

**SCHEDULE F
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Fringe Benefit Plan Annual Information Return

Under Section 6039D of the Internal Revenue Code

► **File as an attachment to Form 5500.**

Official Use Only

OMB No. 1210-0110

2000

**This Form is NOT Open
to Public Inspection.**

For the calendar plan year 2000
or fiscal plan year beginning

MM / DD / YYYY

and ending

MM / DD / YYYY

A Name of plan

B Three-digit
plan number ►

□□□

C Plan sponsor's name as shown on line 2a of Form 5500

D Employer Identification Number

□□-□□□□□□

1 Check the Internal Revenue Code section that describes this fringe benefit plan:

(a) ☐ 125 (Cafeteria plan) (b) ☐ 127 (Educational assistance program) (c) ☐ 137 (Adoption assistance program)

2 Enter the total number of employees of the employer

□□□□□□□□

3 Enter the total number of employees eligible to participate in the plan

□□□□□□□□

4 Enter the total number of employees participating in the plan. (See instructions.)

□□□□□□□□

5 Enter the total cost of the fringe benefit plan for the plan year. (See instructions.) ..

□□□□□□□□□□.00

6 Did the fringe benefit plan terminate in this plan year? (See instructions.)

☐ Yes ☐ No

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500. Cat. No. 14687J Schedule F (Form 5500) 2000

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