. Tax that is reported by the last day of the 7th month after the end of the		452	10c	n which the	0.00000			
	ction <b>b</b> 1. Tax that is reported by the last day of the 7th month after the end of the ige benefits were paid to the employer's employees	caitil	uar y	rear I	ii willell tile	CAUCSS			
11	Section 4977 tax on excess fringe benefits (from Schedule G, line 4)		004	11					
• •	Section 4077 tax on excess image benefits (from sofiedule G, fille 4)	•	201	- 1 1					
12	Total Section B taxes. Add lines 8a through 11. Enter here and on Part II, line 17			12					
Section C. Tax that is reported by the last day of the 15th month after the end of the plan year									
13	Section 4979 tax on excess contributions to certain plans (from Schedule H, line 2). E								
	here and on Part II, line 17	<b>&gt;</b>	205	13					

Form 5330 (Rev. 12-2013) Page 2 Name of Filer: Filer's identifying number: Section D. Tax that is reported by the last day of the month following the month in which the reversion occurred Section 4980 tax on reversion of qualified plan assets to an employer (from Schedule I, Section E. Tax that is reported by the last day of the month following the month in which the failure occurred Section 4980F tax on failure to provide notice of significant reduction in future accruals Section F. Taxes reported on or before the 15th day of the 5th month following the close of the entity manager's taxable year during which the plan became a party to a prohibited tax shelter transaction Section 4965 tax on prohibited tax shelter transactions for entity managers (from Schedule 16 Part II Tax Due 17 Enter the amount from Part I, line 7, 12, 13, 14, 15, or 16 (whichever is applicable) . . . . 17 18 Enter amount of tax paid with Form 5558 or any other tax paid prior to filing this return . . . . 18 19 Tax due. Subtract line 18 from line 17. If the result is greater than zero, enter here, and attach check or money order payable to "United States Treasury." Write your name, identifying number, plan number, and "Form 5330, Section(s) " on your payment . . . . ▶ 19 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign Here Your Signature Telephone number Date Print/Type preparer's name Preparer's signature Date PTIN Check **Paid** self-employed **Preparer** Firm's name Firm's EIN ▶

**Use Only** 

Firm's address ▶

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Phone no.

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Multiply line 10 by 6%

Page 3 Name of Filer: Filer's identifying number: Schedule A. Tax on Nondeductible Employer Contributions to Qualified Employer Plans (Section 4972) Reported by the last day of the 7th month after the end of the tax year of the employer (or other person who must file the return) Total contributions for your tax year to your qualified employer plan (under section 401(a), 1 1 2 Amount allowable as a deduction under section 404 2 3 3 Enter amount of any prior year nondeductible contributions made for 4 5 Amount of any prior year nondeductible contributions for years beginning after 12/31/86 returned to you in this tax year for any prior tax year . . . 5 6 6 7 Amount of line 6 carried forward and deductible in this tax year . . . 7 8 Subtract line 7 from line 6 8 9 Tentative taxable excess contributions. Add lines 3 and 8 . . . . . . Nondeductible section 4972(c)(6) or (7) contributions exempt from excise tax . . . 10 10 11 11 12 Multiply line 11 by 10%. Enter here and on Part I, line 1 12 Schedule B. Tax on Excess Contributions to Section 403(b)(7)(A) Custodial Accounts (Section 4973(a)(3)) Reported by the last day of the 7th month after the end of the tax year of the employer (or other person who must file the return) 1 Total amount contributed for current year less rollovers (see instructions) . . . . . . . 1 Amount excludable from gross income under section 403(b) (see instructions) . . . . 2 2 Current year excess contributions. Subtract line 2 from line 1. If zero or less, enter -0- . . . 3 3 4 Prior year excess contributions not previously eliminated. If zero, go to line 8 . . . . . . 4 5 Contribution credit. If line 2 is more than line 1, enter the excess; otherwise, enter -0-. . . . 5 Total of all prior years' distributions out of the account included in your gross income under 6 section 72(e) and not previously used to reduce excess contributions . . . . . . . . . 6 7 Adjusted prior years' excess contributions. Subtract the total of lines 5 and 6 from line 4 7 8 8 9 9 10 10 Enter the value of your account as of the last day of the year . . . . .

Excess contributions tax. Enter the lesser of line 9 or line 11 here and on Part I, line 2 . . .

