## Attention:

This form or schedule is provided for information purposes and should not be reproduced on personal computer printers by individual taxpayers for filing.

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Check the Department of Labor's website at <u>http://www.efast.dol.gov</u> for additional information concerning the processing system, electronic filing, software, and "non-standard" filings.

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|--|---|---------|----------------------------|--|
| SCHEDULE H<br>(Form 5500)<br>Department of the Treasury<br>Internal Revenue Service<br>Department of Labor<br>Employee Benefits Security Administration<br>Pension Benefit Guaranty Corporation<br>For the calendar plan year 2003 | <ul> <li>Financial Information</li> <li>This schedule is required to be filed under Section 104 of Retirement Income Security Act of 1974 (ERISA) and section Internal Revenue Code (the Code).</li> <li>File as an attachment to Form 5500.</li> </ul> | on 6058 |                            | Official Use Only<br>OMB No. 1210-0110<br>2003<br>This Form is Open to<br>Public Inspection. |
| or fiscal plan year beginning A Name of plan   | and endi  | B       | Three-digit<br>plan number |  |
| C Plan sponsor's name as shown of  | on line 2a of Form 5500   | D       | Employer Id                | lentification Number   |
| Part I Asset and Liability   | Statement   | 5       |                            |  |

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

|              | Assets  | (a) Beginning of Year |    | (b) End of Year |  |
|--------------|---|-----------------------|----|-----------------|--|
|              | al noninterest-<br>ring cash  |                       | 00 |                 |  |
|              | eivables (less allowance for<br>btful accounts):<br>Employer<br>contributions                     |                       |    |                 |  |
| (2)          | Participant contributions   |                       |    |                 |  |
| (3)          | Other   |                       |    |                 |  |
| c Ger<br>(1) | neral investments:<br>Interest-bearing cash (inclu<br>accounts and<br>certificates<br>of deposit) | iding money market    |    |                 |  |
| (2)          | U.S. Government securities  |                       |    |                 |  |
| (3)          | Corporate debt instruments employer securities):  | s (other than         |    |                 |  |
|              | (A) Preferred   |                       |    |                 |  |
|              | (B) All other   |                       |    |                 |  |
| (4)          | Corporate stocks (other that employer securities):  | an                    |    |                 |  |
|              | (A) Preferred   |                       |    |                 |  |
|              | (B) Common  |                       |    |                 |  |
| (5)          | Partnership/joint venture interests.  |                       |    |                 |  |

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- **1c (6)** Real estate (other than employer real property) .....
  - (7) Loans (other than to participants) ...
  - (8) Participant loans.
  - (9) Value of interest in common/ collective trusts...
     (10) Value of interest
  - in pooled separate accounts ...... (11) Value of interest

  - in 103-12 investment entities .....
  - (13) Value of interest in registered investment companies (e.g., mutual funds) .....
  - (14) Value of funds held in insurance company general account (unallocated contracts)...

(15) Other .....

- d Employer-related investments:
  - (1) Employer securities .....
  - (2) Employer real
- e Buildings and other property used in plan operation .....
- f Total assets (add all amounts in lines 1a through 1e) ....

## Liabilities

- ${\boldsymbol{g}}\;$  Benefit claims payable
- h Operating payables ....
- i Acquisition indebtedness ......
- j Other liabilities ...... k Total liabilities (add all amounts in lines 1g through 1j)....

