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).

OMB Nos. 1210-0110 1210-0089

2013

This Form is Open to Public Inspection

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Part	l Annual R	eport Ide	entificat	ion Inform	ation					
For ca	lendar plan year 20	013 or fiscal	l plan year	beginning	01/01/2013		and ending	12/31/	2013	
A Thi	is return/report is fo	or:	a single-	employer plar	n [] {	a multiple-employer	plan (not multiemploye	er)	a one-partici	pant plan
B Thi	is return/report is:		the first r	eturn/report	☐ t	the final return/repor	t			
			an amen	ded return/rep	oort a	short plan year retu	rn/report (less than 12	months	5)	
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	ame of plan							1b	Three-digit	
EDUCA	TIONAL & PROFE	SSIONAL S	BERVICES	INTERNATIO	DNAL INC. D	EFINED BENEFIT P	ENSION PLAN		plan number (PN) ▶	002
								10	Effective date of	
								'C		/2011
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	TIONAL & PROFE					ipioyer, ii ioi a sirigit	z-ciripioyer plani	20		349880
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Ja 11	an administrator s i	name and a	iddiess 🔨	Odilie as i lai	i opolisoi iva	ine Dame as rie	in oponsor Address	00	Administrator 3	LIIV
								3с	Administrator's	telephone number
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Form 5500-SF 2013 Page **2**

Pa	rt III Financial Information							
7	Plan Assets and Liabilities		(a) Beginning of Ves				(h) End of Voca	
_ <u>'</u> _a		7a	(a) Beginning of Yea		+		(b) End of Year 1064158	
<u>a</u>	Total plan assets Total plan liabilities	7b		0			0	
	Net plan assets (subtract line 7b from line 7a)	76 7c	67691				1064158	
8	, ,	76						
	Income, Expenses, and Transfers for this Plan Year Contributions received or receivable from:		(a) Amount				(b) Total	
и	(1) Employers	8a(1)	25000	0				
	(2) Participants	8a(2)		0				
	(3) Others (including rollovers)	8a(3)		0				
b	Other income (loss)	8b	13732	6				
							387326	
d	Benefits paid (including direct rollovers and insurance premiums			_				
	to provide benefits)	. 8d		0				
<u>e</u>	Certain deemed and/or corrective distributions (see instructions)	8e		0				
<u>f</u>	Administrative service providers (salaries, fees, commissions)	8f	8	0				
g	Other expenses	. 8g		0				
<u>h</u>	Total expenses (add lines 8d, 8e, 8f, and 8g)	8h					80	
<u>i</u>	Net income (loss) (subtract line 8h from line 8c)	8i					387246	
<u>j</u>	Transfers to (from) the plan (see instructions)	8j						
Pai	t IV Plan Characteristics							
9a	If the plan provides pension benefits, enter the applicable pension 1A 3D	feature co	des from the List of Plan Chara	acteris	stic Co	des in	the instructions:	
b								
_								
Par					1		T	
10	During the plan year:			ı	Yes	No	Amount	
a	Was there a failure to transmit to the plan any participant contribu 29 CFR 2510.3-102? (See instructions and DOL's Voluntary Fidure)			10a		X		
b	Were there any nonexempt transactions with any party-in-interest on line 10a.)			10b		X		
	,				X		440000	
C				10c			110000	
d	Did the plan have a loss, whether or not reimbursed by the plan's or dishonesty?	•	-	10d		X		
е	Were any fees or commissions paid to any brokers, agents, or oth							
	insurance service, or other organization that provides some or all instructions.)			10e		X		
f				10f		X		
g				10g		X		
h	If this is an individual account plan, was there a blackout period?	(See instru	uctions and 29 CFR	J		X		
	2520.101-3.)			10h				
	exceptions to providing the notice applied under 29 CFR 2520.10			10i				
Part	VI Pension Funding Compliance							
11	Is this a defined benefit plan subject to minimum funding requirem 5500) and line 11a below)							
11a	1a Enter the unpaid minimum required contribution for current year from Schedule SB (Form 5500) line 39							
12								
	(If "Yes," complete line 12a or lines 12b, 12c, 12d, and 12e below,							
а	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							
If	you completed line 12a, complete lines 3, 9, and 10 of Schedule							
	Enter the minimum required contribution for this plan year	•	· •			12b		

