

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans 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.	OMB Nos. 1210-0110 1210-0089 2023 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023	
A	This return/report is for: ☐ a multiemployer plan ☒ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☐ a single-employer plan ☐ a DFE (specify) _____ ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information	
1a	Name of plan COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN	1b Three-digit plan number (PN) ▶ 333
		1c Effective date of plan 01/01/1998
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) COADVANTAGE CORPORATION 101 RIVERFRONT BLVD SUITE 300 BRADENTON, FL 34205	2b Employer Identification Number (EIN) 27-3007025 2c Plan Sponsor's telephone number 813-935-2000 2d Business code (see instructions) 561300

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 accompanying schedules, statements and attachments, 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.	10/15/2024	ASHLEY WALKER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☐ Same as Plan Sponsor THE COADVANTAGE 401K PLAN COMMITTEE 101 RIVERFRONT BLVD SUITE 300 BRADENTON, FL 34205	3b Administrator's EIN 27-3007025 3c Administrator's telephone number 407-422-8448
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 96262
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 84837 6a(2) 67179 6b 7192 6c 6730 6d 81101 6e 0 6f 81101 6g(1) 23708 6g(2) 16836 6h 549
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2J 2A 2F 2G 2K 3D 2S 2T b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	

9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary (4) ☐ DCG (Individual Plan Information) – Number Attached _____ (5) ☒ MEP (Multiple-Employer Retirement Plan Information)	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ A (Insurance Information) – Number Attached <u>1</u> (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2023 Form M-1 annual report. If the plan was not required to file the 2023 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500. ► Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2023 This Form is Open to Public Inspection
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For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan	B Three-digit plan number (PN)	333
COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN		
C Plan sponsor's name as shown on line 2a of Form 5500	D Employer Identification Number (EIN)	
COADVANTAGE CORPORATION	27-3007025	

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
04-1590850	65935	MR 61723	3697	01/01/2023	12/31/2023

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
665	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
RAYMOND JAMES INSURANCE GROUP INC 333 NORTH POINT EAST ALPHARETTA, GA 30022

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
533			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
RAYMOND JAMES INSURANCE GROUP INC 1200 EAST LAS OLAS BLVD FORT LAUDERDALE, FL 33301

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
105			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

AURORA INSURANCE MICHAEL DEGENOVA

15350 N FLORIDA AVE
TAMPA, FL 33613

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
27			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	60626326
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	0

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

b Premiums paid to carrier	6b	
c Premiums due but unpaid at the end of the year.....	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☒ other ▶ **GROUP ANNUITY CONTRACT**

b Balance at the end of the previous year	7b	66624353
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c Additions: (1) Contributions deposited during the year	7c(1)	12186391	
(2) Dividends and credits	7c(2)	0	
(3) Interest credited during the year	7c(3)	1843699	
(4) Transferred from separate account.....	7c(4)	25606898	
(5) Other (specify below)	7c(5)	1548736	

▶ **LOAN REPAYMENTS AND FORFEITURES**

(6) Total additions	7c(6)	41185724
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d Total of balance and additions (add lines 7b and 7c(6))	7d	107810077
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e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	21708502	
(2) Administration charge made by carrier	7e(2)	217675	
(3) Transferred to separate account.....	7e(3)	25257574	
(4) Other (specify below)	7e(4)	0	

(5) Total deductions	7e(5)	47183751
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f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	60626326
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Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid.....	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3)).....		9a(4)	0
b Benefit charges (1) Claims paid.....	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2)).....		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies.....	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.).....		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves.....		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount	10b	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A?..... ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2023
		This Form is Open to Public Inspection.

For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023

A Name of plan COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶ 333
C Plan sponsor's name as shown on line 2a of Form 5500 COADVANTAGE CORPORATION	D Employer Identification Number (EIN) 27-3007025

Part I

Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1

Information on Persons Receiving Only Eligible Indirect Compensation

- a

Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).....

Yes

☒

No
- b

If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b)	Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

EMPOWER ANNUITY INSURANCE CO

8515 EAST ORCHARD AVE
GREENWOOD VILLAGE, CO 80111

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
64	RECORDKEEPER	1531007	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

(a) Enter name and EIN or address (see instructions)

COADVANTAGE RESOURCES, INC.

59-3434670

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
50 99	PROFESSIONAL SERVICES	759177	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

MERRILL LYNCH CONSULTING SERVICES

13-5674085

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
17 27	INVESTMENT ADVISOR	275000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

CBIZ CPAS P.C.

43-1947695

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
99	OTHER	65625	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

WINSTON & STRAWN, LLP

36-1975990

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29	LEGAL	32940	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

EMPOWER ADVISORY GROUP

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	INVESTMENT MANAGEMENT	6602	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

QDRO CONSULTANTS, LLC

3071 PEARL ROAD
MEDINA, OH 44256

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
99	OTHER	800	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
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(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2023 This Form is Open to Public Inspection.
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For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023

A Name of plan <u>COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN</u>	B Three-digit plan number (PN) ►	<u>333</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>COADVANTAGE CORPORATION</u>	D Employer Identification Number (EIN) <u>27-3007025</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
--------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: <u>THE VANGUARD TARGET RETIRE 2045 TRU</u>		
b Name of sponsor of entity listed in (a): <u>VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS</u>		
c EIN-PN <u>90-6083972-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>61561292</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>THE VANGUARD TARGET RETIRE 2055 TRU</u>		
b Name of sponsor of entity listed in (a): <u>VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS</u>		
c EIN-PN <u>27-6715091-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>34656941</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>THE VANGUARD TARGET RETIRE 2070 TRU</u>		
b Name of sponsor of entity listed in (a): <u>VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS</u>		
c EIN-PN <u>64-6546416-454</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>94131</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>THE VANGUARD TARGET RETIRE 2050 TRU</u>		
b Name of sponsor of entity listed in (a): <u>VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS</u>		
c EIN-PN <u>90-6083970-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>47279877</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>THE VANGUARD TARGET RETIRE 2040 TRU</u>		
b Name of sponsor of entity listed in (a): <u>VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS</u>		
c EIN-PN <u>90-6083974-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>60374964</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>THE VANGUARD TARGET RETIRE 2065 TRU</u>		
b Name of sponsor of entity listed in (a): <u>VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS</u>		
c EIN-PN <u>82-6194314-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1133278</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>THE VANGUARD TARGET RETIRE 2020 TRU</u>		
b Name of sponsor of entity listed in (a): <u>VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS</u>		
c EIN-PN <u>90-6083982-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>16900886</u>

a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE 2025 TRU

b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS

c EIN-PN 90-6083980-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 53775836
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a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE 2030 TRU

b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS

c EIN-PN 90-6083978-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 70295923
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a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE 2060 TRU

b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS

c EIN-PN 45-3799419-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 23168541
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a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE INCM TRU

b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS

c EIN-PN 87-6420194-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4437
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a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE 2035 TRU

b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS

c EIN-PN 90-6083976-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 66586475
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a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE INCM II

b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS

c EIN-PN 90-6083967-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 10932633
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)

(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110
		2023
		This Form is Open to Public Inspection

For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ►	333
C Plan sponsor's name as shown on line 2a of Form 5500 COADVANTAGE CORPORATION	D Employer Identification Number (EIN) 27-3007025	

Part I	Asset and Liability Statement
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1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	11470466	14377093
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	771139033	962130185
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	66853704	60626326
(15) Other	1c(15)	1877879	2495222

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	851341082	1039628826
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	851341082	1039628826

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	37929392	
(B) Participants	2a(1)(B)	100639524	
(C) Others (including rollovers)	2a(1)(C)	17789857	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		156358773
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	661621	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		661621
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	14961634	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		14961634
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		590421
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		137649767
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		310222216

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	108451945	
(2) To insurance carriers for the provision of benefits.....	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		108451945
f Corrective distributions (see instructions)	2f		32700
g Certain deemed distributions of participant loans (see instructions)	2g		640694
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees.....	2i(2)	304051	
(3) Recordkeeping fees.....	2i(3)		
(4) IQPA audit fees.....	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	2367100	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		2671151
j Total expenses. Add all expense amounts in column (b) and enter total	2j		111796490

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		198425726
l Transfers of assets:			
(1) To this plan	2l(1)		133911441
(2) From this plan	2l(2)		144049423

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☒ Unmodified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) ☒ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: **CBIZ CPAS P.C.**

(2) EIN: **43-1947695**

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) ☐ This form is filed for a CCT, PSA, DCG or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

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? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		☒	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		☒	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		☒	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		☒	
e Was this plan covered by a fidelity bond?	☒		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		☒	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		☒	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b 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.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
ADP/VOYA	59-2452823	001
AMERITAS-BLUESTAR RETIREMENT SERVICES	31-4379515	001
ASCENSUS	11-3665754	001
EMPLOYER FLEXIBLE	27-4406361	001

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

5b 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.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
EMPOWER	84-0467907	001
FUTURE PLAN/CAPITAL GROUP	43-1763741	001

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2023 This Form is Open to Public Inspection.
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For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	333
C Plan sponsor's name as shown on line 2a of Form 5500 COADVANTAGE CORPORATION	D Employer Identification Number (EIN) 27-3007025	

Part I	Distributions
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All references to distributions relate only to payments of benefits during the plan year.

1	Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	0
2	Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 20-3691708		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.			
3	Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
---------	--

4	Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.				
5	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 ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6	a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a		
	b Enter the amount contributed by the employer to the plan for this plan year	6b		
	c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c		
If you completed line 6c, skip lines 8 and 9.				
7	Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8	If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?	☐ Yes	☐ No	☐ N/A

Part III	Amendments
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9	If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.	☐ Increase	☐ Decrease	☐ Both	☐ No
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Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
---------	--

10	Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11	a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
	b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12	Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

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(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

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(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:		
a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	14a	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	14b	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	14c	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:		
a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:		
a Enter the number of employers who withdrew during the preceding plan year	16a	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

Part VI	Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans
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18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

a Enter the percentage of plan assets held as:

Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%

High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:

☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more

20 PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation. _____

Part VII	IRS Compliance Questions
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21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☐ No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☒ Design-based safe harbor method

☐ "Prior year" ADP test

☒ "Current year" ADP test

☐ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 12 / 31 / 2018 (MM/DD/YYYY) and the Opinion Letter serial number Q703120A.

SCHEDULE MEP (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	MULTIPLE-EMPLOYER RETIREMENT PLAN INFORMATION This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and Section 6058(a) of the Internal Revenue Code (the Code) ► File as an attachment to Form 5500.	OMB No. 1210-0110 2023 This Form is Open to Public Inspection
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For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN	B Three-digit Plan number (PN) ►	333
C Plan administrator's name as shown on line 3a of Form 5500/Form 5500-SF THE COADVANTAGE 401K PLAN COMMITTEE	D Administrator's EIN 27-3007025	

Part I	Type of Multiple-Employer Pension Plan. All multiple-employer pension plans must complete.
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1 Check the appropriate box to indicate type of multiple-employer pension plan. (Only defined contribution plans may check lines 1a, 1b, and 1c. Defined benefit plans and defined contribution plans not checking lines 1a, 1b, or 1c should check line 1d. See Instructions).

- a** ☐ association retirement plan (See 29 CFR 2510.3-55) (Complete Part II)
- b** ☒ professional employer organization plan (PEO Plan) (See 29 CFR 29 CFR 2510.3-55) (Complete Part II)
- c** ☐ pooled employer plan (PEP) (See 29 CFR 2510.3-44) (Complete Parts II and III)
- d** ☐ other multiple-employer pension plan (Describe) _____ (Complete Part II)

Part II	Participating Employer Information.
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2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan. **Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).**

2a Name of Participating Employer COADVANTAGE CORPORATION	2b EIN 27-3007025	2c Percentage of Total Contributions for the Plan Year 3.48	2d Aggregate Account Balances Attributable to Participating Employer 33105194
2a Name of Participating Employer 1406 CONSULTING, LLC	2b EIN 82-1307644	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 171670

CAUTION Do not individually list information for working owners (see instructions and 29 CFR 2510.3-55(d)(2)) or other individuals who are participants or beneficiaries in the plan or arrangement that are no longer associated with a particular participating employer or participating employer plan (see instructions). Providing identifying information for individuals may result in rejection of this filing. If there are any such individuals in the plan, answer "Yes" to line 2e and provide the total information for all such individuals, without providing names or other identifying information.

2e Does the plan include any individuals not participating through an employer or who are individual working owners?	2e	☐ Yes ☒ No
2f If you answer "Yes" in line 2e, enter a good faith estimate of the percentage of total contributions made by all such individuals that are not listed on line 2a during the plan year.	2f	
2g If you answer "Yes" in Line 2e, enter the aggregate account balances for all such individuals that are not listed on line 2a.	2g	

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

**Schedule MEP (2023)
v. 230728**

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan.

Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
1ST CLASS MECHANICAL, INC	59-1767267	0.04	356485
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
1ST FIRE & SECURITY, INC.	80-0079555	0.06	89085
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
22 SMR COMPANY, LLC	83-2925567	0.01	1197952
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
30A ESCAPES, LLC	82-5368208	0.06	414804
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
365 ENTERPRISES LLC	46-5639798	0.01	228251
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
4675 INVESTMENTS, INC. DBA WES	59-3702694	0.04	149824
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
5 STAR PACKAGING, INC.	27-4533284	0.00	250350
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
68 VENTURES, LLC	81-3290751	0.79	2770301
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
828 PRODUCTIONS LLC	83-2900195	0.00	0

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan.

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
924 PETCORAL LLC	47-4659190	0.00	3290
2a Name of Participating Employer A AAMERICAN CONTAINER & TRAILER LEASING, INC.	59-3354575	0.08	1147001
2a Name of Participating Employer A&M ENDEAVORS, LLC	74-3116083	0.00	2526
2a Name of Participating Employer A. ADVOCATES & ATTORNEYS OF KENNEDY LAW GROUP, PA	59-3607269	0.02	106261
2a Name of Participating Employer A. JAMES GLOBAL SERVICES, INC	82-3502878	0.03	102440
2a Name of Participating Employer A.R. CHOICE MANAGEMENT, INC.	20-1795707	0.02	137975
2a Name of Participating Employer A-1 24 HOUR SERVICE INC.	65-0891963	0.00	50733
2a Name of Participating Employer A1 TELETRONICS INC	59-3112743	0.00	73
2a Name of Participating Employer AAA T.L.C. HEALTH CARE, INC.	95-4536672	0.07	172443

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
A-BRIDGE LLC	87-4278813	0.00	1737
2a Name of Participating Employer ABUYO, INC. DBA SELECTHUB	2b EIN 45-3821823	2c Percentage of Total Contributions for the Plan Year 0.06	2d Aggregate Account Balances Attributable to Participating Employer 174707
2a Name of Participating Employer ABX COLLISION CENTERS, INC	2b EIN 46-6592410	2c Percentage of Total Contributions for the Plan Year 0.02	2d Aggregate Account Balances Attributable to Participating Employer 98150
2a Name of Participating Employer ACADEMIC & CLINICAL INFECTIOUS DISEASES	2b EIN 59-1568228	2c Percentage of Total Contributions for the Plan Year 0.08	2d Aggregate Account Balances Attributable to Participating Employer 442003
2a Name of Participating Employer ACAI ASSOCIATES, INC.	2b EIN 65-0020223	2c Percentage of Total Contributions for the Plan Year 0.09	2d Aggregate Account Balances Attributable to Participating Employer 1341233
2a Name of Participating Employer ACCELLIX, INC.	2b EIN 27-2402415	2c Percentage of Total Contributions for the Plan Year 0.38	2d Aggregate Account Balances Attributable to Participating Employer 2146335
2a Name of Participating Employer ACCELUS INC	2b EIN 81-5135750	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 13672
2a Name of Participating Employer ACCENT SIGNS	2b EIN 59-3286988	2c Percentage of Total Contributions for the Plan Year 0.02	2d Aggregate Account Balances Attributable to Participating Employer 765693
2a Name of Participating Employer ACCESS GLOBAL GROUP, INC.	2b EIN 46-1976784	2c Percentage of Total Contributions for the Plan Year 0.04	2d Aggregate Account Balances Attributable to Participating Employer 338206

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ACCURATE MONITORING LIMITED	20-5795855	0.33	0
2a Name of Participating Employer ACE ELECTRIC SERVICE COMPANY, LLC	27-1494757	0.00	86709
2a Name of Participating Employer ACE ELECTRICAL SERVICE OF NORTH FLORIDA, INC.	20-4999192	0.04	291289
2a Name of Participating Employer ACRY-TECH COATINGS, INC	59-2518319	0.00	252717
2a Name of Participating Employer ACTION AIR, INC.	65-0285865	0.00	8906
2a Name of Participating Employer ACTIVE CYBER LLC	46-4556357	0.18	0
2a Name of Participating Employer ACTIVUS CONNECT LLC	83-1917754	0.00	167
2a Name of Participating Employer ACUITYIM LLC	37-1797643	0.00	63857
2a Name of Participating Employer ADAM AMERICA, LLC	30-0733899	0.08	296663

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ADAMS AUTOWORX INC	82-1666160	0.00	223287
ADAMS COUNTY DAIRIES	83-4058478	0.00	0
ADDICTION PREVENTION COALITION	26-0319028	0.00	9919
ADITXT, INC.	82-3204328	0.00	1445378
ADLER FAMILY DENTAL LLC	22-3780238	0.12	2939416
ADLI LAW GROUP P.C.	27-2187270	0.07	464224
ADV PEDIATRIC SURGEONS PC	45-2500613	0.10	1113115
ADVANCED CABLING SOLUTIONS INC.	59-3511800	0.00	17119
ADVANCED CYBER ENGINEERING SOLUTIONS & TECHNOLOGIES	85-0638688	0.00	83590

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ADVANCED REFINISH LLC	83-1936226	0.01	35141
ADVANCED TELECOM, INC.	59-3015968	0.03	1066756
ADVANCED VASCULAR SOLUTIONS, LLC	84-4744855	0.09	444369
ADVANCED VENTURES, LLC	26-2166165	0.02	110283
ADVANTAGE COMMUNICATIONS GROUP, LLC	20-0441923	0.51	4489773
ADVANTAGE PROPERTY MANAGEMENT LLC	51-0418931	0.09	1184606
AFFINITY SOLUTIONS, INC.	13-4024222	0.00	0
AFFORDABLE BODY SHOP, INC	02-0642647	0.06	543330
AGGRESSIVE PLUMBING, INC.	59-3062162	0.03	58080

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AGR FINANCIAL, LLC	22-3376977	0.11	1697197
AIR AMERICA A/C	16-1627653	0.00	659698
AIR STREAM CORP.	11-2550650	1.17	6889452
AIRCRAFT MAINTENANCE SPECIALIST, INC.	65-0088882	0.03	362626
AIS-JAX, INC.	02-0710297	0.00	140
AJ LOGISTICS	76-0541531	0.07	1089930
ALABAMA CHRISTIAN FOUNDATION	26-1917492	0.02	37799
ALABAMA FAMILY DENTISTRY	63-1264278	0.22	3916233
ALAN R. HEAP, D.M.D., P.A.	59-2977900	0.11	1652982

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALASKA HAND REHABILITATION, INC.	26-1617527	0.00	905812
ALIGN INSURANCE GROUP, LLC	83-2444025	0.00	8237
ALIQANTUM INTERNATIONAL INC	27-3006907	0.21	647121
ALL HEALTH PHYSICAL THERAPY, INC.	31-1836785	0.00	0
ALL STATE PACKAGING, LLC	83-4295372	0.02	71325
ALLIANCE COACH, INC.	27-0777094	0.00	68894
ALLIANCE RETAIL CONSTRUCTION, INC.	32-0266470	0.20	2764571
ALLIANT LTC PHARMACY	83-1356072	0.03	126399
ALLIED BUSINESS SYSTEMS, LLC	33-1010352	0.14	975038

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALLISON CONTRACTOR SOLUTIONS, INC.	82-1405935	0.00	8539
ALL-PRO TITLE GROUP, LLC	06-1715740	0.00	343833
ALLSOUTH APPLIANCE GROUP, INC	72-1353380	0.26	1364753
ALLSTATE STOREFRONT SYSTEMS, INC.	75-2696794	0.00	57795
ALMOND STREET COLD STORAGE	75-2856344	0.00	0
ALPFA INC	32-0178401	0.10	790252
ALPHA MACHINE LLC	82-3824013	0.00	76578
ALTO NEUROSCIENCE, INC.	83-4210124	0.77	2089190
AM ARCHITECTURE AND INTERIOR DESIGN GROUP, LLC	47-3242111	0.05	225694

