SCHEDULE P (Form 5500)

Department of the Treasury

Internal Revenue Service

Annual Return of Fiduciary of Employee Benefit Trust

This schedule may be filed to satisfy the requirements under section 6033(a) for an annual information return from every section 401(a) organization exempt from tax under section 501(a).

Filing this form will start the running of the statute of limitations under section 6501(a) for any trust described in section 401(a) that is exempt from tax under section 501(a).

File as an attachment to Form 5500 or 5500-EZ.

Official Use Only

OMB No. 1210-0110

2001

This Form is Open to Public Inspection.

	the trust calendar year 2001 iscal trust year beginning	and endi	ing	MM /		
Ple	ase type or print					
1a	Name of trustee or custodian		4			
	Number, street, and room or suite no. (If a P.O. box, see the instructions for Form 5500 or 5500-EZ.)					
	City or town	State	ZIP code)		
		jn				
2a	Name of trust					
h	Trust's employer identification number					
	Trust's employer identification number					
3	Name of plan if different from name of trust					
	25"					
_						
4	Have you furnished the participating employee benefit plan(s) with the trust fina to be reported by the plan(s)?				Yes	No
5	Enter the plan sponsor's employer identification number as shown on Form 550	00 or 5500-EZ .	▶			
	er penalties of perjury, I declare that I have examined this schedule, and to the best nature of fiduciary	of my knowledge	e and belief	it is true, co	orrect, and co	ompiete.
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>	Q-	Date	•			

For Paperwork Reduction Act Notice and OMB Control Nos., see the inst. for Form 5500 or 5500-EZ. Cat. No. 13504X Schedule P (Form 5500) 2001