Page	3	- [1
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С	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				
е	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?	. 🔲 Y	'es X No			
	If "Yes," enter the amount of any plan assets that reverted to the employer this year	. 13a				
b	Were all the plan assets distributed to participants or beneficiaries, transferred to another plan, or brought under the of the PBGC?	control		Yes X No		
С	If during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) which assets or liabilities were transferred. (See instructions.)	to				
1	3c(1) Name of plan(s):	3c(2) El	N(s)	13c(3) PN(s)		
Part	VIII Trust Information (optional)					
14a	Name of trust	14b Trust's EIN				

SCHEDULE SB (Form 5500)

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Single-Employer Defined Benefit Plan **Actuarial Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

2013

OMB No. 1210-0110

This Form is Open to Public Inspection

Pension Benefit Guaranty Corporation	File as	an attachme	nt to Form	5500 or 5	500-SF.				
For calendar plan year 2013 or fiscal pla		01/01/2013			and endi	ng 12/3	1/2013		
▶ Round off amounts to nearest dollar	ar.								
Caution: A penalty of \$1,000 will be	assessed for late filing	of this report u	ınless reasc	nable cau	use is establish	ed.			
A Name of plan EDUCATIONAL & PROFESSIONAL SER PENSION PLAN	RVICES INTERNATIO	NAL INC. DEF	INED BENE		B Three-dig plan num	,	>	002	
C Plan sponsor's name as shown on line EDUCATIONAL & PROFESSIONAL SER					D Employer	Identificat 26-4349	ion Number (EIN)	
E Type of plan: X Single Multiple-	A Multiple-B	F	Prior year pla	ın size: 🗙	100 or fewer	101-50	00 More	han 500	
Part I Basic Information									
1 Enter the valuation date:	Month	Day31	Year _2	2013	-				
2 Assets:									
a Market value						2a		808	3484
b Actuarial value						2b		808	3484
3 Funding target/participant count bre	:akdown:			(1) Nu	ımber of partici	pants	(2)	Funding Target	
a For retired participants and benef	iciaries receiving paym	nent	3a			0			0
b For terminated vested participant	s		3b			0			0
C For active participants:		,							
(1) Non-vested benefits			3c(1)					195	5799
(2) Vested benefits			3c(2)					455	5499
(3) Total active			3c(3)			5		651	1298
d Total			3d			5		651	298
4 If the plan is in at-risk status, check	the box and complete	lines (a) and (b	b)						
a Funding target disregarding preson	cribed at-risk assumption	ons				4a			
b Funding target reflecting at-risk a at-risk status for fewer than fiv						4b			
5 Effective interest rate						5		6.16	%
6 Target normal cost						6		178	3201
Statement by Enrolled Actuary To the best of my knowledge, the information suply accordance with applicable law and regulations. In combination, offer my best estimate of anticipated	n my opinion, each other assur								
SIGN HERE							06/03/2	2014	
	gnature of actuary						Date		
ROBERT M. HANESS	•						14-049	945	
Type or	r print name of actuary				-	Most re	ecent enrollm		
HANESS AND ASSOCIATES, LLC							916-43	85-9830	
·	Firm name				Te	elephone		ıding area code)	
PO BOX 836 US ROCKLIN, CA 95677						·	`	,	
A	ddress of the firm				-				
If the actuary has not fully reflected any re instructions	gulation or ruling prom	ulgated under	the statute	in complet	ting this schedu	ıle, check	the box and	see	

Page 2 -	1
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Schedule SB (Form 5500) 2013

