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). 2013

OMB Nos. 1210-0110

1210-0089

This Form is Open to Public Inspection ▶ Complete all entries in accordance with the instructions to the Form 5500-SF.

Pa	rt I	Annual Report	Identification Information				
For o	calenda	ar plan year 2013 or fis	scal plan year beginning 01/01/	2013	and ending 1	2/31/2	2013
A T	his ret	urn/report is for:	X a single-employer plan	a multiple-employer pl	an (not multiemployer)		a one-participant plan
Вт	his ret	urn/report is:	the first return/report	the final return/report			_
		·	an amended return/report	a short plan year return	/report (less than 12 mg	onths)	
C (Check b	oox if filing under:	Form 5558	automatic extension			DFVC program
		gg	special extension (enter descr	ுiption)			
Pa	rt II	Basic Plan Info	rmation—enter all requested info	, ,			
	Name (1b	Three-digit
			EFINED BENEFIT PLAN				plan number
						4-	(PN) 001
						10	Effective date of plan 01/01/2008
		oonsor's name and ade TRUCTION CORP.	dress; include room or suite numbe	er (employer, if for a single-	employer plan)	2b	Employer Identification Number (EIN) 11-2844589
500 O	D WF	STBURY ROAD				2c	Sponsor's telephone number 516-967-5666
EAST	HILLS	, NY 11577				2d	Business code (see instructions) 238900
3a	Plan ad	dministrator's name ar	nd address XSame as Plan Spons	or Name Same as Plan	Sponsor Address	3b	Administrator's EIN
						3с	Administrator's telephone number
			e plan sponsor has changed since t	the last return/report filed fo	r this plan, enter the	4b	EIN
		EIN, and the plan nur or's name	mber from the last return/report.			4c	PN
5a	Total n	number of participants	at the beginning of the plan year			5a	3
b	Total n	number of participants	at the end of the plan year			5b	3
С			account balances as of the end of t		•	5c	
6a	Were	all of the plan's assets	s during the plan year invested in e	ligible assets? (See instruct	tions.)		X Yes No
	•	•	f the annual examination and repor			,	
			? (See instructions on waiver eligibi	,			
	-		it plan, is it covered under the PBG			_	
	ii tiie p	dan is a defined benef	——————————————————————————————————————		LINIOA SECTION 4021): .		res [] Not determined
			or incomplete filing of this return				
SB o	or Sche		her penalties set forth in the instruc nd signed by an enrolled actuary, a plete.				
SIGN		Filed with authorized/	valid electronic signature.				
HER	E	Signature of plan a	dministrator	Date	Enter name of individu	ual sig	ning as plan administrator
SIGN							
HER	E	Signature of emplo	yer/plan sponsor	Date	Enter name of individu	ual sig	ning as employer or plan sponsor
Prep	arer's i	name (including firm n	name, if applicable) and address; in	clude room or suite number	(optional)	Prep	parer's telephone number (optional)
					ļ		

Form 5500-SF 2013 Page **2**

Pai	rt III Financial Information										
7	Plan Assets and Liabilities		(a) Beginning of Yea				(b) End	of V	nar		
	Total plan assets	7a	(a) beginning of Tea				(b) Ella		369290)	
	Total plan liabilities	7b							700200		
	Net plan assets (subtract line 7b from line 7a)	7c	33123	39				3	869290)	
	Income, Expenses, and Transfers for this Plan Year	70					/b) T		00200		
	Contributions received or receivable from:		(a) Amount				(b) 1	otai			
	(1) Employers	8a(1)									
	(2) Participants	8a(2)									
	(3) Others (including rollovers)	8a(3)									
b	Other income (loss)	8b	3805	1							
С	Total income (add lines 8a(1), 8a(2), 8a(3), and 8b)								38051		
	Benefits paid (including direct rollovers and insurance premiums to provide benefits)	8d									
е	Certain deemed and/or corrective distributions (see instructions)	8e									
f	Administrative service providers (salaries, fees, commissions)	. 8f									
g	Other expenses	8g									
h	Total expenses (add lines 8d, 8e, 8f, and 8g)	8h									
i	Net income (loss) (subtract line 8h from line 8c)	8i							38051		
j	Transfers to (from) the plan (see instructions)	8j									
Pai	t IV Plan Characteristics	, ,	L								
9a											
b	b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:										
Par	t V Compliance Questions										
	•				Yes	No		A			
10 a	During the plan year: Was there a failure to transmit to the plan any participant contribu	tione withi	n the time period described in		162	NO		Amo	ount		
	29 CFR 2510.3-102? (See instructions and DOL's Voluntary Fidu Were there any nonexempt transactions with any party-in-interest	ıciary Corı	rection Program)	10a		X					
D	on line 10a.)			10b		X					
				10c	X					100	000
d				100						100	000
	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	Has the plan failed to provide any benefit when due under the pla	n?		10f		X					
g	Did the plan have any participant loans? (If "Yes," enter amount a	s of vear e	end.)	10q		Χ					
h		(See instru	uctions and 29 CFR	10h		X					
ī	If 10h was answered "Yes," check the box if you either provided the	ne require	d notice or one of the	10i							
Dort											
11											
44-	5500) and line 11a below)							^	Yes	Ц	No
	Enter the unpaid minimum required contribution for current year fr		,			11a					
12	Is this a defined contribution plan subject to the minimum funding			or se	ection	302 of	ERISA?		Yes	X	No
	(If "Yes," complete line 12a or lines 12b, 12c, 12d, and 12e below,			_4! - ·				ا جاد	44		
	If a waiver of the minimum funding standard for a prior year is beir granting the waiver.		Mon		, and e	enter th Day	ne date of	he le Yea		ıng	
	you completed line 12a, complete lines 3, 9, and 10 of Schedule	•			1	4.6.	1				
b	Enter the minimum required contribution for this plan year					12b					

Page	3	- [1
------	---	-----	---

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 Tr	ust's EIN	

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 Internal Revenue Code (the Code).