## Net Assets

I Net assets (subtract line 1k from line 1f) ....

|                       | Official Use Only |
|-----------------------|-------------------|
| (a) Beginning of Year | (b) End of Year   |
|                       |                   |
|                       |                   |
|                       |                   |
|                       |                   |
|                       |                   |
|                       | <sup>2</sup>      |
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|     |       | Income  |               |   |           | Ň |  |
|-----|-------|---|---------------|---|-----------|---|--|
| Co  | ntrib | outions:  | (a) Amount    |   |           |   |  |
| (1) |       | ceived or receivable in cash from:                        |               |   | 00 0-     | - |  |
|     | (A)   | Employers   |               |   |           | r |  |
|     | (B)   | Participants  |               |   |           |   |  |
|     | (C)   | Others (including rollovers)                              |               |   | 0.0       |   |  |
| (2) | Non   | ncash contributions                                       |               |   |           |   |  |
|     |       |   |               | K | (b) Total | I |  |
| (2) | Toto  | al contributions. Add lines 2a(1)(A), (B), (C), an        |               |   |           |   |  |
| (3) | 1019  | ai contributions. Add lines Za(T)(A), (D), (C), an        |               |   |           |   |  |
| Ear |       | gs on investments: (1) Interest:                          |               |   |           |   |  |
|     | (A)   | Interest-bearing cash<br>(including money market accounts |               |   |           |   |  |
|     |       | and certificates of deposit)                              |               |   |           |   |  |
|     | (P)   | U.S. Government securities                                | 1,2           |   |           |   |  |
|     | (D)   | 0.5. Government securities                                |               |   |           |   |  |
|     | (C)   | Corporate debt instruments                                |               |   |           |   |  |
|     | . ,   |   |               |   |           |   |  |
|     | (D)   | Loans (other than to participants)                        |               |   |           |   |  |
|     |       |   |               |   |           |   |  |
|     | (E)   | Participant loans   |               |   |           |   |  |
|     | (E)   | Other   | ()            |   |           |   |  |
|     | (, )  |   |               |   |           |   |  |
|     |       |   |               |   |           |   |  |
|     | (G)   | Total interest. Add lines 2b(1)(A) through (F)            | •             |   |           |   |  |
|     |       | Q   |               |   |           |   |  |
| (2) |       | idends:   |               |   |           |   |  |
|     | (A)   | Preferred stock   |               |   |           |   |  |
|     | (B)   | Common stock  |               |   |           |   |  |
|     | (-)   |   |               |   |           |   |  |
|     | (C)   | Total dividends. Add lines 2b(2)(A) and (B)               |               |   |           |   |  |
|     |       | e.  |               |   |           |   |  |
| • • |       |   |               |   |           |   |  |
| (4) |       | gain (loss) on sale of assets:                            |               |   |           |   |  |
|     |       | Aggregate proceeds  |               |   |           |   |  |
|     | (B)   | Aggregate carrying amount<br>(see instructions)           |               |   |           |   |  |
|     |       | 0-  |               |   |           |   |  |
|     | (C)   | Subtract line 2b(4)(B) from line 2b(4)(A) and             | enter result  |   |           |   |  |
|     |       |   |               |   |           |   |  |
|     |       |   |               |   |           |   |  |
|     |       |   | 0 3 0 0 0 3 0 | E |           |   |  |

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|-------------|-----------------|---------------|------|
| Schedule H  | (FOIIII         | <b>3300</b> ) | 2003 |