Pa	rt II	Begin	ning of Year	Carryov	er and Prefunding B	alances							
							(a) C	arryover balance		(b)	Prefundii	ng balance	
		_	•		cable adjustments (line 13				0			0	
8			•	•	unding requirement (line 35				0			0	
9	Amount	remainii	ng (line 7 minus li	ne 8)					0			0	
10	Interest	on line 9	using prior year's	actual ret	urn of				0			0	
11	Prior ye	ar's exce	ess contributions t	o be added	to prefunding balance:								
	a Prese	ent value	of excess contrib	utions (line	38a from prior year)							8535	
					nterest rate of 4.90 %							0	
	${f c}$ Total available at beginning of current plan year to add to prefunding balance				nce						8535		
	d Portion of (c) to be added to prefunding balance									8535			
12	12 Other reductions in balances due to elections or deemed elections							8535					
13	Balance	at begir	nning of current ye	ear (line 9 +	line 10 + line 11d – line 12	?)			0			0	
Pa	art III	Fun	ding Percenta	ages									
14										14	124.13 %		
15	15 Adjusted funding target attainment percentage								15	123.52 %			
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement								16	92.45 %				
17	If the cu	ırrent val	ue of the assets o	f the plan is	s less than 70 percent of th	e funding ta	rget, enter si	uch percentage			17	%	
Pa	art IV	Con	tributions an	d Liquidi	ity Shortfalls								
18	Contribu	utions ma	ade to the plan for	the plan ye	ear by employer(s) and em	ployees:							
(N/	(a) Date M-DD-Y		(b) Amount p employer		(c) Amount paid by employees	(a) [(MM-DD		(b) Amount pai employer(s		((c) Amount paid by employees		
	/16/2013		Gp.Gy G.	250000	0	(22	,	5p.6) 6. (e	,		ор	.,	
	710/2010			200000									
				J		Totals ▶	18(b)		250000	18(c)		0	
19	Discour	ited emp	loyer contributions	s – see inst	ructions for small plan with	a valuation	date after th	e beginning of the	year:				
	a Contr	ibutions	allocated toward	unpaid mini	imum required contribution	s from prior	years		19a			0	
	b Contr	ibutions	made to avoid res	trictions ad	ljusted to valuation date				19b			0	
	c Contr	ibutions a	allocated toward mi	nimum requ	uired contribution for current	year adjusted	I to valuation	date	19c			255578	
20	Quarter	ly contrib	outions and liquidit	y shortfalls	:			1					
	a Did th	ne plan h	nave a "funding sh	ortfall" for t	he prior year?						X	Yes No	
	b If line	20a is "	Yes," were require	ed quarterly	installments for the curren	t year made	in a timely r	manner?				Yes X No	
	C If line	20a is "	Yes," see instructi	ons and co	mplete the following table a	as applicable	e:				_	<u>—</u>	
					Liquidity shortfall as of e			n year					
		(1) 19	st		(2) 2nd		(3)	3rd			(4) 4th		