2013

OMB No. 1210-0110

This Form is Open to Public Inspection

	T CHSION DC	ieii O	daranty Corpo	radori		File as a	an attacl	hme	nt to Form	5500 or	5500·	-SF.						
For	calendar	plan	year 2013	or fiscal plan y	ea	r beginning 0	1/01/201	3				and endir	ng 12/3	31/201	3			
				earest dollar.														
			nalty of \$1,	000 will be ass	es	sed for late filing o	f this rep	ort u	unless reaso	onable ca		s establishe	ed.			1		
	Name of p			RP. DEFINED	RE	NEELT DI AN					В	Three-dig					001	
JAI	A CONS	INOC		IN . DEI INED		INCITITEAN						plan numl	oer (PN)		<u> </u>			
С	Plan spons	or's	name as sh	hown on line 2	a o	f Form 5500 or 55	00-SF				D	Employer I	dentifica	tion N	umber	(EIN)		
			CTION COF									, ,	11-284	4589		,		
													11 204	1000				
E 1	ype of pla	n: X	Single	Multiple-A	П	Multiple-B		F	Prior year pla	an size: >	100	or fewer	101-5	000	More	than 500)	
P	art I	Raci	c Inform	ation						<u>L</u>								
1			uation date		Mo	nth <u>01</u> [Day0	1	Year _	2013								
2	Assets:	o vait	adion date	•	VIO						_							
_		t valı	ıe										. 2a					331239
	_												2b					331239
3				nt count break								er of particip			(2)	Fundin	g Target	
						es receiving payme	ent		3a	(1)1	idilib	or or particip	anto		(-)	Tariani	g raiget	
	_																	
			participants															
									3c(1)									122542
	(2)								2 (2)									183814
	(3)								- :-:				3					306356
	d Total												3					306356
4	If the pla	an is i	n at-risk st	atus, check the	e b	ox and complete li	nes (a) a	and (b)		П							
						at-risk assumption							4a					
		•		٥.		ptions, but disrega												
						secutive years and							4b					
5	Effective	inte	rest rate										5					4.81 %
6	Target r	orma	l cost										6					
	-		olled Actu	•														
	accordance v	ith app	olicable law an	d regulations. In my	opi	this schedule and accominion, each other assump	npanying so otion is reas	chedul sonab	es, statements le (taking into a	and attachm ccount the e	nents, if experier	f any, is comple nce of the plan	te and accu and reason	ırate. Ea able exp	ach prescr pectations	ibed assur) and such	mption was other assu	applied in imptions, in
		offer m	y best estimat	e of anticipated exp	erie	ence under the plan.												
	SIGN																	
Н	ERE										_				07/28/2	2014		
				Signa	tur	e of actuary									Date			
ART	HUR E. T	EILE	R, A.S.A.								_				11-01	157		
				Type or pr	int	name of actuary							Most ı	ecent	enrollm	nent nur	nber	
PEN	ISION TA	K STI	RATEGIES	S, INC.							_				212-68	31-7970)	
1.40	0 000 40	10/03/	CHITE 45		irn	n name						Te	lephone	numb	er (incl	uding a	rea code)
	O BROAD N YORK,		, SUITE 15 0018)U S														
				Add	res	s of the firm					_							
If the	actuary h	as no	ot fully refle	ected any requi	ati	on or ruling promu	lgated ur	nder	the statute	in comple	etina	this schedu	le, check	the h	ox and	see		П
	uctions	30 110	2. Tuny 10110	a any rogu	J. (1)	c or raining profitio	.gatoa ai		o olalalo	compic	·g		, 5/1001	D	on and	300		

Page	2	- [1
------	---	-----	---

Pa	rt II	Begir	ning of Year	Carryov	ver and Prefunding Ba	lances							
7	Dalassa	4 11:		-6	:		(a) (Carryover balance		(b) F	Prefund	ing balance	
7		•	0 , ,		icable adjustments (line 13 f	•							
8			•	-	funding requirement (line 35								
9	Amoun	nt remaini	ng (line 7 minus lir	ne 8)									
10	Interes	t on line 9	using prior year's	s actual re	turn of <u>8.54</u> %								
11	Prior ye	ear's exce	ess contributions t	o be adde	d to prefunding balance:								
	a Pres	ent value	of excess contrib	utions (line	e 38a from prior year)								
					interest rate of 6.98 %								0
	C Total	available	at beginning of cur	rent plan y	ear to add to prefunding balan	ce							
	d Port	ion of (c)	to be added to pre	efunding b	alance								
12	12 Other reductions in balances due to elections or deemed elections								0				
13	Balanc	e at begir	nning of current ye	ear (line 9	+ line 10 + line 11d – line 12								
P	art III	Fun	ding Percenta	ages									
14	Fundin	g target a	ttainment percent	age							14	108.12	%
15	Adjuste	ed funding	g target attainmen	t percenta	ge						15	108.12	%
16	6 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement							%					
17	7 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage												
Pa	Part IV Contributions and Liquidity Shortfalls												
18	Contrib	outions ma	ade to the plan for	the plan y	/ear by employer(s) and emp	loyees:							
(N	(a) Da IM-DD-Y		(b) Amount p employer		(c) Amount paid by employees	(a) D (MM-DD)		(b) Amount pa employer(•	(0		int paid by loyees	
(55 .	,	omployer.	(0)	omproyoco	(111111 22	,	ompleyer(<u> </u>		Omp		
						Totals ▶	18(b)			18(c)			
19	Discou	nted emp	loyer contributions	s – see ins	tructions for small plan with	a valuation	date after th	ne beginning of the	e year:				
	a Conf	tributions	allocated toward	unpaid mir	nimum required contributions	from prior y	ears		19a				
	b Cont	tributions	made to avoid res	trictions a	djusted to valuation date				19b				
	C Cont	ributions a	allocated toward mi	nimum req	uired contribution for current y	ear adjusted	to valuation	n date	19c				
20	Quarte	rly contrib	outions and liquidit	y shortfall	s:								
	a Did t	the plan h	nave a "funding sh	ortfall" for	the prior year?							Yes No	5
	b If line	e 20a is "	Yes," were require	ed quarterl	y installments for the current	year made	in a timely	manner?			[Yes No)
	C If line	e 20a is "	Yes," see instructi	ons and c	omplete the following table a	s applicable	<u>:</u>						
		/43			Liquidity shortfall as of e	nd of quarte					(4)		
		(1) 19	St		(2) 2nd		(3)	3rd			(4) 4t	n	