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AM SOFT-GROUP LLC	46-1567466	0.07	418337
AMBER RIDGE APARTMENTS	52-1737346	0.01	31730
AMCI WIRELESS, INC.	85-0273340	0.00	0
AMENITY HEALTH, INC.	16-1783404	0.00	408941
AMERICA SUNSHINE LLC	65-6525725	0.06	894119
AMERICAN ACADEMY OF NURSE PRAC	52-2216259	0.14	852150
AMERICAN ACADEMY OF PEDIATRICS	58-1164164	0.02	586987
AMERICAN DATABANK, LLC	84-1502813	0.00	92070
AMERICAN MEDICAL DEPOT	59-2337158	0.00	1510941

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AMERICAN POLYLITE INC	82-0814494	0.03	145836
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AMERICAN RESTORATION LLC	85-2193210	0.03	74193
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AMERICAN SOLAR ENERGY SOCIETY, INC.	59-1768923	0.00	6360
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AMERICARE APPLIANCE REPAIR LLC	27-2507782	0.00	153048
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AMERITAPE, INC.	59-3018988	0.13	753347
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AMHERST CONSULTING COMPANY LLC	45-3656202	0.00	81832
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AMNET ESOP CORPORATION	83-3280015	0.07	231747
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AMR AT PENSACOLA, INC	59-2940706	0.00	552
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AMR ELECTRICAL CONTRACTING CORP	20-1071163	0.07	298979

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AMZ ATLAS, LLC	85-1389235	0.12	292201
2a Name of Participating Employer ANCHOR PARDUE INSURANCE, INC.	2b EIN 63-1035461	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 22443
2a Name of Participating Employer ANCOR HOLDINGS, LP	2b EIN 75-2516108	2c Percentage of Total Contributions for the Plan Year 0.06	2d Aggregate Account Balances Attributable to Participating Employer 458924
2a Name of Participating Employer ANDERSON & ASSOCIATES INSURANCE GROUP, LLC	2b EIN 02-0659451	2c Percentage of Total Contributions for the Plan Year 0.02	2d Aggregate Account Balances Attributable to Participating Employer 83005
2a Name of Participating Employer ANDORHEALTH, LLC	2b EIN 83-1558230	2c Percentage of Total Contributions for the Plan Year 0.32	2d Aggregate Account Balances Attributable to Participating Employer 793110
2a Name of Participating Employer ANDREA USA OESTE, LLC	2b EIN 33-0957425	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 54063
2a Name of Participating Employer ANGEL EMMANUEL RODRIGUEZ PENA, DDS, INC	2b EIN 92-2580374	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 3963
2a Name of Participating Employer A-NIKS LLC	2b EIN 20-1316688	2c Percentage of Total Contributions for the Plan Year 0.07	2d Aggregate Account Balances Attributable to Participating Employer 382079
2a Name of Participating Employer ANTHEM EXECUTIVE LLC	2b EIN 85-1062103	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 13039

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APARTMENT ASSOCIATION OF METRO DENVER	84-0592187	0.13	1685805
APARTMENT CONCEPTS UNLIMITED	20-8040843	0.04	466977
APARTMENT OWNERS ASSOCIATION OF CALIFORNIA, INC.	27-0931856	0.00	1738381
APOGEE SCIENTIFIC, INC.	84-1284844	0.00	132593
APOLLIDON, LLC	26-2052103	0.23	1308822
APPLICATION DEVELOPMENT CONSULTANTS, LLC	59-2982835	1.07	4904497
APRIL USA ASSISTANCE INC	65-0564647	0.02	1030451
APS ENERGY INC	84-3190697	0.00	45055
APSCO PROFESSIONAL SERVICE COMPANY, INC	73-1609138	0.00	736493

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AQUA CHECK LLC	47-3330835	0.02	30598
AQUA CULTURE TECHNOLOGIES, INC.	23-3189319	0.00	78840
AQUASPY, INC	68-0461115	0.17	2021257
ARBORETA HEALTHCARE, INC.	82-1884480	0.00	2681691
ARBOUR VALLEY MANAGEMENT, LLC	84-1693540	0.13	718027
ARC DIALYSIS LLC	81-4179179	0.01	0
ARCADIA CONSUMER HEALTHCARE, INC.	82-5378086	0.49	2584686
ARCHIMEDEAN ACADEMY	02-0607904	0.24	3085399
ARCO MARINE, INC.	83-4659854	0.14	1367406

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ARCO STEEL COMPANY	22-0740657	0.02	471694
ARCTURUS GROUP LLC	26-0351320	0.05	721354
ARES MATERIALS INC	47-4095035	0.04	189322
ARMSTRONG COMMERCIAL SERVICES LLC	16-1742963	0.00	36129
ARNOLD ELECTRIC INC	73-1579765	0.00	381077
ARTISTRY IN MOSAICS	65-0933394	0.14	0
ASCENT SURGICAL PARTNERS, LLC	39-1964361	0.00	328209
ASH PROPERTIES	36-4691763	0.00	230
ASK MENO	87-2338674	0.03	35032

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ASPEN AUTO CLINIC	20-1188042	0.00	0
ASPEN GROVE APARTMENTS	38-3201874	0.00	9444
ASPENBLUFF, LLC DBA ASPEN COU	82-3987019	0.00	11843
ASSET NAVIGATOR, LLC	26-0302557	0.00	0
ASSET TV INC.	99-0375835	0.00	336146
ASSOCIATED PERSONNEL SERVICES, INC.	22-3730377	0.06	529253
AT HOME IN KEY WEST, INC.	65-0951798	0.00	817684
ATCO PEST CONTROL, INC.	51-0510458	0.02	157191
ATLANTA COMMUNITY FOOD BANK, INC.	58-1376648	1.36	9606432

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ATLANTIS MANAGEMENT SERVICES L	27-3007025	0.00	476
ATLANTIS NATIONAL SERVICES, INC.	20-4326391	0.29	0
ATLAS SPINE, INC.	33-1131445	0.00	189975
ATN CONSULTING	38-3324809	0.04	418704
A-TOWN/HI-TECH LP	27-0037408	0.02	55778
AUDIO VIDEO AND COMMUNICATIONS, INC	59-3396318	0.00	320599
AUTO BODY EXCELLENCE, INC	33-0704012	0.01	101730
AUTO SWEDEN, LLC	46-5487666	0.08	314340
AUTOMOTIVE DEVELOPMENT GROUP, INC.	13-4309924	0.26	1938285

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AVALON HEATING AND AIR LLC	46-2321929	0.14	960965
AVL SYSTEMS, INC.	59-2612461	0.10	497357
AVO T&L, LLC	47-3438612	0.00	683
AVON CABINET CORPORATION	59-2041419	0.02	361524
AVSI GROUP, LLC	27-3587088	0.00	113184
AW REAL ESTATE MANAGEMENT	47-4548957	0.08	0
AXIS PORTABLE AIR LLC	84-2277735	0.34	0
AXIVA HEALTH SOLUTIONS, INC.	45-3988879	0.01	18816
AXIVA INFUSION CENTERS-HT, LLC	83-3811616	0.01	24636

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AXIVARX OF KANSAS, LLC	82-4262188	0.01	41353
AZIMUTH CORPORATION	31-1785180	0.00	5213563
BABYSPARKS	46-1892580	0.01	43894
BACIA SARDENGA, D.V.M., PL	27-1247598	0.00	298620
BACKWOODS RETAIL INC.	37-1650080	0.00	477468
BAILEY COWAN HECKAMAN PLLC	20-3021331	0.10	2131790
BAILEY TAX AND ACCOUNTING, INC.	59-2980126	0.05	755510
BALLENISLES COMMUNITY ASSOCIATION, INC.	65-0151050	0.11	1084805
BANKRUPTCY GLOBAL HOLDINGS LLC	47-2328009	0.00	185595

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BARCLAY INVESTMENTS LLC	82-0822761	0.00	101115
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BARKING LABS CORP	82-0620257	0.00	1179968
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BARLOP, INC.	59-2288364	0.12	1631117
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BARNETT FINANCIAL GROUP	30-0138933	0.12	331951
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BAVELLONI AMERICA INC.	82-1010240	0.00	602256
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BAY MOTOR WINDING, INC.	64-0674340	0.24	1430865
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BAYWOOD TECHNOLOGIES, INC.	59-2751509	0.00	207242
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BBD USA LLC	38-4016359	0.09	545443
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BEACH BLUFF APARTMENTS	68-0488011	0.00	4713

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BEAM4D ENTERPRISES, LLC	20-2643578	0.00	1052599
BECK-FORD CONSTRUCTION, LLC	76-0226117	0.00	95344
BEDS EXPRESS, LLC	82-4238235	0.05	1295933
BELL LLC	20-8969098	0.04	150166
BELLATOR REAL ESTATE, LLC	45-5226962	0.09	730647
BENDCARE, LLC	47-1871534	0.00	2775861
BENSON ENGINEERING COMPANY	75-1013468	0.00	0
BENT BROOK GOLF COURSE	63-1089704	0.02	958342
BENT PINE GOLF CLUB	51-0198590	0.07	1738390

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BERKLEY PRIMARY CARE, PLC	14-1839021	0.02	166151
BERMAN PURCHASING INC	20-1631272	0.00	2506
BEST WESTERN ON THE BAY SHUCKE	47-5314988	0.00	46792
BEST WESTERN PLUS SIESTA KEY	46-0543005	0.03	3727
BETA SQUARED LITHOGRAPHY. INC.	06-1560046	0.02	1071181
BIG DAN'S CAR WASH, LLC	85-3848284	0.00	8831
BIG DAN'S CAR WASH, LLC	85-3848284	0.00	108253
BIG TREE, INC.	84-1339265	0.00	1345613
BIRMINGHAM AUDUBON SOCIETY	51-0198925	0.04	140777

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BIRMINGHAM INFECTIOUS DISEASES, P.C.	45-5399027	0.08	974337
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BLACK DRAGON CAPITAL INVESTMENT MANAGEMENT LLC	83-4030129	0.13	1084719
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BLACK SALMON CAPITAL HOLDINGS LLC	88-0987386	0.00	67383
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BLACK SALMON CAPITAL, LLC	82-1239430	0.00	99579
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BLACKRIDGE TECHNOLOGY	27-2460725	0.00	130360
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BLACKSTONE AMERICA	65-0576903	0.00	3538
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
B-LINE CARRIERS, INC.	59-3690511	0.00	59129
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BLUE STAR GLASS, INC.	11-3827090	0.00	188757
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BLUE TEES ENTERPRISES LLC	84-3543029	0.00	80350

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Part II Participating Employer Information (Continued).

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BLUE TREAD LLC	47-1053255	0.03	77970
2a Name of Participating Employer BLUEBERRY SYSTEMS, LLC	2b EIN 01-0828967	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 122332
2a Name of Participating Employer BLUEBONNET SCHOOL OF CEDAR PARK, LP.	2b EIN 74-2963012	2c Percentage of Total Contributions for the Plan Year 0.09	2d Aggregate Account Balances Attributable to Participating Employer 761972
2a Name of Participating Employer BLUEGRASS INDUSTRIES	2b EIN 65-0704572	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 25175
2a Name of Participating Employer BOATWRIGHT LAND SURVEYORS, INC	2b EIN 59-2301998	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 45813
2a Name of Participating Employer BOB HILL INC	2b EIN 59-0661820	2c Percentage of Total Contributions for the Plan Year 0.04	2d Aggregate Account Balances Attributable to Participating Employer 622742
2a Name of Participating Employer BOCA BAY MASTER ASSOCIATION, INC.	2b EIN 62-1342782	2c Percentage of Total Contributions for the Plan Year 0.21	2d Aggregate Account Balances Attributable to Participating Employer 1485888
2a Name of Participating Employer BONITA BAY COMMUNITY ASSOCIATION	2b EIN 59-2497446	2c Percentage of Total Contributions for the Plan Year 0.23	2d Aggregate Account Balances Attributable to Participating Employer 2459073
2a Name of Participating Employer BONITA SPRINGS-ESTERO REALTORS	2b EIN 59-1708371	2c Percentage of Total Contributions for the Plan Year 0.01	2d Aggregate Account Balances Attributable to Participating Employer 127353

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BOOMERANG PACKAGING INC.	76-0439261	0.02	228212
BOSTON BARRICADE COMPANY, INC.	02-0472117	0.45	2280502
BP LOGIX, INC	33-0671038	0.00	0
BRAND 44, LLC	20-1562120	0.00	96786
BRASFIELD, FREEMAN, GOLDIS & CASH PA	59-1709234	0.08	686217
BRAWCO, INC.	63-0966796	0.09	664988
BREATHE EASY MEDICAL, INC.	20-1560238	0.09	822129
BRES, INC.	20-8124576	0.00	15700
BRICK MARKERS U.S.A., INC.	65-0783070	0.00	261298

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BRIGHT BEGINNINGS	84-1382420	0.00	19792
BRIGHTON ANIMAL CLINIC	81-1565037	0.02	191490
BROADLEAF IT, LLC	82-3854230	0.21	1312235
BRODELL PLUMBING SUPPLY, INC.	59-2743259	0.06	468803
BROOKLYN REBAR LLC	26-2375722	0.04	243635
BROOKS ROCHA, PLLC	84-3929499	0.10	470392
BROOKSIDE PROPERTIES, INC.	62-1365487	0.00	11508333
BROTHERS EXCAVATING LLC	83-4065270	0.00	2260
BROWNING'S NURSERY & LANDSCAPING, INC.	59-2031099	0.00	0

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BROWNSVILLE FAMILY PHARMACY, INC.	26-3118559	0.07	2169784
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BRUCE J LEVINE DPM PA	59-3285417	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BRUCE ROSSMEYER'S DAYTONA HARL	59-3205613	0.01	1043031
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BRUCE ROSSMEYER'S NEW SMYRNA B	20-2178089	0.00	195786
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BRUCE WILLIAMS BENCHMARK HOMES, LLC	02-0794906	0.05	451975
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BRUCKNER KRASNOFF LEDERER MARSHALL SEVRAN CHAN INC.	87-4028057	0.00	573926
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BRUNSWICK NEWS PUBLISHING COMPANY, INC.	58-0824649	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BTE MID-WESTERN, LLC	27-3293525	0.00	211446
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BULBRITE INDUSTRIES, INC.	13-2701380	0.24	5573408

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BUSINESS ACTUALIZATION LLC	45-4532131	0.00	0
BUSK & ASSOCIATES, INC	65-0010642	0.02	63883
BYKOWSKI EQUIPMENT CO	95-2817380	0.21	3352467
BYTE CONSULTING, INC.	52-2286553	0.01	132150
BYZLOAN TAMPA, LLC	83-1487052	0.13	358939
C & P AUTOMATION, INC.	54-2062984	0.08	255139
C.J. HENLEY, D.M.D., P.A.	47-4550082	0.03	197377
C1 PARTNERS	27-5110354	0.04	290310
C4 ADVANCED TACTICAL SYSTEMS, LLC	87-0736523	0.62	4236629

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C4 ARCHITECTURE, LLC	20-3485443	0.24	1430512
2a Name of Participating Employer CABINET ESSENTIAL OF CHICAGO	2b EIN 20-5334463	2c Percentage of Total Contributions for the Plan Year 0.01	2d Aggregate Account Balances Attributable to Participating Employer 300695
2a Name of Participating Employer CABINETS PLUS, INC.	2b EIN 58-2114957	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 2490
2a Name of Participating Employer CALIFORNIA PIPELINE INSPECTION CORP.	2b EIN 47-3211297	2c Percentage of Total Contributions for the Plan Year 0.18	2d Aggregate Account Balances Attributable to Participating Employer 838533
2a Name of Participating Employer CALL KS, LLC	2b EIN 85-3988156	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 2200
2a Name of Participating Employer CALL MANAGEMENT PRODUCTS, INC.	2b EIN 84-1088445	2c Percentage of Total Contributions for the Plan Year 0.07	2d Aggregate Account Balances Attributable to Participating Employer 1569190
2a Name of Participating Employer CALVERT HOLDINGS, LLC	2b EIN 27-2229716	2c Percentage of Total Contributions for the Plan Year 0.80	2d Aggregate Account Balances Attributable to Participating Employer 4796358
2a Name of Participating Employer CAMBERWELL APARTMENTS	2b EIN 52-1660946	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 35164
2a Name of Participating Employer CAMBIA INFORMATION GROUP LLC	2b EIN 90-0147959	2c Percentage of Total Contributions for the Plan Year 0.05	2d Aggregate Account Balances Attributable to Participating Employer 1864867

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CAMEO, WEALTH & CREATIVE MANAGEMENT, INC.	20-8031671	0.00	74750
CANTIUM MANAGEMENT, LLC	81-5200854	4.01	29077099
CAP MANAGEMENT GROUP LLC	87-4690127	0.00	218390
CAPE CORAL HOUSING DEVELOPMENT	65-0383037	0.00	1646
CAPITAL CLAIMS MANAGEMENT, LLC	46-4161533	0.02	371361
CAPITAL REALTY ADVISORS, INC.	65-0192168	0.05	1242629
CAPRI ISLES GOLF, INC	59-1380785	0.04	905079
CAPTEC ENGINEERING, INC.	65-0709247	0.00	1640426
CAPTION FIRST INCORPORATED	36-3665353	0.15	1876086

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CARDAX PHARMA, INC.	46-2790734	0.01	984134
CAREWAVE, INC	56-2349464	0.02	278167
CARING HEARTS FAMILY MEDICAL CENTERS LLC	46-5174398	0.00	1055
CARLETON ENERGY CONSULTING	46-0589300	0.13	774140
CARLISLE PROPERTY MANAGEMENT, INC.	65-0712618	0.01	214171
CARLYLE JUPITER ISLAND	65-0840198	0.04	328555
CARNEGIE HILL PROPERTIES, LLC	74-3214548	0.00	343077
CARNIE P. BRAGG FUNERAL HOMES,	22-1971690	0.01	57765
CARRAS SERVICES, LLC	27-2188539	0.02	105338

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CARTS OF COLORADO, INC.	84-0970915	0.26	6391534
CASUAL LIVING LTD	75-2467445	0.00	1991
CATTLE DOG COFFEE ROASTERS, INC.	26-1542839	0.02	108705
CBS IFOAM LLC	26-0633260	0.00	142233
CCDI, INC	59-3661949	0.12	923082
CEBERT WEALTH	46-5291738	0.04	0
CEDARLANE NATURAL FOODS, INC.	95-4458950	0.01	16771
CENTER FOR INDEPENDENT LIVING	59-2288751	0.01	119668
CENTRA HEALTHCARE SOLUTIONS, INC.	26-4282042	0.09	0

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CENTRAL ALABAMA RESEARCH, INC.	71-0945933	0.00	0
CENTRAL COMMUNICATIONS NETWORK, INC.	59-3087065	0.00	132590
CENTRAL ENGINEERING SUPPLY CO., INC.	75-0181620	0.01	608124
CENTRAL FLORIDA WINDOW & DOOR, LLC	45-4220189	0.13	705850
CENTRALINK CORP. DBA CENTRALIN	95-4873856	0.02	462132
CENTURION EVEN MIAMI LLC	85-0621823	0.00	3430
CENTURY CHERRY LAWN PHARMACY, INC	13-4060815	0.00	376154
CERTIFIED COLLISION OF NYC LLC	47-4965332	0.10	417396
CERTUS PSYCHIATRY AND INTEGRATED CARE PLLC	81-4615670	0.22	1115623

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CFT ENTERPRISES INC	74-3136474	0.01	505297
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHAPMAN SMIDT HARDWARE	74-1912977	0.00	63206
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHARLES E. BROWN, III, DDS, PLLC	20-1272605	0.00	18975
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHARLOTTE SHEET METAL, LLC	86-3043052	0.00	51313
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHARTER SOFTWARE, INC.	84-1361133	0.00	141293
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHEMSTATION GULF COAST	81-4337576	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHEMSTATION OF LOUISIANA	86-1554781	0.05	103347
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHIRISA DF LLC	82-3385591	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHROME CAPITAL GROUP LLC.	46-3217646	0.00	19015

