Form 5500-SF

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Short Form Annual Return/Report of Small Employee Benefit Plan

This form is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA), and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▸ **Complete all entries in accordance with the instructions to the Form 5500-SF.**

OMB Nos. 1210-0110
1210-0089

2012

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 02/17/2012

A This return/report is for: [X] a single-employer plan [ ] a multiple-employer plan (not multiemployer) [ ] a one-participant plan

B This return/report is: [ ] the first return/report [X] the final return/report
[ ] an amended return/report [X] a short plan year return/report (less than 12 months)

C Check box if filing under: [ ] Form 5558 [ ] automatic extension [ ] DFVC program
[ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
DWK CONSULTING TRAINING INC 401 K PROFIT SHARING PLAN TRUST

1b Three-digit plan number (PN) ▸ 001

1c Effective date of plan 01/01/2002

2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan)
DWK CONSULTING TRAINING INC

5649 POPLAR CV
HONEOYE, NY 14471-9545

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2b Employer Identification Number (EIN) 03-0463749

2c Sponsor's telephone number 585-202-2449

2d Business code (see instructions) 541330

3a Plan administrator's name and address [X] Same as Plan Sponsor Name [ ] Same as Plan Sponsor Address

3b Administrator's EIN

3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN, and the plan number from the last return/report.

a Sponsor's name

4b EIN

4c PN

5a Total number of participants at the beginning of the plan year	**5a**	1
b Total number of participants at the end of the plan year	**5b**	0
c Number of participants with account balances as of the end of the plan year (defined benefit plans do not complete this item)	**5c**	0

6a Were all of the plan's assets during the plan year invested in eligible assets? (See instructions.) [X] Yes [ ] No

b Are you claiming a waiver of the annual examination and report of an independent qualified public accountant (IQPA) under 29 CFR 2520.104-46? (See instructions on waiver eligibility and conditions.) [X] Yes [ ] No

If you answered "No" to either line 6a or line 6b, the plan cannot use Form 5500-SF and must instead use Form 5500.

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including, if applicable, a Schedule SB or Schedule MB completed and signed by an enrolled actuary, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	07/26/2013	DAVID KESSELRING
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	07/26/2013	DAVID KESSELRING
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor

Preparer's name (including firm name, if applicable) and address; include room or suite number (optional)

Preparer's telephone number (optional)

Part III Financial Information

7 Plan Assets and Liabilities		(a) Beginning of Year	(b) End of Year
a Total plan assets	7a	73826	0
b Total plan liabilities	7b	0	0
c Net plan assets (subtract line 7b from line 7a)	7c	73826	0

8 Income, Expenses, and Transfers for this Plan Year		(a) Amount	(b) Total
a Contributions received or receivable from: (1) Employers	8a(1)	0	
(2) Participants	8a(2)	0	
(3) Others (including rollovers)	8a(3)	0	
b Other income (loss)	8b	6540	
c Total income (add lines 8a(1), 8a(2), 8a(3), and 8b)	8c		6540
d Benefits paid (including direct rollovers and insurance premiums to provide benefits)	8d	80301	
e Certain deemed and/or corrective distributions (see instructions)	8e	0	
f Administrative service providers (salaries, fees, commissions)	8f	65	
g Other expenses	8g	0	
h Total expenses (add lines 8d, 8e, 8f, and 8g)	8h		80366
i Net income (loss) (subtract line 8h from line 8c)	8i		-73826
j Transfers to (from) the plan (see instructions)	8j	0	

Part IV Plan Characteristics

9a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
2E 2G 2J 2T 3D

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

Part V Compliance Questions

10 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? (See instructions and DOL's Voluntary Fiduciary Correction Program)	10a		X	
b Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 10a.)	10b		X	
c Was the plan covered by a fidelity bond?	10c	X		20000
d Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	10d		X	
e Were any fees or commissions paid to any brokers, agents, or other persons by an insurance carrier, insurance service or other organization that provides some or all of the benefits under the plan? (See instructions.)	10e		X	
f Has the plan failed to provide any benefit when due under the plan?	10f		X	
g Did the plan have any participant loans? (If "Yes," enter amount as of year end.)	10g		X	
h If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	10h		X	
i If 10h was answered "Yes," check the box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	10i			

Part VI Pension Funding Compliance

11 Is this a defined benefit plan subject to minimum funding requirements? (If "Yes," see instructions and complete Schedule SB (Form 5500) and line 11a below) ☐ Yes ☒ No

11a Enter the amount from Schedule SB line 39 — 11a

12 Is this a defined contribution plan subject to the minimum funding requirements of section 412 of the Code or section 302 of ERISA? ☐ Yes ☒ No

(If "Yes," complete line 12a or lines 12b, 12c, 12d, and 12e below, as applicable.)

a If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions, and enter the date of the letter ruling granting the waiver. Month ________ Day ________ Year ________

