13. IF YOU ARE IN THE ENTERTAINMENT BUSINESS, IS THERE GUILD PLAN(S) TO WHICH CONTRIBUTIONS ARE MADE ON YOUR BEHALF?

IF YES, PLEASE CHECK TYPE OF CONTRIBUTION:

14. IF YES, ARE ALL CONTRIBUTIONS TO THE GUILD PLAN(S) MADE DIRECTLY BY THE PRODUCERS WITHOUT GOING THOUGH YOUR CORPORATION?

15. IS YOUR EMPLOYER A MEMBER OF A "CONTROLLED GROUP" OR "AFFILIATED GROUP"? e.g. DOES THE EMPLOYER AND ANOTHER BUSINESS ENTITY SHARE COMMON OWNERSHIP OR REGULARLY PERFORM SERVICES TOGETHER FOR THIRD PARTIES?

CONTROLLED GROUP _____ (If yes, please provide a list of names of companies, owners and ownership percentage) _____

AFFILIATED GROUP _____ (If yes, please provide a list of names of companies, owners and ownership percentage) _____

16. SUBSIDIARY AND AFFILIATED CORPORATIONS:

List the name of each subsidiary and affiliate and indicate relationship

_____

_____

_____

17. DOES YOUR COMPANY EMPLOY ANY FAMILY MEMEBERS OF AN OWNER/SHAREHOLDER? (If Yes, please provide names and relationship below):

_____

_____

18. DO ANY OF THE OWNER/SHAREHOLDERS OF THE EMPLOYER OWN ALL OR A PART OF ANY TRADE OR BUSINESS? (If Yes, please provide detail below):

OWNER/SHAREHOLDER	NAME OF ENTITY	OWNERSHIP%

19. DOES THE EMPLOYER OR ANY MEMBER OF THE CONTROLLED/AFFILIATED SERVICE GROUP SPONSOR ANY OTHER RETIREMENT PLAN THAT WILL NOT BE ADMINISTERED BY MPS? (If Yes, please provide names(s) and type of plan(s)?

_____

20. ARE THERE EMPLOYEES IN ADDITION TO THOSE SHOWN ON THE MPLOYEE CENSUS LISTING, e.g., UNION EMPLOYEES OR LEASED EMPLOYEES (INCLUDING EMPLOYEES FROM A MANAGEMENT COMPANY)? (If Yes, attached list of other employees and specify classification)

21. DID THE EMPLOYER SPONSOR A SECTION 125 CAFETERIA PLAN DURING ANY PART OF THE PLAN YEAR? (If Yes, please include Section 125 deferrals on the employee census)