

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 <div style="font-size: 24pt; font-weight: bold; text-align: center;">2024</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

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) P

B This return/report is: 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
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1a Name of plan <u>LOOMIS SAYLES BOND RET OPT</u>	1b Three-digit plan number (PN) ▶ <u>150</u> 1c Effective date of plan
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) <u>TRANSAMERICA LIFE INSURANCE COMPANY</u> <u>6400 C ST SW</u> <u>CEDAR RAPIDS, IA 52404</u>	2b Employer Identification Number (EIN) <u>39-0989781</u> 2c Plan Sponsor's telephone number <u>319-355-6449</u> 2d Business code (see instructions)

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		Date	
	Signature of plan administrator		Enter name of individual signing as plan administrator
SIGN HERE		Date	
	Signature of employer/plan sponsor		Enter name of individual signing as employer or plan sponsor
SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>08/21/2025</u>	<u>NEIL KOENCK</u>
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
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
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.....	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> 6a(1) 6a(2) 6b 6c 6d 6e 6f 6g(1) 6g(2) 6h
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:

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) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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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) <input type="checkbox"/> R (Retirement Plan Information) (2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary (4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____ (5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	b General Schedules (1) <input checked="" type="checkbox"/> H (Financial Information) (2) <input type="checkbox"/> I (Financial Information – Small Plan) (3) <input type="checkbox"/> A (Insurance Information) – Number Attached _____ (4) <input type="checkbox"/> C (Service Provider Information) (5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information) (6) <input type="checkbox"/> G (Financial Transaction Schedules)
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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 2024 Form M-1 annual report. If the plan was not required to file the 2024 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 D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	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.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>LOOMIS SAYLES BOND RET OPT</u>	B Three-digit plan number (PN)	<u>150</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>TRANSAMERICA LIFE INSURANCE COMPANY</u>	D Employer Identification Number (EIN) <u>39-0989781</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)
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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)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
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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)

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 GEORGETOWN DENTAL PROFESSIONALS PROFIT SHARING PLAN	
b	Name of plan sponsor GEORGETOWN DENTAL PROFESSIONALS LLC	c EIN-PN 20-3939693-001
a	Plan name RUGS AS ART, INC. 401(K) PLAN	
b	Name of plan sponsor RUGS AS ART, INC.	c EIN-PN 65-0261601-001
a	Plan name MERAKI SOCIAL, LLC 401(K) PLAN	
b	Name of plan sponsor MERAKI SOCIAL, LLC	c EIN-PN 81-2114618-001
a	Plan name HALEIWA FAMILY DENTAL CENTER, LTD. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HALEIWA FAMILY DENTAL CENTER, LTD.	c EIN-PN 99-0322411-001
a	Plan name OOMA, INC. 401(K) PLAN	
b	Name of plan sponsor OOMA, INC.	c EIN-PN 06-1713274-001
a	Plan name JIM BURKE EXCAVATING 401(K) PLAN	
b	Name of plan sponsor JIM BURKE EXCAVATING INC.	c EIN-PN 36-4055755-001
a	Plan name LEBLANC NETTLES LAW GROUP 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor LEBLANC NETTLES LAW LLC	c EIN-PN 46-2658554-001
a	Plan name TOOLMAX DESIGNING & TOOLING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TOOLMAX DESIGNING & TOOLING, INC.	c EIN-PN 36-4625497-001
a	Plan name FIRST AMERICAN EMPLOYEE RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor FIRST AMERICAN PROPERTIES, LLC	c EIN-PN 36-4536252-001
a	Plan name ICONERGY LTD 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor ICONERGY LTD	c EIN-PN 27-2414344-001
a	Plan name PAUL MEYER ARCHITECTS, INC. 401(K) PLAN	
b	Name of plan sponsor PAUL MEYER ARCHITECTS, INC.	c EIN-PN 41-1846160-001
a	Plan name COMPLETELY FLOORED 401(K) PLAN	
b	Name of plan sponsor BLAIGE CORPORATION DBA COMPLETELY FLOORED	c EIN-PN 20-3680924-001

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	IKE HEAPHY, D.D.S., P.C. 401(K) PLAN	
b	Name of plan sponsor	IKE HEAPHY, D.D.S., P.C.	c EIN-PN 90-0074728-001
a	Plan name	MICHIGAN FENCE CO., INC. 401(K) PLAN	
b	Name of plan sponsor	MICHIGAN FENCE CO., INC.	c EIN-PN 38-2266859-001
a	Plan name	BLOOSTON, MORDKOFKY, DICKENS & PRENDERGAST, LLP 401(K) PLAN	
b	Name of plan sponsor	BLOOSTON, MORDKOFKY, DICKENS & PRENDERGAST, LLP	c EIN-PN 52-1136273-001
a	Plan name	BLUE Q 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BLUE Q CORPORATION	c EIN-PN 04-3521482-001
a	Plan name	BNL INDUSTRIES, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	BNL INDUSTRIES, INC.	c EIN-PN 06-1226220-001
a	Plan name	CALVARY CHRISTIAN SCHOOL 401(K) PLAN	
b	Name of plan sponsor	CALVARY CHRISTIAN SCHOOL	c EIN-PN 58-1259865-001
a	Plan name	CAM CONSTRUCTION & PAINTING 401(K) PLAN & TRUST	
b	Name of plan sponsor	CAM CONSTRUCTION & PAINTING INC.	c EIN-PN 45-5255646-001
a	Plan name	CANAM MINERALS, INC. 401(K) PLAN	
b	Name of plan sponsor	CANAM MINERALS, INC.	c EIN-PN 94-1535782-001
a	Plan name	CERRONE OLDS-GMC TRUCK 401(K) PLAN	
b	Name of plan sponsor	AL CERRONE'S HARRIS AUTO SALES INC.	c EIN-PN 04-2608042-001
a	Plan name	COLORADO MEDICAL SOCIETY RETIREMENT PLAN	
b	Name of plan sponsor	COLORADO MEDICAL SOCIETY	c EIN-PN 84-0174440-001
a	Plan name	CULVER GROUP PROFIT SHARING & 401(K) PLAN	
b	Name of plan sponsor	THE CULVER GROUP	c EIN-PN 33-0789218-001
a	Plan name	CUTLER ANDERSON ARCHITECTS, PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CUTLER ANDERSON ARCHITECTS, PLLC	c EIN-PN 91-2017916-001

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	DIABLO COUNTRY CLUB 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	DIABLO COUNTRY CLUB	c EIN-PN 94-0699700-003
a	Plan name	DIAGNOSTIC MRI, L.L.C. 401(K) PLAN	
b	Name of plan sponsor	DIAGNOSTIC MRI, L.L.C.	c EIN-PN 76-0617060-001
a	Plan name	DIAKON LOGISTICS 401(K) PLAN	
b	Name of plan sponsor	DIAKON LOGISTICS, INC.	c EIN-PN 20-0446970-001
a	Plan name	FAMILY COUNSELING SERVICE OF TUSCALOOSA COUNTY, INC. MONEY PURCHASE PENSION PLAN	
b	Name of plan sponsor	FAMILY COUNSELING SERVICE OF TUSCALOOSA COUNTY, INC.	c EIN-PN 63-0523406-001
a	Plan name	FAMILY FORD, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	FAMILY FORD, INC.	c EIN-PN 04-3459007-001
a	Plan name	FRAME, MATSUMOTO & COELHO, LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FRAME, MATSUMOTO & COELHO, LLP	c EIN-PN 77-0209411-003
a	Plan name	GOOD TIMES RESTAURANTS, INC. 401(K) SAVINGS & INVESTMENT PLAN	
b	Name of plan sponsor	GOOD TIMES RESTAURANTS, INC.	c EIN-PN 84-1133368-001
a	Plan name	HAWAII CELLULAR THERAPY AND TRANSPLANT LABORATORY 401(K) PLAN	
b	Name of plan sponsor	HAWAII CELLULAR THERAPY AND TRANSPLANT LABORATORY	c EIN-PN 47-2107270-001
a	Plan name	HRG MANAGEMENT, LLC 401(K) PS PLAN	
b	Name of plan sponsor	HRG MANAGEMENT, LLC	c EIN-PN 81-1773216-001
a	Plan name	HUALALAI INVESTORS 401(K) PLAN	
b	Name of plan sponsor	HUALALAI INVESTORS, LLC	c EIN-PN 59-3836047-001
a	Plan name	J & J HEATING & AIR CONDITIONING, INC. 401(K) PLAN	
b	Name of plan sponsor	J & J HEATING & AIR CONDITIONING, INC.	c EIN-PN 04-2488433-001
a	Plan name	J & P PAVING MASONRY & SEALANT RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	J & P PAVING MASONRY & SEALANT, INC.	c EIN-PN 31-1121622-001

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	J GOOD-IN INC. - 401(K) PLAN	
b Name of plan sponsor	J GOOD-IN INC.	c EIN-PN 95-4100491-001
a Plan name	J.H. PENCE COMPANY RETIREMENT SAVINGS PLAN & TRUST	
b Name of plan sponsor	J.H. PENCE COMPANY	c EIN-PN 54-0838544-001
a Plan name	KEENO FARMS CONSTRUCTION, INC. RETIREMENT SAVINGS PLAN	
b Name of plan sponsor	KEENO FARMS CONSTRUCTION, INC.	c EIN-PN 30-0205931-001
a Plan name	KELDERMAN MANUFACTURING, INC. 401(K) PLAN	
b Name of plan sponsor	KELDERMAN MANUFACTURING, INC.	c EIN-PN 42-1145969-001
a Plan name	KENDALL GKIKAS & MITCHELL, LLP 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	KENDALL GKIKAS & MITCHELL, LLP	c EIN-PN 81-3000482-001
a Plan name	LAUREL FOWLER INSURANCE BROKER, INC. 401(K) PLAN	
b Name of plan sponsor	LAUREL FOWLER INSURANCE BROKER INC.	c EIN-PN 77-0393444-001
a Plan name	MARATHON ENGINEERING CORP. 401(K) PLAN & TRUST	
b Name of plan sponsor	MARATHON ENGINEERING, INC.	c EIN-PN 94-2259624-001
a Plan name	MENGWASSER MARTIN LALL & CLARK PC PROFIT SHARING PLAN & TRUST	
b Name of plan sponsor	MENGWASSER, MARTIN, LALL, & CLARK PC	c EIN-PN 43-1564913-001
a Plan name	MESSAGE BROADCAST LLC 401(K) RETIREMENT PLAN	
b Name of plan sponsor	MESSAGEBROADCAST.COM, LLC	c EIN-PN 77-0480271-001
a Plan name	MOORETOWN RANCHERIA COMMERCIAL SAVINGS AND RETIREMENT PLAN	
b Name of plan sponsor	MOORETOWN RANCHERIA	c EIN-PN 68-0152435-003
a Plan name	PACKAGING SPECIALTIES 401(K) PLAN	
b Name of plan sponsor	PACKAGING SPECIALTIES, LLC	c EIN-PN 88-2479890-001
a Plan name	PAGE & ASSOCIATES INSURANCE, INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	PAGE & ASSOCIATES INSURANCE, INC.	c EIN-PN 88-1074263-001