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CIRCLE PROPERTY MANAGEMENT	65-1062623	0.09	960128
CIRCLE SQUARE FOUNDATION	83-6900931	0.02	57104
CITIZENS BANK OF FLORIDA	59-0557762	0.00	336357
CIVICA ACQUISITIONS, LLC	46-2362881	0.00	205943
CJ HORAK ENTERPRISES, INC.	46-0735275	0.00	12470
CJ'S SALES AND SERVICE OF OCALA, INC.	59-2488285	0.00	5936
CLARKE CONSTRUCTION GROUP, INC	84-1709113	0.05	510904
CLAWS, INC. DBA FRAMEWORKS	65-0654361	0.01	0
CLEAN AIR TECHNOLOGIES - HVACR, INC	65-0506464	0.02	88012

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CLEAN ENERGY SOLUTIONS, INC.	20-5409816	0.06	552043
CLEANFUEL USA, INC.	81-4054197	0.00	87986
CLEANSTART CLEANING SERVICES, INC.	86-1427570	0.00	3596
CLEARLY AGILE, LLC	83-3562722	0.16	1398308
CLIFFORD B. NEWTON (NEWTON & NEWTON)	59-3548888	0.00	122297
CLIMATE SYSTEMS, LLC	85-4430034	0.27	1119599
CLUBSIDE APARTMENT HOMES	52-1873897	0.01	22652
CLUBSPECIALISTS INTERNATIONAL, LLC	26-4384651	0.05	279993
CN INFUSION RESOURCES, INC.	26-2589064	0.01	31800

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CN MOTOR COMPANY, LLC	61-1917684	0.03	511687
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COASTAL CURRENT ELECTRIC LLC	46-1458242	0.00	2474
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COASTAL FAMILY DENTISTRY, PA	83-0438037	0.06	232499
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COASTAL HVAC SUPPLY	26-2634002	0.26	1998192
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COASTAL NEUROLOGY, INC.	59-3609982	0.17	1158607
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COASTAL PROTECTION, INC.	47-3607836	0.00	33791
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COCHRAN CONSULTING, INC	75-2118274	0.00	659423
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COGNITIVE SPACE, INC.	82-4395610	0.00	434661
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COIL PROCESSORS LLC	83-3337332	0.02	138600

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COLE HARDWARE	94-2490288	0.00	4643547
2a Name of Participating Employer COLLIN COUNTY UROLOGY	75-1531693	0.00	14231
2a Name of Participating Employer COLOR TECHNOLOGIES, INC.	58-2262790	0.00	371570
2a Name of Participating Employer COLORADO GULF PACKAGING, INC.	74-2779972	0.00	359701
2a Name of Participating Employer COLORON PLASTICS CORPORATION	22-2270194	0.05	1777219
2a Name of Participating Employer COMMERCIAL CONSTRUCTION & MAINTENANCE, INC.	47-0935496	0.11	452105
2a Name of Participating Employer COMMERCIAL PROPERTY SOUTHWEST FLORIDA, LLC	26-4245433	0.00	17689
2a Name of Participating Employer COMMUNICATION CONSTRUCTION SERVICES, INC.	65-0767680	0.08	1198318
2a Name of Participating Employer COMMUNITY ASSET MANAGEMENT, INC.	76-0348337	0.00	16064

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMMUNITY FOUNDATION OF COLLIER COUNTY	59-2396243	0.19	2181927
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMMUNITY FOUNDATION OF NORTHEAST ALABAMA	63-0308398	0.00	613897
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMPENSATION RESOURCES, INC.	52-1668892	0.00	1737361
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMPLETE COMMUNICATIONS SERVICES LLC	35-2560783	0.08	605094
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMPLETE URGENT HEALTHCARE, LLC	45-1600063	0.00	20303
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMPUTER CUT COMPONENTS, LLC	20-4476497	0.00	69256
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CONCRETE IRON, INC.	27-3007025	0.00	189
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CONCRETE PRECAST PRODUCTS, INC.	27-5549047	0.03	703127
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CONCURRENT, INC.	26-2636279	0.00	63430

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CO-NEXUS	37-1450529	0.00	194440
2a Name of Participating Employer CONGRESS AVENUE SERVICES, INC	74-2898113	0.00	2480
2a Name of Participating Employer CONNECTIONS FOR BUSINESS	65-0024224	0.07	606535
2a Name of Participating Employer CONNECTIVITY, LLC	56-2172131	0.08	633566
2a Name of Participating Employer CONSTRUCTION SOLUTIONS, INC	59-3333568	0.05	674346
2a Name of Participating Employer CONTEMPORARY DESIGN COMPANY, LLC	83-2042033	0.00	11415
2a Name of Participating Employer CONTEMPORARY PLASTIC SURGERY	43-2011710	0.11	1245098
2a Name of Participating Employer CONTROL COMMUNICATIONS, INC.	65-0602414	0.00	168
2a Name of Participating Employer CONTROL SYSTEMS, INC.	63-1236215	0.07	886318

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COOKIES UNITED LLC	46-5467994	0.21	3976249
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COPPERWOOD ASSET MANAGEMENT LP	36-4735414	0.00	282697
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CORA BETT THOMAS REALTY CO.	58-2220442	0.00	7833
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CORE REALTY HOLDINGS MANAGEMENT, INC.	20-3213310	0.30	2069879
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CORINTH BAPTIST CHURCH INC	58-1429719	0.00	21771
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CORNETT PUBLISHING COMPANY INC.	63-1173007	0.04	1163189
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CORPORATE REALTY MANAGEMENT	72-1399538	0.24	2467774
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CORPORATE TRAVEL CONSULTANTS II LLC	26-0002670	0.13	907168
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COUGAR OIL, INC.	63-0596053	0.01	421845

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COUGHLIN PROPERTY MANAGEMENT, LLC	94-3297508	0.05	0
COULTON CREEK CAPITAL LLC	61-1582378	0.09	406915
COUNCIL FOR QUALITY GROWTH	58-1664710	0.04	505637
COX STATIONERS & PRINTERS	22-2428262	0.11	1229884
C-PACE ALLIANCE, INC.	88-2492060	0.04	87221
CPC MARKETING, INC.	87-2496766	0.00	281144
CQ FLUENCY, INC	32-0102982	0.34	1778288
CRAFT ELECTRIC, INC	37-2042000	0.00	46229
CRAFTSMAN COLLISION (USA) CORP.	47-1908444	0.02	63273

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CREATIVE ENVIRONMENTAL SOLUTIONS, INC	59-3226613	0.11	866425
CREATIVE ILLUMINATION, INC.	84-0523931	0.00	766043
CREATIVE LEARNING SYSTEMS, LLC	81-5084073	0.41	2453806
CREDIT BUREAU OF NAPA COUNTY,	94-1284710	0.02	887618
CREETA RESOURCES, LLC	82-2855029	0.00	309076
CREST BUILDERS, INC.	37-1753278	0.05	319239
CREST ORTHOPEDIC IMPLANTS, LLC	84-3149321	0.00	258642
CRM COMMERCIAL LLC	20-2503449	0.03	150309
CRONUS PHARMA LLC	45-4138004	0.03	349493

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CROOMS FLEET SERVICES, INC.	46-4545555	0.04	244899
CROSS KEYS CAPITAL, LLC	30-0395843	0.07	366938
CROSSROADS INSTITUTE FOR PSYCHOTHERAPY & ASSESSMENT	46-2368629	0.00	556254
CRUISE EXPEDITION COMPANY LLC	83-3988084	0.01	0
CSB INTERNATIONAL INC	11-3373352	0.00	0
CSF AQUATICS, LLC	84-4039957	0.00	11794
CSI MANAGEMENT GROUP, INC.	27-3007025	0.00	928
CUDDLE BARN, INC. DBA CUDDLE B	45-3835604	0.13	763552
CUDJOE SALES	65-0899731	0.09	640991

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CURBCO, INC.	65-0073113	0.00	209062
2a Name of Participating Employer CUSTOM DESIGNED SECURITY SYSTEMS, INC.	59-2128804	0.01	78794
2a Name of Participating Employer CUSTOM FOAM FABRICATORS, INC.	20-1281226	0.00	3456
2a Name of Participating Employer CYLOGY, INC.	75-3009593	0.03	979414
2a Name of Participating Employer CYPRESS PARTNERS LLC	65-1049847	0.00	4393768
2a Name of Participating Employer CZERO INC	20-8175796	0.27	0
2a Name of Participating Employer D. GROVER, INC.	20-1594165	0.00	368094
2a Name of Participating Employer D. MARTIN PLUMBING, INC	65-0268567	0.00	67093
2a Name of Participating Employer D.C. POWER ENGINEERING INC	26-1235477	0.01	25096

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DAGOSTINO GEOSPATIAL, INC.	59-3528150	0.03	138513
DAL TECH SERVICE GROUP, INC.	75-2275420	0.04	0
DALLAS AFTERSCHOOL	76-0838983	0.07	430343
DALLAS TRAILER REPAIR CO. INC.	75-1554958	0.00	1070818
DALLAS WHITE ROCK MARATHON	75-1562942	0.04	108606
DALMATIAN FIRE EQUIPMENT	88-3245472	0.00	165125
DALMATIAN FIRE EQUIPMENT, INC	26-0316399	0.00	423266
DANFORD F&B, LLC	81-1091887	0.00	780956
DANIEL C. BUSH, DDS PLLC	74-1963414	0.00	64432

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DATANET, INC.	84-1533562	0.05	829005
DAVID A. KINSER & ASSOCIATES, INC.	59-3050614	0.01	358994
DAVID E. RIGGS (JHRA)	20-0989759	0.05	0
DAVIDSON MEDIA GROUP, LLC	01-0803559	0.00	24946
DAWSON'S ELECTRIC INC	41-2246271	0.00	6141
DAY FARMS, INC.	58-2069467	0.01	35618
DBE MANAGEMENT, INC.	20-1331070	0.27	1112764
DDJF, INC	82-2099795	0.04	168577
DEAVER INDUSTRIES, INC.	63-0936142	0.09	2063893

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DECATUR HARDWARE SUPPLY, INC.	58-1911284	0.06	597513
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DEDICATED FOODSERVICE SOLUTIONS LLC	88-1260202	0.03	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DEFENSEWERX, INC	46-0684933	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DEL VALLE BRANDS, INC	65-0259259	0.00	43600
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DELAPLANE PLUMBING INC	02-0757328	0.05	605874
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DELICIOUS HOSPITALITY LLC	81-3328364	0.00	13451
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DELTA LIGHT (USA) LLC	56-2516720	0.13	872193
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DELWIN REALTY LLC	51-2246622	0.00	47641
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DENNIE MILLER PLUMBING, INC.	65-0667969	0.00	417

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Part II Participating Employer Information (Continued).

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DENNIS CRAIG FITCH, DDS	30-7482314	0.01	38423
DERRICK KINNEY	45-7654730	0.00	108684
DHL ANALYTICAL, INC.	74-3868852	0.05	223052
DIGITAL BOARDWALK, INC.	26-4639955	0.00	997104
DIGITAL FUSION LLC	27-0474198	0.00	76460
DINESH KHANNA, MD, LLC	59-3538029	0.63	4011647
DIRECT MAIL VELOCITY, LLC	87-3737078	0.01	0
DIRECT SERVICE BENEFITS LLC	46-4733857	0.00	11428
DISCOUNT TWO WAY RADIO CORPORATION	95-4890200	0.01	132845

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DISCOVERY OUTSOURCING, LLC	27-3007025	0.00	6536
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DIVERSE CHARTER SCHOOLS COALITION, INC.	45-2849094	0.05	588501
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DIVIDENDS INC	46-3953631	0.04	421485
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DME SHOPPE-FORT MYERS, INC.	36-3500976	0.00	233355
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DOBLER CONSULTING SERVICES LLC	45-2894247	0.02	224848
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DOCUPHASE, LLC	85-0968460	0.01	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DODD ENTERPRISES	59-2242307	0.02	341371
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DONNA R ULIVA	20-2976098	0.00	895
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DORSEY TRAILER, INC.	58-1820450	0.00	445714

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DOUBLE ACE CARGO, INC	65-0884189	0.00	7795
DOVETAIL-WOOD TRADITIONS, INC	20-1563175	0.00	5736
DR. BRUCE W. ANDERSON, PA	59-2349801	0.15	0
DREAM HOME FRISCO, INC.	45-4127702	0.00	536957
DRINK RECESS, INC.	83-1822233	0.08	640075
DRUG FREE AMERICA FOUNDATION, INC.	59-1662427	0.00	202625
DUE NORTH CONSULTING INC	63-1281576	0.06	70023
DUFFY AIR SYSTEMS, INC	65-0488079	0.03	0
DUNE ENTERTAINMENT PARTNERS LLC	46-3754540	0.00	33239

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E&W TOOL AND SUPPLY, INC.	83-0524495	0.11	1424335
EAGLE FIRE PROTECTION	59-2621955	0.00	246375
EAGLE FIRE PROTECTION	59-2621955	0.00	37652
EATING DISORDER SOLUTIONS OF TEXAS LLC	83-2139457	0.00	11571
EB ACADEMIC CAMPS, LLC	47-1263889	0.00	55727
ECCOLO LTD.	11-3585705	0.23	2469863
ECIFM SOLUTIONS, INC	94-3372989	0.29	800898
ED SCHLITT L C	65-0881989	0.00	15597
EDGEWATER BEACH RESORT MANAGEMENT LLC	59-2369578	0.27	2545084

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EDUCATION FOUNDATION OF SARASOTA COUNTY, INC.	59-2320858	0.07	204467
EDWARDS & MIMS INSURANCE AGENCY	57-0407578	0.01	216435
EDWARDS INTERIORS	58-2523927	0.00	6826137
EG STAFFING LLC	83-2911906	0.00	638587
EGH PRINTING, LLC	82-4967816	0.05	642810
EHS INTERNATIONAL INC.	27-3972378	0.00	230
EL CAPITAN SPORTS CENTER, INC.	59-1526084	0.04	290373
ELEGRAN LLC	26-1876585	0.05	251347
ELEMENT22 LLC	27-1086057	0.27	1103604

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ELITE MANAGEMENT GROUP LLC	35-2614867	0.04	82265
ELITE PROPERTY RESEARCH LLC	46-4454878	0.11	695260
ELIXINOL, LLC	47-2510704	0.03	505168
ELMER KENNEDY LLC	47-1337744	0.00	0
EMINENT MEDICAL CENTER OPERATING, LLC	81-2054664	0.00	727731
EMMA JEWEL CHARTER SCHOOL, INC	27-4427509	0.07	450179
EMPLOYEE BENEFIT ADVISORS, INC.	57-1187527	0.01	13365
ENDORPHIN FARMS, INC.	59-3500748	0.05	463792
ENGINEERED FABRICATION, INC.	58-1672608	0.00	1136769

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ENOCH ENTERPRISES OF CENTRAL TX, LLC	45-4774409	0.00	0
ENOCH ENTERPRISES OF KILLEEN, LLC	84-3084455	0.01	0
ENOCH ENTERPRISES, LP	74-3040650	0.07	0
ENVIRO-AG ENGINEERING, INC.	75-2489308	0.20	3804305
ENVIRONMENTAL BIOTECH INTERNATIONAL, LLC	20-8233871	0.01	156576
ENVIRONMENTAL RISK MANAGEMENT, LLC	65-0922629	0.05	481352
EPC ENERGY SERVICES, LLC	46-3208960	0.00	512026
EPOCH PROPERTIES	59-1308295	0.18	1891165
ERGOTRONIX, INC.	81-0885973	0.05	421537

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ERICSONS BICYCLES INC.	75-1796806	0.00	2020552
ESCALERA RESOURCES CO	83-0214692	0.00	195376
ESTATES MANAGEMENT COMPANY	56-2014392	0.02	1428757
ETAIL PET INC	82-4670560	0.00	1251
ETHOSOFT, INC.	20-2913165	0.14	795862
EUROPEAN PAINT & BODY I, INC.	65-0134507	0.00	15249
EUROPEAN PAINT & BODY II, INC.	65-0809928	0.00	887693
EVENTPOWER	54-1813925	0.23	3045307
EVERLIGHT SOLAR, LLC	27-3007025	0.03	85611

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EVERYDAYPLUMBER.COM LLC	45-4612448	0.00	261107
EVERYTHING FOR OFFICES	84-1087408	0.07	1481266
EVOLUTION 2000, INC.	13-4025150	0.00	7500
EXCENTIUM, INC.	20-5872493	0.32	2306549
EXCLUSIVE FURNITURE MANAGEMENT CORP	85-4295854	0.25	604624
EYE CARE CENTER OF NORTHERN COLORADO, P.C.	84-1355429	0.00	5968575
F & J SPECIALTY PRODUCTS, INC.	59-1937255	0.10	1534855
F&F ENVIRONMENTAL, INC	59-3514368	0.00	0
FABWORX SOLUTIONS, INC.	43-1972448	0.17	2612753

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FACTOR HEALTH MARKETING, LLC	86-3174248	0.00	3662
FACTOR MEDICAL SUPPLY, LLC	87-0817203	0.00	2958
FAITH ACADEMICS, LLC	87-0851401	0.03	41976
FALKNER WINERY INC	33-0906291	0.00	1908
FAST FURNITURE REPAIR LLC	46-2210880	0.08	688752
FATHER AND SON PEST AND LAWN S	26-4088857	0.03	107840
FEDERAL ENGINEERING & TESTING, INC.	80-0831583	0.10	836986
FEER, INC.	59-3391964	0.07	721739
FERN INSULATORS INC.	59-3421276	0.12	725991

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FICKLING & COMPANY, INC.	58-2080190	0.08	0
FILAN & CONNER PLUMBING, LLC	20-0945551	0.03	206400
FIMAC SOLUTION LLC	20-2102782	0.00	20580
FINARD PROPERTIES LLC	20-5863203	0.00	1793361
FIRMIN PRINTING & OFFICE EQUIP	75-1324383	0.00	723
FIRSTFOUR STAFFING	85-3928302	0.01	45579
FISCHER HARDWARE INC	76-0291076	0.00	1755
FIVE STAR LUMBER, INC.	63-1237880	0.04	1701175
FIVESKY LLC	46-1098542	0.23	803389

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FIXNATION, INC.	83-0452460	0.00	231
2a Name of Participating Employer FLATIRONS FIELD SERVICES, LLC	2b EIN 46-0828556	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 0
2a Name of Participating Employer FLEET LEASE DISPOSAL, INC.	2b EIN 59-1951844	2c Percentage of Total Contributions for the Plan Year 0.24	2d Aggregate Account Balances Attributable to Participating Employer 3281185
2a Name of Participating Employer FLEXXRAY, LLC	2b EIN 90-0282287	2c Percentage of Total Contributions for the Plan Year 0.07	2d Aggregate Account Balances Attributable to Participating Employer 112809
2a Name of Participating Employer FLICKERBOX, INC.	2b EIN 94-3327853	2c Percentage of Total Contributions for the Plan Year 0.11	2d Aggregate Account Balances Attributable to Participating Employer 2374459
2a Name of Participating Employer FLORIDA ARTHRITIS AND RHEUMATOLOGY ASSOCIATES, LLC	2b EIN 46-2817349	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 26380201
2a Name of Participating Employer FLORIDA BARTER	2b EIN 27-3007025	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 77
2a Name of Participating Employer FLORIDA BREAKER	2b EIN 65-0402243	2c Percentage of Total Contributions for the Plan Year 0.01	2d Aggregate Account Balances Attributable to Participating Employer 648161
2a Name of Participating Employer FLORIDA COMMUNICATION CONTRACTORS	2b EIN 82-2795003	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 66763

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FLORIDA GULF COAST VACATION HOMES, LLC	45-1257505	0.00	354932
FLORIDA INTERNATIONAL BANK ASSOCIATION (FIBA), INC	59-1921450	0.04	764359
FLORIDA IS FOR VETERANS, INC.	47-2327385	0.00	196830
FLORIDA TRANSPORT SERVICE, INC.	59-1551645	0.03	230165
FLOURISH PSYCHOLOGY LLC	26-4371459	0.04	93475
FLOWER MOUND DERMATOLOGY	11-3691473	0.00	50172
FLYUSA, INC.	84-4457660	0.04	74142
FOOD SALES EAST, LLC	47-4175292	0.37	7480112
FOREST LAKE ESTATES CO-OP, INC.	59-3172338	0.00	92764

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FORMA-KOOL MANUFACTURING, INC.	38-2324437	0.02	384957
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FORTE INTERACTIVE, INC.	65-0947453	0.00	334488
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FOSSIL CREEK DENTAL PARTNERS, LLP	20-0468655	0.00	2710
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FRANCIS R. MORSE, PA	59-2682160	0.00	31553
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FREEMAN ORTHODONTICS, P.A.	55-0881045	0.01	1021356
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FRIENDLY FRANKIES BOTTLE SHOP INC	65-0273253	0.01	29407
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FS GROUP, LLC	20-4082856	0.20	3368712
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FSA NETWORK INC.	27-3007025	0.00	7825
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FSB ASSOCIATES, LLC	22-3720302	0.00	697430

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Part II Participating Employer Information (Continued).