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|------|---|
|      |   |

| 2b | (5)   | Unrealized appreciation (depreciation) (a of assets:                                 | ) Amount |           | 6   |  |
|----|-------|--|----------|-----------|-----|--|
|    |       | (A) Real estate  |          |           | ~~~ |  |
|    |       |  |          | 00        |     |  |
|    |       | (B) Other  |          | (b) Total |     |  |
|    |       |  |          |           |     |  |
|    |       | (C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)              |          |           |     |  |
|    | (6)   | Net investment gain (loss) from common/collective trusts                             |          | 44        |     |  |
|    | (7)   | Net investment gain (loss) from pooled separate accounts                             |          |           |     |  |
|    | (8)   | Net investment gain (loss) from master trust investment accounts                     |          |           |     |  |
|    | (9)   | Net investment gain (loss) from 103-12 investment entities                           |          |           |     |  |
|    | (10)  | Net investment gain (loss) from registered investment companies (e.g., mutual funds) |          |           |     |  |
| c  | Othe  | r income   |          |           |     |  |
| Ŭ  | oun   |  | <b>Q</b> |           |     |  |
| d  | Tota  | income. Add all <b>income</b> amounts in column (b) and enter total                  |          |           |     |  |
| е  | Ben   | Expenses<br>efit payment and payments to provide benefits:                           |          |           |     |  |
| Ũ  | (1)   | Directly to participants or beneficiaries,   |          |           |     |  |
|    | .,    | including direct rollovers   |          |           |     |  |
|    | (2)   | To insurance carriers for the provision of benefits                                  |          |           |     |  |
|    | (3)   | Other  |          |           |     |  |
|    | (4)   | Total benefit payments. Add lines 2e(1) through (3)                                  |          |           |     |  |
| f  | Corr  | ective distributions (see instructions)  |          |           |     |  |
|    | _     | R  |          |           |     |  |
| g  | Cert  | ain deemed distributions of participant loans (see instructions)                     |          |           |     |  |
| h  | Inter | est expense  |          |           |     |  |
| i  |       | inistrative expenses:  |          |           |     |  |
|    | (1)   | Professional fees  |          |           |     |  |
|    | (2)   | Contract administrator fees  |          |           |     |  |
|    | (3)   | Investment advisory and management fees  |          |           |     |  |
|    | (4)   | Other  |          |           |     |  |
|    | (5)   | Total administrative expenses. Add lines 2i(1) through (4)                           |          |           |     |  |
| j  | Tota  | expenses. Add all expense amounts in column (b) and enter total                      |          |           |     |  |
| -  |       |  |          |           |     |  |