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	SALESMASTER 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	PACKAGING SPECIALTY INC. DBA SALESMASTER CORP.	c EIN-PN 23-2547189-001
a	Plan name	VREELAND ENGINEERS 401(K) PLAN	
b	Name of plan sponsor	VREELAND ENGINEERS, INCORPORATED	c EIN-PN 62-1480752-001
a	Plan name	WACKER PLUMBING 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WACKER PLUMBING	c EIN-PN 54-1279697-001
a	Plan name	WULCO, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	WULCO, INC.	c EIN-PN 61-1171211-222
a	Plan name	WWE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WORLDWIDE ENTERPRISES, INC.	c EIN-PN 05-0493007-001
a	Plan name	X-CEL HAIR SALON 401(K) PLAN	
b	Name of plan sponsor	RANDA VISIONS, INC. DBA X-CEL HAIR SALON	c EIN-PN 03-0379464-001
a	Plan name	AIR & LUBE SYSTEMS, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	AIR & LUBE SYSTEMS, INC.	c EIN-PN 94-3284282-001
a	Plan name	AIR GROUP, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	AIR GROUP, LLC	c EIN-PN 22-3620908-001
a	Plan name	AIREKO CONSTRUCTION LLC CODA PROFIT SHARING PLAN	
b	Name of plan sponsor	AIREKO CONSTRUCTION, LLC	c EIN-PN 66-0286068-001
a	Plan name	ARCHITECTURE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ARCHITECTURE, INC.	c EIN-PN 54-1371604-001
a	Plan name	AXXIOME USA LLC RETIREMENT PLAN	
b	Name of plan sponsor	AXXIOME USA LLC	c EIN-PN 90-1017436-001
a	Plan name	EDUCATIUS GROUP 401(K) PLAN	
b	Name of plan sponsor	EDUCATIUS, INC. DBA EDUCATIUS INTERNATIONAL	c EIN-PN 26-4005699-001

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 FASHION CARPETS, INC. 401(K) PLAN	
b	Name of plan sponsor FASHION CARPETS, INC.	c EIN-PN 84-0714131-001
a	Plan name FAWLEY & ASSOCIATES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DARRELL E. FAWLEY, JR. DBA FAWLEY & ASSOCIATES	c EIN-PN 31-1365446-001
a	Plan name GRANITE CITY FAMILY & COSMETIC DENTISTRY 401(K) PLAN	
b	Name of plan sponsor GRANITE CITY FAMILY & COSMETIC DENTISTRY	c EIN-PN 20-4990679-001
a	Plan name HEFTY SEED COMPANY 401(K) PLAN AND TRUST	
b	Name of plan sponsor AGRONOMY SCIENCES, LLC DBA HEFTY SEED COMPANY	c EIN-PN 20-2149647-001
a	Plan name HUESCHEN AND SAGE PLLC RETIREMENT PLAN	
b	Name of plan sponsor HUESCHEN AND SAGE, PLLC ATTORNEYS AND COUNSELORS	c EIN-PN 38-3574838-001
a	Plan name HULL BROTHERS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HULL BROTHERS, INC.	c EIN-PN 34-0971398-001
a	Plan name HWA LANDSCAPE ARCHITECTS RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor HWA LANDSCAPE ARCHITECTS	c EIN-PN 68-0176703-001
a	Plan name HWO, INC. 401(K) PLAN	
b	Name of plan sponsor HWO, INC.	c EIN-PN 83-2185021-001
a	Plan name JAG, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor JAG, INC.	c EIN-PN 20-4383697-001
a	Plan name LEGACY TRUCKING, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor LEGACY TRUCKING, INC.	c EIN-PN 84-1268710-001
a	Plan name MARIAN COLLEGE RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor MARIAN COLLEGE	c EIN-PN 95-4775118-001
a	Plan name MARIO SUSI & SON, INC. 401(K) PLAN	
b	Name of plan sponsor MARIO SUSI & SON, INC.	c EIN-PN 04-2213066-003

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	MARK HANNA	
b	Name of plan sponsor	MARK HANNA	c EIN-PN 74-2800312-001
a	Plan name	METRO FENCE CO., INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor	METRO FENCE COMPANY, INC.	c EIN-PN 74-6514295-001
a	Plan name	METROLIST 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	METROLIST, INC.	c EIN-PN 84-0943682-001
a	Plan name	METROPOLITAN GLASS COMPANY, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	METROPOLITAN GLASS CO., INC.	c EIN-PN 63-0795468-001
a	Plan name	MORRIS DISTRIBUTING 401(K) PLAN	
b	Name of plan sponsor	MORRIS DISTRIBUTING	c EIN-PN 68-0301995-001
a	Plan name	MOTION MACHINERY 401(K) PLAN	
b	Name of plan sponsor	MOTION MACHINERY, LTD	c EIN-PN 76-0566121-001
a	Plan name	MOUNTAIN WEST SURGICAL RETIREMENT PLAN	
b	Name of plan sponsor	MOUNTAIN WEST SURGICAL	c EIN-PN 88-0418505-001
a	Plan name	NORTHWEST EYE PHYSICIANS 401(K) PLAN	
b	Name of plan sponsor	NORTHWEST EYE PHYSICIANS, P.C.	c EIN-PN 38-1861527-002
a	Plan name	NORWALK COMMUNITY HEALTH CENTER 401(K) PLAN	
b	Name of plan sponsor	NORWALK COMMUNITY HEALTH CENTER, INC.	c EIN-PN 06-1436620-001
a	Plan name	NRG MEDIA, LLC 401(K) PLAN	
b	Name of plan sponsor	NRG MEDIA, LLC	c EIN-PN 56-2501807-001
a	Plan name	PAKOIL COMPANY EMPLOYEES' PROFIT-SHARING TRUST	
b	Name of plan sponsor	PAKOIL COMPANY	c EIN-PN 23-1940681-002
a	Plan name	PALM IMAGING INSTITUTE, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	PALM IMAGING INSTITUTE, INC. AND EMPIRE ORTHOPEDIC CENTER	c EIN-PN 33-0638761-001

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 PIEDMONT UROLOGY PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PIEDMONT UROLOGY, PLLC	c EIN-PN 33-1063400-001
a	Plan name PINES PET CEMETERY, INC. 401(K) PLAN	
b	Name of plan sponsor PINES PET CEMETARY, INC.	c EIN-PN 31-1015335-001
a	Plan name PS3 ENTERPRISES, INC. 401(K) PLAN	
b	Name of plan sponsor PS3 ENTERPRISES, INC.	c EIN-PN 26-3852614-001
a	Plan name PUEBLO OF ACOMA HOUSING AUTHORITY 401(K) PLAN	
b	Name of plan sponsor PUEBLO OF ACOMA HOUSING AUTHORITY	c EIN-PN 65-1303187-001
a	Plan name PUTNAM TRUCKING, INC. 401(K)/PROFIT SHARING PLAN	
b	Name of plan sponsor PUTNAM TRUCKING, INC.	c EIN-PN 37-1272751-001
a	Plan name RICHARD GROUP 401(K) PLAN	
b	Name of plan sponsor RICHARD GROUP, LLC	c EIN-PN 46-1249708-001
a	Plan name RICHARD SHAPIRO, D.D.S. 401(K) PLAN	
b	Name of plan sponsor RICHARD SHAPIRO DDS, C.P.	c EIN-PN 22-3464171-001
a	Plan name RINDERKNECHT ASSOCIATES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor RINDERKNECHT ASSOCIATES, INC.	c EIN-PN 42-0959632-001
a	Plan name SALVATORE ANGELO DMD, PC 401(K) PLAN	
b	Name of plan sponsor SALVATORE ANGELO II DMD, PC	c EIN-PN 04-3214907-001
a	Plan name SANDHILLS STATE BANK 401(K) PLAN	
b	Name of plan sponsor SANDHILLS STATE BANK	c EIN-PN 47-0130530-001
a	Plan name SIMPSON SPENCE YOUNG 401(K) RETIREMENT PLAN	
b	Name of plan sponsor SIMPSON SPENCE YOUNG	c EIN-PN 13-5395270-001
a	Plan name SKL PRIME SERVICES, LLC SAFE HARBOR 401(K) PLAN	
b	Name of plan sponsor SKL PRIME SERVICES, LLC	c EIN-PN 01-0551573-001

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 STOCKTON PATHOLOGY MEDICAL GROUP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor STOCKTON PATHOLOGY MEDICAL GROUP	c EIN-PN 68-0005184-003
a	Plan name STRATEGIC CONTRACTING SERVICES INC. 401(K) PLAN	
b	Name of plan sponsor STRATEGIC CONTRACTING SERVICES INC.	c EIN-PN 20-8612710-001
a	Plan name TEXAS GOLF ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor TEXAS GOLF ASSOCIATION	c EIN-PN 75-0715222-001
a	Plan name TEXAS HEALTHCARE PHARMACY 401(K) PLAN	
b	Name of plan sponsor TEXAS THCP OPERATIONS, LP	c EIN-PN 26-0058682-001
a	Plan name TIMOTHY P. MILLER TRUCKING 401(K) PLAN	
b	Name of plan sponsor TIMOTHY P. MILLER TRUCKING, INC.	c EIN-PN 20-2756682-001
a	Plan name WALKER & COMPANY 401(K) PLAN	
b	Name of plan sponsor WALKER & COMPANY, LLP	c EIN-PN 52-1706976-001
a	Plan name 3NSOLUTIONS, INC. 401(K) PLAN	
b	Name of plan sponsor 3NSOLUTIONS, INC.	c EIN-PN 76-0732644-001
a	Plan name A & L COORS, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor A & L COORS, INC.	c EIN-PN 84-0534580-001
a	Plan name ALBEMARLE ENT, ASTHMA & ALLERGY ASSOCIATES, P.A. 401(K) PLAN	
b	Name of plan sponsor ALBEMARLE ENT, ASTHMA & ALLERGY ASSOCIATES	c EIN-PN 56-2091476-001
a	Plan name ARGENT FEDERAL CREDIT UNION 401(K) PLAN	
b	Name of plan sponsor ARGENT FEDERAL CREDIT UNION	c EIN-PN 54-0623641-002
a	Plan name ARIAS, TOVAR & ASSOCIATES, P.A. 401(K) PLAN	
b	Name of plan sponsor ARIAS, TOVAR & ASSOCIATES, P.A.	c EIN-PN 65-0971956-001
a	Plan name BAD AXE PRODUCTS LLC 401(K) PLAN	
b	Name of plan sponsor BAD AXE PRODUCTS LLC	c EIN-PN 45-2653251-001