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FUERST DAY LAWSON, INC.	98-0379592	0.04	354474
FULL CIRCLE INSIGHTS, INC.	36-4795746	0.11	806497
FULL THROTTLE DIRECT MAIL, LLC	81-4106845	0.00	124497
FULTON CONSULTING ENGINEERS, INC.	83-4466074	0.01	276830
FUNDERBURK ELECTRICAL SERVICES, LLC	26-4489977	0.03	579621
FUNDSTRAT GLOBAL ADVISORS LLC	46-5324205	0.26	1134122
FUSE SPECIALTY APPLIANCES, LLC	83-2852680	0.47	1624698
FUTURUM, INC	74-2783501	0.12	1085079
G & S SALES, INC.	75-2197738	0.09	1369212

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G5 TEK SOLUTIONS LLC	26-3951647	0.30	1940571
GAB ENDOSCOPY CENTER, LTD.	54-2095652	0.00	161887
GALBRAITH WEATHERBIE LAW PLLC	82-3295947	0.18	928125
GA-MA & ASSOCIATES, INC.	59-1636454	0.03	420555
GATOR AV, LLC	87-1004075	0.00	42412
GATORLAND KUBOTA EQUIPMENT COMPANY, INC.	47-1805614	0.02	156140
GEIER'S CHOICE MEATS	59-2130086	0.00	546233
GELTRUDE & COMPANY, LLC	22-3363665	0.33	3255835
GENE LOVE CONTRACTING, INC.	57-1043571	0.00	11266

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GENERAL ENERGY SERVICES, INC.	88-2874326	0.00	504861
GENEVA WORLDWIDE, INC	13-3897160	0.05	247056
GENTRY VASQUEZ ELECTRIC, INC.	82-4456574	0.01	57956
GEORGE BEDDIE	55-6528633	0.01	95941
GEORGE KOSTAKIS, P.A.	59-2916508	0.01	175400
GET SPIFFY, INC	46-5010147	0.00	0
GF - CALUSA LLC	92-1690029	0.00	8446
GF - CAPRI LLC	92-1655294	0.00	7984
GF - WATERFORD LLC	92-1712983	0.00	11735

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GILDENSON REAL ESTATE, LLC	83-2592655	0.02	202331
GILMORE MOVING & STORAGE, INC.	59-0948405	0.12	1760795
GIULIANO-PAGANO CORPORATION	95-2659237	0.01	18632
GLOBAL FUELING SYSTEMS, INC	84-3203225	0.12	2706207
GLOBAL GENES	26-3331487	0.14	370821
GLOBAL STREET, LLC	45-4995998	0.01	47727
GNJ ASSOCIATES, INC. DBA PROFO	20-3603113	0.04	1825104
GO FLORIDA INVESTMENTS, INC.	26-1761622	0.00	3439
GOLD MEDAL WINE CLUB	77-0364158	0.00	175887

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GOLF BRADSHAW LLC	83-2958299	0.00	32523
GOLF CARS OF HOUSTON LP	83-0395516	0.01	0
GOLF DEBARY LLC	85-2509379	0.00	4977
GOLFTEC BOULDER	45-3267473	0.03	159280
GONZER ADMINISTRATIVE, LLC	20-8073865	0.01	1205455
GOOD PEOPLE BREWING CO LLC	20-5029632	0.00	31469
GOODING'S SUPERMARKET, INC	59-1292169	0.00	858340
GOTCHOSEN, INC.	45-2386858	0.00	5283
GRACE DIGITAL INC	26-0790604	0.22	3642571

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GRANADA	27-1629955	0.02	43771
2a Name of Participating Employer GRANDE PROPERTY SERVICES, INC.	47-2802254	0.00	0
2a Name of Participating Employer GRANITE MANAGEMENT GROUP, INC.	82-0716535	0.00	58415
2a Name of Participating Employer GRAPEVINE RELIEF AND COMMUNITY EXCHANGE	75-2195702	0.13	1143528
2a Name of Participating Employer GRAPHIX SOLUTIONS OF AMERICA, INC.	11-3657567	0.00	80066
2a Name of Participating Employer GRAVES FABRICATING, INC.	63-1266493	0.01	81161
2a Name of Participating Employer GREAT HEIGHTS, INC	32-0598579	0.03	0
2a Name of Participating Employer GREAT HILLS GOLF CLUB OF AUSTIN, INC.	74-2373759	0.00	0
2a Name of Participating Employer GREAT JOB SPOT, INC.	59-3714664	0.02	430990

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GREAT WESTERN LEASING AND SALES, LLC	87-0561536	0.23	0
2a Name of Participating Employer GREATER BLUFFTON CHAMBER & CONVENTION VISITORS BUREAU	35-2434545	0.00	1452
2a Name of Participating Employer GREATER ERIE SURGERY CENTER, LLC	20-8251988	0.00	102314
2a Name of Participating Employer GREEN EARTH REALTY, LLC	20-8934001	0.04	91731
2a Name of Participating Employer GREEN GUARD SERVICES, INC	46-2843587	0.00	68852
2a Name of Participating Employer GREEN THUMB PALM BEACH	82-3468349	0.00	0
2a Name of Participating Employer GREENBERG, WALDEN & GROSSMAN, LLC	22-1890508	0.00	58630
2a Name of Participating Employer GREYSTONE GOLF CLUB, INC.	63-1032330	0.21	3281014
2a Name of Participating Employer GROUND UP INTERNATIONAL LLC	81-2003049	0.10	301704

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GTG AUTOMATION	20-8397990	0.00	45540
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GTMN PARTNERS, LLC	20-2955144	0.00	97866
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GUARDIAN ANGELS MEDICAL SERVICE DOGS, INC	27-2667123	0.00	194502
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GUARDIAN HEATING & AIR INC	83-3387822	0.04	96862
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GULF COAST BUSINESS BANK	87-4743729	0.01	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GULF COAST PLUMBING PARTNERS, INC.	84-1771191	0.02	55335
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GULF SOUTH FOREST PRODUCTS, INC	65-0002925	0.16	2429691
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GULFTECH FIRE PROTECTION INC	46-0817329	0.01	19848
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
H.K. METALCRAFT MANUFACTURING COMPANY	13-1805127	0.10	3572181

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HABITAT FOR HUMANITY OF COLLIN COUNTY	75-2443511	0.04	327233
HAMPTON INN	65-0851368	0.00	0
HAMPTON INN	65-0794455	0.00	0
HAMPTON INN - CITY CENTER	59-3639110	0.00	13858
HAMPTON INN - GROVE HOTEL	65-0502465	0.00	0
HAMPTON INN & SUITES	26-1689696	0.00	0
HARLOW TANK SERVICES, LLC	84-4435071	0.00	0
HARVEST SENSATIONS, LLC	06-1612238	0.17	1207824
HATCH COLLECTION LLC	45-2518636	0.26	422059

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HAUK CUSTOM POOLS, LLC	75-2964632	0.11	657258
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HAWK ISLAND LEASING, LLC DBA T	26-2353794	0.00	156510
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HAWORTH, BARBER & GERSTMAN, LLC	27-2346719	0.11	1601285
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HEAFEY BENTLEY MGT	86-1112261	0.03	253322
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HEALTH SCRIPTS, INC	27-3322661	0.00	113
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HEALTH TECH RECEIVABLES MANAGEMENT, INC.	27-4293046	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HEALTHTECH, INC.	27-1526464	0.00	18
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HEARTCARE CONSULTANTS, LLC	26-3807662	0.00	350312
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HELICON CHEMICAL COMPANY LLC	45-5627444	0.00	298492

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HELIOS DATA, INC.	82-3673278	0.05	493194
HERON CREEK ASSOCIATES, LTD	65-0870275	0.04	405437
HERTOG FOUNDATION, INC.	26-2002295	0.08	1043877
HF FOODS GROUP, INC	81-2717873	1.02	0
HH VENTURES GROUP, LLC	82-4108561	0.00	432
HIGHLAND COMMERCIAL MORTGAGE, LLC	27-1161830	0.22	3136908
HIGHLANDS ACCOUNTING GROUP, INC.	82-3217974	0.05	215542
HIGHLINE HOSPITALITY PARTNERS, LLC	84-3044346	0.13	1085751
HIGHLINE REAL ESTATE PARTNERS, LLC	84-3044272	0.05	258234

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HIGHLINE STORAGE PARTNERS, LLC	84-3049297	0.30	1270056
HILDEBRAND LAW FIRM, LLC	27-0489997	0.00	2255
HISTORICAL SOCIETY OF MARTIN COUNTY, INC.	59-0913326	0.04	226899
HOFFER PEST SOLUTIONS INC.	46-4025686	0.02	0
HOLD THYSSEN INC.	59-3077038	0.05	403063
HOLDEN ENERGY TRANSPORT, LLC	47-2655234	0.01	54116
HOLE IN THE WALL DRYWALL REPAIR, LLC	46-5137416	0.03	141432
HOLIDAY INN CRESTVIEW	22-1727665	0.00	225831
HOLLIDAY KARATINOS LAW FIRM, PLLC	87-0778702	0.04	1201777

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HOME PRO TITLE, INC.	35-2668913	0.01	16036
2a Name of Participating Employer HOMEOWNERS OF PORT CHARLOTTE VILLAGE	59-2283369	0.01	20299
2a Name of Participating Employer HONOR CAPITAL CORPORATION	59-2611508	0.16	1088755
2a Name of Participating Employer HOPEWELL BEVERAGE, INC.	84-4366862	0.01	9163
2a Name of Participating Employer HORIZON ITALIAN TILE	75-2633490	0.00	15536
2a Name of Participating Employer HORTICULTURAL ARTS & PARK INSTITUTE INC.	59-3378866	0.01	46123
2a Name of Participating Employer HOSPITAL & HEALTHCARE COMPENSATION SERVICE, INC.	22-2326784	0.02	582904
2a Name of Participating Employer HOSS BOOT COMPANY INC.	82-4800634	0.00	153226
2a Name of Participating Employer HOSTED AMERICA LLC	90-0835482	0.00	7662

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HOUNDS TOWN USA LLC	87-4817009	0.09	230508
HSD USA, INC.	52-2299080	0.07	724380
HTLC VENTURES INC.	59-3731484	0.08	668234
HUMANE SOCIETY OF MANATEE COUNTY, INC	59-1819652	0.03	541867
HUMANTOLD PSYCHOTHERAPY LCSW	27-1620688	0.42	1357224
HURLEY CORP. DBA H & E AIR CAR	51-0425920	0.02	276170
HUTCHISON ADVISORS	27-3007025	0.00	253
HYDRAMASTER, LLC	83-1763443	0.00	53142
ICAN BENEFIT GROUP LLC	20-2395888	0.00	37921

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ICO DEVELOPMENT, LLC	36-4543626	0.00	181549
ID90T, INC.	27-1240815	0.16	0
IDATIX CORPORATION	59-3641278	0.00	136943
IFB AMERICAS, INC	20-4746772	0.00	847326
I-LOG, LLC	20-3683553	0.03	159511
IMAGE 360 ARLINGTON	75-2674909	0.03	283736
IMAGE ONE CORPORATION	59-3281176	0.03	875806
IMAGETECH SYSTEMS, LLC	87-3882264	0.06	238332
IMPERIAL FIRE PROTECTION, INC.	13-4228875	0.03	127700

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
IMPRESSIONS IN WOOD, INC.	76-0356904	0.05	1388352
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
IMS-MERITUS, LLC	85-3923847	0.00	6642
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INA A. COLEN ACADEMY	85-3353649	0.10	207307
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INDITAL US LIMITED	76-0440628	0.11	1483084
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INFUSION TREATMENT CENTERS	84-1287146	0.06	532029
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
IN-HOUSE PUBLIC RELATIONS, LLC DBA IHPR	26-2786021	0.00	14922
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INLAND EMPIRE CONTAINER, LLC	86-2224131	0.00	7974
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INNOVATIVE MARKETING & DISTRIB	65-0865124	0.08	559713
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INSIDE STORIES LLC	47-5344623	0.05	586466

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INSIGHT NEWS & FEATURES, INC.	81-0567662	0.00	9133
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INSULA APARTMENT MANAGEMENT, LLC	46-4392403	0.00	116720
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INTEGRA REALTY RESOURCES HOLDINGS LLC	46-4986806	0.00	174036
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INTEGRATED FRESH SOLUTIONS, LLC	20-4351996	0.36	3222437
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INTEGRATED PREMISE TECHNOLOGY	59-3341649	0.04	274570
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INTEGRATED SUPPORT SERVICES	54-2117810	0.40	3310266
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INTERMARK MANAGEMENT CORP	57-0836340	0.20	2409440
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INTERNATIONAL MEDICAL MANAGEME	45-4786965	0.00	9147
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INTERNATIONAL STUDENT EXCHANGE INC	94-2843176	0.01	0

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INTRUST PARTNERS	83-4700689	0.11	576903
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INVICTUS VENTURES, INC.	45-2383360	0.00	634
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ISCHEBECK USA, INC.	27-0864068	0.00	339733
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ISLAND REAL ESTATE ASSOCIATES, INC.	65-0521356	0.00	74695
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
J. & J. INTERNATIONAL PRINTERS, INC.	22-3914246	0.05	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
J. CAULEY & ASSOCIATES, LLC	45-1662045	0.05	434882
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
J. MEYERS CUSTOM BUILDER INC.	59-3524628	0.02	129263
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
JAEGER SPINDLES NORTH AMERICA, CORP	36-4796417	0.01	42932
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
JAF COMMUNICATIONS INC	88-1791206	0.00	2987612

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JAMES E. LANG, MD, PA	65-0642257	0.06	624702
JAMES P. NOLAN AND ASSOCIATES, LLC	20-1894028	0.01	233883
JANET H. & C. HARRY KNOWLES FOUNDATION, INC.	01-0485964	0.28	4302620
JASON POZNER, M.D., P.A.	65-0964784	0.15	691850
JAX ELECTRICAL CONTRACTING, INC.	04-3836433	0.00	45188
JC'S BRITISH & 4X4, INC	20-2171226	0.04	331368
JDETIPS, LNC.	81-4630165	0.01	69999
JEFF MONTGOMERY ASSOCIATES	59-2366512	0.05	397518
JEFFREY D. RETTIG, D.O., P.A.	74-2505637	0.00	59775

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JESSICA V. SHELLARD, CPA, LLC	26-1227430	0.01	299509
JILL V. HICKEY, DPM, PA	59-3678720	0.00	30765
JIMCO SALES & MANUFACTURING, INC.	75-1292034	0.15	1625950
JMDG ARCHITECTURE, INC.	83-1572620	0.00	8526
JOBS FOR FLORIDA'S GRADUATES	59-3580979	0.02	236819
JOHN A. TUCKER, M.D., P.A.	63-0994137	0.00	10788
JOHN ATENCIO GOLDSMITH, LTD.	84-0793672	0.02	631058
JOHN CANNON HOMES, INC.	65-0773295	0.22	3414863
JOHN WITT ENTERPRISES, INC.	42-1689161	0.00	43185

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JORDAN AIR, INC.	58-2033764	0.00	75060
JOSEPH GIANNONE PLUMBING, HEATING & AIR CONDITIONING	26-2338402	0.00	29310
JOUFFRE, INC.	52-2325032	0.22	764250
JOYCE HOMES, INC.	84-1150610	0.00	28491
JPI HEALTHCARE SOLUTIONS INC.	27-1886374	0.03	0
JR INVESTMENT PROPERTIES, LLC	86-1975227	0.00	7443
JUDI'S HOUSE	84-1600797	0.07	0
JUICE BEAUTY, INC.	94-3380263	0.11	1603212
JUNIPER RESIDENTIAL MANAGEMENT GROUP, LLC	45-1349594	0.17	1499422

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JUVENTIO, LLC	80-0883342	0.00	220436
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
K2 VENTURE CAPITAL LLC	85-1763748	0.14	292114
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KAHN PROPERTIES, INC.	57-0871207	0.01	928386
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KAHUNA OPERATIONS MANAGEMENT,	27-3007025	0.00	6159
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KAPP MORRISON, LLP	81-2894063	0.15	1059071
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KARATS & CARATS OF MAITLAND, INC.	59-2694065	0.01	868726
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KARHL HOLDINGS, LLC	27-5043888	0.03	108196
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KARLVILLE DEVELOPMENT, LLC	65-0989770	0.03	111505
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KAS PET LLC	46-5344118	0.03	283004

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KATZ HOUSE OF COLOR, INC	82-3583056	0.00	8960
KENNEDY INVESTMENTS, INC.	59-2731447	0.04	158532
KEY 7 SOFTWARE LLC	45-4668677	0.01	37013
KEY HOTEL GROUP, LLC	46-1409914	0.10	1294188
KEYS INSURANCE SERVICES, INC. (ROSIER INSURANCE)	13-4259726	0.07	621855
KEYS-CALDWELL, INC.	59-1863831	0.00	21265
KIDDS QUALITY CLEANING	20-1942423	0.00	24655
KIDS HOUSE OF SEMINOLE, INC.	59-3415005	0.01	189560
KILBOURNE HEATING & AIR CONDITIONING INC	59-2842891	0.02	214344

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KILIAN ENGINEERING, INC.	72-1523384	0.00	420285
KIMBLE ELECTRIC COMPANY, LLC	65-1162629	0.00	33040
KIMBROUGH FIRE EXTINGUISHER CO. INC.	75-2018729	0.00	793782
KINETIC IMAGE CORPORATION	27-3091157	0.00	210914
KINGSTON-MIAMI TRADING COMPANY	59-2233518	0.00	8539
KINSER CONSTRUCTION COMPANY	73-0732015	0.00	66301
KIRBY RESTAURANT SUPPLY COMPAN	75-1907197	0.00	0
KLAPPRODT POOLS I LTD	56-2613200	0.06	835361
KLEEN PRODUCTS, INC.	73-0744170	0.00	175001

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KLEO, INC. DBA CLASSWALLET	27-0308480	0.03	0
KNACK GLOBAL, LLC	26-1875057	0.06	455717
KNOEMA CORPORATION	45-2478559	0.68	1313265
KNOX-ADDLEY ART + DESIGN SERVICES, LLC	45-3582970	0.00	10229
KPK HOSPITALITY LLC	82-2027851	0.00	5363
KPS ALARMS, INC.	01-0580133	0.11	350665
KPS FIRE SPRINKLERS, INC	27-3402016	0.04	136981
KR AESTHETICS LLC	84-2880491	0.10	250416
KRAZY KAT SPORTSWEAR, LLC	22-3480562	0.00	406972

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KRISTIN M. JACKSON, LLC	83-1677882	0.03	129662
KROMATID, INC.	26-0431248	0.00	1118672
KS2 TECHNOLOGIES, INC.	75-2453972	0.00	0
L&H CPAS AND ADVISORS LLC	82-2968572	0.16	424530
LACY AND BARRETT LLC	47-4191964	0.00	59102
LAFAYETTE RE MANAGEMENT LLC	45-3670172	0.52	2059941
LAKE WORTH CHRISTIAN SCHOOL SOCIETY INC	59-0855397	0.26	1559308
LAKES OF DELRAY, INC	59-2596584	0.01	544691
LAKESIDE FAMILY DENTISTRY	20-8243635	0.07	804104