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Name of Fi		ited Transactions (Section 4975) (see instructions) Repor	Filer's identifyin	
		mployer (or other person who must file the return)	ted by the last day of	
	ne excise tax a res a	sult of a prohibited transaction that was (box "a" or box "b" <b>b</b> other than discrete (a lease or a loa	must be checked): in)	
2 Cor	nplete the table be	elow to disclose the prohibited transactions and figure the		ons)
(a) Transaction number	(b) Date of transaction (see instructions)	(c) Description of prohibited transaction	(d) Amount involved in prohibited transaction (see instructions)	(e) Initial tax on prohibited transaction (multiply each transaction in column (d) by the appropriate rate (see instructions))
<i>(i)</i>				
(ii)				
(iii)				
(iv)				
(v)				
(vi)				
(vii)				
(viii)				
(ix)				
(x)				
(xi)				
(xii)				

Name of Filer: Filer's identifying number:

Schedule C. Tax on Prohibited Transactions (Section 4975) Reported by the last day of the 7th month after the end of the tax year of the employer (or other person who must file the return) (continued)

Complete the table below, if applicable, of other participating disqualified persons and description of correction (see instructions). (b) Name and address of (a) Item no. (d) Date of (c) EIN or SSN Description of correction from line 2 disqualified person correction Schedule D. Tax on Failure to Meet Minimum Funding Standards (Section 4971(a)) Reported by the last day of the 7th month after the end of the employer's tax year or 81/2 months after the last day of the plan year that ends within the filer's tax year Aggregate unpaid required contributions (accumulated funding deficiency for multiemployer 

Multiply line 1 by 10% (5% for multiemployer plans). Enter here and on Part I, line 8a .

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Name of Filer: Filer's identifying number: Schedule E. Tax on Failure to Pay Liquidity Shortfall (Section 4971(f)(1)) Reported by the last day of the 7th month after the end of the employer's tax year or 81/2 months after the last day of the plan year that ends within the filer's tax year (e) Total (a) 1st Quarter (b) 2nd Quarter (c) 3rd Quarter Add cols. a-d for line 3 1 Amount of shortfall . . . . 1 2 2 Shortfall paid by the due date 3 Net shortfall amount . . . 3 Multiply line 3, column (e), by 10%. Enter here and on Part I, line 9a . . . . . . . . . Schedule F. Tax on Multiemployer Plans in Endangered or Critical Status (Section 4971(g)(3), 4971(g)(4)) Reported by the last day of the 7th month after the end of the employer's tax year or 81/2 months after the last day of the plan year that ends within the filer's tax year Section 4971(g)(3) tax on failure to meet requirements for plans in endangered or critical status . . . a Enter the amount of contributions necessary to meet the applicable benchmarks or requirements . 1a 1b c Enter the greater of line 1a or line 1b, here and on Part I, line 10b . . . . . . . . . . . . . . 1c Section 4971(g)(4) tax on failure to adopt rehabilitation plan . . . . . . . . . . . . . . . . . . Enter the amount of the excise tax on the accumulated funding deficiency under section 4971(a)(2) 2a Enter the number of days during the tax year which are included in the period beginning on the first day of the 240 day period and ending on the day the rehabilitation plan is adopted 2b 2c Enter the greater of line 2a or line 2c, here and on Part I, line 10c . . . . . . . . . . . . 2d Schedule G. Tax on Excess Fringe Benefits (Section 4977) Reported by the last day of the 7th month after the end of the calendar year in which the excess fringe benefits were paid to the employer's employees Did vou make an election to be taxed under section 4977? . . . . . . . . 2 If "Yes," enter the calendar year (YYYY) in which the excess fringe benefits were paid ▶ If line 1 is "Yes." enter the excess fringe benefits on this line (see instructions) . . . . . 3 Enter 30% of line 3 here and on Part I, line 11 . . . . . . . . . . . . . . . Schedule H. Tax on Excess Contributions to Certain Plans (Section 4979) Reported by the last day of the 15th month after the end of the plan year Enter the amount of an excess contribution under a cash or deferred arrangement that is part of a plan qualified under section 401(a), 403(a), 403(b), 408(k), or 501(c)(18) or excess aggregate contributions . 2 Schedule I. Tax on Reversion of Qualified Plan Assets to an Employer (Section 4980) Reported by the last day of the month following the month in which the reversion occurred 1 Date reversion occurred . . . . . . . . . . . . **b** Excise tax rate **2a** Employer reversion amount 3 Multiply line 2a by line 2b and enter the amount here and on Part I, line 14 . . . 4 Explain below why you qualify for a rate other than 50%: Schedule J. Tax on Failure to Provide Notice of Significant Reduction in Future Accruals (Section 4980F) Reported by the last day of the month following the month in which the failure occurred Enter the number of applicable individuals who were not provided ERISA section 204(h) notice ▶ Enter the effective date of the amendment . . . . . . MM DD YY 2 2 3 3 Enter the number of days in the noncompliance period ▶ 4 Enter the total number of failures to provide ERISA section 204(h) notice (see instructions) . 4 Multiply line 4 by \$100. Enter here and on Part I, line 15 . . . . . . . . . . . . . . . . . 5 5 6 Provide a brief description of the failure, and of the correction, if any Schedule K. Tax on Prohibited Tax Shelter Transactions (Section 4965) Reported on or before the 15th day of the 5th month following the close of the entity manager's tax year during which the plan became a party to a prohibited tax shelter transaction Enter the number of prohibited tax shelter transactions you caused the same plan to be a Multiply line 1 by \$20,000. Enter the result here and on Part I, line 16 . . . . . . . .

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