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	BAKER & HAZLEWOOD PROFIT SHARING PLAN	
b	Name of plan sponsor	BAKER & HAZLEWOOD	c EIN-PN 54-0760483-001
a	Plan name	BALEMET EMPLOYEE BENEFIT PLAN	
b	Name of plan sponsor	BALEMET RECYCLING METALS, INC.	c EIN-PN 22-2907788-001
a	Plan name	CANIZARO CAWTHON DAVIS, APA PROFIT SHARING & 401(K) PLAN	
b	Name of plan sponsor	CANIZARO CAWTHON DAVIS, APA	c EIN-PN 64-0651290-001
a	Plan name	CHARLES RIVER BOAT COMPANY 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	CHARLES RIVER BOAT COMPANY, INC.	c EIN-PN 04-3084148-001
a	Plan name	CHEAHA BANK 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CHEAHA BANK	c EIN-PN 63-1251208-001
a	Plan name	COMMUNITY STATE BANKSHARES, INC. EMPLOYEE STOCK OWNERSHIP PLAN	
b	Name of plan sponsor	COMMUNITY STATE BANK	c EIN-PN 26-0620241-001
a	Plan name	CYM AUTO PARTS DISTRIBUTORS, INC. - RETIREMENT PLAN	
b	Name of plan sponsor	CYM AUTO PARTS	c EIN-PN 66-0421766-001
a	Plan name	LEINGANG HOME CENTER 401(K) PLAN	
b	Name of plan sponsor	LEINGANG GROUP, INC. D/B/A LEINGANG HOME CENTER	c EIN-PN 46-3955538-001
a	Plan name	OPAL SOFT, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	OPALSOFT, INC.	c EIN-PN 94-3280543-001
a	Plan name	OPEN MRI OF NEW ENGLAND, INC. 401(K) PLAN	
b	Name of plan sponsor	OPEN MRI OF NEW ENGLAND, INC.	c EIN-PN 05-0495348-002
a	Plan name	PNG 401(K) PROFIT SHARING SAVINGS PLAN	
b	Name of plan sponsor	PNG ENVIRONMENTAL, INC.	c EIN-PN 93-1203951-001
a	Plan name	RATLIFF ENTERPRISES 401(K) PLAN	
b	Name of plan sponsor	RATLIFF ENTERPRISES	c EIN-PN 43-0831684-001

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 SARAT FORD SALES, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor SARAT FORD SALES, INC.	c EIN-PN 04-2385735-001
a	Plan name SAUK-SUIATTLE 401(K) PLAN	
b	Name of plan sponsor SAUK SUIATTLE INDIAN TRIBE	c EIN-PN 91-0961478-001
a	Plan name THE ART SOURCE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE ART SOURCE, INC.	c EIN-PN 99-0280665-001
a	Plan name THE BOYS AND GIRLS CLUB OF GREATER HOLYOKE 401(K) PLAN	
b	Name of plan sponsor THE BOYS AND GIRLS CLUB OF GREATER HOLYOKE, INC.	c EIN-PN 04-2103792-003
a	Plan name THE CARING CENTER 401(K) RETIREMENT PLAN	
b	Name of plan sponsor THE CARING CENTER, INC.	c EIN-PN 23-2623819-001
a	Plan name THE CARLTON LAW FIRM 401(K) PLAN	
b	Name of plan sponsor THE CARLTON LAW FIRM, P.L.L.C.	c EIN-PN 27-5059291-001
a	Plan name TROY HOUSING SERVICES CORPORATION PENSION PLAN	
b	Name of plan sponsor TROY HOUSING SERVICES CORPORATION	c EIN-PN 63-0972892-001
a	Plan name TRUE & ASSOCIATES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TRUE & ASSOCIATES	c EIN-PN 22-2472821-002
a	Plan name WARNERS MOTOR EXPRESS, INC. PROFIT SHARING & 401(K) PLAN	
b	Name of plan sponsor WARNERS MOTOR EXPRESS, INC.	c EIN-PN 23-1303827-001
a	Plan name A-1 SERVICE INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor A-1 SERVICE INC.	c EIN-PN 72-0692706-001
a	Plan name A. LOUIS ROSADO, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor A. LOUIS ROSADO, INC. C/O HRI	c EIN-PN 04-2517982-001
a	Plan name A. N. ABELL CO. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor A. N. ABELL AUCTION CO.	c EIN-PN 95-1872203-001

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	AMERICAN PAPER CORPORATION CODA PROFIT SHARING PLAN	
b	Name of plan sponsor	AMERICAN PAPER CORPORATION	c EIN-PN 66-0392240-001
a	Plan name	BAR 20 PENSION PROFIT SHARING - 401(K) PLAN	
b	Name of plan sponsor	BAR 20 DAIRY LLC	c EIN-PN 20-2670418-001
a	Plan name	BARNARD MANUFACTURING CO., INC. 401(K) PLAN	
b	Name of plan sponsor	BARNARD MANUFACTURING CO., INC.	c EIN-PN 38-1842231-001
a	Plan name	BUCK HILL FALLS COMPANY 401(K) PLAN	
b	Name of plan sponsor	BUCK HILL FALLS COMPANY	c EIN-PN 24-0536840-001
a	Plan name	BUDGET DRY WATERPROOFING INC. 401(K) PLAN	
b	Name of plan sponsor	BUDGET DRY WATERPROOFING, INC.	c EIN-PN 20-8805605-001
a	Plan name	BUG MAN EXTERMINATING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BUG MAN EXTERMINATING, INC.	c EIN-PN 54-1884547-001
a	Plan name	COSTA 401(K) PLAN	
b	Name of plan sponsor	COSTA FRUIT & PRODUCE COMPANY INC.	c EIN-PN 04-2076359-001
a	Plan name	DISHMAN DODGE 401(K) PLAN	
b	Name of plan sponsor	M&G INVESTMENTS, INC. DBA DISHMAN DODGE	c EIN-PN 91-0953903-002
a	Plan name	ENTERPRISE TITLE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	YOUR TITLE COMPANY INCORPORATED DBA ENTERPRISE TITLE	c EIN-PN 27-0047953-001
a	Plan name	ENVISION TELEPHONY, INC. 401(K) PLAN	
b	Name of plan sponsor	ENVISION TELEPHONY, INC.	c EIN-PN 91-1661458-001
a	Plan name	FULGENT CONTRACTING CORPORATION 401(K) PLAN	
b	Name of plan sponsor	FULGENT CONTRACTING CORPORATION	c EIN-PN 52-2116656-001
a	Plan name	FUNAMBOL 401(K) PLAN	
b	Name of plan sponsor	FUNAMBOL	c EIN-PN 42-1606939-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	FUNG ASSOCIATES RETIREMENT PLAN	
b	Name of plan sponsor	FUNG ASSOCIATES	c EIN-PN 45-2778165-001
a	Plan name	FURRER & ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	NORTH VALLEY FINANCIAL SERVICES LLC DBA FURRER AND ASSOCIATES	c EIN-PN 87-2736693-001
a	Plan name	GULF SOUTH EYE ASSOCIATES (APMC) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	GULF SOUTH EYE ASSOCIATES (APMC)	c EIN-PN 72-1076001-777
a	Plan name	GUYOUNGTECH USA, INC. 401(K) PLAN	
b	Name of plan sponsor	GUYOUNGTECH USA, INC.	c EIN-PN 20-1963180-001
a	Plan name	HYPOTENUSE RETIREMENT & PROFIT SHARING PLAN	
b	Name of plan sponsor	HYPOTENUSE, INC. DBA SURVEYUSA	c EIN-PN 13-3592138-001
a	Plan name	HYUNDAI DYMOS 401(K) PLAN	
b	Name of plan sponsor	HYUNDAI DYMOS MICHIGAN, LLC	c EIN-PN 32-0423491-001
a	Plan name	JOHN P. FRANGIE, M.D., P.C. RETIREMENT PLAN	
b	Name of plan sponsor	JOHN P. FRANGIE, M.D., P.C.	c EIN-PN 46-0538578-001
a	Plan name	ABC ACADEMY, INC. PLAN	
b	Name of plan sponsor	ABC ACADEMY, INC.	c EIN-PN 38-2498000-001
a	Plan name	ABCO CORPORATION 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	ABCO CORPORATION	c EIN-PN 54-0838480-001
a	Plan name	AMERICAN SOCIETY FOR SURGERY OF THE HAND 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	AMERICAN SOCIETY FOR SURGERY OF THE HAND	c EIN-PN 31-6051199-001
a	Plan name	AMES, INC. 401(K) PLAN	
b	Name of plan sponsor	AMES, INC.	c EIN-PN 52-1039531-001
a	Plan name	BASIC METALS, INC. RETIREMENT PLAN	
b	Name of plan sponsor	BASIC METALS, INC.	c EIN-PN 39-1515822-222

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 BASIS INTERNATIONAL LTD. 401(K) PLAN	
b	Name of plan sponsor BASIS INTERNATIONAL LTD.	c EIN-PN 85-0327924-001
a	Plan name BASSETT & BASSETT RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor BASSETT & BASSETT, INCORPORATED	c EIN-PN 38-2653541-001
a	Plan name CHILES & SONS-LAMAN, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CHILES & SONS-LAMAN, INC.	c EIN-PN 34-4492949-003
a	Plan name COSTA BROTHERS MASONRY 401(K)/PREVAILING WAGE PLAN	
b	Name of plan sponsor COSTA BROTHERS MASONRY, INC.	c EIN-PN 04-3054314-003
a	Plan name COUNTRYSIDE CULLIGAN 401(K) & INCENTIVE SAVINGS PLAN	
b	Name of plan sponsor COUNTRYSIDE MANAGEMENT, INC.	c EIN-PN 41-1813535-001
a	Plan name COUNTY OF BERKS EMPLOYEE THRIFT PLAN	
b	Name of plan sponsor COUNTY OF BERKS	c EIN-PN 23-6003049-001
a	Plan name COYLE REPRODUCTIONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COYLE REPRODUCTIONS, INC.	c EIN-PN 95-2955426-001
a	Plan name DON'S TRUCK SALES, INC. 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor DON'S TRUCK SALES, INC.	c EIN-PN 42-0816951-001
a	Plan name DONWAS INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor DONWAS INC.	c EIN-PN 45-4958843-001
a	Plan name ERMAN RETIREMENT ADVISORY 401(K) RETIREMENT PLAN	
b	Name of plan sponsor ERMAN RETIREMENT ADVISORY	c EIN-PN 95-3677994-001
a	Plan name G.C.S. SALES & MARKETING, INC. 401(K) PLAN	
b	Name of plan sponsor G.C.S. SALES & MARKETING, INC.	c EIN-PN 04-3268496-001
a	Plan name H. BRAUNING COMPANY, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor H. BRAUNING COMPANY, INC.	c EIN-PN 54-1328776-001