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LAMOTTE BUILDERS	57-0724098	0.00	113628
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LAN LNFOTECH, LLC	80-0392071	0.07	867281
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LANDMARK CONTRACTING, INC.	59-2282672	0.09	281872
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LANDRETH LIGHTING, INC	26-3850392	0.22	1843328
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LANDSAW EYECARE	27-3007025	0.00	871
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LANE ELECTRONICS AND ALARM SYSTEMS, INC.	59-2907302	0.03	154086
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LANIER EDUCATION AND RESEARCH NETWORK	75-2076531	0.00	35056
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LANPHEAR TOOLS WORKS INC	05-0548400	0.02	41320
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LARTA INSTITUTE	95-4609347	0.00	2462465

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LASER LENS TEK INC	65-1142095	0.05	435402
LASER PEGS VENTURES LLC	27-3356323	0.00	51950
LASER SCIENTIFIC, LLC	83-0389053	0.08	893843
LAURA DEVINE ATTORNEYS LLC	26-0213205	0.02	435907
LAW OFFICES OF LANGLEY & CHANG	46-5365600	0.00	53902
LAWN PRO MAINTENANCE INC	59-3648783	0.01	57551
LAWRENCE LOWY ASSOCIATES	13-3779161	0.18	3926694
LEAD RESORT MANAGEMENT, LLC	84-2887987	0.10	0
LE'CENTRE DENTISTRY PLLC	93-2716102	0.05	1060282

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LEE ARCHITECTS/INTERIOR DESIGNERS PC	84-0795654	0.07	2048065
LEE COUNTY HOUSING DEVELOPMENT CORP	65-0295038	0.02	75950
LEGACY RECORDS NYC LLC	81-5212636	0.00	1537
LEGEND ASSET MANAGEMENT II LLC	26-4482560	0.00	9929
LEGION HEALTHCARE PARTNERS, LLC	84-1943139	0.06	714015
LEISURE INTERACTIVE, LLC	56-2509136	0.02	47186
LENDER LEGAL PLLC	46-1030201	0.00	1926197
LEVEL FOUR ORTHOTICS & PROSTHETICS, INC.	83-0359603	0.03	493728
LEVINGER COMPANY	65-0220430	0.08	0

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LEVINE CONTRACT FURNITURE GROUP INC.	13-3861834	0.02	0
LIBERTY RENT, LLC	86-2149683	0.00	52292
LIDOCHEM LLC	22-2354639	0.14	2853877
LIFE'S ABUNDANCE, INC.	46-5246499	0.10	633042
LIFESTYLE MANAGEMENT OF BIRMINGHAM, INC.	63-1221672	0.00	0
LIGHTHOUSE JEWELRY UTC, LLC	61-1741765	0.03	214288
LIGHTING RESOURCES LLC	25-1905692	0.27	2676306
LIMITLESS HOMES, LLC	84-1815910	0.00	355894
LINGO, INC.	59-3233818	0.01	164852

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LINGOPORT, INC.	84-1586079	0.08	0
LINKSTERS MANAGEMENT, LLC	26-1403283	0.42	4026210
LINRENE FURNITURE, INC.	56-1898671	0.00	63949
LINT OUT OF SW FL INC	47-4561333	0.03	175898
LITTLE HAWK INVESTMENTS, LLC	47-4636607	0.07	322051
LITTLESTONE MANAGEMENT	51-0630065	0.06	291289
LIVE BUILDING SYSTEMS, LLC	81-1970661	0.05	139489
LM FUNDING LLC	26-2319938	0.00	116111
LOAN SCIENCE, LLC	26-3696826	0.00	7528

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LOBSTER LIFE SYSTEMS INC	22-2986119	0.01	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LOCAL AD FACE, LLC	47-4088705	0.00	19677
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LOCAL CUTS MEAT COMPANY, LLC	85-3761443	0.00	5055
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LOCKLEAR & ASSOCIATES PROFESSIONAL CORPORATION	45-5224708	0.00	78581
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LONE STAR PEDIATRICS	54-2115447	0.00	51376
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LONESTAR EMS, LLC	86-2639935	0.00	556834
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LONG BEACH ICE, INC	26-4424095	0.00	15028
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LONG ISLAND ANIMAL EMERGENCY, PLLC	47-3101386	0.05	216752
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LONGHORN TUBE, LLC	20-3363405	0.00	2563

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LOS ANGELES PRODUCE DISTRIBUTORS, LLC	81-3740880	0.01	6813
LOS ANGELES PRODUCE FRESH	82-3415567	0.11	350712
LOUISIANA COMMUNITY HEALTH CENTER, INC.	35-2681604	0.01	13691
LQPMC SERVICES LLC	87-1696311	0.04	184302
LUCKIE & COMPANY, LLC	63-1160366	0.00	6838089
LUCKY'S TATTOO & MEDICAL SUPPLIES, INC.	59-3654931	0.02	0
LUMINA EMPLOYMENT CORP.	82-3897534	0.01	42274
LUX-ART SILKS INTERNATIONAL, INC.	65-0950055	0.03	483352
M & J PLUMBING CONTRACTORS, INC.	58-1999558	0.00	257417

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M & S STEEL, INC.	58-1705022	0.03	394165
M.C. MILLER CO., INC.	22-1777475	0.10	1140249
MACCIO ENTERPRISES, LLC DBA TH	82-1199589	0.10	621174
MACH INDUSTRIES INC.	92-0850019	0.00	40727
MACKEL ARTHUR CARTER ENTERPRIS	27-2045135	0.08	225013
MACROCAP LABORATORIES, LLC	92-3639207	0.24	1260013
MADERN USA, INC.	20-4039228	0.00	0
MAIN MECHANICAL SERVICE, INC.	59-2327199	0.02	58782
MAJOR AIR SERVICES CORP	11-2007668	0.00	111437

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MALIN-DIAZ IRRIGATION	59-3646033	0.01	80874
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MANDA MACHINE CO., INC.	75-1231525	0.05	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MANGO BOTTLING, INC.	59-3132873	0.02	451266
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MAR MEDICAL CONSULTANTS PA	65-1132238	0.07	591209
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MARINE MAMMAL CARE CENTER LOS ANGELES	47-5249182	0.04	89335
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MARIO ALMEIDA, M.D. P.A.	65-0310039	0.05	664322
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MARK BOND & COMPANY, INC.	75-2174264	0.03	737387
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MARK L MEYER MD PLLC	55-0869609	0.01	421519
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MASTER THE POSSIBILITIES, INC.	46-2693153	0.02	59557

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MASTERWORD SERVICES, INC	76-0393601	0.09	1473142
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MATTHEWS DESIGN GROUP	92-0592519	0.28	3334907
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MAUI WOWI	41-2040884	0.00	18181
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MAY SANDS MONTESSORI SCHOOL, INC	65-0798013	0.02	167202
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MAYACOO LAKES II CLUB INC.	27-0501192	0.00	7351
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MAZZOLA OIL SERVICE, INC.	20-4138659	0.10	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MB FLORIDA LIMITED, LLC	65-0443290	0.00	634957
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MB&R ENGINEERING, INC.	58-2486929	0.01	197033
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MCHENRY CONSULTING INC.	81-0563681	0.12	2635557

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MCKILLOP LAW FIRM PL	26-2627754	0.00	645790
MCKINNEY CAPITAL	26-4202626	0.04	172039
MCMULLIN LEGAL SERVICES LLC	45-5289265	0.01	29051
MEALEY GROUP, INC.	65-1043421	1.43	9123508
MEASURING USABILITY, LLC	59-3827627	0.26	626916
MEBROM LLC	84-4635270	0.06	421424
MEDICAL LABORATORY DIAGNOSTICS, INC.	22-2768584	0.00	176517
MEDOVENT SOLUTIONS	83-4559217	0.02	0
MEDPLEX OUTPATIENT SURGERY CENTER, LTD.	76-0353620	0.12	919132

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MEDQIA, LLC DBA MEDQIA IMAGING	20-5787819	0.26	0
MEDSAFETY SOLUTIONS LLC	46-4783944	0.01	0
MEDWORKS MANAGEMENT, LLC	27-2243293	0.17	2129628
MELISSA DELAMO LLC	47-2326726	0.00	118
MELISSA SHOES	26-1830997	0.00	264767
MERITUS CORP	20-5355432	0.00	7380
MERLIN IT SUPPORT, INC.	20-1250191	0.00	151340
METROPICA DEVELOPMENT, LLC	32-0417365	0.00	12857
MGC SYSTEMS CORP	98-0374347	0.00	50244

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MGL PARTNERS, INC. DBA GOOD'S HOME FURNISHINGS	26-4543486	0.00	1313716
MH VERTICAL, LLC	87-1596948	0.02	34302
MIAMI TRANSFORMERS CORP.	65-0647554	0.00	17760
MIAMI TRANSFORMERS SERVICE AND REPAIR CORP.	35-2301322	0.00	10338
MICRO INTEGRATION & PROGRAMMING SOLUTION	73-1461043	0.03	0
MID-FLORIDA PRIMARY CARE, P.A.	03-0374583	0.10	2233060
MILLENIA KIDZ INC	83-4443681	0.00	3846
MILLENNIUM DENTAL	85-2099466	0.00	4726
MINDFUL CARE, INC	83-3361300	0.50	891809

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MISSISSIPPI EYE ASSOCIATES	64-0790748	0.02	29636
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MNJ ENTERPRISES	32-0469202	0.00	538
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MNSK HOTELS, LLC	87-4641079	0.00	2758
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MOBILE COMM, LLC DBA LEADERSHI	20-0045473	0.00	278426
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MOCZULSKI & MOCZULSKI PROPERTIES, INC.	76-0633161	0.16	2272494
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MODCLOTH HOLDINGS, LLC	84-3488131	0.00	561450
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MODERN AIR SOLUTIONS, LLC	46-1813227	0.05	316047
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MOHRMANN PHARMACIES	74-1727322	0.00	62830
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MOMENTUM SOLAR	27-1242539	0.88	3544362

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MONTESSORI SCHOOL OF DOWNTOWN CLEARLAKE LLC	26-4033568	0.01	49407
MONTESSORI SCHOOL OF PEARLAND LP	45-3623814	0.00	3321
MONUMENT HEALTH, LLC	85-0850460	0.00	3288
MORTGAGE CONSULTANTS, LTD.	75-2104203	0.00	31880
MOSSLAND FARMS, INC.	58-2013632	0.01	524957
MOUTAINVIEW CHEM DRY	20-0620135	0.03	259926
MPP MANAGEMENT, INC.	43-1765083	0.00	1810522
MSA ANNUITY, LLC	51-0503284	0.03	521910
MSC MANAGEMENT, INC.	30-0806717	0.09	469588

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MST DENTAL, P.C.	63-0847718	0.00	1320156
MUELLER LAW, PLLC	27-4651001	0.00	170281
MULTIPOINT COMMUNICATIONS, INC.	59-3633815	0.04	389408
MURPHY, MILLER & BAGLIERI, LLP	20-1689274	0.33	6482658
MURRELL, INC.	59-2193650	0.03	243095
MYLAN PARK FOUNDATION INC.	55-0765182	0.02	35802
N & M ENTERPRISES, INC.	26-1302086	0.00	0
NANO BANC	42-1728855	0.73	3542363
NATIONAL ENVY EMPLOYEE LEASING, LLC.	81-3577240	0.00	972

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NATIONAL FINANCIAL COMPANIES, LLC	30-0623129	0.01	31672
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NAUSET ENTERPRISES, INC. DBA A	59-3529402	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NAVARRE BEACH LAUNDRY DBA LGG HOLDINGS LLC	72-1558574	0.00	43738
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NAVARRE LUMBER & SUPPLY, INC	59-2982397	0.00	35847
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NBE NATIONAL BANK EQUIPMENT, INC.	01-0625789	0.07	353795
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NETWORK REPUBLIC, INC.	27-0680164	0.01	62454
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NEW BRUNSWICK CARDIAC CATH LAB, LLC	20-2419783	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NEW CAPITAL, LLC	95-4546100	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NEW DEAL MERCANTILE, INC.	74-1757175	0.00	170024

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NEW MILLENIUM SMILES DBA SAVAN	58-2531858	0.07	1118000
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NEW WIDE INDUSTRIAL (USA) CO., LTD	27-0865711	0.03	661971
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NEWCO WARRANTY SERVICES, INC.	65-0898491	0.06	1998341
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NEXCOR FOOD SAFETY TECHNOLOGIES, INC.	47-2383225	0.04	457018
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NFUSION CAPITAL FINANCE, LLC	84-2775450	0.05	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NGUYEN DENTAL PL	26-0222419	0.04	400041
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NICKEL PLATE PROPERTIES & MANAGEMENT	26-2646032	0.07	511714
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NIPPON CONCEPT AMERICA, LLC	99-0373678	0.01	192163
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NIROC CONSULTANTS, INC.	27-3237191	0.04	536813

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NLTG, INC DBA THE ONE TO ONE G	04-3147676	0.00	19214
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NOAH'S ARK ANIMAL HOSPITAL	01-0759863	0.00	427946
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NOMAD FIELD SERVICES, LLC	46-2296152	0.00	13010
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NORM'S RV, INC.	33-0783544	0.00	5523
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NORTH AMERICAN DIRECTORY SERVICES, LLC	85-3979810	0.02	53775
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NORTH ATLANTIC PAINTING COMPANY, INC.	81-0678821	0.01	44340
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NORTH COUNTY CHARTER SCHOOL, INC.	65-0865183	0.05	593913
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NORTH GEORGIA AUTISM CENTER LLC	82-5484002	0.00	2151
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NORTH TEXAS URGENT CARE, P.A.	61-1643282	0.00	324820

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NORTHGATE COUNTRY CLUB, LLC	46-1203151	0.00	0
NORTHWEST SEAFOOD, INC.	59-3077199	0.02	90862
NOVATIO SOLUTIONS, LLC DBA NOVATIO	36-3990452	0.00	15466
NPZ LAW GROUP, P. C.	22-3241533	0.15	2782663
OAKBROOK APARTMENTS	52-1737346	0.00	17835
OBSESSED GARAGE, LLC	81-2546411	0.00	15779
OBVIYO, INC.	87-1566357	0.00	35862
OCCAMSEC LLC	27-0821248	0.00	0
OCEAN STUDIES CHARTER SCHOOL	27-0677326	0.04	87739

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OFFICE FURNITURE NOW INC.	81-1857489	0.01	4795
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OFFICE INTERIORS GROUP, INC.	80-0302523	0.00	51312
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OLD SAVANNAH TOURS, LLP	58-1512590	0.00	137700
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OM ENGINEERING SERVICES, INC	42-1677099	0.04	1097423
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ONC NEWARK CLUB, LLC DBA THE N	20-5612517	0.00	12760
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ONE SPIRIT LEARNING ALLIANCE, LTD.	27-0027902	0.03	256615
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ONE WORLD INC.	58-2402938	0.10	826005
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ONEILL INDUSTRIES INTERNATIONAL, INC.	82-3032891	0.00	189595
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ONEONTA DENTAL CENTER	72-1380930	0.04	1582698

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ONEVISION RESOURCES, INC.	81-4673303	0.10	740519
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OPEN EDUCATION LLC	27-4450263	0.36	3946978
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OPTICAT LLC	26-4731828	0.00	1667
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OPTIONS INFORMATION TECHNOLOGY LLC	20-3855394	0.53	5961243
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ORAZUL ENERGIA MANAGEMENT LLC	81-4706450	0.00	346636
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ORION PAYMENT SYSTEMS, INC.	76-0629546	0.00	212275
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ORLANDO PEDIATRIC PULMONARY AND SLEEP ASSOCIATES PA	32-0017907	0.27	4545422
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ORLANDO RENTCO LLC	82-5504514	0.04	60112
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ORTHOPEDIC SURGERY CENTER OF CLEARWATER	59-3594816	0.00	192597

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OUT OF HOME AMERICA, INC	06-1487435	0.10	829003
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OUTPATIENT SURGERY CENTER OF ST. AUGUSTINE, LLC	20-2047704	0.00	275803
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OUTRIGGER ENERGY II, LLC	82-3529662	0.21	2207584
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OWA USA CORP	38-4078129	0.01	60831
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OXFORD REALTY GROUP LLC	04-3697052	0.01	97744
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OZARE CARE, INC.	65-1092691	0.00	1173180
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
P2 SOLUTIONS	45-1571958	0.00	20620
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PACA FOODS LLC	27-4334780	0.00	21086
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PACES MEDEQUIP, LLC	26-1805301	0.00	6660

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PACESETTERS, INC.	59-2387581	0.07	1101888
PACIFIC LIGHT & HOLOGRAM, INC.	82-4222191	0.36	1891874
PACIFIC TECHNOLOGIES AND SOLUTIONS, LLC	82-5098345	0.16	398809
PACKARD CAPITAL, LLC	83-3660975	0.09	533662
PALADIN OPERATING COMPANY, LLC	92-0293911	0.07	575393
PALADIN PHYSICIANS SERVICES, P.A.	45-4024265	0.00	67825
PALATKA OAKS APARTMENTS	06-1819528	0.01	58133
PALMER RANCH MASTER PROPERTY OWNERS ASSOCIATION	59-2782438	0.04	346739
PANHANDLE MEDICAL SERVICES, LLC	59-3194768	0.00	2975

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PANTHEON HOLDINGS, LLC	87-1377558	0.04	51852
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PAR ONE CONSTRUCTION	59-3125017	0.00	3503
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PARAMOUNT POWER, INC	59-3386520	0.01	28580
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PARIS PRESENTS INC.	36-2115043	0.77	10060833
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PARSLEY CONSTRUCTION	59-3007984	0.00	236302
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PARTHENON MEDICAL CENTER	27-4083175	0.01	219617
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PAS CARGO USA, INC.	42-1539006	0.00	264814
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PASSER INC	56-2468076	0.02	86880
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PATHFINDER BUSINESS STRATEGIES, LLC	20-0635855	0.04	234797

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PCE MANAGEMENT, INC	01-0713242	0.00	3054028
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PEAKE, FOWLER & ASSOCIATES, PA	57-1102076	0.04	492608
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PEDIATRIC CARE OF AUSTIN, P.A.	74-2809697	0.00	113620
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PEEBLES PROSTHETICS, INC.	84-1160766	0.19	2740917
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PEGGY ADAMS ANIMAL RESCUE LEAG	59-0637811	0.16	798422
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PERFECT DRIVE GOLF VILLAS	20-4914871	0.00	2599
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PERFORMANCE PHYSICAL THERAPY OF NAPLES, INC.	06-1693930	0.20	2857098
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PERRY & CO	84-0614213	0.06	390393
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PERRY BAROMEDICAL CORPORATION	65-0314327	0.08	987796

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PETITT, PLLC	27-3424894	0.03	1270029
PETROS SERVICES, LLC	80-0776392	0.42	1566651
PHASE ENGINEERING, INC.	75-2502360	0.11	1108327
PHILIP A. BATES, P.A.	59-3467087	0.00	5642
PHOENIX DATA SECURITY, INC.	45-2211547	0.24	1690418
PHONESUITE UNIFY	84-4275342	0.00	29964
PICSOLVE, INC.	20-2191432	0.10	832063
PIERCE SALES COMPANY INC.	34-1200546	0.02	535650
PILGRIM MORTGAGE, LLC	30-0382471	0.01	0

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PINNACLE COMPANIES	22-3693818	0.00	5279
PINNACLE HOTEL MANAGEMENT, LLC	52-2051492	0.20	2595483
PIONEER MOTOR BEARING COMPANY	62-1388933	0.36	6314777
PIRTEK JERSEY VILLAGE	04-9493577	0.00	14959
PIRTEK SFO	27-3007025	0.00	840
PITTMAN INDUSTRIAL MARKETING INC.	63-1035249	0.04	1009783
PIVOT POINT SECURITY, INC.	22-3752669	0.15	1327727
PLAN B, INC.	74-2893221	0.02	0
PLAYHUT, INC.	95-4373438	0.00	8891

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PLS PRODUCTIONS	14-4407050	0.00	472489
PMD CONSULTING	83-3658871	0.00	242217
POD MANAGEMENT INC	65-0276640	0.06	1006434
POINT CHARLOTTE, LLC	27-3007025	0.00	1033
PORT A PIT, INC.	59-2120599	0.00	8630
PORT ORANGE PEDIATRICS PA	57-1230607	0.01	278248
PORT ORANGE SOUTH DAYTONA CHAMBER OF COMMERCE	59-2074508	0.00	59105
POTTER GOLF INSTRUCTION, LLC	27-3007025	0.00	739
POWDER RIVER SURGERY CENTER LLC	84-5166436	0.00	561448

