

SCHEDULE I (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information—Small Plan This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). <div style="border: 1px solid black; display: inline-block; padding: 2px;">ACK_ID</div> File as an attachment to Form 5500.	OMB No. 1210-0110 <div style="font-size: 1.2em; font-weight: bold;">2016</div> This Form is Open to Public Inspection
For calendar plan year 2016 or fiscal plan year beginning <div style="border: 1px solid black; display: inline-block; padding: 2px;">SCH I PLAN YEAR BEGIN DATE</div> and ending <div style="border: 1px solid black; display: inline-block; padding: 2px;">SCH I TAX PRD</div>		
A Name of plan	B Three-digit plan number (PN)	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SCH_I_PLAN_NUM</div>
C Plan sponsor's name as shown on line 2a of Form 5500	D Employer Identification Number (EIN) <div style="border: 1px solid black; display: inline-block; padding: 2px;">SCH_I_EIN</div>	

Complete Schedule I if the plan covered fewer than 100 participants as of the beginning of the plan year. You may also complete Schedule I if you are filing as a small plan under the 80-120 participant rule (see instructions). Complete Schedule H if reporting as a large plan or DFE.

Part I Small Plan Financial Information

Report below the current value of assets and liabilities, income, expenses, transfers and changes in net assets during the plan year. Combine the value of plan assets held in more than one trust. Do not enter the value of the portion of an insurance contract that guarantees during this plan year to pay a specific dollar benefit at a future date. Include all income and expenses of the plan including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. **Round off amounts to the nearest dollar.**

1 Plan Assets and Liabilities:		(a) Beginning of Year	(b) End of Year
a Total plan assets	1a	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_TOT_ASSETS_BOY_AMT</div>	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_TOT_ASSETS_EOY_AMT</div>
b Total plan liabilities	1b	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_TOT_LIABILITIES_BOY_AMT</div>	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_TOT_LIABILITIES_EOY_AMT</div>
c Net plan assets (subtract line 1b from line 1a)	1c	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_NET_ASSETS_BOY_AMT</div>	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_NET_ASSETS_EOY_AMT</div>

2 Income, Expenses, and Transfers for this Plan Year:		(a) Amount	(b) Total
a Contributions received or receivable:			
(1) Employers.....	2a(1)	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_EMPLR_CONTRIB_INCOME_AMT</div>	
(2) Participants.....	2a(2)	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_PARTICIPANT_CONTRIB_AMT</div>	
(3) Others (including rollovers)	2a(3)	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_OTH_CONTRIB_RCVD_AMT</div>	
b Noncash contributions	2b	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_NON_CASH_CONTRIB_BS_AMT</div>	
c Other income.....	2c	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_OTHER_INCOME_AMT</div>	
d Total income (add lines 2a(1), 2a(2), 2a(3), 2b, and 2c)	2d		<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_TOT_INCOME_AMT</div>
e Benefits paid (including direct rollovers)	2e		
f Corrective distributions (see instructions)	2f	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_TOT_DISTRI_BNFT_AMT</div>	
g Certain deemed distributions of participant loans (see instructions).....	2g	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_CORRECTIVE_DISTRI_BNFT_AMT</div>	
h Administrative service providers (salaries, fees, and commissions)	2h	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_DEEM_DSTRB_PARTCP_LN_AMT</div>	
i Other expenses	2i	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_ADMIN_SRVC_PROVIDERS_AMT</div>	
j Total expenses (add lines 2e, 2f, 2g, 2h, and 2i).....	2j	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_OTH_EXPENSES_AMT</div>	<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_TOT_EXPENSES_AMT</div>
k Net income (loss) (subtract line 2j from line 2d)	2k		<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_NET_INCOME_AMT</div>
l Transfers to (from) the plan (see instructions)	2l		<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_TOT_PLAN_TRANSFERS_AMT</div>

3 Specific Assets: If the plan held assets at any time during the plan year in any of the following categories, check "Yes" remaining in the plan as of the end of the plan year. Allocate the value of the plan's interest in a commingled trust containing the assets of more than one plan on a line-by-line basis unless the trust meets one of the specific exceptions described in the instructions.