| 1                   | Schedule H (Form 5500) 2003   |                      |              | Pag              | e <b>5</b> |               | Off      | icial Use Onl | у                |
|---------------------|---|----------------------|--------------|------------------|------------|---------------|----------|---------------|------------------|
|                     | Net Income and Deconciliation   |                      |              |                  |            | <b>(b)</b> To |          |               | ,                |
| 01-                 | Net Income and Reconciliation   |                      |              |                  |            |               |          | <b>K</b> Ŷ    |                  |
|                     | Net income (loss) (subtract line 2j from line 2d)<br>Transfers of assets  |                      |              |                  |            |               |          |               |                  |
|                     | (1) To this plan  |                      |              |                  |            |               |          |               |                  |
|                     | (2) From this plan  |                      |              |                  |            |               | K        |               |                  |
| Ра                  | rt III Accountant's Opinion   |                      |              |                  |            | á             | -        |               |                  |
| 3                   | Complete lines 3a through 3c if the opinion of an independent qualif<br>Complete line 3d if an opinion is not attached.   | ied publ             | ic accounta  | ant is attached  | to this F  | orm 5500      | D.       |               |                  |
| а                   | The attached opinion of an independent qualified public accountant  | for this p           | olan is (see | e instructions): | X          |               |          |               |                  |
|                     | (1) Unqualified (2) Qualified (3)   | Discla               | aimer        | (4)              | Adverse    |               |          |               |                  |
|                     |   |                      |              | X                |            |               |          |               |                  |
|                     | Did the accountant perform a limited scope audit pursuant to 29 CFI<br>Enter the name and EIN of the accountant (or accounting firm):   | R 2520. <sup>-</sup> | 103-8 and/0  | or 103-12(d)?.   |            |               | Yes      |               | No               |
| Ū                   | Name  |                      |              | ~                |            |               |          |               |                  |
|                     |   |                      |              | <b>O</b>         |            |               |          |               |                  |
|                     |   |                      |              |                  |            |               |          |               |                  |
|                     | EIN   |                      | 4.           |                  |            |               |          |               |                  |
| d                   | The opinion of an independent qualified public accountant is not atta   | ached b              | ecause:      |                  |            |               |          |               |                  |
|                     | (1) The this form is filed for a CCT_DSA or MTIA (2)  |                      |              |                  |            |               |          |               |                  |
|                     |   | - 14                 |              |                  |            |               |          |               |                  |
|                     | (1) this form is filed for a CCT, PSA or MTIA. (2)  | it will I            | be attached  | d to the next F  | orm 5500   | ) pursuar     | nt to 29 | CFR 252       | 0.104-50         |
| Ра                  | rt IV Transactions During Plan Year   | it will I            | be attached  | d to the next F  | orm 550(   | ) pursuar     | nt to 29 | CFR 252       | 0.104-50         |
| <b>Pa</b><br>4      | rt IV Transactions During Plan Year<br>CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and  | 2                    |              |                  |            |               | nt to 29 | CFR 252       | 0.104-50         |
| 4                   | rt IV       Transactions During Plan Year         CCTs and PSAs do not complete Part IV.       MTIAs, 103-12 IEs, and 103-12 IEs also do not complete 4j.   | 2                    |              |                  |            |               | nt to 29 | CFR 252       | 0.104-50         |
| <b>4</b><br>Duri    | rt IV Transactions During Plan Year<br>CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and<br>103-12 IEs also do not complete 4j.   | 2                    |              |                  |            |               |          | CFR 252       | 0.104-50         |
| <b>4</b><br>Duri    | Transactions During Plan Year         CCTs and PSAs do not complete Part IV.         MTIAs, 103-12 IEs, and 103-12 IEs also do not complete 4j.         ng the plan year:         Did the employer fail to transmit to the plan any   | GIAs do              | not compl    |                  |            | 4k, or 5.     |          | CFR 252       | 0.104-50         |
| <b>4</b><br>Duri    | Transactions During Plan Year         CCTs and PSAs do not complete Part IV.         MTIAs, 103-12 IEs, and 103-12 IEs also do not complete 4j.         ng the plan year:         Did the employer fail to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? (See instructions  | GIAs do              | not compl    |                  |            | 4k, or 5.     |          | CFR 252       | 0.104-50         |
| 4<br>Duri<br>a      | Transactions During Plan Year         CCTs and PSAs do not complete Part IV.         MTIAs, 103-12 IEs, and 103-12 IEs also do not complete 4j.         ng the plan year:         Did the employer fail to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? (See instructions and DOL's Voluntary Fiduciary Correction Program.)   | GIAs do              | not compl    |                  |            | 4k, or 5.     |          | CFR 2524      | 0.104-50         |
| <b>4</b><br>Duri    | Transactions During Plan Year         CCTs and PSAs do not complete Part IV.         MTIAs, 103-12 IEs, and 103-12 IEs also do not complete 4j.         ng the plan year:         Did the employer fail to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? (See instructions and DOL's Voluntary Fiduciary Correction Program.)   | GIAs do              | not compl    |                  |            | 4k, or 5.     |          | CFR 2524      | 0.104-50         |
