## Form **5330**

(Rev. April 2009)
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)

OMB No. 1545-0575

Filer	tax year beginning , and ending				,	
Α		В	iler's ide	entifyin	g number (see inst	ructions)
		E	Employer	identi	fication number (EII)	۷)
	Number, street, and room or suite no. (If a P.O. box or foreign address, see instructions)					
	01 1 170	5	Social se	curity i	number (SSN)	
	City or town, state, and ZIP code			-		
С	Name of plan	E	Plan spor	nsor's	EIN	
D	Name and address of plan sponsor	F	Plan year	endin	g (MM/DD/YYYY)	
Н	If this is an <b>amended return,</b> check here	G I	Plan num	ber		
Pai	Taxes. You can only complete one section of Part I for each Form 5330 fi	led	<u> </u>	nstru	ıctions).	
	ection A. Taxes that are reported by the last day of the 7th month after the end of ax year of the employer (or other person who must file the return)	the	FOR IRS USE ONLY			
1	Section 4972 tax on nondeductible contributions to qualified plans (from Schedule	Α,				
	line 12)		161	1		
2	Section 4973(a)(3) tax on excess contributions to section 403(b)(7)(A) custodial account	ts				
	(from Schedule B, line 12)		164	2		
				0-		
	Section 4975(a) tax on prohibited transactions (from Schedule C, line 3)		159	3a 3b		+
b	Section 4975(b) tax on failure to correct prohibited transactions		224	30		+
4	Section 4976 tax on disqualified benefits for funded welfare plans		200	4		<u> </u>
52	Section 4978 tax on ESOP dispositions		209	5a		
	Section 4978 tax on ESOP dispositions		200	5b		
	The tax on time on the direction of the appropriation on the cost of the					
6	Section 4979A tax on certain prohibited allocations of qualified ESOP securities		203	6		
7	Total Section A taxes. Add lines 1 through 6. Enter here and on Part II, line 17	<b></b>		7		
	ection B. Taxes that are reported by the last day of the 7th month after the end of nonths after the last day of the plan year that ends within the filer's tax year	the	emplo	oyer's	s tax year or 8	1/2
8a	Section 4971(a) tax on failure to meet minimum funding standards (from Schedule D, line 2)		163	8a		
	Section 4971(b) tax for failure to correct minimum funding standards		225	8b		
Qa	Section 4971(f)(1) tax on failure to pay liquidity shortfall (from Schedule E, line 4)		226	9a		
	Section 4971(f)(2) tax for failure to correct liquidity shortfall	•	227	9b		
-		•				
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)(3) tax on failure to meet requirements for plans in endangered or critic status (from Schedule F, line 1c)		454	10h		
C	Section 4971(g)(4) tax on failure to adopt rehabilitation plan (from Schedule F, line 2d)	•	451 452	10b 10c		+-
	ection B1. Tax that is reported by the last day of the 7th month after the end of the	e ca			r in which the	excess
	inge benefits were paid to the employer's employees	-			- 1-	
11	Section 4977 tax on excess fringe benefits (from Schedule G, line 4)		201	11		
12	Total Section B taxes. Add lines 8a through 11. Enter here and on Part II, line 17	<b>•</b>		12		
	ection C. Tax that is reported by the last day of the 15th month after the end of the		an yea	ır		
13	Section 4979 tax on excess contributions to certain plans (from Schedule H, line 2 Enter here and on Part II, line 17	<u>2</u> ). ▶	205	13		

Page 2 Form 5330 (Rev. 4-2009) Filer's identifying number: Name of Filer: 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, line 3). Enter here and on Part II, line 17 14 . . . . . . . . . . . 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 (from Schedule J, line 5). Enter here and on Part II, line 17 15 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 K, line 2). Enter here and on Part II, line 17 16 237 Part II Tax Due 17 Enter the amount from Part I, line 7, 12, 13, 14, 15, or 16 (whichever is applicable) 18 Enter amount of tax paid with Form 5558 or any other tax paid prior to filing this return . . . 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 Date Preparer's SSN or PTIN Preparer's **Paid** Check if signature self-employed \_\_\_ Preparer's Firm's name (or EIN

Phone no.