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
POWERVZ, LLC	88-4185799	0.01	37130
PRECISE CABLES INCORPORATED	84-1332801	0.00	1365611
PRECISION BONE AND JOINT SURGERY CENTER LLC	86-1302912	0.00	101
PRECISION GRAPHICS, INC.	04-3699405	0.04	583969
PRECISION TRADING CORP	59-1938903	0.00	131100
PREFERRED COMPOSITE SERVICES, INC.	65-0665511	0.00	681545
PREMIER CARE HOMECARE	20-4448771	0.00	9257
PREMIER FABRICATING, LLC (FOCUS METAL SOLUTIONS)	47-2484379	0.00	5158
PRESCHOOL PARTNERS	46-4519557	0.04	333373

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PRIMARY CHARTER SCHOOLS, INC.	59-3588811	0.00	825
PRINCECO INC.	20-2014510	0.00	540040
PRINTGLOBE, LLC	83-2918087	0.00	0
PRINTSWELL, INC.	63-1048794	0.26	2060703
PROACTIVE TECHNOLOGIES, INC.	75-2710126	0.06	944395
PRODEVAL CORP	87-1671638	0.04	53953
PRODUCT SOURCE INTERNATIONAL DATACOMM, LLC	22-3749078	0.12	5903439
PROFESSIONAL ELECTRICAL SERVICES, INC	59-3453672	0.14	287714
PROFESSIONAL FUNERAL SERVICES	20-5730672	0.03	198930

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PROFESSIONAL LAND SURVEYORS, LLC	88-1956349	0.07	304706
PROFESSIONAL MANAGEMENT, INC.	59-1725802	0.10	767418
PROFESSIONAL PAINTING & PAPERHANGING, INC.	59-3557293	0.00	7042
PROGRESSIVE METAL FINISHERS, INC.	63-1009487	0.02	558787
PROSCAPE HOLDINGS, INC.	20-2495327	0.00	173219
PROSOC, INC.	80-0655413	0.02	0
PSI BUSINESS COMPUTERS, INC. T	22-2821404	0.00	3966
PULMONARY ASSOCIATES OF ST. AUGUSTINE, P.A.	20-1395801	0.17	2188335
PURADYN FILTER TECHNOLOGIES, INC.	65-0125129	0.00	136534

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PURELY ELIZABETH LLC	82-0839763	0.45	1962247
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PVHA/SIMS - SAVANNAH COMMONS, LLC	20-8810643	0.00	70763
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PYA ANALYTICS, LLC	46-2482646	0.00	40713
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
QBENCH INC	88-3695087	0.00	273994
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
QCS ACQUISITION CORPORATION	83-3291995	0.36	2356553
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
QP3 TRAINING SYSTEMS, INC.	59-3646862	0.04	682709
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
QUALPATH INC.	65-1146661	0.03	267628
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
QUANTUM SYSTEMS INC	35-2728202	0.00	170352
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
QUEUE SOFTWARE INC.	47-1052622	0.00	172141

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
QUINN FOODS, LLC	27-3540829	0.11	0
QUORUM SERVICES, LLC	20-2148530	0.08	453020
R&R OF PENSACOLA, LLC	81-1361197	0.00	1779
R.B. JACKSON ILL, P.C.	20-3232023	0.05	250881
R.O.C.K., RIDE ON CENTER FOR KIDS	74-2917659	0.02	90268
RADIATION SHIELDING INC	20-3996016	0.00	936
RALI SOLUTIONS, LLC	85-4131251	0.10	631916
RALLYDAY PARTNERS	84-1771488	0.24	0
RAM EYE CARE AND RETINA CENTER, PA	30-0029956	0.03	154859

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RAMAR ENTERPRISES OF BROWARD, INC	42-1568291	0.00	426923
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RATAN MANAGEMENT GROUP, LLC	45-2554946	0.02	32955
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RAY-JURGEN CO., LLC	83-0966193	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RAYMARK MECHANICAL, INC.	76-0463618	0.01	43268
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RAZOM, INC.	46-4604398	0.00	54425
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RDK ASSETS, INC	86-2038316	0.00	426757
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
REACH FOR THE STARS LEARNING CENTER INC	20-3042280	0.04	89442
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
REAL PROPERTY TAX ADVISORS, IN	16-1617905	0.00	133
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
REB TECHNOLOGIES, INC.	75-2684918	0.06	1790014

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
REDWAVE TECHNOLOGY GROUP, LLC	27-3948187	0.02	65902
REINFORCING SUPPLY LLC	11-3584472	0.06	316500
REINLAND CORP.	75-2358778	0.05	631089
REL ACOUSTICS AMERICA LIMITED, LLC.	47-1009146	0.00	62198
RELEASE MARINE, INC.	58-1861312	0.00	174677
RELIABLE BRONZE & MANUFACTURING, INC.	41-0945773	0.00	55591
RENEW RX	82-4273031	0.09	332246
REPLICATIONS, INC.	13-4075810	0.16	451722
RESPIRATORY CRITICAL CARE AND	59-3385828	0.18	637826

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Part II Participating Employer Information (Continued).

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RESTORATION ON LOCATION, INC.	27-0943755	0.13	415285
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
REVIEWPUSH LLC	27-2113067	0.06	481079
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RHODES+ BRITO ARCHITECTS	59-3373968	0.46	6469562
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RICHARDS EQUIPMENT, LLC	63-1286732	0.00	6371
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RIGGS PARTNERS, INC.	57-0980003	0.15	3214226
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RISING PHARMACEUTICALS	83-3859401	0.59	2486099
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RIVER CITY REHABILITATION AND SPINE SPECIALISTS, PC	20-0490012	0.00	11804
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RIVERWOOD COMMUNITY ASSOCIATION, INC	65-0346024	0.00	18213
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RN BORELLI	94-2613728	0.00	694718

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RNB ASSOCIATES, INC.	46-1924643	0.02	85936
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ROBANDA INTERNATIONAL, INC	33-0814850	0.15	866231
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ROBERT W PAYNE DDS	59-3510533	0.00	107262
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ROBRADY, INC	83-2380247	0.16	2152157
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ROEBUCK & ASSOCIATES, INC.	59-3308136	0.12	898595
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ROEBUCK TECHNOLOGIES LLC	47-4304367	0.07	835831
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ROMA INDUSTRIES LLC	13-4108320	0.01	199268
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RON STANLEY & SON PLUMBING, INC.	75-2483900	0.04	500665
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ROSEWOOD MANOR OF VERO BEACH,	27-3007025	0.00	1193

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ROYAL GLEN APARTMENTS	52-1647796	0.00	665
RUBINTON & ASSOCIATES PA	45-5051199	0.00	198035
RUPERT, GIBBON & SPIDER, INC	46-3698186	0.00	2117
RURAL URGENT CARE, LLC	47-3524701	0.53	2499991
RXMEDICAL DYNAMICS	26-0334211	0.00	82686
S&P MANAGEMENT SERVICES, INC.	20-4521989	0.03	695993
SA 2010 LLC	20-4353069	0.03	149177
SABAL PALM BANK	20-5464849	0.00	1772374
SALON WEST OF LARGO INC	20-1376596	0.15	1511988

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SANCTUARY MEDICAL AESTHETIC CENTER OF BOCA RATON	47-4097445	0.00	0
SANDBLAST BY CREATIVE CONCEPTS, INC.	63-1187568	0.05	1840824
SANFORD RENT ALL INC	56-1331278	0.00	2342
SANTA FE APPAREL LLC	27-4026943	0.00	1533411
SARDIS LONE STAR LLC	84-2838022	0.00	3743
SARITASA LLC	20-2842465	0.17	1221099
SASSY BUSINESS MANAGEMENT, INC.	27-3356253	0.08	588106
SAVANNAH BLINDS SHUTTERS & SHADES, LLC	26-1893500	0.00	12054
SAVANNAH GLOBAL SOLUTIONS, LLC	58-2517680	0.00	1340605

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SAVANNAH RIVER LOGISTICS LLC	27-1705503	0.00	13416
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCANDIA GEAR THE AMERICAS CORP	42-1777788	0.03	258259
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCENIC STAYS HOLDING COMPANY LLC	85-4123928	0.04	266908
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCIF SOLUTIONS, INC	86-1118830	0.08	422818
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCIPERIO, INC.	73-1528382	0.39	3683521
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCOTT FISCHER ENTERPRISES LLC.	27-3903038	0.24	6428845
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCOTT, SINGLETON, FINCHER AND CO. PC	75-1830742	0.01	521394
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SD3IT, LLC	47-1072876	0.29	890002
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SEAMLESS RAIN GUTTERS, INC.	75-3077551	0.00	447

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Part II Participating Employer Information (Continued).

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SEAN PATRICK ENTERPRISES, INC.	65-0740101	0.07	114175
SEAVIEW INVESTMENT MANAGERS, LLC	82-2888122	0.05	197526
SECURE DELIVERY SOLUTIONS	87-1145363	0.00	1188
SEIBERT AND SON, INC.	58-1293673	0.02	856452
SELECT TITLE AGENCY, INC.	22-3146755	0.00	39228
SELGE HOLDINGS & VENTURES	26-3916615	0.00	484681
SENATOR INTERNATIONAL FREIGHT FORWARDING, LLC	65-0914038	0.01	0
SENTINEL TITLE, LLC	84-3526743	0.03	66269
SERA SYSTEMS, INC.	84-1800590	0.17	401360

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SERVICE CONSTRUCTION SUPPLY INC	63-1260413	0.00	680573
SERVICE KEEPERS MAINTENANCE, INC	65-0044807	0.00	194235
SERVPRO OF CHAMPIONS	76-0499151	0.01	23032
SESCORT, INC.	13-3739542	0.00	0
SEUFFERT HOLDINGS, LLC	82-2932252	0.00	857
SEVENTEEN SEVENTY-SIX, INC	46-2105790	0.01	0
SHADOW WOOD COMMUNITY ASSOCIATION, INC.	65-0811616	0.08	673830
SHEAR EXPRESS, INC.	59-3025010	0.17	1421937
SHERLOCK HOMES PEST CONTROL & IRRIGATION LLC	85-1678473	0.00	342

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SHIPRA ENTERPRISE LLC	76-0273670	0.01	344875
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SHORE/FORM SYSTEMS, INC	59-2291751	0.00	2262
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SID DANIEL LUMBER COMPANY OF SAVANNAH, INC.	58-1202297	0.00	29388
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SIIA	52-1329859	0.31	1195905
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SIMPLESHOW USA CORP.	37-1749888	0.27	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SINCERUS PHARMACEUTICALS, INC.	81-1035487	0.30	1569518
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SISSINE'S BUSINESS SOLUTIONS OF ORLANDO, LLC	46-3694974	0.13	986219
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SISSINE'S OFFICE SYSTEMS, INC	59-2139556	0.22	1691989
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SKY MANAGEMENT CORP	13-3796721	0.00	61640

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SLATE PROPERTY GROUP, LLC	46-4040206	0.31	1586580
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SLEEP DISORDER CENTER OF FT WALTON BEACH	59-3182353	0.01	84662
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SMART FLOUR FOODS LLC	45-2620108	0.00	180614
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SMG PROPERTY MANAGEMENT, INC.	52-1653151	0.08	397096
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SMITH ELECTRICAL INC	20-3442661	0.02	236183
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SNELLING PERSONNEL	22-3508520	0.00	37117
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SOCAL NETWORKING, INC	20-2500965	0.05	166818
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SOE SOFTWARE CORPORATION	82-0565032	0.06	1322751
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SOFTLINE SOLUTIONS LLC	26-3605289	0.00	40058

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SOHACKI INDUSTRIES, INC.	59-3090535	0.06	0
SOLARUS TECHNOLOGIES, INC.	45-5263753	0.00	0
SOLITUDE BEACH, INC.	58-1810133	0.00	66721
SONDER HEALTH PLANS, INC.	83-1793185	0.00	1842
SOUTH BAY PEDIATRIC DENTAL GROUP GP	20-8894917	0.04	0
SOUTH CENTRAL STEEL INC.	63-1013224	0.00	3630
SOUTH FLORIDA STAIRS, INC.	92-2477038	0.08	760975
SOUTH GEORGIA PROPERTY MANAGEMENT, LLC	20-8255839	0.00	37558
SOUTHEASTERN MARINE POWER, LLC	20-3844386	0.05	553059

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SOUTHERN CRESCENT PEDIATRICS	58-1487734	0.10	1733573
SOUTHERN ENERGY SYSTEMS, LLC	82-3913760	0.08	313438
SOUTHERN HOSPITALITY WHOLESALE & RETAIL INC	59-3112541	0.04	773434
SOUTHERN LAND TITLE, LLC	63-0830564	0.00	42015
SOUTHERN MONTGOMERY COUNTY	74-1670450	0.04	308576
SOZO CHILDREN INTERNATIONAL	27-4552700	0.04	136924
SPAULDING FOR CHILDREN	74-2116380	0.05	0
SPECIALTY MANAGEMENT COMPANY O	59-2315139	0.10	479177
SPIGEL PROPERTIES, LLC	74-2680768	0.08	0

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SPINA BIFIDA ASSOCIATION OF AMERICA	52-1342181	0.04	567553
SPOTLESS LOGISTICS	47-1445268	0.00	1697
SPOTLIGHT MEDIA SOLUTIONS, INC.	02-8222267	0.03	447238
SPRING PLACE	47-3777636	0.03	248164
SPRING STUDIOS NEW YORK LLC	27-3192017	0.05	472214
SPRUCE CAPITAL PARTNERS LLC	77-0703500	0.15	514433
SSCOR CORPORATION	95-3613041	0.05	0
STANLEY TATE BUILDERS INC.	59-0766919	0.00	4480
STARABILITY FOUNDATION INC	59-2516162	0.06	206168

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STARLING EYE GROUP	59-3526387	0.03	137372
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STATESBORO MEDICAL GROUP LLC	84-2492416	0.00	149104
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STAVROS ENTERPRISES, INC.	20-5238284	0.00	6955
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STEALTH ENTRY	27-0212709	0.00	8044
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STEELECREEK MANAGEMENT, LLC	80-1591837	0.04	731765
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STEELO CLEANING LLC	80-0283533	0.02	32960
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STEGAS, INC	45-4748189	0.04	220184
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STERLING OAKS ASSOC & CLUB INC	77-0676024	0.11	834320
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STEVEN MILLER & CO. LLC	92-1202469	0.00	328125

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STITCH & COUTURE, INC. DBA LEL	13-3862975	0.17	1292503
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STONE BOND TECHNOLOGIES	03-0413214	0.00	64843
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STONEBROOK FAMILY MEDICINE	20-0596759	0.03	1103719
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STREET SMART YOUTH PROJECT	80-0241296	0.01	78931
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STUDIO 2H DESIGN, LLC	47-4604499	0.02	48558
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STUDIO COMPLETIVA INC.	84-1312592	0.21	1353825
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SUBSTANCE SOLUTIONS, INC.	26-1646246	0.01	236224
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SUMMER GLEN APARTMENTS	74-3180113	0.00	3013
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SUNFRESH PRODUCE INC.	45-4350697	0.00	76404

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SUNSHINE CONSTRUCTION LLC DBA	20-8781325	0.07	742559
SUNSHINE HORTICULTURE, LLC	20-0928662	0.00	444597
SUNSHINE STATE SALES, INC.	59-2291188	0.00	7128
SUNSTATE BANK	65-0878433	0.34	4283209
SUNTECH ELECTRICAL CONTRACTORS	20-0173128	0.00	16666
SUPER FAST ELECTRIC, LLC	82-3503072	0.01	97606
SUPER ORGANIC FOODS INC	46-5751661	0.00	70165
SURGICAL CAPITAL SOLUTIONS, INC	47-2149063	0.09	632808
SURGICAL CLINIC SOLUTIONS, LLC	82-3722886	0.10	623469

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SURGICAL SPECIALISTS OF ST. LU	27-3007025	0.00	1810
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SW COMMUNITY	82-4810941	0.03	185508
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SYMBIONT SERVICE CORPORATION	65-0186071	0.12	4018290
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SYNERGY ASSET MANAGEMENT, INC	59-3734160	0.04	184430
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SYNERGY GOLF GROUP LLC	83-2599698	0.03	387890
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TACSERV, LLC	46-2523410	0.09	199245
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TAFFIN, LLC	13-4103858	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TAG AGENCY OF PINELLAS, INC.	27-2995103	0.00	354463
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TAG COLLISION, INC	47-1873892	0.01	43971

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TALO PARIS PHYSICIANS	81-3875588	0.00	32909
TAMPA BAY BATTERY	82-3282498	0.04	245337
TANGO NETWORKS, INC.	26-4457449	0.01	0
TAPPS' GARAGE	84-0718075	0.00	210465
TARGET GRAPHICS, INC.	65-0064589	0.01	448230
TATE DEVELOPMENT CORPORATION	59-2649349	0.04	505760
TAXSERV, LLC	54-1792131	0.07	878818
TAYLOR & MATHIS OF FLORIDA, LLC	86-1084942	0.00	11919
TAYLOR CPA & ASSOCIATES PC	58-2505292	0.00	172366

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TE SYSTEMS, INC	47-4074599	0.06	473079
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TEAM DRIVE-AWAY HOLDINGS, LLC	47-5242122	0.25	1428965
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TEC SERVICES GROUP, INC	22-3949732	0.16	566699
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TECHBRIDGE INC.	58-2531971	0.14	888597
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TECHNICAL SPECIALTIES COMPANY, INC.	13-1910884	0.00	3444
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TECTRADE COMPUTERS CORP.	99-0384429	0.00	521115
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TELECOMMUNICATIONS ASSET MANAGEMENT COMPANY	59-3424264	0.00	4038209
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TEMPLE BUILDING SYSTEMS, INC.	36-4002440	0.00	807449
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TERRA-COM ENVIRONMENTAL CONSULTING, INC.	59-3604964	0.08	1975635

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TERROR TOURS LLC	46-1039102	0.01	83906
2a Name of Participating Employer TEXAS CUSTOM BUILDERS, LTD	20-2234747	0.00	2076
2a Name of Participating Employer TEXAS ENDOVASCULAR ASSOCIATES PLLC	47-4517082	0.09	736229
2a Name of Participating Employer TEXAS HEALTH MANAGEMENT LLC	46-1274382	0.00	209
2a Name of Participating Employer TEXAS PHARMACY MANAGEMENT GRP	27-3007025	0.00	2318
2a Name of Participating Employer THE ACHIEVE AGENCY, LLC	81-3926385	0.00	93412
2a Name of Participating Employer THE ADOBE, LTD	46-1542226	0.00	61758
2a Name of Participating Employer THE ALS ASSOCIATION GOLDEN WEST CHAPTER	95-4163338	0.22	1630632
2a Name of Participating Employer THE AMERICAN ACADEMY OF ORTHOT	23-7225346	0.02	0

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THE ARBOR SCHOOL OF CENTRAL FLORIDA, INC	27-3092011	0.00	9302
THE BRENTWOOD COMPANY, INC.	59-1035928	0.10	1793666
THE CABINET CENTER, INC.	20-3755408	0.06	1014526
THE CLEO INSTITUTE	27-3185735	0.02	28468
THE CONSERVATORY DAY SPA & SAL	04-9024617	0.00	0
THE CORAL GABLES TRUST COMPANY	03-0536836	0.23	1780028
THE CYBRIX GROUP, INC.	13-4228013	0.00	189113
THE EDUCATION FOUNDATION OF COLLIER COUNTY	65-0230582	0.11	419983
THE EXCHANGE TAVERN	42-1646458	0.00	103137

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THE FILTA GROUP, INC.	98-0375567	0.02	442750
THE FOUNDRY MINISTRIES, INC.	63-0624278	0.04	398084
THE GENTNER GROUP, LLC	86-1924210	0.00	39693
THE GURU, INC.	36-4649637	0.05	114573
THE HARTLINE ALARM CO., INC.	59-3169722	0.01	390042
THE LIGHTHOUSE TEAM, LLC	81-2051897	0.05	742326
THE LINKS APARTMENTS	64-0961859	0.00	1755
THE MATRIX FINANCIAL GROUP, INC.	65-0679588	0.08	1802578
THE ORGANIC MAIDS	45-5293078	0.03	104627