| 4<br>Duri<br>a      | Transactions During Plan Year         CCTs and PSAs do not complete Part IV.         MTIAs, 103-12 IEs, and 103-12 IEs, and 103-12 IEs also do not complete 4j.         ng the plan year:         Did the employer fail to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? (See instructions and DOL's Voluntary Fiduciary Correction Program.)         Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans   | GIAs do              | not compl    |                  |            | 4k, or 5.     |          | CFR 252       | 0.104-50         |
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| 4<br>Duri<br>a      | Transactions During Plan Year         CCTs and PSAs do not complete Part IV.         MTIAs, 103-12 IEs, and 103-12 IEs also do not complete 4j.         ng the plan year:         Did the employer fail to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? (See instructions and DOL's Voluntary Fiduciary Correction Program.)         Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by the participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked)         Were any leases to which the plan was a party in default or  | GIAs do              | not compl    |                  |            | 4k, or 5.     |          | CFR 252       | 0.104-50         |
| 4<br>Duri<br>a<br>b | Transactions During Plan Year         CCTs and PSAs do not complete Part IV.         MTIAs, 103-12 IEs, and 103-12 IEs also do not complete 4j.         ng the plan year:         Did the employer fail to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? (See instructions and DOL's Voluntary Fiduciary Correction Program.)         Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by the participant's account balance. (Attach Schedule G (Form 5500) Part I if 'Yes'' is checked).  | GIAs do              | not compl    |                  |            | 4k, or 5.     |          | CFR 2524      | 0.104-50         |
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| 4<br>Duri<br>a<br>b | Transactions During Plan Year         CCTs and PSAs do not complete Part IV.       MTIAs, 103-12 IEs, and 103-12 IEs also do not complete 4j.         ng the plan year:       Did the employer fail to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? (See instructions and DOL's Voluntary Fiduciary Correction Program.)         Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by the participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked)         Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part I if "Yes" is checked)         Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach   | GIAs do              | not compl    |                  |            | 4k, or 5.     |          | CFR 2524      |                  |
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| 4<br>Duri<br>a<br>b | Transactions During Plan Year         CCTs and PSAs do not complete Part IV.       MTIAs, 103-12 IEs, and 103-12 IEs also do not complete 4j.         ng the plan year:       Did the employer fail to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? (See instructions and DOL's Voluntary Fiduciary Correction Program.)         Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by the participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked)         Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked)         Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked on line 4d.) | GIAs do              | not compl    |                  |            | 4k, or 5.     |          | CFR 2524      |                  |
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| [   | Schedule H (Form 5500) 2003  |                  |          | Page <b>6</b>           |                     |                   |   |
|-----|--|------------------|----------|-------------------------|---------------------|-------------------|---|
|     |  | Yes              | No       |                         | Amount              | Official Use Only |   |
| 4 f | Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?   |                  |          |                         |                     |                   |   |
| g   | Did the plan hold any assets whose current value was neither<br>readily determinable on an established market nor set by an<br>independent third party appraiser?  |                  |          |                         |                     |                   |   |
| h   | Did the plan receive any noncash contributions whose value<br>neither readily determinable on an established market nor se<br>an independent third party appraiser?  | t by             |          |                         | 29                  |                   |   |
| i   | Did the plan have assets held for investment? (Attach schedu<br>of assets if "Yes" is checked, and see instructions for format<br>requirements)  |                  |          |                         | 41                  |                   |   |
| j   | Were any plan transactions or series of transactions in excess<br>of 5% of the current value of plan assets? (Attach schedule of<br>transactions if "Yes" is checked and see instructions for forma<br>requirements) | of<br>at         |          |                         | )                   |                   |   |
| k   | Were all the plan assets either distributed to participants or<br>beneficiaries, transferred to another plan, or brought under th<br>control of the PBGC?  |                  |          | 0                       |                     |                   |   |
| 5a  | Has a resolution to terminate the plan been adopted during t<br>plan year or any prior plan year? If yes, enter the amount of<br>plan assets that reverted to the employer this year                                 | any              |          |                         |                     |                   |   |
| 5b  | <ul><li>If, during this plan year, any assets or liabilities were transfer liabilities were transferred. (See instructions).</li><li>5b(1) Name of plan</li></ul>  | red from this pl | an to an | other plan(s), identify | v the plan(s) to wh | ich assets or     |   |
|     | 5b(2) EIN<br>5b(1) Name of plan  |                  |          | <b>5b(3)</b> PN         |                     |                   |   |
|     | 5b(2) EIN<br>5b(1) Name of plan  |                  |          | <b>5b(3)</b> PN         |                     |                   |   |
|     | <b>5b(2)</b> EIN <b>5b(1)</b> Name of plan   |                  |          | <b>5b(3)</b> PN         |                     |                   |   |
|     |  |                  |          | <b>5b(3)</b> PN         |                     |                   |   |
|     | 5b(2) EIN  |                  |          |                         |                     |                   |   |
| I   |  | 3 0 0            | ο ε      |                         |                     |                   | I |
| L   |  |                  |          |                         |                     | -                 |   |