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	IITC 401(K) PLAN	
b	Name of plan sponsor	ISLAND INFORMATION TECHNOLOGY CONSULTANTS, INC.	c EIN-PN 20-1314597-001
a	Plan name	ILLINOIS COLLEGE OF EMERGENCY PHYSICIANS RETIREMENT PLAN	
b	Name of plan sponsor	ILLINOIS COLLEGE OF EMERGENCY PHYSICIANS	c EIN-PN 23-7147401-001
a	Plan name	JOHNSON ELECTRIC SUPPLY, INC. 401(K) PLAN	
b	Name of plan sponsor	JOHNSON ELECTRIC SUPPLY, INC.	c EIN-PN 04-3367863-001
a	Plan name	LEVIN LEGAL GROUP, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LEVIN LEGAL GROUP, P.C.	c EIN-PN 23-2830283-001
a	Plan name	LIBERTY CHEVROLET, INC. 401(K) PLAN	
b	Name of plan sponsor	LIBERTY CHEVROLET, INC.	c EIN-PN 04-3027316-001
a	Plan name	OREGON COLLEGE OF ORIENTAL MEDICINE 401(K) PLAN	
b	Name of plan sponsor	OREGON COLLEGE OF ORIENTAL MEDICINE	c EIN-PN 93-0845182-001
a	Plan name	OREGON FISH GUYS 401(K) PLAN	
b	Name of plan sponsor	OREGON FISH GUYS, INC.	c EIN-PN 20-3065360-001
a	Plan name	ORLANDO SPRING CORP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ORLANDO SPRING CORP	c EIN-PN 95-1933966-001
a	Plan name	RAY SMITH INSURANCE AGENCY, INC. 401(K) PLAN	
b	Name of plan sponsor	RAY SMITH INSURANCE AGENCY, INC.	c EIN-PN 41-1389486-001
a	Plan name	RDC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ROCK & DIRT CONSTRUCTION	c EIN-PN 20-0382886-001
a	Plan name	REA & ASSOCIATES 401(K)/PROFIT SHARING PLAN	
b	Name of plan sponsor	REA & ASSOCIATES LLP	c EIN-PN 77-0164868-001
a	Plan name	SAVANT SYSTEMS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SAVANT SYSTEMS, INC.	c EIN-PN 85-1002349-777

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 SC JOHNSON DE PR, INC. SUPPLEMENTAL RETIREMENT PLAN	
b	Name of plan sponsor SC JOHNSON DE PR, INC.	c EIN-PN 66-0290543-002
a	Plan name SPAULDING BRICK CO., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SPAULDING BRICK CO., INC.	c EIN-PN 04-1203530-001
a	Plan name SPOLIDORO & SONS, INC. 401(K) PLAN	
b	Name of plan sponsor SPOLIDORO & SONS, INC.	c EIN-PN 04-2642418-001
a	Plan name TRUECONTEXT 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor TRUECONTEXT	c EIN-PN 98-0474577-001
a	Plan name TRUTRON CORPORATION PROFIT SHARING PLAN	
b	Name of plan sponsor TRUTRON CORPORATION	c EIN-PN 38-1858530-001
a	Plan name TRUXAW & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor JOSEPH C. TRUXAW AND ASSOCIATES, INC.	c EIN-PN 95-2992708-001
a	Plan name WATSON REALTY COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WATSON REALTY COMPANY	c EIN-PN 95-3462904-001
a	Plan name AC CRANE & SIGN SERVICE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor AC CRANE & SIGN SERVICE, INC.	c EIN-PN 52-1914457-001
a	Plan name ALL AIR MECHANICAL CONTRACTOR INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor ALL AIR MECHANICAL CONTRACTOR, INC.	c EIN-PN 20-5664372-001
a	Plan name ARNOLD TOOL & DIE CO. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor ARNOLD TOOL & DIE CO.	c EIN-PN 38-2004956-001
a	Plan name ARRASMITH, JUDD, RAPP, CHO VAN INC. 401(K)/PROFIT SHARING PLAN	
b	Name of plan sponsor ARRASMITH, JUDD, RAPP, CHO VAN INC.	c EIN-PN 16-1627907-001
a	Plan name BAY TRADERS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BAY TRADERS, INC.	c EIN-PN 92-0140124-002

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	BC2 ENVIRONMENTAL 401(K) PLAN	
b	Name of plan sponsor	BC2 ENVIRONMENTAL, LLC	c EIN-PN 83-2585853-001
a	Plan name	BORINQUEN CONTAINER 1165(E) CODA RETIREMENT PLAN	
b	Name of plan sponsor	BORINQUEN CONTAINER CORP.	c EIN-PN 66-0275132-001
a	Plan name	CARDIOVASCULAR SOLUTIONS, LLC PROFIT SHARING PLAN	
b	Name of plan sponsor	CARDIOVASCULAR SOLUTIONS, LLC	c EIN-PN 26-0170867-001
a	Plan name	CHSU 401(K) PLAN	
b	Name of plan sponsor	CALIFORNIA HEALTH SCIENCES UNIVERSITY	c EIN-PN 45-4846058-001
a	Plan name	CIERRA PIPE, INC. RETIREMENT PLAN	
b	Name of plan sponsor	CIERRA PIPE, INC.	c EIN-PN 76-0058138-777
a	Plan name	CIMC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CALIFORNIA INDIAN MANPOWER CONSORTIUM, INC. (CIMC)	c EIN-PN 94-2472564-001
a	Plan name	COMPUTHINK, INC. 401(K) PLAN	
b	Name of plan sponsor	COMPUTHINK, INC.	c EIN-PN 36-3953691-001
a	Plan name	DOUGLASS INDUSTRIES, INC. 401(K) PLAN	
b	Name of plan sponsor	DOUGLASS INDUSTRIES	c EIN-PN 22-1912538-002
a	Plan name	DOWLING FUEL 401(K) PLAN	
b	Name of plan sponsor	DOWLING FUEL COMPANY	c EIN-PN 22-1803850-001
a	Plan name	EL POLLO LOCO, INC. 401(K) PLAN	
b	Name of plan sponsor	EL POLLO LOCO, INC.	c EIN-PN 33-0377527-777
a	Plan name	ELATERAL INC. 401(K) PLAN	
b	Name of plan sponsor	ELATERAL INC. DBA BRANDGILITY	c EIN-PN 51-0396708-001
a	Plan name	ELCO LIGHTING PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	AMP PLUS, INC. DBA ELCO LIGHTING	c EIN-PN 95-4309236-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	ELDREDGE COMPANIES, INC. 401(K) SALARY SAVINGS PLAN AND TRUST	
b	Name of plan sponsor	THE ELDREDGE COMPANIES, INC.	c EIN-PN 23-2372461-001
a	Plan name	GEMI TRUCKING, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	GEMI TRUCKING	c EIN-PN 58-1734350-001
a	Plan name	GEMINI SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor	GEMINI SERVICES, LLC	c EIN-PN 35-2212355-001
a	Plan name	GRAYCO ENTERPRISES, INC. 401(K) PLAN	
b	Name of plan sponsor	GRAYCO ENTERPRISES, INC.	c EIN-PN 36-4322896-001
a	Plan name	HENSLEY LAMKIN RACHEL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HENSLEY LAMKIN RACHEL, INC.	c EIN-PN 75-2377361-001
a	Plan name	HERITAGE ACADEMY 401(K) PLAN	
b	Name of plan sponsor	EDUCATION SERVICES DBA HERITAGE ACADEMY	c EIN-PN 57-1002951-001
a	Plan name	IMPACT INDUSTRIES 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	WORLD OF MOULDING	c EIN-PN 33-0327222-001
a	Plan name	IMPORT LOGISTICS, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	IMPORT LOGISTICS, INC.	c EIN-PN 36-3798354-001
a	Plan name	JAMES W. REILLY 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	JAMES W. REILLY, DDS PC	c EIN-PN 58-2592630-001
a	Plan name	JANET H. LEE, D.O., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	JANET H. LEE	c EIN-PN 87-0754052-001
a	Plan name	LINGLE DESIGN GROUP 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	LINGLE DESIGN GROUP	c EIN-PN 36-4398800-001
a	Plan name	MARYLAND PLASTICS UNION 401(K) PLAN	
b	Name of plan sponsor	MARYLAND PLASTICS, INC.	c EIN-PN 52-1636609-003

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	MHS LIFT HOLDINGS INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	MHS LIFT HOLDINGS INC.	c EIN-PN 23-1738019-001
a	Plan name	NAKAE & ASSOCIATES INC. 401(K) PLAN	
b	Name of plan sponsor	NAKAE & ASSOCIATES INC.	c EIN-PN 77-0216520-002
a	Plan name	OAKLAND COMMUNITY NURSERY SCHOOL RETIREMENT AND 401(K) PLAN	
b	Name of plan sponsor	OAKLAND COMMUNITY NURSING SCHOOL	c EIN-PN 22-2210714-001
a	Plan name	PARTRADE TRADING CO., LLC 401(K) PLAN	
b	Name of plan sponsor	PARTRADE TRADING CO., LLC	c EIN-PN 84-1662256-001
a	Plan name	PASADENA SENIOR CENTER 401(K) PLAN	
b	Name of plan sponsor	PASADENA SENIOR CENTER	c EIN-PN 95-2085393-001
a	Plan name	POTTER VALLEY INVESTMENTS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	POTTER VALLEY INVESTMENTS, INC.	c EIN-PN 68-0176327-001
a	Plan name	POWER FUNDING, LTD. 401(K) PLAN	
b	Name of plan sponsor	POWER FUNDING, LTD.	c EIN-PN 75-2952855-001
a	Plan name	POWER SOLUTIONS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	POWER SOLUTIONS, LLC.	c EIN-PN 52-2100793-222
a	Plan name	PR MANAGEMENT, CORP. RETIREMENT PLAN	
b	Name of plan sponsor	PR MANAGEMENT, CORP.	c EIN-PN 01-0757637-001
a	Plan name	PVIM RETIREMENT PLAN	
b	Name of plan sponsor	PIONEER VALLEY INTERNAL MEDICINE, PC	c EIN-PN 20-4133434-001
a	Plan name	Q3 TECHNOLOGIES 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	Q3 TECHNOLOGIES LLC	c EIN-PN 20-4855347-001
a	Plan name	QMSI 401(K) PLAN	
b	Name of plan sponsor	QMSI	c EIN-PN 62-1539705-001

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	RIOUX EYE CENTER, INC. RETIREMENT PLAN	
b	Name of plan sponsor	RIOUX EYE CENTER, INC.	c EIN-PN 87-4253844-001
a	Plan name	SMEED COMMUNICATION SERVICES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SMEED SOUND SERVICE, INC. DBA SMEED COMMUNICATION SERVICES	c EIN-PN 93-0776324-001
a	Plan name	SUBURBAN & TRI-STATE SUBARU 401(K) PLAN	
b	Name of plan sponsor	SUBURBAN & TRI-STATE SUBARU, INC.	c EIN-PN 06-1210980-001
a	Plan name	SUMMIT HAND THERAPY, LLC RETIREMENT PLAN	
b	Name of plan sponsor	SUMMIT HAND THERAPY, LLC	c EIN-PN 20-5860288-001
a	Plan name	THE COLONIAL MANOR 401(K) PLAN	
b	Name of plan sponsor	COLONIAL MANOR HEALTH CARE CENTER, INC.	c EIN-PN 31-0868001-001
a	Plan name	THE DUNCAN COMPANIES 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	THE DUNCAN COMPANIES, INC.	c EIN-PN 59-3537237-001
a	Plan name	TOMROSE CONSTRUCTION, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TOMROSE CONSTRUCTION, INC.	c EIN-PN 81-4771309-001
a	Plan name	VALLEY WIDE MASONRY, INC. 401(K) PLAN	
b	Name of plan sponsor	VALLEY WIDE MASONRY, INC.	c EIN-PN 86-0797879-001
a	Plan name	VAN DYKE LANDSCAPE ARCHITECTS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	VAN DYKE, LLP	c EIN-PN 71-0997792-001
a	Plan name	WEGENER WELDING, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WEGENER WELDING, LLC	c EIN-PN 20-4664586-001
a	Plan name	ZIMMER FAMILY LAW, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ZIMMER FAMILY LAW, LLC	c EIN-PN 93-1242574-001
a	Plan name	FMF RACING EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor	FMF RACING	c EIN-PN 33-0667541-001