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THE ORLANDO DENTAL GROUP	20-2341885	0.05	925351
THE PRACTICE OF DISTINCTION, LLC	46-2478284	0.00	169715
THE QUESTCOM GROUP, INC.	59-3753150	0.16	1476177
THE RESTAURANT PEOPLE MANAGEMENT	65-0988801	0.17	986302
THE STEEL SUPPLY COMPANY, INC.	20-4429379	0.00	383762
THE TALMADGE GROUP, INC.	58-2408467	0.03	66183
THE VILLAGES AT COUNTRY CREEK MASTER ASSOCIATION INC	65-0040526	0.02	71174
THE WEILER ENGINEERING CORP.	65-0413376	0.36	3091337
THE WESTMONT MONTESSORI SCHOOL	22-1756061	0.09	698195

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THE WILHELM AGENCY, INC.	11-3336839	0.05	150165
THE WORRELL FIRM LLC	84-3834422	0.01	238798
THERMO KING OF THE SOUTHEAST	20-8432054	0.25	2017163
THIGPEN HEATING AND COOLING, INC	59-2621999	0.09	127533
THOMAS MACHINERY, INC.	59-2313928	0.15	1701180
THOMSON DENTAL, P.C.	45-2715699	0.00	74824
THRUST TECH ACCESSORIES, INC.	82-2823959	0.00	325783
TI COMMUNITIES HR LP	82-2365637	0.00	0
TIERRA GROUP INTERNATIONAL, LTD	45-3766365	0.24	2409409

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TIGER VALVE COMPANY, LLC	46-1197792	0.12	964862
TILLMAN AND ASSOCIATES ENGINEERING LLC	20-3832004	0.00	351985
TILLMAN LEARNING, LLC	27-4912183	0.00	104
TIMES THREE CLOTHIER LLC	20-5942879	0.12	1172140
TIRE WHEEL & AUTOMOTIVE, INC.	59-2332567	0.00	11882
TIRE ZONE OF OKEECHOBEE INC	26-0855130	0.01	60194
TIRO SECURITY	45-5604173	0.01	73506
TITANIUM BILLING SERVICES, LLC	71-0905170	0.00	4731
TMN, LLC	54-2008588	0.16	760008

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TODAY'S VISION	76-0399898	0.03	1030971
2a Name of Participating Employer TOM SHARPE CONSTRUCTION, INC.	75-2628518	0.02	535524
2a Name of Participating Employer TOML INCORPORATED	27-5071827	0.01	22258
2a Name of Participating Employer TOMOE ENGINEERING USA, INC.	46-2571750	0.03	424171
2a Name of Participating Employer TOTAL HEALTH GUIDANCE LLC	45-2590345	0.00	6091
2a Name of Participating Employer TOTAL OFFICE SOLUTIONS, INC.	57-0902779	0.00	27522
2a Name of Participating Employer TOTS AND TYKES PEDIATRICS, P.A.	75-2941829	0.10	1733480
2a Name of Participating Employer TPD PARTNERS LLC	81-1343524	0.13	290116
2a Name of Participating Employer TRACKSTREET, INC.	47-3408150	0.00	0

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TRACTOR ENTERPRISES LLC	82-2255354	0.00	83308
TRANSCENDENT INVESTMENT MANAGEMENT, LLC	65-0241332	0.05	239421
TRANSCOR DATA SERVICES LLC	45-5435620	0.00	0
TRANSMISSION DOCTOR AND AUTO CARE LLC	26-1602670	0.00	0
TRICARICO ARCHITECTURE AND DESIGN, PC	20-0533648	0.23	6140241
TRIFECTA NETWORKS LLC	82-3534139	0.00	0
TRIMPA GROUP LLC	27-3045059	0.02	214893
TRI-STATE PAIN INSTITUTE, LLC	26-1827801	0.01	188138
TROOP INC.	92-2600999	0.00	16349

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TROPICAL SHORES BEACH RESORT LLC	65-0594242	0.10	689671
TROPICAL TILE & MARBLE INC	65-0305467	0.02	31042
TRUCKMAX, INC.	65-0731268	0.00	585764
TRUCKMAX, INC.	65-0731268	0.00	379701
TRUPHARMA, LLC	46-0598266	0.10	1426025
TRUST HOSPITALITY LLC	32-0288144	0.00	770910
TSG GROUP MIAMI, LLC	82-3405002	0.00	397427
TUSCO, INC.	63-0799869	0.20	1026528
TWO ELK INVESTMENTS, LLC DBA BILLOR	47-1925102	0.10	1414073

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TYBER MEDICAL	43-0535658	0.01	0
TYCO ELECTRICAL SERVICES INC.	76-0496424	0.05	749330
TYREX GROUP LTD.	74-2942280	0.00	0
U.S. BIRCH CORPORATION	84-4753313	0.00	19915
UCF CLINICAL, LLC	87-3543687	0.00	66263
UCF CONVOCATION CORPORATION	16-1733312	0.00	247364
UFLEX USA, INC	91-1466446	0.18	986950
UGARTE & ASSOCIATES, INCORPORATED	59-2401460	0.00	527
UNIFY HEALTH SERVICES LLC	46-4853516	0.00	329358

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
UNITED REFRIGERATION INC.	59-2182393	0.17	1525696
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
UNITY RECOVERY CENTER	26-3163883	0.00	129719
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
UNIVERSAL SPECIALTY PHARMACY LLC	82-1705409	0.00	9687
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
UNZIPPED APPAREL SALES, INC.	02-0731076	0.21	2998218
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
URBAN ARTS PARTNERSHIP	13-3554734	0.14	988706
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
URBAN ASSEMBLY CHARTER SCHOOL FOR COMPUTER SCIENCE	81-3663544	0.42	1744485
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
URBAN THIER & FEDERER PA	20-3007435	0.15	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
US POWER PARTNERS, LLC	83-0930872	0.50	2905218
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
US POWER SERVICES, LLC	20-0079717	0.00	410271

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USED CARDBOARD BOXES, INC.	20-5115837	0.04	244362
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VALDOSTA COUNTRY CLUB, INC	58-0471100	0.00	19125
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VALLEY VASCULAR SURGEONS, P.C.	86-0370412	0.00	1
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VALUE STORE IT MANAGEMENT, INC.	27-0719304	0.14	1669837
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VAN WEZEL FOUNDATION, INC.	59-2807055	0.09	388936
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VARTEK LLC	20-1678289	0.00	20550
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VECTORGLOBAL WMG, INC.	13-3699819	0.42	3814043
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VELA RESEARCH, LP	87-0655276	0.07	1505614
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VENETIAN CONDOMINIUM, INC.	59-1303036	0.01	97466

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VENTURA TELEPHONE LLC	20-8616584	0.06	262802
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VENTURE HOME SOLAR, LLC	47-4266827	0.43	1406764
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VERADATA LLC	27-1465902	0.00	225595
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VERSATILE DISTRIBUTORS, INC.	22-1619389	0.00	115714
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VETERINARY SALES AND MARKETING, LLC	86-1010543	0.02	87507
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VIA VERDE GOLF MANAGEMENT	84-2187004	0.02	238350
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VIAX DENTAL TECHNOLOGIES LLC	46-1349269	0.10	968971
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VIKING FLOOR ENTERPRISES, INC.	76-0454559	0.00	103401
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VILLAGE OF EXCELLENCE ACADEMY	48-1304650	0.01	312975

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VILLAGE PEDIATRICS, PC	46-2423012	0.06	620422
VIP OFFICE FURNITURE AND SUPPLY INC.	58-1480813	0.00	1058471
VIP REALTY GROUP, INC.	35-1728685	0.01	121880
VIRTAMED, INC.	46-1736681	0.16	677548
VIRTUAL CARE, LLC	81-4755406	0.00	47071
VISAGE HAIR AND NAIL DESIGN, INC.	04-3642520	0.02	201791
VISION MEDIA MANAGEMENT	46-4810267	0.22	4105354
VISTA INTERIORS, LLC	83-3969091	0.08	1156969
VITACARE HOME CARE, LLC	47-2923660	0.00	62

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VITROMEX USA, INC.	74-2797988	0.00	467833
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VMOX, LLC	45-4004287	0.23	1234849
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VOLTAIR CONSULTING ENGINEERS INC	20-4452969	0.28	2210373
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VOYAGES TO ANTIQUITY, LLC	42-1768667	0.00	46555
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VPA LA INLAND EMPIRE, INC.	32-0705220	0.08	366099
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
W.H. BARNES, INC. DBA BEST FLO	59-3481433	0.02	89044
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
W.M. HEITGRAS COMPANY	73-0773169	0.00	22653
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WALDEN COUNTRY CLUB PARTNERSHIP, LLP	74-3118932	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WALKINGSPREE USA LTD.	26-2358944	0.07	420497

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WARM THOUGHTS COMMUNICATIONS, INC.	13-3715190	0.23	4775751
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WARNER MANUFACTURING COMPANY	41-0599640	0.09	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WARREN PACKAGING INC.	46-1179050	0.09	455507
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WATER CONNECTIONS, INC.	65-0797171	0.00	1296640
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WATERBLASTING, LLC	47-2876221	0.10	988840
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WATERMARK MEDICAL, INC.	26-2114817	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WATSON & MELVIN INC	47-2316418	0.05	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WAVE TECHNOLOGIES	75-2309151	0.14	1209300
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WE DO WEB CONTENT, INC.	26-4465145	0.04	527593

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WE REK, INC.	52-1046704	0.00	68681
WE SHIP EXPRESS LLC	86-1973497	0.50	1897290
WELLESLEY INFORMATION SERVICES, LLC	52-2206279	0.16	982019
WELLS PHARMA OF HOUSTON, LLC	84-2285383	0.09	226498
WELLS PHARMACY NETWORK, LLC	27-4947247	0.30	973920
WELLS SPECIALTY PHARMACY , INC.	59-3287703	0.11	799655
WELLTECK IT, LLC	47-2045189	0.01	20531
WEM, LP DBA WESTMOORE APARTMEN	38-2986280	0.00	42046
WEN- LAKE CORP.	59-3101268	0.00	733

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WENAAS USA, INC.	74-2281832	0.00	43214
WEST BROWARD COMMUNITY MANAGEMENT	01-0626784	0.01	191748
WESTFIELD DEVELOPMENT COMPANY, INC.	47-5628288	0.38	9960343
WESTLAKE EYECARE, PLLC	27-5442175	0.00	55065
WESTWATER ENERGY LLC	27-3029550	0.00	64213
WESTWOOD SHORES PROPERTY OWNERS ASSOCIATION, INC.	74-1964843	0.00	0
WHEELLOCK STREET CAPITAL, LLC	26-2780159	0.49	7332442
WHETSTONE ENGINEERING & TESTING, INC.	65-0461695	0.04	672577
WHISPERWOOD APARTMENTS	74-3243114	0.02	35428

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Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WHITEFISHESCAPES.COM LLC	47-4594341	0.01	370885
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WILCO HOLDINGS LLC	81-0963211	0.05	66945
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WILKINS MEDIA, LLC	45-5597939	0.61	3877098
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WILLOWBEND INVESTMENTS, INC.	48-1110937	0.18	4910605
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WILSON ELECTRIC OF NORTH FLORIDA, INC	20-4279320	0.09	175019
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WINDHAVEN SURGERY CENTER, LLC	20-8251890	0.09	2006569
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WINGATE BY WYNDHAM-MIRAMAR	65-1099486	0.00	25480
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WINTCO, LLC DBA FACTORY REPROD	81-5370993	0.09	438754
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WOLFE & TAYLOR, INC.	47-2446000	0.06	1194329

CAUTION Do not individually list information for working owners (see instructions and 29 CFR 2510.3-55(d)(2)) or other individuals who are participants or beneficiaries in the plan or arrangement that are no longer associated with a particular participating employer or participating employer plan (see instructions). Providing identifying information for individuals may result in rejection of this filing. If there are any such individuals in the plan, answer "Yes" to line 2e and provide the total information for all such individuals, without providing names or other identifying information.

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan.

Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WOMEN'S INTEGRATED NETWORK	13-3989836	0.00	0
2a Name of Participating Employer WOODSPEAR PM-MEMBER, LLC	87-4290426	0.00	1372422
2a Name of Participating Employer WOOF WOOF VETERINARY SERVICES, LLC	84-3692582	0.03	99757
2a Name of Participating Employer WORKSCAPE DESIGNS LLC	46-0670840	0.00	6248
2a Name of Participating Employer WORLD AUTO GLASS LLC	62-1832237	0.00	0
2a Name of Participating Employer WORLD OF AMERICA GLOBAL PARTNERS	20-4548162	0.10	549582
2a Name of Participating Employer WORLD PRECISION INSTRUMENTS, LLC	81-1802254	0.12	0
2a Name of Participating Employer WP PHARMA LABS , INC.	83-4547642	0.02	75726
2a Name of Participating Employer WTS, LLC	30-0608746	0.00	71990

CAUTION Do not individually list information for working owners (see instructions and 29 CFR 2510.3-55(d)(2)) or other individuals who are participants or beneficiaries in the plan or arrangement that are no longer associated with a particular participating employer or participating employer plan (see instructions). Providing identifying information for individuals may result in rejection of this filing. If there are any such individuals in the plan, answer "Yes" to line 2e and provide the total information for all such individuals, without providing names or other identifying information.

Part II Participating Employer Information (Continued).

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Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
XFIBRA, INC.	81-5199156	0.01	67733
XPEDITED SERVICES LLC	86-1173765	0.03	225456
XR STUDIOS, LLC	85-1001413	0.06	145779
Y.C.C.S. PROPERTY OWNERS ASSOC	27-3007025	0.00	202
YOUNG PRESIDENTS ORGANIZATION-	58-1835904	0.04	575704
YOUNG'S ELECTRICAL CONTRACTING, INC	65-1094639	0.03	1458119
YO-ZURI AMERICA, INC.	05-0573867	0.00	1358
YRA DESIGN INC	32-0534481	0.08	674280
ZEBRA COALITION, INC	27-1645847	0.01	8502

CAUTION Do not individually list information for working owners (see instructions and 29 CFR 2510.3-55(d)(2)) or other individuals who are participants or beneficiaries in the plan or arrangement that are no longer associated with a particular participating employer or participating employer plan (see instructions). Providing identifying information for individuals may result in rejection of this filing. If there are any such individuals in the plan, answer "Yes" to line 2e and provide the total information for all such individuals, without providing names or other identifying information.

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan.

Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer ZERO WAIT - STATE INC.	2b EIN 74-2928695	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 0
2a Name of Participating Employer ZION REVENUE SOLUTIONS, LLC	2b EIN 47-3130668	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 1849
2a Name of Participating Employer ZIP CONSULTING	2b EIN 46-1395638	2c Percentage of Total Contributions for the Plan Year 0.10	2d Aggregate Account Balances Attributable to Participating Employer 618600
2a Name of Participating Employer ZUMMO MEAT COMPANY, INC.	2b EIN 74-1478952	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 3658749
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer

CAUTION Do not individually list information for working owners (see instructions and 29 CFR 2510.3-55(d)(2)) or other individuals who are participants or beneficiaries in the plan or arrangement that are no longer associated with a particular participating employer or participating employer plan (see instructions). Providing identifying information for individuals may result in rejection of this filing. If there are any such individuals in the plan, answer "Yes" to line 2e and provide the total information for all such individuals, without providing names or other identifying information.

Part III	Pooled Employer Plan Information
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Line 3. All Pooled employer plans must answer all of the questions in Part III, in addition to completing all of Parts I and II.

3a Is the pooled plan provider (identified as the plan sponsor and administrator in Part II of the Form 5500) currently in compliance with the Form PR (Pooled Plan Provider Registration Statement) requirements? (See instructions and 29 CFR 2510.3-44) ☐ Yes ☐ No

3b If line 3a is "Yes", enter the ACK ID for the most recent Form PR that was required to be filed under the Form PR filing requirements. (Failure to enter a valid ACK ID will subject the Form 5500 filing to rejection as incomplete.)
ACK ID _____



**COADVANTAGE CORPORATION
RETIREMENT SAVINGS PLAN**

**Financial Statements
and Supplemental Schedule**

**December 31, 2023 and 2022
(With Independent Auditors' Report Thereon)**

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

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Independent Auditors' Report

To Plan Administrator
CoAdvantage Corporation Retirement Savings Plan:

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed the audit of the financial statements of CoAdvantage Corporation Retirement Savings Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits as of December 31, 2023 and 2022, and the related statement of changes in net assets available for benefits for the year ended December 31, 2023, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the Plan ("investment information") by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA ("qualified institution").

Management has obtained certifications from qualified institutions as of December 31, 2023 and 2022 and for the year ended December 31, 2023, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audit and on the procedures performed as described in the Auditors' Responsibilities for the Audit of the Financial Statements section:

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

CBIZ CPAs P.C.
140 Fountain Parkway North, Suite 410
St. Petersburg, FL 33716

Phone: 727.572.1400
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cbizcpas.com

¹In certain jurisdictions, CBIZ CPAs P.C. operates under its previous name, Mayer Hoffman McCann P.C.



- The information in the accompanying financial statements related to assets held by and certified to by qualified institutions agrees to, or is derived from, in all material respects, the information prepared and certified by institutions that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (“GAAS”). Our responsibilities under those standards are further described in the Auditors’ Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management’s election of the ERISA Section 103(a)(3)(C) audit does not affect management’s responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan’s ability to continue as a going concern within one year after the date that the financial statements are issued or available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments, administering the Plan, and determining that the Plan’s transactions that are presented and disclosed in the financial statements are in conformity with the Plan’s provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditors’ Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for the Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors’ report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on these financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certifications, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Other Matter - Supplemental Schedule Required by ERISA

The supplemental Schedule of Assets (Held at End of Year) as of December 31, 2023, is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.



In our opinion:

- The form and content of the supplemental schedule, other than the information in the supplemental schedule that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- The information in the supplemental schedule related to assets held by and certified to by qualified institutions agrees to, or is derived from, in all material respects, the information prepared and certified by institutions that management determined meets the requirements of ERISA Section 103(a)(3)(C).

CBIZ CPAs P.C.¹

October 15, 2024
St. Petersburg, Florida

¹In certain jurisdictions, CBIZ CPAs P.C. operates under its previous name, Mayer Hoffman McCann P.C.

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN**Statements of Net Assets Available for Benefits****December 31, 2023 and 2022**

	<u>2023</u>	<u>2022</u>
Assets:		
Investments:		
Guaranteed interest account, at contract value	\$ 60,626,326	66,853,704
Mutual funds, at fair value	515,364,971	771,139,033
Self directed brokerage account, at fair value	2,495,222	1,877,879
Common collective trusts, at fair value	<u>446,765,214</u>	<u>-</u>
Total investments	1,025,251,733	839,870,616
Receivables:		
Participant contributions	3,177,719	2,571,826
Employer contributions	2,438,908	2,938,650
Notes receivable from participants	<u>14,377,093</u>	<u>11,470,466</u>
Total receivables	<u>19,993,720</u>	<u>16,980,942</u>
Net assets available for benefits	<u><u>\$ 1,045,245,453</u></u>	<u><u>856,851,558</u></u>

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Statement of Changes in Net Assets Available for Benefits

For the Year Ended December 31, 2023

Additions to net assets attributed to:	
Investment income:	
Net appreciation in fair value of investments	\$ 138,240,188
Interest and dividends	<u>14,961,634</u>
Net investment income	153,201,822
Interest income on notes receivable from participants	661,621
Contributions:	
Participant	101,245,417
Employer	37,429,650
Rollover	<u>17,789,857</u>
	<u>156,464,924</u>
Total additions	310,328,367
Deductions from net assets attributed to:	
Benefits paid to participants	109,125,339
Administrative expenses	<u>2,671,151</u>
Total deductions	<u>111,796,490</u>
Net increase	198,531,877
Transfers out, net	(10,137,982)
Net assets available for benefits:	
Beginning of year	<u>856,851,558</u>
End of year	<u>\$ 1,045,245,453</u>

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Notes to Financial Statements

December 31, 2023 and 2022

(1) **Description of the Plan**

The following description of the CoAdvantage Corporation Retirement Savings Plan (the “Plan”) provides only general information. Participants should refer to the plan document for a more complete description of the Plan’s provisions.