Form **5330** (Rev. 4-2009)

**Use Only** 

yours if self-employed), address, and ZIP code

Name of Filer: Filer's identifying number:

	ported by the last day of the 7th month after the end of the tax year of the employer (or oth return)	er pe	erson who must fil	le
1	Total contributions for your tax year to your qualified employer plan (under section 401(a), 403(a), 408(k), or 408(p))	1		
2	Amount allowable as a deduction under section 404	2		
3	Subtract line 2 from line 1	3		
	years beginning after 12/31/86			
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	Subtract line 5 from line 4			
7	Amount of line 6 carried forward and deductible in this tax year			
8	Subtract line 7 from line 6	8		
9	Tentative taxable excess contributions. Add lines 3 and 8	9		
10	Nondeductible section 4972(c)(6) or (7) contributions exempt from excise tax	10		
11	Taxable excess contributions. Subtract line 10 from line 9	11		
12	Multiply line 11 by 10%. Enter here and on Part I, line 1	12		
Sah				
Rep	redule B. Tax on Excess Contributions to Section 403(b)(7)(A) Custodial Accounts (Section 4 ported by the last day of the 7th month after the end of the tax year of the employer (or oth return)	973(a		le
Rep the	needule B. Tax on Excess Contributions to Section 403(b)(7)(A) Custodial Accounts (Section 4 ported by the last day of the 7th month after the end of the tax year of the employer (or oth return)	973(a		le
Rep	edule B. Tax on Excess Contributions to Section 403(b)(7)(A) Custodial Accounts (Section 4 ported by the last day of the 7th month after the end of the tax year of the employer (or oth	973(a		le
Rep the	needule B. Tax on Excess Contributions to Section 403(b)(7)(A) Custodial Accounts (Section 4 ported by the last day of the 7th month after the end of the tax year of the employer (or oth return)	973(a er pe		le
Rep the	dedule B. Tax on Excess Contributions to Section 403(b)(7)(A) Custodial Accounts (Section 4 borted by the last day of the 7th month after the end of the tax year of the employer (or oth return)  Total amount contributed for current year less rollovers (see instructions)	973(a er pe		le
Repthe	Total amount contributed for current year less rollovers (see instructions)  Amount excludable from gross income under section 403(b) (see instructions)	973(a er pe		le
Rep the 1 2 3	Total amount contributed for current year less rollovers (see instructions)  Amount excludable from gross income under section 403(b) (see instructions)  Current year excess contributions. Subtract line 2 from line 1. If zero or less, enter -0	973(a er pe		le
Rep the 1 2 3	dedule B. Tax on Excess Contributions to Section 403(b)(7)(A) Custodial Accounts (Section 40 borted by the last day of the 7th month after the end of the tax year of the employer (or oth return)  Total amount contributed for current year less rollovers (see instructions)	973(aer pe		le
Rep the	Total amount contributed for current year less rollovers (see instructions)  Amount excludable from gross income under section 403(b) (see instructions)  Current year excess contributions. Subtract line 2 from line 1. If zero or less, enter -0-  Prior year excess contributions not previously eliminated. If zero, go to line 8  Contribution credit. If line 2 is more than line 1, enter the excess; otherwise, enter -0-  Total of all prior years' distributions out of the account included in your gross income under	973(a er pe		le
1 2 3 4 5 6	redule B. Tax on Excess Contributions to Section 403(b)(7)(A) Custodial Accounts (Section 4 borted by the last day of the 7th month after the end of the tax year of the employer (or oth return)  Total amount contributed for current year less rollovers (see instructions)	973(; er per la		le
1 2 3 4 5 6	redule B. Tax on Excess Contributions to Section 403(b)(7)(A) Custodial Accounts (Section 4 borted by the last day of the 7th month after the end of the tax year of the employer (or oth return)  Total amount contributed for current year less rollovers (see instructions)	973(a er pe		le
1 2 3 4 5 6 7 8	redule B. Tax on Excess Contributions to Section 403(b)(7)(A) Custodial Accounts (Section 4) forted by the last day of the 7th month after the end of the tax year of the employer (or oth return)  Total amount contributed for current year less rollovers (see instructions)	973(a er per er		le

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

(xii)

	(Rev. 4-2009)			Page <b>4</b>
Name of			identifying number:	
		ibited Transactions (Section 4975) (see instructions) Represer of the employer (or other person who must file the		y of the 7th month
	ne excise tax a re a 🔲 discrete	sult of a prohibited transaction that was (box "a" or box "b  b  other than discrete (a lease or a loa		
2 Con	nplete the table be	elow to disclose the prohibited transactions and figure the in	itial tax (see instruction	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)				
(vi)				

4	Have you corrected all of the prohibited transactions that you are reporting on this return? If "Yes complete Schedule C, line 5, on the next page, If "No," attach statement (see instructions)	δ,″ Γ			
	complete Schedule C, line 5, on the next page. If "No," attach statement (see instructions)		Yes	Ш	No

(see instructions).