Pa	rt V Assumption	ns Used to Determine	Funding Target and Targe	et Normal Cost				
21	Discount rate:							
	a Segment rates:	1st segment: 4.94%	2nd segment: 6.15%	3rd segment: 6.76 %		N/A, full y	ield cur	ve used
	b Applicable month (enter code)			21b			3
22	Weighted average ret	irement age			22			65
23	Mortality table(s) (see			scribed - separate	Substitute	;		
Pa	rt VI Miscellane	ous Items			_			
24	Has a change been m	nade in the non-prescribed act	uarial assumptions for the current	• •				. V No
25			on year? If "Yes " one instructions				Yes	
		<u>'</u>	an year? If "Yes," see instructions	0 0 .			느	
			Participants? If "Yes," see instruc		attachment.		Yes	s X No
27	If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment							
Pa	rt VII Reconcilia	ation of Unpaid Minimu	ım Required Contribution	s For Prior Years				
28	Unpaid minimum requ	uired contributions for all prior	years		28			
29			I unpaid minimum required contrib		29			
30	Remaining amount of	unpaid minimum required cor	ntributions (line 28 minus line 29).		30			
Pa	rt VIII Minimum	Required Contribution	For Current Year					
31		nd excess assets (see instruct						
	a Target normal cost ((line 6)			31a			
	b Excess assets, if ap	oplicable, but not greater than	line 31a		31b			
32	Amortization installme			Outstanding Bala	ance	Inst	allment	
	a Net shortfall amortiz	zation installment						
	b Waiver amortization	n installment						
33			ter the date of the ruling letter gra		33			
34			er/prefunding balances (lines 31a		34			
<u> </u>	rotar farialing roquiron	none polore remodering carryove	Carryover balance	Prefunding bala	-	Total	balance	2
35	Balances elected for u	use to offset funding						
36	Additional cash requir	rement (line 34 minus line 35).			36			
37			ontribution for current year adjuste		37			
38	,	ss contributions for current ye						
					38a			
			prefunding and funding standard o		38b			
39		·	ear (excess, if any, of line 36 over		39			
40)		40			
		· · · · · · · · · · · · · · · · · · ·	Pension Relief Act of 2010)			
		de to use PRA 2010 funding re		(00000000000000000000000000000000000000	,			
	a Schedule elected					2 plus 7 years	15	years
			41a was made				2010	2011
42					42	<u> </u>	-	1
			d over to future plan years		43			

Safa Construction Corp. Defined Benefit Plan

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

Plan Name: Safa Construction Corp. Defined Benefit Plan

Normal Retirement Benefit

Actuarial Cost Method: PPA06 Funding Rules

IRC430 Funding Yield Curve Segmented Rates

First Segment: 1.72%
Second Segment: 4.58%
Third Segment: 5.67%

IRC404 Funding Yield Curve Segmented Rates

First Segment: 4.94%
Second Segment: 6.15%
Third Segment: 6.76%

Pre-Retirement Valuation Assumptions

Retirement Valuation Assumptions

Mortality Table 2013 430(h)(3)(A)-Optional combined

Mortality table applied on a static basis

Optional Forms Assumption

100% of participants will elect the Plan Normal Form

Pre-Retirement Actuarial Equivalence Assumptions

Investment Earnings 5% Effective annual rate

Retirement Actuarial Equivalence Assumptions

Investment Earnings 5% Effective annual rate
Mortality Table 1994 GAR PROJ 2002

Assumptions for IRC415 Maximum Benefit Actuarial Adjustments

Investment Earnings 5% Effective annual rate

Mortality Table 2013 417(e)(3) Applicable Mortality Table

Retirement Protection Act of 1994 Interest Rate for non-life annuities

Investment Earnings 5% Effective annual rate

Safa Construction Corp. Defined Benefit Plan Schedule SB, line 22 - Description of Weighted Average Retirement Age Plan Name: Safa Construction Corp. Defined Benefit Plan

The weighted average retirement age of 65 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.

Safa Construction Corp. Defined Benefit Plan Schedule SB, Part V - Summary of Plan Provisions Plan Name: Safa Construction Corp. Defined Benefit Plan

Plan Effective Date January 1, 2008

Plan Anniversary Date January 1, 2013

Participation Eligibility Minimum age: 21 and

Minimum months of service: 12

Plan Entry Date 01/01 or 07/01 coincident with or following the satisfaction of the requirements

Normal Retirement Date First day of the month coincident with or following age 65 and the completion of

5 years of participation

Not to exceed the later of age 65 and 5 years of participation

Normal Form of Benefit Single Life Annuity

(Qualified Joint and Survivor annuity is the required standard option)

Normal Retirement Benefit Benefit reduced before offset by 1/0 for each year of service less than 0

Maximum total years of service: 25
Maximum years of past service: 5
Minimum benefit: \$833.00 per month

IRC415 maximum annual benefit: \$205,000 Actuarially adjusted under IRC415(b) for benefit

commencement age and benefit form
Benefit limited to 100% of compensation

Minimum benefit: 2% of compensation per year of topheavy plan service up to

10 (actuarially adjusted for benefit form)

Compensation Definition Highest consecutive 3 year average salary over all service

Annual salary up to \$255,000 considered

Pre-Retirement Death Benefit Lump sum payable on death of participant

Benefit Amount 100 times the normal retirement benefit

Minimum death benefit: \$2,000.00

Vested Retirement Benefit Vesting Schedule:

20% a year after 3 years(100% after 7 years)

