## **SCHEDULE B** (Form 5500)

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

## **Actuarial Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974, referred to as ERISA, except when attached to Form 5500-EZ and, in all cases, under section 6059(a) of the Internal Revenue Code, referred to as the Code.

▶ Attach to Form 5500 or 5500-EZ if applicable.

► See separate instructions.

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OMB No. 1210-0110

2003

This Form is Open to Public Inspection (except when attached to Form 5500-EZ).

_		
Fo	or calendar plan year 2003 or fiscal plan year beginning ,	and ending ,
▶	Round off amounts to nearest dollar.	
▶	Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause	e is established.
Ā	Name of plan	B Three-digit
	· ·	plan number ▶
C	Plan sponsor's name as shown on line 2a of Form 5500 or 5500-EZ	D Employer Identification Number
_		
E	Type of plan: (1) Single-employer (2) Multiemployer (3) Multiple-employer	F 100 or fewer participants in prior plan year
_	Part I Basic Information (To be completed by all plans)	1   100 of lower participants in prior plan year
1a		ear
K	b Assets:	
	(1) Current value of assets	b(1)
	(2) Actuarial value of assets for funding standard account	
C	C (1) Accrued liability for plans using immediate gain methods	c(1)
	(2) Information for plans using spread gain methods:	
	(a) Unfunded liability for methods with bases	c(2)(a)
	(b) Accrued liability under entry age normal method	c(2)(b)
	(c) Normal cost under entry age normal method	c(2)(c)
Sta	tatement by Enrolled Actuary (see instructions before signing):	
	Signature of actuary	Date
	Signature of actuary	G Date
	Type or print name of actuary	Most recent enrollment number
	Firm name	Telephone number (including area code)
		3,
_	Address of the firm	
lf t	the actuary has not fully reflected any regulation or ruling promulgated under the statute in comple	ating this schedule
	neck the box and see instructions	
_	or Paperwork Reduction Act Notice and OMB Control Numbers, v6.1	Schedule B (Form 5500) 2003
	ee the instructions for Form 5500 or 5500-EZ.	Schedule B (Form 3300) 2003
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1d			n on current liabilities	•						-4' \	۵/4۱	ı		
			unt excluded from cui	rrent liabi	iity attributa	able to pre	-participatio	n servi	ce (see instru	ctions)	d(1)			
	(2)		'94" information:								4(0)(-)			
		` '	Current liability								d(2)(a)			
		` '	Expected increase in		•		•	0	' '		d(2)(b)			
		. ,	Current liability compu		_		•		•		d(2)(c)			
		(d) E	Expected release fron	n "RPA '9	4" current l	liability for	the plan yea	ır			d(2)(d)			
	(3)	"OBR	RA '87" information:											
		(a) (	Current liability								d(3)(a)			
		(b) E	Expected increase in	current li	ability due 1	to benefits	accruing du	iring the	e plan year		d(3)(b)			
		(c) E	Expected release fron	n "OBRA	'87" curren	nt liability fo	or the plan ye	ear			d(3)(c)			
	(4)	Expe	cted plan disburseme	ents for th	ne plan yea	r					d(4)			
2	Оре		al information as of b											
а	Cur	rent va	alue of the assets (see	e instruct	ions)						2a			
b	"RP	A '94"	current liability:					(1) No	o. of Persons	(2) Ve	sted Bene	efits	(3) To	al Benefits
	(1)	For re	etired participants and	d benefic	iaries receiv	ving paym	ents							
	(2)	For te	erminated vested part	ticipants										
	(3)		ctive participants											
	(4)													
С	` '		entage resulting from					is less	than 70% en	ter				
		. '	entage	Ü	,	. ,,	. ,,		•			2c		%
3			ons made to the plan											,,,
<u> </u>			(b)		(0	<del>)</del>	(a)			(b)			(c)	
Мо	( <b>a</b> ) Dav-	<i>)</i> /-Year	Amount paid be employer	У	Amount	paid by byees	MoDay		Amou	int paid by nployer	'		(c) Amount pa employe	aid by
1410.	Duy	roui	Omployor		Ompic	Зуссь	IVIO. Day	Tour	Oi	Прюуст			Omploy	000
									(1.)					
					_	_	3 Total	s 🕨	(b)		_	(c)		
4		-	contributions and liqu	•	` '									
а	Plar	ns othe	er than multiemployer	plans, e	nter funded	d current li	ability perce	ntage fo	or preceding					
	yea	r (see	instructions)									4a		%
b	If lir	ne 4a is	s less than 100%, see	e instructi	ons, and co	omplete th	e following t	able as	applicable:					
					Liquidit	ty shortfall	as of end of	Quarte	er of this plan	year				
			<del>,</del>				f end of Quarter of this plan year  (3) 3rd				<b>(4)</b> 4th			
		(1)	1st		(2)	2nd			<b>(3)</b> 3r	d d			<b>(4)</b> 4	th
		(1)	1st			2nd			<b>(3)</b> 3r	d			<b>(4)</b> 4	th
		(1)	1st			2nd			<b>(3)</b> 3r	d			<b>(4)</b> 4	th