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)

5 Complete the table below, if applicable, of other participating disqualified persons and description of correction

(a) Item no. from line 2	<b>(b)</b> Name and address of disqualified person	(c) EIN or SSN	(d) Date of correction	Desc	(ription	e) of correction	
Schedule D. 7th month aft	Tax on Failure to Meet Minimum I ter the end of the employer's tax year	Funding Standards (Section 4 year or 8 ½ months after th	4971(a)) Rep e last day o	oorted by of the plar	the la	ast day of the r that ends with	nin
<ul> <li>Aggregate unpaid required contributions (accumulated funding deficiency for multiemployer plans) (see instructions)</li></ul>							

Form 5330 (Rev. 4-2009)	
Name of Filer:	Filor's identifying number

ivan	ie of Filer:				Filer's identify	ing numbe	er:		
	edule E. Tax on Failure to Pay Li end of the employer's tax year o								
			(a) 1st Quarter	(b) 2nd Quarter	(c) 3rd Quarter	(d) 4th Qu	uarter	(e) Total Add cols. a-d fo	
1	Amount of shortfall	1							
2	Shortfall paid by the due date	2							
3	Net shortfall amount	3							
4	Multiply line 3 column (e) by 10	— % (5							
	line 9a		<u> </u>		<u></u>		4		
last	edule F. Tax on Multiemployer Pl day of the 7th month after the e s within the filer's tax year								
1	Section 4971(g)(3) tax on failure to me	eet red	quirements for pla	ns in endangered	or critical status		1		
	Enter the amount of contributions n			•			1a		
_	Enter the amount of the accumi		•	•			1b		
	Enter the greater of line 1a or line						1c		
2	Section 4971(g)(4) tax on failure to						2		
	Enter the amount of the excise		-	•					
•	4971(a)(2) from Schedule D, line				•		2a		
ı	Enter the number of days during the of the 240 day period and ending o	e tax	year which are in	cluded in the peri	od beginning on t	he first day	2b		
	Multiply line 2b by \$1,100						2c		
	d Enter the greater of line 2a or line	2c, ł	nere and on Part	I, line 10c		▶	2d		
	edule G. Tax on Excess Fringe Ber ndar year in which the excess fring					th month a	after 1	the end of the	
1	Did you make an election to be to	axed	under section 4	977?	□ Yes	☐ No			
2	If "Yes," enter the calendar year (Y	YYY)	in which the exce	ess fringe benefits	s were paid > _				
3	If line 1 is "Yes," enter the excess	s fring	ge benefits on th	nis line (see instr	uctions)		3		
_4_	Enter 30% of line 3 here and on	Part I	, line 11			•	4		
	edule H. Tax on Excess Contribution of the plan year	ons to	Certain Plans	(Section 4979) R	eported by the I	ast day of	the 1	5th month afte	r the
1	Enter the amount of an excess conti	ibutio	n under a cash o	r deferred arrange	ment that is part	of a plan			
-	qualified under section 401(a), 403(a),						1		
2	*** · · · · · · · · · · · · · · · · · ·	here	and on Part I, li	ne 13		•	2		
	edule I. Tax on Reversion of Quanth following the month in which				Section 4980) F	Reported b	y the	last day of th	пе
1	Date reversion occurred			► MM	_ DD Y	Υ			
	Employer reversion amount								
3	Multiply line 2a by line 2b and en						3		
4	Explain below why you qualify for								•
•									
	<u>-</u>								
	edule J. Tax on Failure to Provid day of the month following the r					als (Section		UF) Reported	by the
1	Enter the number of applicable individ						1		
2	Enter the effective date of the am	endn	nent	► MM	_ DD Y`	Y	2		
3	Enter the number of days in the n	onco	mpliance period	▶			3		
4	Enter the total number of failures to p	rovide	ERISA section 20	04(h) notice (see in	structions)		4		
5	Multiply line 4 by \$100. Enter here	e and	l on Part I, line 1	15		. •	5		
6	Provide a brief description of the								
<u> </u>				4007) 7					
	edule K. Tax on Prohibited Tax She owing the close of the entity manage	er's ta	ax year during w	hich the plan bed	came a party to a	prohibited			
1	Enter the number of prohibited	tax s	helter transaction	ons you caused	the same plan	to be a			
2	party to ►	the re	esult here and o	_ n Part I. line 16		•	2		