Exclude service before effective date Computation Period: Elapsed Time Method

Based on periods of service rounded to nearest year

Accrued Retirement Benefit Pro-rated on service

Maximum number of years of past credited benefit accrual service is 5

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

2013

This Form is Open to Public Inspection

Annual Report Identification Information			
For calendar plan year 2013 or fiscal plan year beginning		and ending	
A This return/report is for:	a multiple-employe	er plan (not multiemployer)	a one-participant plan
B This return/report is: the first return/report	the final return/rep	ort	
an amended return/report	a short plan year r	eturn/report (less than 12 m	on t bs)
C Check box if filing under: Form 5558	automatic extension	on 🔺 🗸	☐ DFVC program
special extension (enter descrip	tion)		
Basic Plan Information—enter all requested information in the context in	rmation		
1a Name of plan			D Three-digit
Safa Construction Corp. Defined Benefit Plan			plan number (PN) ▶ 001
	*		C Effective date of plan
			1/1/2008
2a Plan sponsor's name and address; include room or suite number	(employer, if for a sing	le-employer plan) 2	2b Employer Identification Number
Safa Construction Corp.			(EIN) 11-2844589
Sala Construction Corp.			C Sponsor's telephone number 16-967-5666
500 Old Westbury Road	• 4		2d Business code (see instructions)
East Hills, NY 11577			38900
3a Plan administrator's name and address X Same as Plan Sponsor	Name X Samues		b Administrator's EIN
Same		3	C Administrator's telephone number
<u> </u>			
4 If the name and/or EIN of the plan sponsor has changed since	a last-return/report filed	I for this plan, enter	ID EIN
the name, EIN, and the plan number from the last return/ngo.			-
Sponsor's name Total number of participants at the beginning of the planned	-		lc PN
b Total number of participants at the end of the plan y ar	***************************************	<u> </u>	ia 3
C Number of participants with account balances as of the	plan year (defined be	nefit plans do not	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
complete this item)		5	ic
6a Were all of the plan's assets during the plan year invested in eligit	ble assets? (See instru	ıctions.)	X Yes No
D Are you claiming a waiver of the annual examination and report of	f an independent quali	fied public accountant (IQPA	» — —
under 29 CFR 2520.104-46? (See instructions of waiver eligibility If you answered "No" to either light to on the 6b, the plan car	nnotuse Form 5500.	SE and must instead use	X Yes No
C If the plan is a defined benefit plan, s i collered under the PBGC			
Caution: A penalty for the life or acomplete filing of this return			
Under penalties of perjury and ther enalties set forth in the instructions	s, I declare that I have	examined this return/report.	including if applicable a Schedule
SB or Schedule MB completed to signer by an enrolled actuary, as we	ell as the electronic ver	sion of this return/report, an	d to the best of my knowledge and
belief, it is true, correct, and compile			
Ehm Salot	7/28/2014	Ebrahim Safakamal	
Signature of plan administrator	Date	Enter name of individual s	signing as plan administrator
Ehr Sahol	7/28/2014	Ebrahim Safakamal	
Signature of employer/plan sponsor	Date	Enter name of individual s	signing as employer or plan sponsor
Preparer's name (including firm name, if applicable) and address; include			Preparer's telephone number (optional)
			,

	Financial Information									
7	Plan Assets and Liabilities		(a) Beginning	of Yea	——— F			(b) End of Ye		
a	Total plan assets	7a			331,23	9		of Elia of 16	369,290	
b	Total plan liabilities	7b				o			303,230	
c		7c		-	331,23	-			200,000	
8	Income, Expenses, and Transfers for this Plan Year		(a) Amo		301,20	┪			369,290	
а	_		(a) Allio	unt				(b) Total		
	(1) Employers	8a(1)				0				
	(2) Participants	8a(2)				D:				
	(3) Others (including rollovers)	8a(3)				0				
<u>b</u>	Other income (loss)	8b			38, 6					
<u>C</u>	Total income (add lines 8a(1), 8a(2), 8a(3), and 8b)	8c			00,		7	<u> </u>	20.054	
đ	Benefits paid (including direct rollovers and insurance premiums								38,051	
	to provide benefits)	8d								
<u>e</u>	Certain deemed and/or corrective distributions (see instructions)	8e			1					
<u>f</u>	Administrative service providers (salaries, fees, commissions)	8f			•					
g	Other expenses	8g								
<u>h</u>		8h								
<u> </u>	Net income (loss) (subtract line 8h from line 8c)	81							00.054	
i_	Transfers to (from) the plan (see instructions)	8j		—					38,051	
	Plan Characteristics	1	•							
9a										
b	If the plan provides welfare benefits, enter the applicable welfare fea	turn code	from the List of Plan (haracte	ristic C	odes i	n the in	structions:		
		Y	<u> </u>					a		
40	Compliance Questions								· · · · · · · · · · · · · · · · · · ·	
	During the plan year:	~			Yes	No		Amoun	ıt	
a	Was there a failure to transmit to the plan any participant contributions v	nin the time	period described							
b	in 29 CFR 2510.3-102? (See instructions and DOL's Voluntary Fiduciary O Were there any nonexempt transactions with any party-in-in-in-in-in-in-in-in-in-in-in-in-in-	Cion Pr	rogram)	10a	<u> </u>	X	↓			
	reported on line 10a.)	o not incl	ude transactions	406	1	x				
С	Was the plan covered by a fidelity band?			10b	X	 ^	┼──			
d	Did the plan have a loss, whether or not reimbursed y the	elity bond	that was caused by	10c	 ^ -	<u> </u>	┼		100,000	
	rade of distroffesty?			10d		x				
е	Were any fees or commissions paid to any soker agents or other	nercone hi	/ on incurrence				 			
	the plant (Care in the state of other organization dat provides some of	er all of the	benefits under	,						
f	Has the plan failed to provide any benefit then gue under the plan?	***************		10e		X	├──			
g i	Did the plan have any participant log 157 of "Yes," enter amount as of	from and		10f		X	├			
n i	f this is an individual account lan. his there a blackout period? (See	a inetructio	no and 20 OFD	10g		Х				
				10h	l	X				
	I TUIT Was answered "YEL" check the You if you either provided the a		Alan							
	skeepuoris to providing the face a plied under 29 CFR 2520.101-3			10i						
11	Pension Funding Compliance									
	5500) and line 11a below)									
	nter the unpaid minimum required contribution for current year from	****						X Yes	No	
12	s this a defined contribution plan subject to the minimum funding and in	ocnedule	55 (Form 5500) line 39		1	1a			0	
	s this a defined contribution plan subject to the minimum funding requirement "Yes," complete line 12a or lines 12b, 12c, 12d, and 12e below, as	ents of section	on 412 of the Code or sec	tion 302	of ERIS	SA?		Yes	X No	
a H	a waiver of the minimum funding standard for a prior year is being	applicable.	.)							
g	a waiver of the minimum funding standard for a prior year is being a ranting the waiver.	mortized if	i unis pian year, see ins	tructions	s, and e		ne date		uling	
lf yo	u completed line 12a, complete lines 3. 9. and 10 of Schodule 8	ID /E	SEOO)	4.5		Day _		Year		
b E	ff 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									
					1	2b				