(a) **General**

The Plan is a multiple employer defined contribution plan covering eligible employees of CoAdvantage Corporation (the “Principal Participating Employer”) and Adopting Employers. Employees are eligible to participate in the Plan based on elections made by the Adopting Employers. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”). The Plan’s Investment Committee is responsible for oversight of the Plan, determining the appropriateness of the Plan’s investment offerings and monitoring investment performance.

The Plan operates under an agreement with Empower Retirement LLC (“Empower”), for recordkeeping and custodian services of its group annuity contract. As part of this agreement, Empower enters into a trust agreement with a related party or third party trustee to hold the investments and execute investment transactions of the Plan during the year. All investments and related investment activity, except for the guaranteed interest account which is certified separately, were certified by Empower Trust Company (“ETC”).

An affiliate of Empower, Empower Life & Annuity Insurance Company of New York (“ELAIC”), has provided the certification for the guaranteed interest account as of December 31, 2023 and 2022.

(b) **Contributions**

Each year, participants may contribute an amount of annual compensation as elected by their Adopting Employer. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (“rollover”). Participants direct the investment of their contributions into various investment options offered by the Plan. Each Adopting Employer elects the level of safe harbor, matching and/or profit-sharing contributions. Contributions are subject to certain Internal Revenue Service limitations. Roth deferrals are allowed under the Plan, if elected by Adopting Employers.

(c) **Participant Accounts**

Each participant’s account is credited with the participant’s contributions and their Adopting Employer’s matching contributions, as well as allocations of their Adopting Employer’s profit-sharing contribution and plan earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Notes to Financial Statements - Continued

(1) Description of the Plan - Continued

(d) Vesting

Participants are immediately vested in their contributions and their Adopting Employer's Safe Harbor contributions, if applicable, plus actual earnings thereon. Vesting in the remainder of their account is based on years of continuous service. A participant generally begins to vest in year one at (20%) and increases ratably until fully vested in year five. However, vesting schedules vary based on the Adopting Employer's elections. Participants also become fully vested upon retirement age (65), death or becoming disabled.

(e) Notes Receivable From Participants

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account. The loan interest rate is the prime rate plus 1.00%. Principal and interest is paid ratably through regular payroll deductions. Loans must be repaid in five years unless they are for the purchase of a primary residence in which case the loan may not exceed 30 years.

(f) Payment of Benefits

Upon termination of service, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution. Participants may take in-service withdrawals upon attainment of age 59 ½ or for immediate and heavy financial hardship needs, as defined in the plan document.

(g) Forfeited Accounts

Any nonvested amounts in a terminated participant's account are forfeited by the participant and transferred to a forfeiture account. Forfeitures shall be used to pay plan expenses or to reduce the Adopting Employers' future matching contributions. Approximately \$3,000 of forfeited nonvested accounts were utilized during the year ended December 31, 2023 to pay plan expenses and approximately \$438,000 was used reduce adopting employer contributions or were transferred out of the Plan at the adopting employers terminations. At December 31, 2023 and 2022, forfeited nonvested accounts available for use totaled approximately \$3,824,000 and \$3,168,000 respectively.

(2) Summary of Significant Accounting Policies

(a) Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

(b) Use of Estimates

The preparation of the financial statements in conformity with accounting principles generally accepted in the United States of America ("U.S. GAAP") requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from these estimates.

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Notes to Financial Statements - Continued

(2) Summary of Significant Accounting Policies - Continued

(c) Investment Valuation and Income Recognition

Investments are reported at fair value, except for the fully benefit responsive investment contract which is reported at contract value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Investment Committee determines the Plan's valuation policies utilizing information provided by the investment advisors and insurance companies. See Note 4 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Interest income is recorded on the accrual basis. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

(d) Payment of Benefits

Benefits are recorded when paid.

(e) Notes Receivable From Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2023 or 2022. Delinquent participant loans are recorded as distributions on the basis of the terms of the plan agreement.

(f) Expenses

Management fees and operating expenses are paid out of the Plan. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in net appreciation of fair value of investments.

(3) Information Certified by the Trustee and the Custodian

The plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, ETC and ELAIC, the trustee and custodian, respectively, as of December 31, 2023 and 2022 have certified that the following data included in the accompanying financial statements and supplemental schedule is complete and accurate:

- Total investments
- Notes receivable from participants;
- Net investment income;
- Interest income on notes receivable from participants;
- Investments as presented in the Schedule of Assets (Held at End of Year)

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Notes to Financial Statements - Continued

(3) **Information Certified by the Trustee and the Custodian - Continued**

The Plan's independent auditors did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in these financial statements.

(4) **Fair Value Measurements**

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs. The three levels of the fair value hierarchy are described as follows:

Level 1: Inputs to the valuation methodology are quoted prices (unadjusted) in active markets for identical assets or liabilities that the Plan can access at the measurement date.

Level 2: Inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly, such as:

- (a) Quoted prices for similar assets or liabilities in active markets;
- (b) Quoted prices for identical or similar assets or liabilities in inactive markets;
- (c) Inputs other than quoted prices that are observable for the asset or liability;
- (d) Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3: Inputs that are unobservable inputs for the asset or liability.

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2023 or 2022.

Mutual Funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily Net Asset Value ("NAV") and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded and are classified as Level 1.

Self-Directed Brokerage Accounts: valued at the quoted market prices in active and inactive markets or quoted market prices for similar assets and are classified as Level 1 or 2.

Common Collective Trusts: Valued at the NAV of units of a collective trust. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment advisor reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Notes to Financial Statements - Continued

(4) Fair Value Measurements - Continued

The following table sets forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2023 and 2022. Classification within the fair value hierarchy table is based on the lowest level of any input that is significant to the fair value measurement.

Description	Assets Measured at Fair Value at December 31, 2023	Fair Value Measurements at Reporting Date Using		
		Quoted Prices in Active Markets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Mutual funds	\$ 515,364,971	515,364,971	-	-
Self-directed brokerage account	2,495,222	2,027,509	467,713	-
	517,860,193	517,392,480	467,713	-
Investments measured at NAV practical expedient (a)	446,765,214			
Total investments	\$ 964,625,407			

Description	Assets Measured at Fair Value at December 31, 2022	Fair Value Measurements at Reporting Date Using		
		Quoted Prices in Active Markets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Mutual funds	\$ 771,139,033	771,139,033	-	-
Self-directed brokerage account	1,877,879	1,557,083	320,796	-
	\$ 773,016,912	772,696,116	320,796	-

(a) In accordance with Subtopic 820-10, certain investments that were measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

(5) Fully Benefit-Responsive Investment Contract

The Plan has a fully benefit-responsive guaranteed investment contract ("SAGIC") with MassMutual, which is managed by Great West Investments. The SAGIC is a market value separate account investment option with a general investment account guarantee that provides a stated rate of return and insulates plan participant activity from daily fluctuations in the market. The SAGIC is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The average yield for the plan year ended December 31, 2023 was 3.30%.

The guaranteed investment contract issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the Plan. The crediting rate is based on a formula established by the contract issuer. The crediting interest rate is reviewed on a quarterly basis for resetting. The guaranteed investment contract does not permit the insurance company to terminate the agreement prior to the scheduled maturity date.

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Notes to Financial Statements - Continued

(5) **Fully Benefit-Responsive Investment Contract - Continued**

This contract meets the fully benefit-responsive investment contract criteria and therefore is reported at contract value. Contract value is the relevant measure for fully benefit-responsive investment contracts because this is the amount received by participants if there were to initiate permitted transactions under the Plan. Contract value, as reported to the Plan by MassMutual, represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

The Plan's ability to receive amounts due is dependent on the issuer's ability to meet its financial obligations. The issuer's ability to meet its contractual obligations may be affected by future economic and regulatory developments.

Certain events might limit the ability of the Plan to transact at contract value with the issuer. Such events include the following: (1) amendment to the Plan document (including complete or partial termination or merger with another plan.), (2) changes to the Plan's prohibition on competing investment options or deletion of equity wash provisions, (3) bankruptcy of the plan sponsor or other plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan, or (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA, (5) premature termination of the contract. No events are probable of occurring that might limit the ability of the Plan to transact at contract value with the contract issuers and that would limit the ability of the Plan to transact at contract value with the participants.

(6) **Related Party and Party-in-Interest Transactions**

The Plan operates under a revenue sharing agreement with Empower, whereby Empower receives revenue from service providers for services Empower provides to the funds. This revenue received is deposited into an expense budget account and is used to offset certain amounts owed to Empower and ELAIC, for its administrative services. If the revenue received by Empower from such service providers exceeds the amount owed, Empower remits the excess to the Plan. Such amounts may be applied to pay plan administrative expenses or allocated to the accounts of the participants. Remaining expenses not covered by the revenue sharing are paid by the Principal Participating Employer. During 2023, the Plan received and used approximately \$1,133,000 in earnings adjustments to pay plan expenses as part of this revenue sharing agreement.

During 2023, the Plan's administrative expenses totaled approximately \$2,671,000, including approximately \$759,000 paid to the Principal Participating Employer for services provided to the Plan, and approximately \$1,538,000 paid to ELAIC for services provided, and approximately \$374,000 for other expenses such as investment advisory and audit fees.

Certain of the plan investments are managed by ELAIC. These activities, along with the administrative expenses noted above and participant loan transactions are considered party-in-interest activity defined in Section 3(14) of ERISA, however, are expressed exempt from the prohibited transaction rules.

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Notes to Financial Statements - Continued

(7) **Plan Termination**

Although it has not expressed any intent to do so, the Principal Participating Employer has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, participants would become 100% vested in the Adopting Employers' contribution portion of their account.

(8) **Tax Status**

The Plan adopted the Empower Retirement LLC Non-Standardized Profit Sharing/401(k) Plan provided by Empower. Empower obtained a favorable opinion letter dated April 7, 2021. The plan administrator has adopted all plan provisions within the pre-approved plan document and believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Internal Revenue Code, and therefore, believes that the Plan is qualified, and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain tax position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

(9) **Risks and Uncertainties**

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, market, and credit risks. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

(10) **Reconciliation of Financial Statements to Form 5500**

The following is a reconciliation of net assets available for benefits per the financial statements to Form 5500 as of December 31:

	<u>2023</u>	<u>2022</u>
Net assets available for benefits per the financial statements	\$ 1,045,245,453	856,851,558
Less contributions receivable	<u>(5,616,627)</u>	<u>(5,510,476)</u>
Net assets available for benefits per Form 5500	<u>\$ 1,039,628,826</u>	<u>851,341,082</u>

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Notes to Financial Statements - Continued

(10) Reconciliation of Financial Statements to Form 5500 - Continued

The following is a reconciliation of the net increase in net assets per the financial statements to net income per Form 5500 for the year ended December 31, 2023:

Net increase in net assets per the financial statements	\$ 198,531,877
Plus contributions receivable - beginning of year	5,510,476
Less contributions receivable - end of year	<u>(5,616,627)</u>
Net income per Form 5500	<u>\$ 198,425,726</u>

(11) Transfers In and Out

Qualified plans sponsored by certain Adopting Employers may be merged into the Plan in conjunction with such Adopting Employers' adoption of the Plan. New participant accounts are then created for such participants in the Plan. During 2023, approximately \$133,900,000 of assets were transferred into the Plan relating to new Adopting Employers.

In addition, the account balances of participants employed by certain Adopting Employers who terminate their leasing arrangements with the Company during the year may be transferred out of the Plan through mergers with, or creation of, other qualified plans. During 2023, approximately \$144,000,000 of assets were transferred out of the Plan based on termination of Adopting Employers.

(12) Subsequent Events

The Plan's management has evaluated events and transactions for potential recognition or disclosure in the financial statements through October 15, 2024, the date the financial statements were available to be issued.

SUPPLEMENTAL SCHEDULE

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)

Employer Identification Number (EIN): 27-3007025

Plan Number: 333

December 31, 2023

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (If Applicable)	(e) Current Value
*	SAGIC Diversified Bond II	Guaranteed Interest Account	\$ 60,626,326
	Allspring Special Mid Cap Value R6	Mutual Fund	10,192,260
	American Funds American Balanced R6	Mutual Fund	60,551,934
	American Funds New World R6	Mutual Fund	9,385,186
	Blackrock Strategic Global Bond K	Mutual Fund	2,690,006
	Dodge & Cox Global Stock - I	Mutual Fund	11,262,275
	Dodge & Cox Stock - I	Mutual Fund	33,362,924
	Dreyfus Government Cash Mgmt Instl	Mutual Fund	295,269
	Fidelity 500 Index	Mutual Fund	112,394,896
	Fidelity International Index	Mutual Fund	135,237
	Fidelity Mid Cap Index	Mutual Fund	20,300,342
	Fidelity Small Cap Index	Mutual Fund	21,600,007
	Fidelity Total International Index	Mutual Fund	10,443,423
	Fidelity Us Bond Index	Mutual Fund	15,074,840
	Franklin Small-Mid Cap Growth R6	Mutual Fund	16,403,205
	Invesco Comstock A	Mutual Fund	4
	Invesco Small Cap Value R6	Mutual Fund	13,584,688
*	MassMutual Us Government Mny Mkt Fd	Mutual Fund	883,355
	Mfs International Growth R6	Mutual Fund	14,943,963
	Mfs Research International R6	Mutual Fund	10,764,432
	Pimco Real Return Instl	Mutual Fund	6,892,134
	Pioneer Strategic Income K	Mutual Fund	3,617,323
	T. Rowe Price Blue Chip Growth I	Mutual Fund	58,919,897
	T. Rowe Price Dividend Growth I	Mutual Fund	25,900,714
	Vanguard Explorer Adm	Mutual Fund	15,893,441
	Vanguard High-Yield Corporate Adm	Mutual Fund	5,771,779
	Vanguard Strategic Equity Inv	Mutual Fund	9,308,764
	Vanguard Target Retirement 2020 Inv	Mutual Fund	8,672
	Vanguard Target Retirement 2025 Inv	Mutual Fund	167,082
	Vanguard Target Retirement 2030 Inv	Mutual Fund	39,926
	Vanguard Target Retirement 2035 Inv	Mutual Fund	18,067
	Vanguard Target Retirement 2040 Inv	Mutual Fund	39,004
	Vanguard Target Retirement 2045 Inv	Mutual Fund	114,875
	Vanguard Target Retirement 2050 Inv	Mutual Fund	77,467
	Vanguard Target Retirement 2055 Inv	Mutual Fund	3,784
	Vanguard Target Retirement 2060 Inv	Mutual Fund	9,490
	Vanguard Target Retirement 2065 Inv	Mutual Fund	10,999
	Vanguard Wellesley Income Adm	Mutual Fund	6,614,622
	Victory Sycamore Established Value R6	Mutual Fund	11,606
	Western Asset Core Plus Bond Is	Mutual Fund	17,677,079
	Target Retirement Incm And Grwth Trst II	Common Collective	4,437
	The Vanguard Target Retire 2020 Trust II	Common Collective	16,900,886
	The Vanguard Target Retire 2025 Trust II	Common Collective	53,775,836
	The Vanguard Target Retire 2030 Trust II	Common Collective	70,295,923
	The Vanguard Target Retire 2035 Trust II	Common Collective	66,586,475
	The Vanguard Target Retire 2040 Trust II	Common Collective	60,374,964
	The Vanguard Target Retire 2045 Trust II	Common Collective	61,561,292
	The Vanguard Target Retire 2050 Trust II	Common Collective	47,279,877
	The Vanguard Target Retire 2055 Trust II	Common Collective	34,656,941
	The Vanguard Target Retire 2060 Trust II	Common Collective	23,168,541
	The Vanguard Target Retire 2065 Trust II	Common Collective	1,133,278
	The Vanguard Target Retire 2070 Trust II	Common Collective	94,131
	The Vanguard Target Retire Incm Trust II	Common Collective	10,932,633
	Schwab PCRA	Self Directed Brokerage	2,495,222
			1,025,251,733
*	Participant loans	1.50% - 10.25%	14,377,093
			<u>\$ 1,039,628,826</u>

* Party-in-interest

5b 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.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
G&A Partners	76-0461926	001
Group Management Services, Inc.	47-6953424	001
Guideline 401k	47-4474775	001
Human Interest	47-3868366	001
Insperty Retirement Services	76-0178498	001
John Hancock	04-3483032	001

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

5b 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.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
Milliman, Inc.	74-7846546	001
Nationwide	55-0817538	001
NestEggs	43-5673124	001
Paychex	16-1124166	001
Principal	43-1929483	001
Questco Companies	34-6754689	001

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

5b 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.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
Robert Walsh	47-8658946	001
Questco Companies	34-6754689	001
Slavic 401k	01-0620969	001
T Rowe Price	04-2515821	001
The Retirement Plan Company	36-4526030	001
Transamerica	36-6071399	001

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

5b 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.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
Voya	52-1317217	001
Voya/ADP	52-1317217	001

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

CoAdvantage Corporation

01-JAN-2023 to 31-DEC-2023

03-JUN-24 18:11:48

INVESTMENT OPTION	MATURITY DATE	INTEREST RATE	COST OF ASSETS	CURRENT VALUE
IACSTX			4.45	4.39
IDGCXX			295,268.70	295,268.70
IDODGX			30,591,519.20	33,362,924.24
IDODWX			9,942,719.18	11,262,275.00
IFMGGX			13,738,898.85	16,403,205.46
IFSMDX			18,080,180.14	20,300,341.84
IFSPSX			125,600.78	135,237.09
IFSSNX			19,749,632.45	21,600,007.07
IFTHXX			9,482,539.98	10,443,423.18
IFXAIX			95,653,827.71	112,394,895.73
IFXNAX			14,519,886.43	15,074,839.68
IMGRDX			14,498,021.03	14,943,962.61
IMKSXX			883,354.70	883,354.72
IMKWIX			2,532,881.98	2,690,006.42
IMRSKX			9,453,826.12	10,764,431.67
IPDGIX			23,954,691.56	25,900,714.54
IPRRIX			6,870,093.59	6,892,134.31
IRLBGX			54,477,394.50	60,551,933.88
IRNWGX			8,368,908.30	9,385,185.79
ISMVSX			12,300,485.43	13,584,688.37
ISTRKX			3,416,705.55	3,617,323.49
ITBCIX			47,525,572.90	58,919,896.93
IVEVRX			11,466.10	11,601.78
IVEXRX			14,292,510.86	15,893,441.38
IVFFVX			3,694.85	3,783.56
IVFIFX			75,509.35	77,466.65
IVFORX			37,383.83	39,004.58
IVG2020			15,640,806.06	16,900,886.06
IVG2025			49,335,997.44	53,775,835.91
IVG2030			63,836,272.25	70,295,923.22
IVG2035			60,146,309.36	66,586,470.49
IVG2040			54,110,079.56	60,374,305.89
IVG2045			54,915,546.31	61,561,132.44
IVG2050			42,098,407.37	47,279,842.10
IVG2055			30,936,283.98	34,656,940.71
IVG2060			20,710,575.50	23,168,378.05
IVG2065			1,050,613.52	1,133,277.97
IVG2070			87,064.38	94,130.53
IVGRINC			10,226,398.12	10,933,653.86
IVLXVX			10,237.00	10,998.93
IVSEQX			9,082,678.36	9,308,764.02
IVTHRX			39,215.36	39,925.72
IVTIVX			112,234.44	114,875.24
IVTRIGT			4,313.44	4,436.60
IVTTHX			17,704.54	18,067.69
IVTTSX			9,263.56	9,490.99
IVTTVX			166,337.52	167,082.40
IVTWNX			8,829.25	8,672.73
IVWEAX			5,503,402.29	5,771,778.67
IVWLAX			6,538,873.48	6,614,622.37
IWAPSX			16,841,618.80	17,677,079.37

INVESTMENT OPTION	MATURITY DATE	INTEREST RATE	COST OF ASSETS	CURRENT VALUE
IWPRX			10,167,250.03	10,192,259.85
ISDBSCH			2,360,779.05	2,360,779.05
ISDBSCR			134,443.13	134,443.13
ISGVDQ0		3.300	4.76	4.76
ISGVDQ1		3.300	55,124,795.30	56,801,952.28
TOTALS			920,098,912.68	1,021,427,364.09
PARTICIPANT LOANS	VARIOUS	1.5-10.25	13,219,920.78	13,231,287.00
FORFEITURES			3,729,554.70	3,824,368.68