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	FOOD 4 LESS SALARY SAVINGS PLAN	
b	Name of plan sponsor	PAQ, INC. DBA FOOD 4 LESS	c EIN-PN 68-0363934-002
a	Plan name	CBW AUTOMATION, INC. 401(K) PROFIT SHARING PLAN AND RETIREMENT TRUST	
b	Name of plan sponsor	MULLER TECHNOLOGY COLORADO	c EIN-PN 48-0775210-001
a	Plan name	CCALA CORP. RETIREMENT PLAN	
b	Name of plan sponsor	CCALA CORP.	c EIN-PN 66-0430969-001
a	Plan name	CDSS RETIREMENT PLAN	
b	Name of plan sponsor	CENTER FOR DISEASES & SURGERY OF THE SPINE	c EIN-PN 88-0340195-001
a	Plan name	LAFATA MANAGEMENT, INC. EMPLOYEES' 401(K) PLAN	
b	Name of plan sponsor	LAFATA MANAGEMENT, INC.	c EIN-PN 20-1965835-001
a	Plan name	LAGESTEE INSURANCE SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor	LAGESTEE INSURANCE AGENCY, LTD.	c EIN-PN 62-1081657-001
a	Plan name	PELL MANUFACTURING, INC. 401(K) PLAN	
b	Name of plan sponsor	PELL MANUFACTURING, INC.	c EIN-PN 04-3032603-001
a	Plan name	TAPPE ARCHITECTS, INC. 401(K) PLAN	
b	Name of plan sponsor	TAPPE ARCHITECTS, INC.	c EIN-PN 04-2721071-001
a	Plan name	CISCO SYSTEMS, INC. PUERTO RICO - SALARY DEFERRAL PLAN	
b	Name of plan sponsor	CISCO SYSTEMS, INC.	c EIN-PN 77-0473719-001
a	Plan name	LOMMA CONSTRUCTION CORP. RETIREMENT PLAN	
b	Name of plan sponsor	LOMMA CONSTRUCTION CORP.	c EIN-PN 11-2435487-001
a	Plan name	LORIO ROSS STERLING ENTERTAINMENT 401(K) PLAN	
b	Name of plan sponsor	LORIO ROSS STERLING ENTERTAINMENT	c EIN-PN 38-1995713-001
a	Plan name	PRECISION DOSE, INC. EMPLOYEE SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor	PRECISION DOSE, INC.	c EIN-PN 68-0551203-001

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 PRECISION INDUSTRIAL CONTRACTORS, INC. 401(K) PLAN	
b	Name of plan sponsor PRECISION INDUSTRIAL CONTRACTORS, INC.	c EIN-PN 91-2139290-001
a	Plan name THE EMF COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE EMF COMPANY, INC.	c EIN-PN 75-1552044-001
a	Plan name THE FINANCIAL GROUP OF PHILADELPHIA, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE FINANCIAL GROUP OF PHILADELPHIA, LLC	c EIN-PN 20-2128204-001
a	Plan name ADVANCED CARGO CORPORATION 401(K) P/S PLAN	
b	Name of plan sponsor ADVANCED CARGO CORPORATION	c EIN-PN 41-1663563-001
a	Plan name ADVANCED MANUFACTURING TECHNOLOGY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ADVANCED MANUFACTURING TECHNOLOGY	c EIN-PN 84-1390588-001
a	Plan name COASTAL BEND WORKFORCE DEVELOPMENT BOARD 401(K) PLAN	
b	Name of plan sponsor COASTAL BEND WORKFORCE DEVELOPMENT BOARD	c EIN-PN 74-2424633-001
a	Plan name COD & CAPERS SEAFOOD EMPLOYEES SAVINGS PLAN	
b	Name of plan sponsor COD & CAPERS SEAFOOD	c EIN-PN 59-2349811-001
a	Plan name GKY DENTAL ARTS 401(K) PLAN	
b	Name of plan sponsor GKY DENTAL ARTS INC.	c EIN-PN 88-4323547-001
a	Plan name MAAS BROTHERS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor MAAS BROTHERS, INC. PROFIT SHARING PLAN	c EIN-PN 91-1907561-001
a	Plan name MAD DOGG ATHLETICS, INC. 401(K) PROFIT SHARING PLAN 1	
b	Name of plan sponsor MAD DOGG ATHLETICS, INC.	c EIN-PN 95-4481055-002
a	Plan name MAD DOGG ATHLETICS, INC. 401(K) PROFIT SHARING PLAN 2	
b	Name of plan sponsor MAD DOGG ATHLETICS, INC.	c EIN-PN 95-4481055-003
a	Plan name PRIMO MEDICAL GROUP, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PRIMO MEDICAL GROUP, INC.	c EIN-PN 04-2224896-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	PRINCE WILLIAM CARDIOLOGY PROFIT SHARING PLAN	
b	Name of plan sponsor	PRINCE WILLIAM CARDIOLOGY ASSOCIATES	c EIN-PN 54-1124027-001
a	Plan name	PRINCIPLE PLASTICS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PRINCIPLE PLASTICS, INC.	c EIN-PN 95-1578575-001
a	Plan name	PRIORITY MORTGAGE CORP. 401(K) PLAN	
b	Name of plan sponsor	PRIORITY MORTGAGE CORP.	c EIN-PN 31-1088264-001
a	Plan name	THE PRODUCERS GROUP 401(K) PLAN	
b	Name of plan sponsor	FREUNDT & ASSOCIATES INSURANCE SERVICES, INC.	c EIN-PN 33-0746599-001
a	Plan name	THE ROBERTS LAW GROUP, PLLC 401(K)/NEW COMPARABILITY PLAN	
b	Name of plan sponsor	THE ROBERTS LAW GROUP, PLLC	c EIN-PN 06-1701395-001
a	Plan name	TOOH DINEH INDUSTRIES, INC. 401(K) PLAN	
b	Name of plan sponsor	TOOH DINEH INDUSTRIES, INCORPORATED	c EIN-PN 86-0442648-001
a	Plan name	ALLIED BUILDING MATERIALS, INC. 401(K) PLAN	
b	Name of plan sponsor	ALLIED BUILDING MATERIALS, INC.	c EIN-PN 88-0068520-001
a	Plan name	ALLTECH BUSINESS SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	ALLTECH BUSINESS SYSTEMS, INC.	c EIN-PN 22-2697496-001
a	Plan name	COMSTOCK JOHNSON ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	COMSTOCK JOHNSON ARCHITECTS, INC.	c EIN-PN 68-0039251-003
a	Plan name	CONNOR CONSULTING CORPORATION 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	CONNOR CONSULTING CORPORATION	c EIN-PN 46-1950081-001
a	Plan name	GREAT SOUTHERN CAPITAL CORPORATION SALARY REDUCTION PLAN	
b	Name of plan sponsor	GREAT SOUTHERN CAPITAL CORPORATION	c EIN-PN 64-0604860-010
a	Plan name	GREATER MILWAUKEE PLASTIC SURGEONS, S.C. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	GREATER MILWAUKEE PLASTIC SURGEONS, S.C.	c EIN-PN 39-1819941-001

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 GREEN CHARGE ENVIRONMENTAL 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GREEN CHARGE ENVIRONMENTAL, INC.	c EIN-PN 46-2745824-001
a	Plan name GREEN CHARGE TECHNOLOGIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GREEN CHARGE TECHNOLOGIES, INC.	c EIN-PN 81-2651743-001
a	Plan name MASADA HOMES RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor MASADA HOMES	c EIN-PN 95-2479348-001
a	Plan name QUALITY FURNITURE COMPANY 401(K) PLAN	
b	Name of plan sponsor QUALITY FURNITURE COMPANY	c EIN-PN 25-1390936-001
a	Plan name QUANTUM DYNAMICS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor QUANTUM DYNAMICS, INC.	c EIN-PN 52-2340609-001
a	Plan name QUIK TRAVEL STAFFING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor QUIK TRAVEL STAFFING, INC.	c EIN-PN 95-4826235-001
a	Plan name TUCKER, ALBIN & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor TUCKER, ALBIN & ASSOCIATES	c EIN-PN 32-0386771-001
a	Plan name CREATIVE DESIGN CONCEPTS, INC. 401(K) PLAN	
b	Name of plan sponsor CREATIVE DESIGN CONCEPTS, INC. 401(K) PLAN	c EIN-PN 47-2388058-001
a	Plan name HAI ALLEN QUOC VU, DDS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HAI ALLEN QUOC VU, D.D.S.	c EIN-PN 77-0533136-001
a	Plan name HANGMAN PRODUCTS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HANGMAN PRODUCTS, INC.	c EIN-PN 95-4749074-001
a	Plan name MED-FAST PHARMACY, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor MED-FAST PHARMACY, INC.	c EIN-PN 25-1631348-001
a	Plan name RED HOOK AGENCIES, INC. 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor RED HOOK AGENCIES, INC.	c EIN-PN 66-0345418-002

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 REIF LAW GROUP, P.C. 401(K) PLAN	
b	Name of plan sponsor REIF LAW GROUP, P.C.	c EIN-PN 26-4085758-001
a	Plan name RLA 401(K) PLAN	
b	Name of plan sponsor ROCKFORD LINEAR ACTUATION, INC.	c EIN-PN 04-3588554-001
a	Plan name RNB & K 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor RIPES NELSON BAGGOT & KALOBRASTOS P.C.	c EIN-PN 36-4233711-001
a	Plan name ARTISAN REALTY GROUP RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor ARTISAN REALTY GROUP, INC.	c EIN-PN 81-4631308-001
a	Plan name ARTISTIC TILE PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor ARTISTIC TILE, INC.	c EIN-PN 22-3247240-001
a	Plan name ASC PARTNERS 401(K) PLAN	
b	Name of plan sponsor ASC PARTNERS, LLC	c EIN-PN 71-0974497-001
a	Plan name DARK CORNER SOFTWARE 401(K) PLAN	
b	Name of plan sponsor DARK CORNER SOFTWARE, LLC	c EIN-PN 20-2559570-001
a	Plan name DATA PATH, INC. 401(K) P/S PLAN	
b	Name of plan sponsor DATA PATH, INC.	c EIN-PN 90-0242296-001
a	Plan name DATAWORKS 401(K) PLAN	
b	Name of plan sponsor DW EDUCATIONAL RESEARCH, INC. DBA DATAWORKS EDUCATIONAL RESEARCH	c EIN-PN 77-0584790-001
a	Plan name HI-TECH LABELS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HI-TECH LABELS, INC.	c EIN-PN 95-3836900-001
a	Plan name HICKORY HILL RETIREMENT COMMUNITY, LLC 401(K)/PROFIT SHARING PLAN	
b	Name of plan sponsor HICKORY HILL RETIREMENT COMMUNITY, LLC	c EIN-PN 37-1544274-001
a	Plan name MID-ATLANTIC NEUROSURGICAL ASSOC., P.A. 401(K) PLAN	
b	Name of plan sponsor MID-ATLANTIC NEUROSURGICAL ASSOC., P.A.	c EIN-PN 52-1982174-001