	Form 5500-SF 2013 Page 3 -				
C	Enter the amount contributed by the employer to the plan for this plan year		12c		
	Subtract the amount in line 12c from the amount in line 12b. Enter the result (enter a min negative amount)	nus sign to the left of a	12d		0
е	Will the minimum funding amount reported on line 12d be met by the funding deadline?			Yes	No N/A
	Plan Terminations and Transfers of Assets	`	-		
13a	Has a resolution to terminate the plan been adopted in any plan year?			Yes X	lo
	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 anothe control of the PBGC?		he		Yes X No
C	If during this plan year, any assets or liabilities were transferred from this plan to another which assets or liabilities were transferred. (See instructions.)	r plan(s), identify the pla	(s) to		
1	3c(1) Name of plan(s):		(2) E	IN(s)	13c(3) PN(s)
	• • • • • • • • • • • • • • • • • • •				
	Trust Information (optional)				

SCHEDULE SB (Form 5500)

Department of the Treasury Internal Revenue Service

Pension Benefit Guaranty Corporation

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).

File as an attachment to Form 5500 or 5500-SF

OMB No. 1210-0110

2013

This Form is Open to Public Inspection

For cal	endar plan year 2013 or fiscal plan year beginning	and ending	
→ F	ound off amounts to nearest dollar.		
) (aution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is	s established.	
A Na	me of plan	Three-digit	
Safa (Construction Corp. Defined Benefit Plan	plan number (PN	▶ 001
			**
			and the second second
C Pla	n sponsor's name as shown on line 2a of Form 5500 or 5500-SF	Employer lentines	ation Number (EIN)
	Construction Corp. : [11		
E Ty	pe of plan: X Single Multiple-A Multiple-B F Prior year plan size: X 1	0 or fewe 101-5	00 More than 500
Part	Basic Information		
	nter the valuation date: Month 01 Day 01 Year 2013		
	ssets:		
a	Market value	2a	331,239
	Actuarial value	2b	
<u></u>			331,239
· -		er of participants	(2) Funding Target
a	For retired participants and beneficiaries receiving payment		0
b	For terminated vested participants	TO PROPERTY OF THE PARTY OF THE	0
С	For active participants:		militari de la constanta de la
	(1) Non-vested benefits	aci.	122,542
	(2) Vested benefits 3c(2)		183,814
	(3) Total active	3	306,356
d	Total	. 3	306,356
4 If	the plan is in at-risk status, check the box and complete lives, 1 and (b)		
а	Funding target disregarding prescribed at-risk assumptions	4a	The art at Addition to the second of the sec
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have	e been	
	in at-risk status for fewer than five consecutive vers are disregarding loading factor	e been 4b	
5 E	fective interest rate	5	4.81%
6 Ta	arget normal cost	6	0
State	nent by Enrolled Actuary		
To th	e best of my knowledge, the information supplied in the schedul, and accompanying schedules, statements and attachments, if any rdance with applicable law and regulations. In my opinion each other assumption is reasonable (taking into account the experience	y, is complete and accurate. E	ach prescribed assumption was applied in
	pination, offer my best estimate of anticipated expenses a under the plan.	or the plan and reasonable o	Appellations) and basis outer about profits, in
SIC	New York Control		
HE	New Etiler		7/28/2014
	Signature of actuary	•	Date
ARTH		01157	
7 11 11 11	Type or print name of actuary		nt enrollment number
DENIC	ž. , , , , , , , , , , , , , , , , , , ,	12-681-7970	
1 LIVO	Firm name		ber (including area code)
4400		releptione num	indicating and dodo)
	BROADWAY, SUITE 1509		
NEW	YORK NY 10018 Address of the firm		
			· · · · · · · · · · · · · · · · · · ·
If the a	ctuary has not fully reflected any regulation or ruling promulgated under the statute in completing t	nis schedule, check th	e box and see