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							Of	ficial Use On	ly	
5	Actuarial cost method used as the basis for this plan year's fu	9								
a	Attained age normal <b>b</b> Entry age normal		C	Accrued b	-					
d	Aggregate <b>e</b> Frozen initial liabi	-	f	Individual	level pr	emium				
g	☐ Individual aggregate									
ı	Has a change been made in funding method for this plan year	ar?			• • • • •			Yes	Ш	No
	If live 3 is 20/2 a 2000 also also are an also are also are an also are an also are an also are also are also are an also are also a	Dua	d 0000 400					П у	П	NI-
J	If line i is "Yes," was the change made pursuant to Revenue I							Yes	Ш	No
K	If line i is "Yes," and line j is "No" enter the date of the ruling le			N. d. a. walla		David		V		
6	class) approving the change in funding method			. Month		Day		Year		
_	Checklist of certain actuarial assumptions:									
а	Interest rates for:				-/1\			0/	П	N I / A
	(1) "RPA '94" current liability			_	a(1)			% %	$\vdash$	N/A
<b>L</b>	(2) "OBRA '87" current liability			F	a(2)			%	$\vdash$	N/A
b	Weighted average retirement age	ا			6b				Ш	N/A
_		6-		etirement			t-retiremen	$\overline{}$		
C	Rates specified in insurance or annuity contracts N/A	6с	Yes	No.	)	Yes		No	Ш	N/A
d	Mortality table code for valuation purposes:	a/4\		_						
		d(1)								
_		d(2)							П	
e	Valuation liability interest rate	6e			%			%	$\mathbf{H}$	N/A
T	Expense loading	6f			%			%	Ш	N/A
				lale			Female			
g	Annual withdrawal rates:	/d\	Rate Code		0.4	Rate Code		24		
		g(1)			%			%		
		g(2)			%			%		
		g(3)			%			%	П	
n :	Salary scale				%			%	Ш	N/A
1	Estimated investment return on actuarial value of assets for the	. ,	5 -		C:					
	the valuation date				6i			%		
′	New amortization bases established in the current plan year:					(0) 4	01	(0 ":		
	(1) Type of Base (2) Initial B	alance	9			(3) Amortiz	zation Char	ge/Credit		
					_					
					_					

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Year

If a waiver of a funding deficiency or an extension of an amortization period has been approved for this plan year, enter the

Miscellaneous information:



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8b	If one or more alternative methods or rules (as listed in the instructions) were used for this plan year, enter the ap	propriate		
	code in accordance with the instructions			
С	Is the plan required to provide a Schedule of Active Participant Data? (see instructions) If "Yes," attach schedule.		. Yes	No
9	Funding standard account statement for this plan year:			
	Charges to funding standard account:			
а	Prior year funding deficiency, if any	9a		
b	Employer's normal cost for plan year as of valuation date	9b		
С	Amortization charges as of valuation date:  (1) All bases except funding waivers			
	(1) All bases except funding waivers	c(1)		
	(2) Funding waivers	c(2)		
d	Interest as applicable on lines 9a, 9b, and 9c	9d		
е	Additional interest charge due to late quarterly contributions, if applicable	9e		
f	Adjusted additional funding charge from Part II, line 12q, if applicable	9f		
g	Total charges. Add lines 9a through 9f	9g		
	Credits to funding standard account:			
h	Prior year credit balance, if any	9h		
i	Employer contributions. Total from column (b) of line 3	9i		
	Outstanding Balance			
j	Amortization credits as of valuation date	9j		
k	Interest as applicable to end of plan year on lines 9h, 9i, and 9j	9k		
ı	Full funding limitation (FFL) and credits			
	(1) ERISA FFL (accrued liability FFL)			
	(2) "OBRA '87" FFL (170% current liability FFL)			
	(3) "RPA '94" override (90% current liability FFL)	14.4		
	(4) FFL credit before reflecting "OBRA '87" FFL	I(4)		
	(5) Additional credit due to "OBRA '87" FFL	I(5)		
m		m(1)		
		m(2)		
n	Total credits. Add lines 9h through 9k, 9l(4), 9l(5), 9m(1), and 9m(2)	9n		
0	Credit balance: If line 9n is greater than line 9g, enter the difference	90		
р	Funding deficiency: If line 9g is greater than line 9n, enter the difference.	9p		
~	Reconciliation account:			
q	Current year's accumulated reconciliation account:			
	(1) Due to additional funding charges as of the beginning of the plan year q(1)	-		
	(2) Due to additional interest charges as of the beginning of the plan year  (2) Pure to wait and funding deficiencies:	-		
	(3) Due to waived funding deficiencies:			
	(a) Reconciliation outstanding balance as of valuation date	-		
		g(4)		
10		q(4)		
10	Contribution necessary to avoid an accumulated funding deficiency. Enter the amount in line 9p or the amount required under the alternative funding standard account if applicable	10		
11	Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions		. Yes	No
<u></u>	rias a change been made in the actualial assumptions for the current plan year? It is res, see instructions		. Lites	LINU

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	Part II	Additional Information	for Certain	<b>Plans Other</b>	Than Multiemployer P	lans
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Please see Who Must File in the Schedule B instructions to determine if you must complete Part II.

- **12** Additional required funding charge (see instructions):
  - a Enter "Gateway %." Divide line 1b(2) by line 1d(2)(c) and multiply by 100.

If line 12a is at least 90%, go to line 12q and enter -0-.

If line 12a is less than 80%, go to line 12b.

	If line 12a is at least 80% (but less than 90%), see instructions and, if applicable, go to line 12q		
	and enter -0 Otherwise, go to line 12b	12a	%
b	"RPA '94" current liability. Enter line 1d(2)(a)	12b	
С	Adjusted value of assets (see instructions)	12c	
	Funded current liability percentage. Divide line 12c by 12b and multiply by 100	12d	%
е	Unfunded current liability. Subtract line 12c from line 12b	12e	
f	Liability attributable to any unpredictable contingent event benefit	12f	
g	Outstanding balance of unfunded old liability	12g	
h	Unfunded new liability. Subtract the total of lines 12f and 12g from line 12e. Enter -0- if negative	12h	
i	Unfunded new liability amount (% of line 12h)	12i	
j	Unfunded old liability amount	12j	
k	Deficit reduction contribution. Add lines 12i, 12j, and 1d(2)(b)	12k	
I	Net charges in funding standard account used to offset the deficit reduction contribution. Enter		
	a negative number if less than zero	<b>12</b> I	
m	1 Unpredictable contingent event amount:		
	(1) Benefits paid during year attributable to unpredictable contingent event  m(1)		
	(2) Unfunded current liability percentage. Subtract the percentage		
	on line 12d from 100%		
	(3) Enter the product of lines 12m(1) and 12m(2)		
	(4) Amortization of all unpredictable contingent event liabilities		
	(5) "RPA '94" additional amount (see instructions)		
	(6) Enter the greatest of lines 12m(3), 12m(4), or 12m(5)	m(6)	
n	Preliminary additional funding charge: Enter the excess of line 12k over line 12l (if any), plus line 12m(6),		
	adjusted to end of year with interest	12n	
0	Contributions needed to increase current liability percentage to 100% (see instructions)	<b>120</b>	
р	Additional funding charge prior to adjustment: Enter the lesser of line 12n or 12o	12p	
~	Adjusted additional funding charge ( 0.9% of line 10n)	120	



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