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 MID-VALLEY HEALTH SERVICES LONG TERM CARE, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor MID-VALLEY HEALTH SERVICES LONG TERM CARE, INC.	c EIN-PN 26-1365260-001
a	Plan name ATSUMI CAR EQUIPMENT, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ATSUMI CAR EQUIPMENT, INC.	c EIN-PN 54-2044418-001
a	Plan name AUBURN CONSTRUCTORS, INC. 401(K)/PW PLAN	
b	Name of plan sponsor AUBURN CONSTRUCTORS, INC.	c EIN-PN 68-0230575-002
a	Plan name AUDIO VIDEO DESIGN, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor AUDIO VIDEO DESIGN, INC.	c EIN-PN 03-0460318-001
a	Plan name HITV 401(K) PLAN	
b	Name of plan sponsor HITV OPERATING CO., INC.	c EIN-PN 20-8485379-001
a	Plan name HOGE LUMBER COMPANY 401(K) PLAN	
b	Name of plan sponsor HOGE LUMBER COMPANY	c EIN-PN 34-1819246-002
a	Plan name MISKO, INC. 401(K) PLAN	
b	Name of plan sponsor MISKO, INC.	c EIN-PN 23-2506409-001
a	Plan name ROTO-ROOTER 401(K) PLAN	
b	Name of plan sponsor ROOTER SEWER CLEANERS, INC.	c EIN-PN 39-0989392-222
a	Plan name NATIONAL PORTFOLIO NETWORK 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NATIONAL PORTFOLIO NETWORK	c EIN-PN 33-0288775-001
a	Plan name BEC SYSTEMS LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BEC SYSTEMS LLC	c EIN-PN 88-1082676-001
a	Plan name DOWNEY & COMPANY, LLP 401(K) PLAN	
b	Name of plan sponsor DOWNEY & COMPANY, LLP	c EIN-PN 04-3106302-001
a	Plan name DOYLE & ASSOCIATES, PLLC 401(K) PLAN	
b	Name of plan sponsor DOYLE & ASSOCIATES, PLLC	c EIN-PN 20-1414332-001

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	DPE, INC. 401(K) PLAN	
b	Name of plan sponsor	DPE, INC.	c EIN-PN 58-2110906-001
a	Plan name	DR. CRAIG GLICK 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CRAIG A. GLICK, D.D.S., INC.	c EIN-PN 95-4629939-001
a	Plan name	INGRAM FINANCIAL GROUP, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	INGRAM FINANCIAL GROUP, INC. 401(K) PLAN	c EIN-PN 59-1745402-001
a	Plan name	WEST SIDE MARKET SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor	ROMEO'S INC. DBA WEST SIDE MARKET	c EIN-PN 06-1026857-001
a	Plan name	SERVICE TRANSPORT GROUP, INC. 401(K) PSP	
b	Name of plan sponsor	SERVICE TRANSPORT GROUP, INC.	c EIN-PN 23-2981850-001
a	Plan name	SGA DESIGN GROUP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	SGA DESIGN GROUP, P.C.	c EIN-PN 73-1466773-001
a	Plan name	BERGMAN, WALLS & ASSOCIATES, LTD. 401(K) PLAN	
b	Name of plan sponsor	BERGMAN, WALLS & ASSOCIATES, LTD.	c EIN-PN 88-0318867-002
a	Plan name	BERNIE GRUNDMAN MASTERING STUDIO 401(K) PLAN	
b	Name of plan sponsor	BERNIE GRUNDMAN MASTERING STUDIO	c EIN-PN 95-3839051-003
a	Plan name	DURINGER LAW GROUP, PLC 401(K) PLAN	
b	Name of plan sponsor	DURINGER LAW GROUP, PLC	c EIN-PN 20-2965686-001
a	Plan name	INTERNATIONAL PARKING DESIGN, INC. 401(K) PLAN	
b	Name of plan sponsor	INTERNATIONAL PARKING DESIGN, INC.	c EIN-PN 95-2696753-003
a	Plan name	INTERNATIONAL TANK SERVICE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	INTERNATIONAL TANK SERVICE, INC.	c EIN-PN 34-1277387-001
a	Plan name	INTREIS 401(K) PLAN	
b	Name of plan sponsor	INTREIS	c EIN-PN 46-0855494-001

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 NEW ENGLAND METALFORM, INC. CASH BALANCE PLAN	
b	Name of plan sponsor NEW ENGLAND METALFORM, INC.	c EIN-PN 04-3100110-003
a	Plan name NEW HAMPSHIRE HYDRAULICS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NEW HAMPSHIRE HYDRAULICS, INC.	c EIN-PN 02-0338098-001
a	Plan name WILEY SANDERS TRUCK LINES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WILEY SANDERS TRUCK LINES, INC.	c EIN-PN 63-0630434-001
a	Plan name WILLIAM L. FARR DDS INC. DBA ROCKY RIVER DENTAL ASSOCIATES 401K PROFIT SHARING PLAN	
b	Name of plan sponsor WILLIAM L FARR DDS INC. DBA ROCKY RIVER DENTAL ASSOCIATES	c EIN-PN 34-1760741-001
a	Plan name WILLIAMS, DECLARK & TUSCHMAN CO., LPA PROFIT SHARING PLAN	
b	Name of plan sponsor WILLIAMS, DECLARK & TUSCHMAN CO., LPA	c EIN-PN 34-1311244-001
a	Plan name ODESUS, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor ODESUS, INC.	c EIN-PN 95-4864544-001
a	Plan name BOYESEN, INC 401(K) PLAN	
b	Name of plan sponsor BOYESEN, INC.	c EIN-PN 23-2749409-001
a	Plan name BR&GL CONSTRUCTION LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BR&GL CONSTRUCTION LLC	c EIN-PN 81-2970140-002
a	Plan name BRATTON, RAZO & LORD, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BRATTON, RAZO & LORD, INC.	c EIN-PN 84-1955100-001
a	Plan name BREEZWAY THRIFTY GLASS 401(K) PLAN	
b	Name of plan sponsor JOJO ENTERPRISES, INC. DBA BREEZWAY THRIFTY GLASS	c EIN-PN 33-0433751-001
a	Plan name SMITHCO MEATS, INC. 401(K) PLAN	
b	Name of plan sponsor SMITHCO MEATS, INC.	c EIN-PN 91-0923041-001
a	Plan name OSAMU CORPORATION RETIREMENT PLAN	
b	Name of plan sponsor OSAMU CORPORATION	c EIN-PN 95-4529389-001

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 BUTLER-JUSTICE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BUTLER-JUSTICE, INC. 401(K) PROFIT SHARING PLAN	c EIN-PN 88-0401243-002
a	Plan name EXCEL PAYROLL SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor EXCEL PAYROLL SERVICES, INC.	c EIN-PN 26-1943089-001
a	Plan name JOSEPH LAMPARELLI, INC. DBA SUPREME FUEL CO. 401(K) SAVINGS PLAN	
b	Name of plan sponsor JOSEPH LAMPARELLI, INC. DBA SUPREME FUEL CO.	c EIN-PN 04-2679773-001
a	Plan name JSC REALTY SERVICES, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor JSC REALTY SERVICES, INC.	c EIN-PN 75-2319565-001
a	Plan name SPRINGFIELD SERVICES 401(K) PLAN	
b	Name of plan sponsor MCCARTHY LEGAL SERVICES, LLC	c EIN-PN 04-3445519-001
a	Plan name PASTERKAMP HEATING & AIR CONDITIONING COMPANY 401(K)	
b	Name of plan sponsor PASTERKAMP HEATING & AIR CONDITIONING	c EIN-PN 84-0568191-001
a	Plan name PATHMARK HR, INC. 401(K) PSP	
b	Name of plan sponsor PATHMARK HR, INC.	c EIN-PN 81-4987330-001
a	Plan name PATRICK COUNTY FAMILY PRACTICE 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor PATRICK COUNTY FAMILY PRACTICE	c EIN-PN 54-1583691-001
a	Plan name FERNANDES & CHAREST, P.C. 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor FERNANDES & CHAREST, P.C.	c EIN-PN 04-3099857-001
a	Plan name KING CHIROPRACTIC RETIREMENT PLAN	
b	Name of plan sponsor KING CHIROPRACTIC INSTITUTE	c EIN-PN 52-2210480-001
a	Plan name KING SYSTEMS 401(K) PLAN	
b	Name of plan sponsor KING SYSTEMS, LLC	c EIN-PN 81-0553940-001
a	Plan name KLEIN PRODUCTS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KLEIN PRODUCTS, INC.	c EIN-PN 95-2105141-001

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	LUCKY CAB CO. OF NEVADA 401(K) PLAN	
b	Name of plan sponsor	LUCKY CAB CO. OF NEVADA	c EIN-PN 88-0269865-001
a	Plan name	LUCTOR INTERNATIONAL 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LUCTOR INTERNATIONAL, LLC D/B/A VAN GOGH IMPORTS	c EIN-PN 86-0880585-001
a	Plan name	THE LEIGH AGENCY SAFE HARBOR 401(K) PLAN	
b	Name of plan sponsor	THE IDARUTH CORPORATION T/A THE LEIGH AGENCY	c EIN-PN 22-3020365-001
a	Plan name	THE LIFELINK OF PUERTO RICO SUPPLEMENTAL RETIREMENT PLAN	
b	Name of plan sponsor	LIFELINK FOUNDATION, INC. D/B/A LIFELINK OF PUERTO RICO	c EIN-PN 59-2193032-001
a	Plan name	ACME ENGRAVING PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor	ACME ENGRAVING COMPANY, INC.	c EIN-PN 22-2136958-001
a	Plan name	CITY WELDING RETIREMENT PLAN	
b	Name of plan sponsor	CITY WELDING & FABRICATION, INC.	c EIN-PN 04-2990922-001
a	Plan name	CLARKE PACKING 401(K) PLAN	
b	Name of plan sponsor	CLARKE PACKING & CRATING COMPANY	c EIN-PN 36-3828267-001
a	Plan name	PRECISION SMALL ENGINE CO., INC. 401(K) PLAN	
b	Name of plan sponsor	PRECISION SMALL ENGINE CO., INC.	c EIN-PN 59-1985940-001
a	Plan name	PREMIER FLOOR CARE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PREMIER FLOOR CARE, INC..	c EIN-PN 88-0480004-002
a	Plan name	MAIC, INC. 401(K) PLAN	
b	Name of plan sponsor	MINORITY ADVANCEMENT IN CORPORATIONS, INC.	c EIN-PN 52-2060991-001
a	Plan name	ADVANTAGE PEST RELATED SERVICES, INC. RETIREMENT PROGRAM	
b	Name of plan sponsor	ADVANTAGE PEST RELATED SERVICES, INC.	c EIN-PN 65-0380484-001
a	Plan name	AEIFS 401(K) PLAN	
b	Name of plan sponsor	AEIFS INC.	c EIN-PN 54-2087640-001