Pa	rt V	Assumptio	ns Used to Determine	Funding Target and Targe	et Normal Cost						
21	Discou	nt rate:									
	a Seg	ment rates:	1st segment: 4.94%	2nd segment: 6.15%	3rd segment 6.76 %		N/A, fu	II yield	curve	e used	
	b Appl	licable month (enter code)			21b				0	
22	Weight	ted average ret	tirement age			22				62	
23	Mortali	ty table(s) (see	e instructions) X Pre	escribed - combined Pre	scribed - separate	Substitu	te				
Pa	rt VI	Miscellane	ous Items								
24				cuarial assumptions for the current	plan year? If "Yes." see	instructions	regarding re	auired			
		-							Yes	X No	
25	Has a r	method change	e been made for the current pl	an year? If "Yes," see instructions	regarding required attac	chment			Yes	X No	
26	Is the p	olan required to	provide a Schedule of Active	Participants? If "Yes," see instruc	tions regarding required	attachment		X	Yes	No	
27	If the p	lan is subject t	o alternative funding rules, en	ter applicable code and see instruc	ctions regarding	27				<u> </u>	
	attachr	ment				21					
Pa	rt VII	Reconcilia	ation of Unpaid Minimu	ım Required Contribution	s For Prior Years						
28	Unpaid	l minimum requ	uired contributions for all prior	years		28				0	
29	9 Discounted employer contributions allocated toward unpaid minimum required contributions from prior year (line 19a)									0	
30	60 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)									0	
			Required Contribution			1					
31			nd excess assets (see instruct								
			,			31a				178201	
				line 31a		31b				157186	
32		zation installme	<u> </u>	iiile Jia	Outstanding Bala	1	Installment				
32					Outstanding Bail						
	_					0			0		
33				ter the date of the ruling letter gran	ting the approval					0	
55) and the waived amount		33					
34	Total fu	unding requirer	ment before reflecting carryove	er/prefunding balances (lines 31a -	31b + 32a + 32b - 33)	34				21015	
				Carryover balance	Prefunding bala	nce	To	tal bala	ance		
35	Balanc	es elected for	use to offset funding							_	
	require	ment								0	
36	Additio	nal cash requi	rement (line 34 minus line 35).			36				21015	
37	Contrib	outions allocate 9c)	ed toward minimum required co	ontribution for current year adjuste	d to valuation date	37				255578	
38	Presen	nt value of exce	ess contributions for current ye	ar (see instructions)		l l					
			<u> </u>			38a				234563	
				prefunding and funding standard c		38b					
39				ear (excess, if any, of line 36 over		39	0				
40	-)	•	40				0	
Pa	rt IX			Pension Relief Act of 2010)					
			de to use PRA 2010 funding re		, 11 111111111	<u>, </u>					
							2 plus 7 yea	rs	15	years	
								2010		2011	
42	b Eligible plan year(s) for which the election in line 41a was made										
				d over to future plan years		43					
		motamine ac	ociciation amount to be ourne	a over to ratare plan years							

Schedule SB, line 26 -Schedule of Active Participant Data Educational & Professional Services International, Inc.

26-4349880/002

For the plan year 01/01/2013 through 12/31/2013

Years of Credited Service

Attained Age	Under 1 Nb.	1 to 4 Nb.	5 to 9 Nb.	10 to 14 Nb.	15 to 19 Nb.	20 to 24 Nb.	25 to 29 Nb.	30 to 34 Nb.	35 to 39 Nb.	40 & up Nb.	
Under 25											
25 to 29		2									
30 to 34		1									
35 to 39											
40 to 44											
45 to 49											
50 to 54											
55 to 59		2									
60 to 64											
65 to 69											
70 & up											

Schedule SB, Part V **Statement of Actuarial Assumptions/Methods**

Educational & Professional Services International, Inc. 26-4349880 / 002

For the plan year 01/01/2013 through 12/31/2013

Valuation Date: 12/31/2013

As prescribed in IRC Section 430 **Funding Method:**

Age - Eligibility age at last birthday and other ages at nearest birthday

Retrospective Compensation - Highest 3 consecutive years of service

Form of Payment - Assumed form of payment for funding is lump sum equivalent of normal form. Funding Target for lump sum is

the greater of the present value of accrued benefit computed using funding segment rates and 417(e) Applicable Mortality Table or lump sum at the assumed retirement date of accrued benefit using plan actuarial equivalence discounted using appropriate segment rate. Lump sum on plan actuarial equivalence rates will not exceed 415 maximum allowable distribution, which is the lesser amount computed using a) 5.5% interest and the Applicable Mortality Table or b) the greater of plan actuarial equivalence interest and mortality or 417(e)

Interest Rates -

Segment rates for the Valuation Date as permitted under IRC 430(h)(2)(C)

Segment #	Year	Rate %
Segment 1	0 - 5	1.28
Segment 2	6 - 20	4.05
Segment 3	> 20	5.07

Segment rates as of September 30, 2012 As permitted under IRC 430(h)(2)(C)(iv)(II)

Segment #	Year	Rate %
Segment 1	0 - 5	4.94
Segment 2	6 - 20	6.15
Segment 3	> 20	6.76