		Yes	No	Amount
a Partnership/joint venture interests	3a			<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_JOINT_VENTURE_EOY_AMT</div>
b Employer real property	3b			<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_EMPLR_PROP_EOY_AMT</div>
c Real estate (other than employer real property)	3c			<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_INV_REAL_ESTATE_EOY_AMT</div>
d Employer securities	3d			<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_EMPLR_SEC_EOY_AMT</div>
e Participant loans	3e			<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_MORTG_PARTCP_EOY_AMT</div>
f Loans (other than to participants)	3f			<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_OTH_LNS_PARTCP_EOY_AMT</div>
g Tangible personal property.....				<div style="border: 1px solid black; display: inline-block; padding: 2px;">SMALL_PERSONAL_PROP_EOY_AMT</div>

For Paperwork Reduction Act Notice, see the Instructions.

Part II Compliance Questions

4 During the plan year:	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)			SMALL_FAIL_TRANSM_CONTRIB_IND
4a			SMALL_FAIL_TRANSM_CONTRIB_AMT
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of plan year or classified during the year as uncollectible? Disregard participant loans secured by the participant's account balance.			SMALL_LOANS_IN_DEFAULT_IND
4b			SMALL_LOANS_IN_DEFAULT_AMT
c Were any leases to which the plan was a party in default or classified during the year as uncollectible?			SMALL_LEASES_IN_DEFAULT_IND
4c			SMALL_LEASES_IN_DEFAULT_AMT
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a.)			SM_PARTY_IN_INT_NOT_RPTD_IND
4d			SM_PARTY_IN_INT_NOT_RPTD_AMT
e Was the plan covered by a fidelity bond?			SMALL_PLAN_INS_FDLTY_BOND_IND
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?			SMALL_LOSS_DISCV_DUR_YEAR_IND
4f			SMALL_LOSS_DISCV_DUR_YEAR_AMT
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			SMALL_ASSET_UNDETERM_VAL_IND
4g			SMALL_ASSET_UNDETERM_VAL_AMT
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			SMALL_NON_CASH_CONTRIB_IND
4h			SMALL_NON_CASH_CONTRIB_AMT
i Did the plan at any time hold 20% or more of its assets in any single security, debt, mortgage, parcel of real estate, or partnership/joint venture interest?			SMALL_20_PRCNT_SNGL_INVST_IND
4i			SMALL_20_PRCNT_SNGL_INVST_AMT
j Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			SMALL_ALL_PLAN_AST_DISTRIB_IND
4j			
k Are you claiming a waiver of the annual examination and report of an independent qualified public accountant (IQPA) under 29 CFR 2520.104-46? If "No," attach an IQPA's report or 2520.104-50 statement. (See instructions on waiver eligibility and conditions.)			SM_WAIV_ANNUAL_IQPA_REPORT_IND
4k			
l Has the plan failed to provide any benefit when due under the plan?			SM_FAIL_PROVIDE_BENEF_DUE_IND SM_FAIL_PROVIDE_BENEF_DUE_AMT
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			SMALL_PLAN_BLACKOUT_PERIOD_IND
4m			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			SM_COMPLY_BLACKOUT_NOTICE_IND
4n			
o Defined Benefit Plan or Money Purchase Pension Plan Only: Were any distributions made during the plan year to an employee who attained age 62 and had not separated from service?			DISTRIB_MADE_EMPLOYEE_62_IND
4o			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?
If "Yes," enter the amount of any plan assets that reverted to the employer this year. ☐ Yes ☐ No **SMALL_RES_TERM_PLAN_ADPT_AMT**

5b If, during this plan year, any assets or liabilities were transferred, (See instructions.) **SMALL_RES_TERM_PLAN_ADPT_IND** (s), identify the plan(s) to which assets or liabilities were transferred.

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
TABLE: Efast_09.F_sch_i_part1_2009		
SMALL_PLAN_TRANSFER_NAME	SMALL_PLAN_TRANSFER_EIN	
	SMALL_PLAN_TRANSFER_PN	

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance? **SMALL_COVERED_PBGC_INS_IND** ☐ Yes ☐ No ☐ Not determined.
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for the plan. **PREMIUM_FILING_CONFIRM_NUMBER** (See instructions.)

Part III Trust Information

6a Name of trust <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">FDCRY_TRUST_NAME</div>	6b Trust's EIN <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">FDCRY_TRUST_EIN</div>
6c Name of trustee or custodian <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">FDCRY_TRUSTEE_CUST_NAME</div>	6d Trustee's or custodian telephone number <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">FDCRY_TRUST_CUST_PHONE_NUM</div>