Schedule SB	(Form	5500	2013
CONTOURN CD	(· O	0000	, 2010

Page 2-

Balance at beginning of prior year after applicable adjustments (line 13 from prior year) 8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year) 9 Amount remaining (line 7 minus line 8) 10 Interest on line 9 using prior year's actual return of 8,54% 10 Interest on line 9 using prior year's actual return of 8,54% b Interest on (a) using prior year's effective interest rate of 6,93% except as otherwise provided (see instructions) c Total available at beginning of current plan year to add to prefunding balance d Portion of (c) to be added to prefunding balance 13 Balance at beginning of current year (line 9 + line 10 + line 11d - line 12) Part IIII Funding Percentages 14 Funding target attainment percentage 15 Adjusted funding target attainment percentage 16 Prior year's funding regretation percentage for purposes of determining whether carryover/profunding balances shall be a funding registered to reduce current year's funding registered to the plan is issist than 70 percent of the funding target attainment percentage 17 If the current value of the assets of the plan is issist than 70 percent of the funding target attainment percentage in the plan is issist than 70 percent of the funding target attainment percentage in the plan is issist than 70 percent of the funding target attainment percentage in the plan is issist than 70 percent of the funding target attainment percentage in the plan is issist than 70 percent of the funding target attainment percentage in the plan to the plan for the plan year by employer(s) and every the percentage in the plan is issist than 70 percent of the funding target attainment percentage in the plan year by employer(s) and every the percentage in the plan to the plan for the plan year by employer(s) employe	Р	art II Be	ginning of Year	Carryove	r and Prefundir	ng Bal	ances									
Year) O	_								a) Carryover balanc	ance (b) Prefunding bala						
9 Amount remaining (line 7 minus line 8) 0 10 Interest on line 9 using prior year's actual return of 8.54% 0 11 Prior year's excess contributions to be added to prefunding balance: a Present value of excess contributions (line 38a from prior year) b Interest on (a) using prior year's effective interest rate of 6.93% except as otherwise provided (see instructions). c Total available at beginning of current plan year to add to prefunding balance d Portion of (c) to be added to prefunding balance d Portion of (c) to be added to prefunding balance stopping of current year (line 9 + line 10 + line 110 - line 12) 0 Part IIII Funding Percentages 14 Funding target attainment percentage 14 108.12 15 Adjusted funding target attainment percentage 15 108.12 16 Prior year's funding precuriting for purposes of determining whether carryover/prefunding balance shape be used to reduce 16 138.12 17 If the current value of the assets of the plan is less than 70 percent of the funding larget attainment percentage 17 17 Part Vivil Contributions and Liquidity Shortfalls 18 Contributions made to the plan for the plan year by employer(s) and etc. over the property of the plan plan for the plan year by employer(s) and etc. over the plan year by employer(s) employees (b) Amount paid by employer(s) employees (b) Amount paid by employer(s) employees (b) Amount paid by employer(s) employees (c) Amount paid by employer(s) employees (b) Amount paid by employer(s) employees (c) Amount paid by employer(s) employees (c) Amount paid by employees (c) Amount paid by employer(s) employees (c) Amount paid by employees (c) Amount paid b	7 	year)									0 0					
9 Amount remaining (line 7 minus line 8) 0 10 Interest on line 9 using prior year's actual return of 8.54% 0 11 Prior year's excess contributions to be added to prefunding balance: a Present value of excess contributions (line 38a from prior year) b Interest on (a) using prior year's effective interest rate of 6.98% except as otherwise provided (see instructions) C Total available at beginning of current plan year to add to prefunding balance d Portion of (c) to be added to prefunding balance 0 Portion of (c) to be added to prefunding balance 12 Other reductions in balances due to elections or deemed elections 0 13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12) 0 Part IIII* Funding Percentages 14 Funding target attainment percentage 15 Adjusted funding target attainment percentage 16 Prior year's funding percentage for purposes of determining whether carryover/prefunate balances may be used to reduce current year's funding requirement. 17 If the current value of the assets of the plan is less than 70 percent of the funding signs enter such percentage. 17 If the current value of the assets of the plan is less than 70 percent of the funding signs enter such percentage. 18 Contributions and Liquidity Shortfalls 18 Contributions and Liquidity Shortfalls 18 Contributions and Liquidity Shortfalls 19 Discounted employer contributions – see institutions we small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid in minute squired contributions from prior years 19 Discounted employer contributions – see institutions we small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid in minute squired contributions from prior years 19 Discounted employer contributions – see institutions from prior years 19 Discounted employer contributions – see institutions and valuation date after the beginning of the year: a Contributions and coated toward unpaid in minute squired contributions from prior years 19 D	8	to the state of the to the state of the stat												•		
10 Interest on line 9 using prior year's actual return of 8.54% 0 11 Prior year's excess contributions to be added to prefunding balance: a Present value of excess contributions (line 38a from prior year) b Interest on (a) using prior year's effective interest rate of 6.98% except as otherwise provided (see instructions) c Total available at beginning of current plan year to add to prefunding balance d Portion of (c) to be added to prefunding balance d Portion of (c) to be added to prefunding balance d Portion of (c) to be added to prefunding balance d beginning of current year (line 9 + line 10 + line 11d - line 12) 0 12 Other reductions in balances due to elections or deemed elections 0 13 Balance at beginning of current year (line 9 + line 10 + line 11d - line 12) 0 14 Funding Percentages 15 Adjusted funding target attainment percentage 15 108.12 15 Adjusted funding target attainment percentage 15 108.12 16 Prior year's funding percentage for purposes of determining whether carryover/prefund to be used to reduce current year's funding requirement 16 136.12 17 If the current value of the assets of the plan is less than 70 percent of the funding arget enter such percentage 17 18 Contributions and Liquidity Shortfalls 18 Contributions ande to the plan for the plan year by employer(s) and exployes: (a) Date (b) Amount paid by (c) Am	9													0		
11 Prior year's excess contributions to be added to prefunding balance: a Present value of excess contributions (line 38a from prior year) b Interest on (a) using prior year's effective interest rate of 6.95% except as otherwise provided (see instructions). C Total available at beginning of current plan year to add to prefunding balance. d Portion of (c) to be added to prefunding balance. 12 Other reductions in balances due to elections or deemed elections. 13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12). 0 Part IIII Funding Percentages 14 Funding target attainment percentage. 15 Adjusted funding target attainment percentage. 16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce unrent year's funding requirement. 17 If the current value of the assets of the plan is less than 70 percent of the funding age enter such percentage. 17 If the current value of the assets of the plan year by employer(s) and ear love. (a) Date (b) Amount paid by (c) Amount paid by (c) Amount paid by employer(s) and ear love. (a) Date (b) Amount paid by employer(s) employers. 19 Discounted employer contributions – see inst. valons y small plan with a valuation date after the beginning of the year: a Contributions made to avoid restriction adjusted to valuation date. 19 Discounted employer contributions – see inst. valons y small plan with a valuation date after the beginning of the year: a Contributions made to avoid restriction adjusted to valuation date. 19 Discounted employer contributions – see inst. valons y small plan with a valuation date after the beginning of the year: a Contributions made to avoid restriction adjusted to valuation date.											, 0					
a Present value of excess contributions (line 38a from prior year) b Interest on (a) using prior year's effective interest rate of 6.98% except as otherwise provided (see instructions) C Total available at beginning of current plan year to add to prefunding balance d Portion of (c) to be added to prefunding balance 12 Other reductions in balances due to elections or deemed elections 13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12) Part IIII Funding Percentages 14 Funding target attainment percentage 15 Adjusted funding target attainment percentage 16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce to reduce the season of the plan is less than 70 percent of the funding arget enter such percentage 17 If the current vear's funding requirement. 18 Contributions and Liquidity Shortfalls 18 Contributions made to the plan for the plan year by employer(s) and earloyses: (a) Date (b) Amount paid by employer(s) employer(s) employer(s) employer(s) (b) Amount paid by employer(s) (c) Amount paid by employer(s) (d) Date (b) Amount paid by employer(s) (e) Amount paid by employer(s) (f) Amount paid by employer(s) (g) Date (h) Amount paid by employer(s)																