Pre-Retirement - Mortality Table -None

> Turnover/Disability -None Salary Scale -None Expense Load -None Ancillary Ben Load -None

Post-Retirement - Mortality Table -13C - 2013 Funding Target - Combined - IRC 430(h)(3)(A)

> Cost of Living -None

G94 - 1994 Group Annuity Reserving Proj 2002, Scale AA (unisex) at 5% Lump Sum -

13E - 2013 Applicable Mortality Table for 417(e) (unisex)

Fair market value of assets adjusted for contributions under IRC 430(g)(4) **Asset Valuation Method:**

Discrimination Test Assumptions:

HCE Determination - Based on all employees

Otherwise Excludable - Otherwise Excludable HCEs are included with the Not Otherwise Excludable employees

410(b)/401(a)(4) Testing:

Pre-Retirement - Interest -8.5% Post-Retirement - Interest -8.5%

> Mortality Table -U84 - 1984 Unisex

Permissively Aggregated Plans - Tested as a Single Plan

Compensation - Use current compensation to calculate the benefit accrual rate (annual method)

Testing Age - Normal retirement age or attained age, if older

Normal Form for MVAR - Joint with 50% Survivor Benefits

401(a)(26) Testing:

Compensation - Use current compensation to calculate the benefit accrual rate for 401(a)(26)

Testing Age - Normal retirement age or attained age, if older

SCHEDULE SB (Form 5500)

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan **Actuarial Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the

2013

OMB No. 1210-0110

Internal Revenue Code (the Code).

This Form is Open to Public Inspection

File as an attachme	ent to Form 5	500 or 5500-SF.			
For calendar plan year 2013 or fiscal plan year beginning 01/01/	2013	and endin	g i	12/31/2	013
Round off amounts to nearest dollar.					
Caution: A penalty of \$1,000 will be assessed for late filing of this report	unless reason	able cause is establishe	d.		
A Name of plan		B Three-digi	t		
Educational & Professional Services Internat Defined Benefit Pension Plan	cional, I	inc. plan numb	er (PN)	•	002
belined benefit rension Fidn				Harris Maria	
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF					
Trial sponsor's name as snown on line 2a of Form 5500 or 5500-SF		D Employer Id	dentification	Number (E	IN)
Educational & Professional Services Internat	ional, I	nc. 26-4349880)		
E Type of plan: X Single Multiple-A Multiple-B	Prior year plan	size: X 100 or fewer	101-500	☐ More tha	F00
Part I Basic Information	Thor year plan	Size. A 100 of fewer	101-300	iviore that	an 500
		2012			
1 Enter the valuation date: Month 12 Day 31 2 Assets:	Year2	2013			
_ (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				A 16-1 17 1	
a Market value			2a		808484
b Actuarial value			2b		808484
and a second sec		(1) Number of participation	ants	(2) F	unding Target
a For retired participants and beneficiaries receiving payment		117	0	= 2	0
b For terminated vested participants	. 3b		0		0
C For active participants:	- P				
(1) Non-vested benefits	, ,				195799
(2) Vested benefits	3c(2)		77 28		455499
(3) Total active	3c(3)		5		651298
d Total	. 3d		5	OMINET IN	651298
4 If the plan is in at-risk status, check the box and complete lines (a) and ((b)				
a Funding target disregarding prescribed at-risk assumptions			4a		
b Funding target reflecting at-risk assumptions, but disregarding transiti	on rule for pla	ns that have been in			2. (Control of the Control of the Co
at-risk status for fewer than five consecutive years and disregarding	g loading facto	or	4b		
5 Effective interest rate			5		6.16%
6 Target normal cost			6		178201
Statement by Enrolled Actuary					2000 2000 00000000000000000000000000000
To the best of my knowledge, the information supplied in this schedule and accompanying schedul accordance with applicable law and regulations in my opinion, each other assumption is reasonable.	es, statements and	attachments, if any, is complete	and accurate.	Each prescribe	d assumption was applied in
accordance with applicable law and regulations. In my opinion, each other assumption is reasonab combination, offer my best estimate of anticipated experience under the plan.	ie (taking into acco	ont the experience of the plan at	id reasonable e	expectations) ar	nd such other assumptions, in
SIGN					
HERE			0 (6/03/20	1.4
Signature of actuary		-		Date	
ROBERT M. HANESS				1404945	een oo
Type or print name of actuary		N. C.		nt enrollmer	
HANESS & ASSOCIATES, LLC				6-435-9	
Firm name		Tall		2000 5 07	
		Tele	pnone num	iber (includi	ng area code)
P.O. BOX 836					
ROCKLIN CA 95677					
Address of the firm					
f the actuary has not fully reflected any regulation or ruling promulgated under	the statute in	completing this schedule	check the	hox and so	<u> П</u>
nstructions			, 5551 1110	- en and sc	