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 GLEN P. MOREHEAD, MD, PC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GLEN P. MOREHEAD, MD, PC	c EIN-PN 58-2295975-002
a	Plan name GLESSNER & ASSOCIATES, PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GLESSNER & ASSOCIATES, PLLC	c EIN-PN 55-0761731-001
a	Plan name PRO WINE, INC. DBA JULIO'S LIQUORS 401(K) PLAN	
b	Name of plan sponsor PRO WINE, INC. DBA JULIO'S LIQUORS	c EIN-PN 64-3526205-001
a	Plan name PRO-TEK MANUFACTURING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PRO-TEK MANUFACTURING, INC.	c EIN-PN 94-2862885-002
a	Plan name PROFESSIONAL BROKERAGE WEST, INC. 401(K) PLAN	
b	Name of plan sponsor PROFESSIONAL BROKERAGE WEST, INC.	c EIN-PN 88-0222304-001
a	Plan name THE SOUTHEAST ALABAMA GAS DISTRICT RETIREMENT INCOME PLAN	
b	Name of plan sponsor SOUTHEAST ALABAMA GAS DISTRICT	c EIN-PN 63-6004182-001
a	Plan name ALTAONE FEDERAL CREDIT UNION 401(K) PLAN	
b	Name of plan sponsor ALTAONE FEDERAL CREDIT UNION	c EIN-PN 95-1658623-222
a	Plan name ALUMINUM COMPANY OF NC, INC. 401(K)/PROFIT SHARING PLAN	
b	Name of plan sponsor ALUMINUM COMPANY OF NC, INC.	c EIN-PN 83-0791382-001
a	Plan name MATIKON AMERICA INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor MATIKON AMERICA INC.	c EIN-PN 38-3498737-002
a	Plan name CONSER HOMES, INC. EMPLOYEES' RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor CONSER HOMES, INC.	c EIN-PN 93-0670347-001
a	Plan name CONSOLIDATED DOORS, INC. 401(K) PLAN	
b	Name of plan sponsor CONSOLIDATED DOORS, INC.	c EIN-PN 39-1757450-001
a	Plan name GREENFIELD GROUP, INC. PROFIT SHARING & RETIREMENT PLAN	
b	Name of plan sponsor THE GREENFIELD GROUP, INC.	c EIN-PN 65-0347678-001

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	GREENWAY WEALTH MANAGEMENT, LLC 401(K) PLAN	
b	Name of plan sponsor	GREENWAY WEALTH MANAGEMENT, LLC	c EIN-PN 81-5323726-001
a	Plan name	MEDI-WEIGHT LOSS CLINICS, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MEDI-WEIGHT LOSS CLINICS, LLC	c EIN-PN 20-3753744-001
a	Plan name	MEDIASPIKE 401(K) PLAN	
b	Name of plan sponsor	MEDIASPIKE, INC.	c EIN-PN 61-1448533-001
a	Plan name	MEDICORE, LLC 401(K) PLAN	
b	Name of plan sponsor	MEDICORE, LLC	c EIN-PN 30-0852928-001
a	Plan name	ANNAPOLIS ACCOUNTING SERVICES 401(K) PLAN	
b	Name of plan sponsor	CJ BATTISTA, P.C. D/B/A ANNAPOLIS ACCOUNTING SERVICES	c EIN-PN 52-2248341-001
a	Plan name	ANTELOPE VALLEY 401(K) PLAN	
b	Name of plan sponsor	ANTELOPE VALLEY 401(K) PLAN	c EIN-PN 95-4056336-002
a	Plan name	CRIGHTON PLASTICS, INC. 401(K) PLAN	
b	Name of plan sponsor	CRIGHTON PLASTICS, INC.	c EIN-PN 20-8109310-001
a	Plan name	HANSFORD PHARMACY SERVICES 401(K) PLAN	
b	Name of plan sponsor	HANSFORD PHARMACY SERVICES, LLC	c EIN-PN 20-0564615-001
a	Plan name	HARKRIDER, DEMYAN & RODWELL LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HARKRIDER, DEMYAN & RODWELL LLC	c EIN-PN 41-2067761-001
a	Plan name	HARLEY AUTOMOTIVE GROUP 401(K) PLAN	
b	Name of plan sponsor	HARLEY AUTOMOTIVE GROUP, INC.	c EIN-PN 41-1711881-001
a	Plan name	HARPREET SAINI DDS, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	HARPREET SAINI DDS, INC.	c EIN-PN 27-4236646-001
a	Plan name	RELIABLE INDUSTRIES, INC. EMPLOYEES 401(K) PLAN	
b	Name of plan sponsor	RELIABLE INDUSTRIES INC. OF NEW ORLEANS	c EIN-PN 72-0936490-001

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 RELIANT HEATING AND AIR CONDITIONING, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor RELIANT HEATING AND AIR CONDITIONING, INC.	c EIN-PN 75-2227744-001
a	Plan name UAW LOCAL 652 401(K) PLAN	
b	Name of plan sponsor UAW LOCAL 652	c EIN-PN 38-0893147-001
a	Plan name UBORA ENGINEERING & PLANNING RETIREMENT PLAN	
b	Name of plan sponsor UBORA ENGINEERING & PLANNING, INC	c EIN-PN 20-2459818-001
a	Plan name UCOPB, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor UNDERWOOD CHEVROLET OLDS PONTIAC BUICK	c EIN-PN 38-1887779-001
a	Plan name DAVE SCHMITT CONSTRUCTION COMPANY, INC PROFIT SHARING PLAN	
b	Name of plan sponsor DAVE SCHMITT CONSTRUCTION COMPANY, INC	c EIN-PN 42-0889038-001
a	Plan name DAVIDSEN EXCAVATING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DAVIDSEN EXCAVATING, INC.	c EIN-PN 26-2880639-001
a	Plan name HIGHPOINT SOLUTIONS, INC. PROFIT SHARING & 401(K) PLAN	
b	Name of plan sponsor HIGHPOINT SOLUTIONS, INC.	c EIN-PN 22-3462774-002
a	Plan name HILLMAN SECURITY 401(K) PLAN	
b	Name of plan sponsor HILLMAN SECURITY & FIRE TECHNOLOGIES	c EIN-PN 23-1996146-001
a	Plan name MIJA INDUSTRIES, INC. 401(K) PLAN	
b	Name of plan sponsor MIJA INDUSTRIES, INC.	c EIN-PN 04-2496402-001
a	Plan name ROBERT W. CRAVEN 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ROBERT W. CRAVEN, MD	c EIN-PN 91-1735437-001
a	Plan name ROBERT W. JANSEN, DDS & ASSOCIATES, P.C. RETIREMENT PLAN	
b	Name of plan sponsor ROBERT W. JANSEN, DDS & ASSOCIATES, P.C.	c EIN-PN 38-2712051-001
a	Plan name ROCKY'S HARDWARE, INC. 401(K) PLAN	
b	Name of plan sponsor ROCKY'S HARDWARE, INC.	c EIN-PN 04-2373758-001

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	VENANGO MACHINE PRODUCTS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	VENANGO MACHINE PRODUCTS	c EIN-PN 25-1261324-001
a	Plan name	VENTURE 401(K) PLAN	
b	Name of plan sponsor	VM SERVICES, INC.	c EIN-PN 77-0459829-222
a	Plan name	DELUCA HOMES, LP PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	DELUCA HOMES, LP	c EIN-PN 23-1892084-001
a	Plan name	DENNIS K. STOLLER, D.D.S., LTD. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DENNIS K. STOLLER, D.D.S., LTD.	c EIN-PN 37-1067546-003
a	Plan name	HOLMAN'S OF NEVADA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HOLMAN'S OF NEVADA	c EIN-PN 88-0142663-001
a	Plan name	VITECH 401(K) PLAN	
b	Name of plan sponsor	ZUKEN VITECH, INC.	c EIN-PN 54-1636539-001
a	Plan name	NEARTERM CORPORATION 401(K) PLAN	
b	Name of plan sponsor	NEARTERM CORPORATION	c EIN-PN 76-0531760-001
a	Plan name	NECA 401(K) PLAN	
b	Name of plan sponsor	NATIONAL ENTERTAINMENT COLLECTIBLES ASSOCIATION, INC.	c EIN-PN 22-3479934-001
a	Plan name	NEESE 401(K)	
b	Name of plan sponsor	NEESE HEATING & AIR CONDITIONING INC.	c EIN-PN 58-2005554-001
a	Plan name	BEERMAN PRECISION, INC. 401(K) PLAN	
b	Name of plan sponsor	BEERMAN PRECISION, INC.	c EIN-PN 72-0519232-001
a	Plan name	BEHRMANN MEAT & PROCESSING, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	BEHRMANN MEAT & PROCESSING, INC	c EIN-PN 37-0920912-001
a	Plan name	DR. TROY A. HEUER SAFE HARBOR 401(K) PLAN	
b	Name of plan sponsor	DR. TROY A. HEUER	c EIN-PN 23-2724478-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
a	Plan name	DRILLING & PRODUCTION CO. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	DRILLING & PRODUCTION CO.
c	EIN-PN	95-0803480-001
a	Plan name	DRUID HILLS GOLF CLUB 401(K) PLAN
b	Name of plan sponsor	DRUID HILLS GOLF CLUB
c	EIN-PN	58-0225900-001
a	Plan name	INNOVATIVE TURNAROUND CONTROLS 401(K) PLAN
b	Name of plan sponsor	INNOVATIVE TURNAROUND CONTROLS
c	EIN-PN	20-2435857-001
a	Plan name	INSTITUTE OF INFORMATION TECHNOLOGY, INC. 401(K) PLAN
b	Name of plan sponsor	INSTITUTE OF INFORMATION TECHNOLOGY, INC.
c	EIN-PN	90-0014215-001
a	Plan name	SEMILAB USA 401(K) PLAN
b	Name of plan sponsor	SEMILAB USA LLC
c	EIN-PN	27-0347663-001
a	Plan name	WESTERN SHEET METAL, INC. EMPLOYEE PROFIT SHARING PLAN
b	Name of plan sponsor	WESTERN SHEET METAL, INC.
c	EIN-PN	87-0296587-001
a	Plan name	BIO MEDIC CORPORATION 401(K) PLAN
b	Name of plan sponsor	MARYLAND PLASTICS, INC.
c	EIN-PN	52-1636609-002
a	Plan name	E-SAFE TECHNOLOGIES, LLC 401(K) PLAN
b	Name of plan sponsor	E-SAFE TECHNOLOGIES, LLC
c	EIN-PN	27-3784047-001
a	Plan name	EARLEY & ASSOCIATES, INC. 401(K) RETIREMENT PLAN
b	Name of plan sponsor	EARLEY & ASSOCIATES, INC.
c	EIN-PN	38-3480813-001
a	Plan name	IOWA CANCER SPECIALISTS, P.C. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	IOWA CANCER SPECIALISTS, P.C.
c	EIN-PN	06-1666841-003
a	Plan name	SHANACHIE ENTERTAINMENT CORP. 401(K) PLAN
b	Name of plan sponsor	SHANACHIE ENTERTAINMENT CORP.
c	EIN-PN	13-2986258-001
a	Plan name	SHANNON CHEMICAL CORPORATION 401(K) PLAN
b	Name of plan sponsor	SHANNON CHEMICAL CORPORATION
c	EIN-PN	23-1856793-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
a	Plan name	SHEPHERD DATA SERVICES, INC. 401(K) SAVINGS PLAN
b	Name of plan sponsor	SHEPHERD DATA SERVICES, INC.
c	EIN-PN	46-0469044-001
a	Plan name	WMX LOGISTICS, INC. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	WMX LOGISTICS
c	EIN-PN	82-0570015-001
a	Plan name	WOLFE TECH 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	WOLFE TECH DEVELOPMENT CORPORATION II
c	EIN-PN	33-0940914-001
a	Plan name	BRICK CITY PRIMARY CARE PLLC 401(K) PLAN
b	Name of plan sponsor	BRICK CITY PRIMARY CARE
c	EIN-PN	26-4778038-001
a	Plan name	BRIGHT SERVICES RETIREMENT SAVINGS PLAN
b	Name of plan sponsor	BRIGHT PERSONNEL & BUSINESS CONSULTANTS, INC.
c	EIN-PN	54-1189236-001
a	Plan name	BRISTOL BROADCASTING CO. INC. 401(K) AND PROFIT SHARING PLAN
b	Name of plan sponsor	BRISTOL BROADCASTING CO., INC.
c	EIN-PN	54-0491651-001
a	Plan name	BRITTON INDUSTRIES, INC. 401(K) PLAN
b	Name of plan sponsor	BRITTON INDUSTRIES, INC.
c	EIN-PN	22-3769860-001
a	Plan name	ELM HEATING AND COOLING, INC. PROFIT SHARING PLAN
b	Name of plan sponsor	ELM HEATING & COOLING, INC.
c	EIN-PN	36-4021033-001
a	Plan name	EMBER, LLC 401(K) PLAN
b	Name of plan sponsor	EMBER, LLC
c	EIN-PN	42-1760276-001
a	Plan name	JENKINS AUTOMOTIVE, INC. 401(K)/PROFIT SHARING PLAN
b	Name of plan sponsor	JENKINS AUTOMOTIVE, INC.
c	EIN-PN	52-1205731-001
a	Plan name	JENKINS ENTERPRISES 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	JENKINS ENTERPRISES
c	EIN-PN	88-0191006-001
a	Plan name	OHIO COUNCIL OF RETAIL MERCHANTS 401(K) PLAN
b	Name of plan sponsor	OHIO COUNCIL OF RETAIL MERCHANTS
c	EIN-PN	31-4269320-002