b Interest on (a) using prior year's effective interest rate of as otherwise provided (see instructions) c Total available at beginning of current plan year to add to prefunding balance d Portion of (c) to be added to prefunding balance 12 Other reductions in balances due to elections or deemed elections 13 Balance at beginning of current year (line 9 + line 10 + line 11d - line 12) 0 Part IIII Funding Percentages 14 Funding target attainment percentage 15 Adjusted funding target attainment percentage 16 Prior year's funding percentage for purposes of determining whether carryover/prefund g balances may be used to reduce current year's funding requirement. 17 If the current value of the assets of the plan is less than 70 percent of the funding args enter such percentage 17 Part IVI Contributions and Liquidity Shortfalls 18 Contributions made to the plan for the plan year by employer(s) and en love (b) Amount paid by employer(s) and en love (c) Amount paid by employer(s) (c) Amount paid by employer(s) (c) Amount paid by employer(s) (e) Amount paid by em	• •															
as otherwise provided (see instructions) C Total available at beginning of current plan year to add to prefunding balance d Portion of (c) to be added to prefunding balance 12 Other reductions in balances due to elections or deemed elections 3 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12) 9 Part IIII Funding Percentages 14 Funding target attainment percentage 15 108.12 15 Adjusted funding target attainment percentage 16 Prior year's funding percentage for purposes of determining whether carryover/prefund by balances may be used to reduce current year's funding requirement 17 If the current value of the assets of the plan is less than 70 percent of the funding arges enter such percentage 17 Part IVI Contributions and Liquidity Shortfalls 18 Contributions made to the plan for the plan year by employer(s) and exployers (a) Date (b) Amount paid by (c) Amount paid by (a) Date (b) Amount paid by employer(s) employer(s) employer(s) employer(s) employer(s) employer(s) 19 Discounted employer contributions – see instructions of the plan with a valuation date after the beginning of the year: a Contributions made to avoid restrictions adjusted to valuation date. 19 Discounted employer contributions – see instructions of the plan with a valuation date after the beginning of the year: a Contributions made to avoid restrictions adjusted to valuation date.		For the contract of the contra														
c Total available at beginning of current plan year to add to prefunding balance d Portion of (c) to be added to prefunding balance 12 Other reductions in balances due to elections or deemed elections 3 Balance at beginning of current year (line 9 + line 10 + line 11d − line 12) 9 Part IIII Funding Percentages 14 Funding target attainment percentage 15 Adjusted funding target attainment percentage 16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement 17 If the current value of the assets of the plan is less than 70 percent of the funding larget and percentage 17 Part IVI Contributions and Liquidity Shortfalls 18 Contributions made to the plan for the plan year by employer(s) and exployers (a) Date (b) Amount paid by (c) Amount paid by (c) Amount paid by (d) Date (m) Amount paid by (employer(s)) employer(s) 19 Discounted employer contributions – see institutions of small plan with a valuation date after the beginning of the year: a Contributions made to avoid restrictions adjusted to valuation date 19 Discounted amployer contributions made to avoid restrictions adjusted to valuation date 19 Discounted amployer contributions made to avoid restrictions adjusted to valuation date 19 Discounted may be avoid restrictions adjusted to valuation date 19 Discounted may be avoid restrictions adjusted to valuation date 19 Discounted may be avoid restrictions adjusted to valuation date 19 Discounted may be avoid restrictions adjusted to valuation date 19 Discounted may be avoid restrictions adjusted to valuation date 19 Discounted employer contributions														٥		
d Portion of (c) to be added to prefunding balance 12 Other reductions in balances due to elections or deemed elections 13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12) 14 Funding Percentages 15 Funding target attainment percentage 16 Prior year's funding percentage or purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement. 16 Prior year's funding requirement. 17 If the current value of the assets of the plan is less than 70 percent of the funding larget enter such percentage. 17 If the current value of the assets of the plan year by employer(s) and ear oloye is (a) Date (b) Amount paid by (e) Amount paid																
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12) 0 Part IIII Funding Percentages 14 Funding target attainment percentage 15 108.12 15 Adjusted funding target attainment percentage 15 108.12 16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement 16 136.14 17 If the current value of the assets of the plan is less than 70 percent of the funding target enter such percentage 17 17 If the current value of the assets of the plan is less than 70 percent of the funding target enter such percentage 17 18 Contributions and Liquidity Shortfalls 18 Contributions made to the plan for the plan year by employer(s) and enotoge is: (a) Date (b) Amount paid by (c) Amount paid by (e) Amount paid by employer(s) employees 12 (b) Amount paid by employer(s) employees 13 (c) Amount paid by employer(s) employer(s) employer(s) employer(s) employer(s) employer(s) employer(s) 18 (b) 0 18 (c) 19 Discounted employer contributions – see institutions y small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid premium adjured contributions from prior years 19 a b Contributions made to avoid restriction adjusted to valuation date		d Portion o	f (c) to be added to p	refunding ba	lance	······										
Part III Funding Percentages 14 Funding target attainment percentage	12	Other reducti	ons in balances due	to elections of	r deemed elections	<u> </u>				0	0 (
14 108.12 15 Adjusted funding target attainment percentage	13	Balance at be	eginning of current ye	ear (line 9 + li	ne 10 + line 11d – lin	ie 12)				0				0		
15 Adjusted funding target attainment percentage	P	art III Fu	nding Percenta	ges												
15 Adjusted funding target attainment percentage	14	Funding targe	et attainment percent	age								14	10	 08.12%		
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	15	Adjusted fund	ling target attainmen	t percentage								15				
17 If the current value of the assets of the plan is less than 70 percent of the funding args enter such percentage	16	6 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce										16		36.14%		
18 Contributions made to the plan for the plan year by employer(s) and en vloye s: (a) Date (b) Amount paid by (c) Amount paid by employer(s) (c) Amount paid by employer(s) (d) Date		If the current						enter su	ch percentage			17		%		
18 Contributions made to the plan for the plan year by employer(s) and en vloye s: (a) Date (b) Amount paid by (c) Amount paid by employer(s) (c) Amount paid by employer(s) (d) Date	P	art IV	ontributions and	l Liquidity	Shortfalls											
(MM-DD-YYYY) employer(s) employees (M-DD-YYYY) employer(s) employees Totals ► 18(b) 0 18(c) 19 Discounted employer contributions – see instructions or small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid praimum quired contributions from prior years 19a b Contributions made to avoid restrictions adjusted to valuation date						d er i lo	ye s:									
Totals Is(b) 18(c) 19 Discounted employer contributions – see institutions or small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid or animum equired contributions from prior years b Contributions made to avoid restrictions adjusted to valuation date 19a 19b				- 1		ру			(b) Amount paid	by l	(0) Amoı	ınt paid	by		
19 Discounted employer contributions – see instrations or small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid minimum squired contributions from prior years	(1)	MM-DD-YYYY)	employe	r(s)	employees	_	M-DD-Y	/YY)	employer(s)		-	emp	loyees			
19 Discounted employer contributions – see instrations or small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid minimum squired contributions from prior years																
19 Discounted employer contributions – see instrations or small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid minimum squired contributions from prior years					•	V										
19 Discounted employer contributions – see instrations or small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid minimum squired contributions from prior years																
19 Discounted employer contributions – see instrations or small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid minimum squired contributions from prior years			-													
19 Discounted employer contributions – see instrations or small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid minimum squired contributions from prior years																
19 Discounted employer contributions – see instrations or small plan with a valuation date after the beginning of the year: a Contributions allocated toward unpaid minimum squired contributions from prior years	11/11/200				English State of the State of t	COMMAN.										
a Contributions allocated toward unpaid mannum. Quired contributions from prior years	State of the	THE PART						· · ·			18(c)			0		
b Contributions made to avoid restrictions adjusted to valuation date	19	Discounted e	mployer contribution	s – see inst	tions or small plan	with a v	aluation date	after the	beginning of the ye	ear:						
																