Page 2	2 .	L
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Schedule SB (Form 5500) 2013

Pa	art II	Begir	nning of Year	Carryov	er Prefunding Baland	ces							
						-	(a)	Carryover balance		(b) l	Prefund	ing balance	
7		_			cable adjustments (line 13 f				0			0	
8			•	•	unding requirement (line 35				0			0	
9	Amount	remaini	ng (line 7 minus lir	ne 8)					0			0	
10	Interest	on line 9	9 using prior year's	actual ret	urn of7.00%				0			0	
11	Prior ye	ar's exc	ess contributions to	o be added	d to prefunding balance:								
	a Prese	nt value	of excess contribu	utions (line	: 38a from prior year)							8535	
					interest rate of 4.90%							0	
	C Total a	available	at beginning of cur	rent plan ye	ear to add to prefunding balan	ice						8535	
	d Portion	on of (c)	to be added to pre	funding ba	alance							8535	
12	Other re	eductions	s in balances due	to election	s or deemed elections				0			8535	
13	Balance	at begii	nning of current ye	ar (line 9 -	+ line 10 + line 11d – line 12)			0			0	
P	art III	Fun	ding Percenta	ages									
14	Funding	target a	attainment percent	age							14	124.13%	
15	Adjusted	d fundin	g target attainmen	t percentaç	ge						15	123.52%	
16					of determining whether can						16	92.45%	
17	If the cu	rrent val	lue of the assets o	f the plan i	is less than 70 percent of the	e funding tar	get, enter	such percentage			17	%	
Pa	art IV	Con	tributions and	d liquidi	ty shortfalls								
18	Contribu	utions m	ade to the plan for	the plan y	rear by employer(s) and emp	oloyees:							
(N	(a) Date 1M-DD-Y		(b) Amount pa employer((c) Amount paid by employees	(a) [(MM-DD		(b) Amount pa employer(s	-	(0	(c) Amount paid by employees		
3.0	3/16/2	013		250000	0								
						Totals ►	18(b)	2	250000	18(c)		0	
19	Discoun	ted emp	loyer contributions	s – see ins	tructions for small plan with	a valuation	date after t	he beginning of the					
	a Contr	ibutions	allocated toward u	ınpaid min	imum required contributions	from prior y	ears		19a			0	
	b Contr	ibutions	made to avoid res	trictions a	djusted to valuation date				19b			0	
	C Contri	ibutions a	allocated toward mi	nimum req	uired contribution for current y	ear adjusted	to valuation	n date	19c			255578	
20	Quarterl	y contrib	outions and liquidit	y shortfalls	3:						-		
	a Did th	ne plan h	nave a "funding sh	ortfall" for t	the prior year?						2	Yes No	
	b If 20a	is "Yes	," were required qu	uarterly ins	tallments for the current year	r made in a	timely mar	nner?				Yes X No	
	C If 20a	is "Yes,	" see instructions	and compl	ete the following table as ap	•							
		(4)			Liquidity shortfall as of e	nd of quarte	•				(4)	-	
		(1) 19	ST		(2) 2nd		(3)	3rd	+		(4) 4t	n	