If you completed line 12a, complete lines 3, 9, and 10 of Schedule MB (Form 5500), and skip to line 13.

b Enter the minimum required contribution for this plan year — 12b

c	Enter the amount contributed by the employer to the plan for this plan year	**12c**	
d	Subtract the amount in line 12c from the amount in line 12b. Enter the result (enter a minus sign to the left of a negative amount)	**12d**	
e	Will the minimum funding amount reported on line 12d be met by the funding deadline?		☐ Yes ☐ No ☐ N/A

Part VII Plan Terminations and Transfers of Assets

13a	Has a resolution to terminate the plan been adopted in any plan year?		☒ Yes ☐ No
	If "Yes," enter the amount of any plan assets that reverted to the employer this year	**13a**	0
b	Were all the plan assets distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒ Yes ☐ No

c If during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

13c(1) Name of plan(s):	**13c(2)** EIN(s)	**13c(3)** PN(s)

Part VIII Trust Information (optional)

14a Name of trust	**14b** Trust's EIN

PAYCHEX

05/01/2012

David W Kesselring
Dwk Consulting & Training Inc
5649 Poplar Cv
Honeoye, NY 14471-9545

The electronic version of your 2011 Form 5500 is available. You must electronically file your Form 5500 with the U.S. Department of Labor by July 31, 2012.

Dear Plan Administrator:

Thank you for choosing Paychex Retirement Services. As part of your service, Paychex prepares an electronic version of your Form 5500 return for you. Your 2011 Form 5500 is now available via the Paychex Retirement Services for Employers website* at **https://online.paychex.com**.

***Note:** MyPaychex clients must use **https://www.mypaychex.com** to access the website.

The Form 5500 reports your plan's financial conditions, investments, and operations. **The U.S. Department of Labor (DOL) requires that all Form 5500 returns be filed *electronically* using the EFAST2 (ERISA Filing Acceptance System) program each year.** The agency is no longer accepting paper filings.

Complete the following to ensure successful electronic filing of your Form 5500:

A. Obtain signing credentials from the DOL. If you have signing credentials, skip to part B.

1. Register for a User ID and PIN number through the EFAST2 DOL website at **https://www.efast.dol.gov/portal/app/userCreate?execution=e1s1**. When completing the Profile Information for your registration, select **Filing Signer** as the User Type.
   Questions regarding the DOL's filing system should be directed to the EFAST2 Help Line at 1-866-GO-EFAST (1-866-463-3278).

B. Review and file your return on our Paychex Retirement Services for Employers website.

1. Log in to **https://online.paychex.com** and select **Retirement Services.**
2. From the **Administration** tab, select **Compliance Information** from the drop-down menu, and click **View or File 5500**.
3. Review the electronic version of your Form 5500 return for accuracy.
4. If the return is accurate, sign the return electronically by entering the signing credentials assigned to you by the DOL, and proceed to Step 5. If you forgot your User ID and PIN, visit **http://www.efast.dol.gov** and select **Login**, then **Forgot User ID** or **Forgot Password**.
   If the return is ***not*** accurate, follow the system prompts to correct your form.
5. Print a copy of the return, sign it, and retain it with your plan's records.
6. Transmit your return to the DOL and monitor the filing status on our website. Your filing is complete once the status is **Filing Received**.

As the filing deadline approaches, Paychex will notify you via email if the status of your return is not **Filing Received**. To view the most-up-to-date status of your return, please visit our website and follow steps B - 1 and 2.

If you have questions, please call us at 800-472-0072, Monday through Friday between 8:00 a.m. and 8:00 p.m. ET. We appreciate the opportunity to work as an essential partner with your business.

Sincerely,
Paychex Retirement Services

7/30/2012 7:28 on hold Doe

Critical error

Critecal Unexpected Error has occurred, please call Paychex. (Err 100)

- was filed on 5/2/2012, she will send me filing and also 2012 form that I can file.

July 25, 2013

Department of the Treasury Internal Revenue Service,

This note is to explain why my Form 5500- SF is being filed in July 2013.

I have attached a letter from my payroll company regarding the 2011 Form 5500 return. I have always filed in July of every year so that is why I am filing this month. As you can see from my notes on the bottom of the page regarding the problems I was having last year. The person from PayChex indicated she would send me the 2012 form so I could file it. I had closed my 401k and moved the funds to an IRA and had notified the IRS on this. When I went to file my form 5500 earlier this week, when I hit the submit button it came back with an error that I was late in filing. I did not understand this since I had always filed in July previous years. I called the EFAST help number and was told something about if you close your 401k, you file your Form 5500 with a certain period of time. No one had ever told me this so I was filing as before.

Not sure how I was supposed to know this and was hoping that by filing now I would be meeting my obligations.

Please call me at 585-202-2449 or e-mail me at DWKConsultTrain@aol.com when you receive this.

Respectfully,

David W. Kesselring

585-202-2449