c Contributions allocated toward minimal required contribution for current year adjusted to valuation date																
					uired contribution for	r current	t year adjuste	d to valu	ation date	19c	Sec. of the conference of	perger -		0		
20 Quarterly contributions and liquidity scortfals:	20		* 3									ad and		Contained on the		
a Did the plan have a "funding shorts" for the prior year?		a Did the pla	in have a "funding sh	north " for the	e prior year?			•••••				[] Yes	No		
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?		b If line 20a	is "Yes," well of quire	ed quarterly i	nstallments for the c	urrent ye	ear made in a	timely n	nanner?			Г	Yes	No		
c If line 20a is "Yes," see instructions and complete the following table as applicable:		c If line 20a	is "Yes," see instru	ons and com	plete the following ta	able as a	applicable:			-	Lind i.					
Liquidity shortfall as of end of quarter of this plan year					·			this plan	year			incilitación de la constantia de la cons	ericana consula	eniezisaking.		
(1) 1st (2) 2nd (3) 3rd (4) 4th		(1)	1st		(2) 2nd			(3)	3rd		1	(4) 4th)			

_		~
⊐ລຕ	ΙФ	.5

Pa	rt V. Assumptions Used to	Determine Fu	nding Target and Ta	rget Normal Cost											
21	Discount rate:														
	a Segment rates: 1s	t segment: 4.94%	t: 76%		N/A, full yield curve used										
	b Applicable month (enter code)	able month (enter code)													
22	Weighted average retirement age	. 22	2					65							
23	Mortality table(s) (see instructions)	X Presc	ribed - combined	Prescribed - separate	St	ıbstitu	ıte								
Pa	i VI Miscellaneous Items														
24	Has a change been made in the no	n-prescribed actuari	al assumptions for the cur	ent plan year? If "Yes," see	instructi	or	egarding re	quire	1						
	attachment								Yes	X I	Vo_				
25	Has a method change been made	for the current plan y	ear? If "Yes," see instructi	ons regarding required attacl	nmeh				Yes	X	No				
26	Is the plan required to provide a Sc	hedule of Active Par	ticipants? If "Yes," see inst	ructions regarding required	ıtacı.	ent		. 🔲	Yes	X	No				
27	If the plan is subject to alternative for	unding rules, enter a	pplicable code and see in	structions regarding	2	,									
	attachment														
Par	t VII Reconciliation of Unp	oaid Minimum F	Required Contribution	ons For Prior lears											
28	Unpaid minimum required contribut				. 28	3					0				
29	Discounted employer contributions (line 19a)				29	•					0				
30	Remaining amount of unpaid minim				. 30)					0				
Par	t VIII Minimum Required C	ontribution For	Current Year								_				
31	Target normal cost and excess asse														
	a Target normal cost (line 6)				31	а					0				
		arget normal cost (line 6)								0					
32	Amortization installments:														
	a Net shortfall amortization install														
	b Waiver amortization installment														
33	If a waiver has been approved for the				33						_				
	(Month Day Year) and the valved amount														
34	Total funding requirement before re	flecting carryover/pr	efur ding 5 lances (lines 3		. 34	1					0				
25		ance		1	otal b	alance	!								
35	Balances elected for use to offset for requirement	, J									Ω				
36	Additional cash requirement (line 3-				36	3					0				
37							· · ·								
	(line 19c)				37						0				
38_	Present value of excess contributio				1										
	a Total (excess, if any, of line 37 c			***	38						0				
	b Portion included in line 38a at libutation use of prefunding and funding standard carryover balances										0				
39	Unpaid minimum required contribution or current year (excess, if any, of line 36 over line 37) Unpaid minimum required contributions for all years										0				
40	FOLDOWS SET				40)					0				
Pai	Pension Funding Rel	ief Under Pensi	on Relief Act of 201	0 (See Instructions)											
41	If an election was made to use PRA	2010 funding relief	for this plan:												
	a Schedule elected						2 plus 7	year:	<u>. </u>	15 ye	ars				
	b Eligible plan year(s) for which the	ne election in line 41	a was made			200	8 2009		2010	2	011				
42	Amount of acceleration adjustment		42	2											
43	Excess installment acceleration amount to be carried over to future plan years														