Pa	rt V	Assumptio	ns Used to Determine I	Funding Target and Targe	et Normal Cost					
21	Disco	unt rate:								
	a Se	gment rates:	1st segment: 4.94%	2nd segment: 6.15%	3rd segment: 6.76%		N/A, fu	ıll yield	curve	e used
	b App	olicable month (enter code)			21b				0
22	Weigh	nted average ret	tirement age			22				62
23	Morta	lity table(s) (see	e instructions) X Pre	escribed - combined Pre	scribed - separate	Substitute)			
Pa	rt VI	Miscellane	ous Items							
24		-	· ·	uarial assumptions for the current	•		-		Yes	X No
25	Has a	method change	e been made for the current pla	an year? If "Yes," see instructions	regarding required attac	hment			Yes	X No
26	Is the	plan required to	provide a Schedule of Active	Participants? If "Yes," see instruc	ctions regarding required	attachment.		X	Yes	No
27				er applicable code and see instru		27		<u> </u>		
Pa	rt VII	Reconcilia	ation of Unpaid Minimu	m Required Contribution	s For Prior Years					
28	Unpai	d minimum requ	uired contributions for all prior	years		28				0
29				unpaid minimum required contrib		29				0
30	Rema	ining amount of	unpaid minimum required con	tributions (line 28 minus line 29).		30				0
Pa	rt VIII	Minimum	Required Contribution	For Current Year						
31	Targe	et normal cost a	nd excess assets (see instruct	ions):						
	a Targ	get normal cost	(line 6)			31a				178201
	b Exc	ess assets, if ap	oplicable, but not greater than	ine 31a		31b				157186
32	Amort	tization installme	ents:		Outstanding Bala	ince	1	nstallme	ent	
	a Net	shortfall amortiz	zation installment			0				0
	b Wa	iver amortization	n installment			0				0
33				ter the date of the ruling letter gra) and the waived amount	•	33				
34	Total	funding requirer	ment before reflecting carryove	r/prefunding balances (lines 31a	· 31b + 32a + 32b - 33)	34				21015
				Carryover balance	Prefunding balar	nce	To	tal bala	nce	
35			use to offset funding							0
36	Additi	onal cash requi	rement (line 34 minus line 35).			36				21015
37				ontribution for current year adjuste		37				255578
38	Prese	nt value of exce	ess contributions for current year	ar (see instructions)		<u> </u>				
						38a			:	234563
	b Por	tion included in	line 38a attributable to use of p	prefunding and funding standard of	arryover balances	38b				0
39	Unpai	d minimum requ	uired contribution for current ye	ear (excess, if any, of line 36 over	line 37)	39				0
40	Unpai	d minimum requ	uired contributions for all years			40				0
Pa	rt IX	Pension I	Funding Relief Under P	ension Relief Act of 2010	(See Instructions))				
41	If an e	lection was mad	de to use PRA 2010 funding re	lief for this plan:						
						П	2 plus 7 yea	ırs	15 v	years
				11a was made				2010		2011
42						42				
				d over to future plan years		43				

Schedule SB, line 19 - Discounted Employer Contributions

Educational & Professional Services International, Inc. 26-4349880 / 002

For the plan year 01/01/2013 through 12/31/2013 Valuation Date: 12/31/2013

	Date	Amount	Adjusted Contribution	Adjusted Prior Year Contribution	Adjusted Quarterly	Effective Rate	Penalty Rate
Deposited Contribution	08/16/2013	\$250,000					
Applied to Quarterly Contribution	04/15/2013	4,729	4,762	0	4,729	6.16	11.16
Applied to Quarterly Contribution	07/15/2013	4,729	4,817	0	4,729	6.16	11.16
Applied to Quarterly Contribution	10/15/2013	4,729	4,836	0	4,729	6.16	0
Applied to Additional Contribution	12/31/2013	229,359	234,563	0	0	6.16	0
Applied to MRC	12/31/2013	1,725	1,764	0	0	6.16	0
Applied to Quarterly Contribution	01/15/2014	4,729	4,836	0	4,729	6.16	0
Totals for Deposited Contribution		\$250,000	\$255,578	\$0	\$18,916		

Schedule SB, line 22 - Description of Weighted Average Retirement Age

Educational & Professional Services International, Inc. 26-4349880 / 002
For the plan year 01/01/2013 through 12/31/2013

The age reported is the average of the assumed retirement ages for all active participants as of the valuation date rounded to the nearest whole age. For an active late retiree, the assumed retirement age may be later than the Plan's normal retirement age. Each participant's rate of retirement is assumed to be 100% of his/her assumed retirement age.

Schedule SB, Part V Summary of Plan Provisions

Educational & Professional Services International, Inc. 26-4349880 / 002

For the plan year 01/01/2013 through 12/31/2013

Employer: Educational & Professional Services Internationa

Type of Entity - S-Corporation

EIN: 26-4349880 TIN: Plan #: 002 Plan Type: Defined Benefit

<u>Dates:</u> Effective - 01/01/2011 Year end - 12/31/2013 Valuation - 12/31/2013

Eligibility: All employees excluding non-resident aliens, members of an excluded class and union

Minimum age - 21 Months of service - 12

Hours Required for - Eligibility - 1000 Benefit accrual - 1 Vesting - 1000

Plan Entry - First day of 1st or 7th month of plan year on or next following eligibility satisfaction

Retirement: Normal - First of month coincident with or next following attainment of age 62 and completion of 5 years of participation

Early - Not provided

Average Compensation: Highest 3 consecutive years of service

Top Heavy Minimum Benefit - Highest 5 consecutive top heavy years of participation

Plan Benefits: Retirement - Derived from the graded benefit formula below:

Employee Classification Benefit Formula

HC1 not less than 1% of average monthly compensation per year of

participation

HC2 not less than 18% of average monthly compensation per year

of participation

not less than 0.5% of average monthly compensation per year

of participation

PC2 plus Fresh Start Accrued Benefit per year of participation
Et plus Fresh Start Accrued Benefit per year of participation

HC1 plus Fresh Start Accrued Benefit per year of participation

Accrued Benefit - Unit credit based on participation. Service prior to 01/01/2013 is excluded

Minimum Benefit - None Maximum Benefit - None

Maximum allowable distribution is lump sum equivalent of normal form not to exceed 415 maximum allowable distribution, which is the lesser amount computed using a) 5.5% interest and the Applicable Mortality Table or

b) the greater of plan actuarial equivalence interest and mortality or 417(e) Minimum

Death Benefit - Present Value of Accrued Benefit

Top Heavy Minimum: None

IRS Limitations: 415 Limits - Percent: 100 Dollar: \$205,000

Maximum 401(a)(17) compensation - \$255,000

Normal Form: Life Annuity

Optional Forms: Lump Sum

Life Annuity Guaranteed for 10 Years

Joint with 50%, 75% or 100% Survivor Benefit

Vesting Schedule:YearsPercent0-10%

0-1 0% 2 20% 3 40% 4 60% 5 80% 6 100%

Service is calculated using all years of service

Schedule SB, Part V Summary of Plan Provisions

Educational & Professional Services International, Inc. 26-4349880 / 002

For the plan year 01/01/2013 through 12/31/2013

Present Value of Accrued Benefit: Based on the greater of 417(e) or Actuarial Equivalence

417(e):

Interest Rates -

Segment #	Years	Rate %
Segment 1	0 - 5	0.96
Segment 2	6 - 20	3.57
Segment 3	> 20	4.58

Mortality Table - 13E - 2013 Applicable Mortality Table for 417(e) (unisex)

5%

Actuarial Equivalence:

Pre-Retirement - Interest - 5%

Mortality Table - None

Post-Retirement - Interest -

Mortality Table - G94 - 1994 Group Annuity Reserving Proj 2002, Scale AA (unisex)