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
a	Plan name	OK MEDIA SOLUTIONS INC. PROFIT SHARING PLAN
b	Name of plan sponsor	OK MEDIA SOLUTIONS, INC.
c	EIN-PN	45-2633274-001
a	Plan name	OKMULGEE PEDIATRICS 401(K) RETIREMENT PLAN
b	Name of plan sponsor	OKMULGEE PEDIATRICS
c	EIN-PN	73-1473375-001
a	Plan name	SONOMA GRAPHIC PRODUCTS 401(K) PLAN
b	Name of plan sponsor	SONOMA GRAPHIC PRODUCTS
c	EIN-PN	68-0441691-001
a	Plan name	C.C. CONSTRUCTION, INC. 401(K) AND PREVAILING WAGE PLAN
b	Name of plan sponsor	C.C. CONSTRUCTION, INC.
c	EIN-PN	04-2903497-222
a	Plan name	C.J.M. LIGHTING SERVICE, INC. 401(K) PLAN
b	Name of plan sponsor	C.J.M ELECTRIC & LIGHTING SERVICE, INC.
c	EIN-PN	33-0393497-001
a	Plan name	EXECUTIVE PROPERTY MANAGEMENT 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	EXECUTIVE PROPERTY MANAGEMENT
c	EIN-PN	22-2398215-001
a	Plan name	EYE CARE OF MAINE PROFIT SHARING PLAN
b	Name of plan sponsor	EYE CARE OF MAINE, P.A.
c	EIN-PN	01-0316462-004
a	Plan name	F.A. PEINADO, LLC 401(K) PLAN
b	Name of plan sponsor	F.A. PEINADO, LLC
c	EIN-PN	77-0647820-001
a	Plan name	JTI ELECTRICAL INSTRUMENTATION 401(K) RETIREMENT PLAN
b	Name of plan sponsor	JTI ELECTRICAL & INSTRUMENTATION, LLC
c	EIN-PN	80-0927449-001
a	Plan name	K4 SOLUTIONS, INC. 401(K) PLAN
b	Name of plan sponsor	K4 SOLUTIONS, INC.
c	EIN-PN	54-2041084-001
a	Plan name	STARKE MACHINE COMPANY 401(K) PLAN
b	Name of plan sponsor	STARKE MACHINE COMPANY
c	EIN-PN	75-1710418-001
a	Plan name	STATE EMPLOYEES ASSOCIATION OF NORTH CAROLINA, INC. RETIREMENT PLAN
b	Name of plan sponsor	STATE EMPLOYEES ASSOCIATION OF NORTH CAROLINA
c	EIN-PN	58-1575076-001

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	FINELINES SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor	KSG ENTERPRISES, INC.	c EIN-PN 04-3291695-001
a	Plan name	CARROLL ACE HARDWARE 401(K) PLAN	
b	Name of plan sponsor	CARROLL ACE HARDWARE	c EIN-PN 42-1461838-001
a	Plan name	CARTER STREET CORPORATION EMPLOYEE 401(K) SAVINGS PLAN	
b	Name of plan sponsor	CARTER STREET CORPORATION	c EIN-PN 62-1125122-001
a	Plan name	KNOWLOGY GOLDMINE	
b	Name of plan sponsor	KNOWLOGY CORPORATION	c EIN-PN 13-3848008-001
a	Plan name	KOBER/HANSSEN/MITCHELL ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KOBER/HANSSEN/MITCHELL ARCHITECTS	c EIN-PN 99-0237714-001
a	Plan name	KONISHI DENTAL LABORATORY, INC. RETIREMENT 401(K) PLAN	
b	Name of plan sponsor	KONISHI DENTAL LABORATORY, INC.	c EIN-PN 95-3962089-003
a	Plan name	PAUL E. ANTALIK, MD, PC 401(K) PLAN	
b	Name of plan sponsor	PAUL E. ANTALIK, MD, P.C.	c EIN-PN 25-1347137-001
a	Plan name	SURGEONS CHOICE MEDICAL CENTER 401(K) PLAN AND TRUST	
b	Name of plan sponsor	SURGEONS CHOICE MEDICAL CENTER	c EIN-PN 38-3162435-001
a	Plan name	FORGE TECH, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FORGE TECH, INC.	c EIN-PN 22-3721848-001
a	Plan name	CENTENNIAL TECHNOLOGIES, INC. PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	CENTENNIAL TECHNOLOGIES, INC.	c EIN-PN 38-2164329-001
a	Plan name	LAKOTA CONTRACTING, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	LAKOTA CONTRACTING, INC.	c EIN-PN 26-0060538-001
a	Plan name	TEAM NEXT LEVEL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TEAM NEXT LEVEL, INC. DBA DOMINO'S PIZZA	c EIN-PN 81-4118651-001

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	TEC ELECTRICAL CONTRACTING, INC. 401(K) PLAN	
b	Name of plan sponsor	TEC ELECTRICAL CONTRACTING, INC	c EIN-PN 46-0761832-001
a	Plan name	WHITLOCK PLUMBING AND HEATING, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	WHITLOCK PLUMBING AND HEATING, INC.	c EIN-PN 54-1282116-001
a	Plan name	AXSUN, CORP. 401(K) PLAN	
b	Name of plan sponsor	AXSUN, CORP.	c EIN-PN 99-0376382-001
a	Plan name	AXXIOME AMERICAS, INC. RETIREMENT PLAN	
b	Name of plan sponsor	AXXIOME AMERICAS, INC.	c EIN-PN 74-3213150-001
a	Plan name	BENJAMIN DEL VENTO, P.A. PROFIT SHARING PLAN	
b	Name of plan sponsor	BENJAMIN DEL VENTO, P.A.	c EIN-PN 22-1943968-001
a	Plan name	BIRMINGHAM PODIATRY, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BIRMINGHAM PODIATRY, P.C.	c EIN-PN 63-0826296-002
a	Plan name	BLACK DOG SALVAGE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BDS HOLDINGS, INC.	c EIN-PN 54-1968963-001
a	Plan name	BSB RETIREMENT READINESS 401(K) PLAN	
b	Name of plan sponsor	THE BIPPUS STATE BANK	c EIN-PN 35-0180140-001
a	Plan name	BUCHHOLZ TRANSPORT 401(K) & PSP	
b	Name of plan sponsor	BUCHHOLZ TRANSPORT INC.	c EIN-PN 38-2497552-001
a	Plan name	CALIFORNIA BOX COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CALIFORNIA BOX COMPANY	c EIN-PN 95-3901917-002
a	Plan name	CARVER FINANCIAL CORPORATION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	CARVER FINANCIAL CORPORATION	c EIN-PN 20-0397876-001
a	Plan name	CLAYTON PHARMACY SERVICES 401(K) PLAN	
b	Name of plan sponsor	CLAYTON PHARMACY SERVICES	c EIN-PN 45-4098818-001

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	CLEARBROOK, LLC 401(K) PLAN	
b	Name of plan sponsor	CLEARBROOK LLC	c EIN-PN 63-1209080-001
a	Plan name	COLLEGIUM HOLDINGS, INC. 401(K) PLAN	
b	Name of plan sponsor	COLLEGIUM HOLDINGS, INC.	c EIN-PN 22-3221879-001
a	Plan name	COOLING & HERBERS PROFIT SHARING & 401(K) PLAN	
b	Name of plan sponsor	COOLING & HERBERS, P.C.	c EIN-PN 43-1093669-001
a	Plan name	CROSSWAY ENTERPRISES, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CROSSWAY ENTERPRISES, LLC	c EIN-PN 20-2024197-001
a	Plan name	CROY CONTRACTING, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	CROY CONTRACTING, INC.	c EIN-PN 54-1616963-001
a	Plan name	CRYSTALASER PROFIT SHARING PLAN	
b	Name of plan sponsor	CRYSTALASER	c EIN-PN 86-0889160-002
a	Plan name	CTS PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor	CTS, INC.	c EIN-PN 36-4198749-001
a	Plan name	DBM ENGINEERING, P.C. 401(K) PLAN	
b	Name of plan sponsor	DBM ENGINEERING, PC	c EIN-PN 20-2917025-001
a	Plan name	DERMATOLOGY ALLERGY 401(K) PLAN	
b	Name of plan sponsor	DERMATOLOGY ALLERGY GENERAL PHYSICIANS OF OHIO, INC.	c EIN-PN 31-1027818-001
a	Plan name	DSP RETIREMENT PLAN	
b	Name of plan sponsor	DAVE SOLTWISCH PLUMBING, INC.	c EIN-PN 36-3485159-001
a	Plan name	EASTERN RADIOLOGY ASSOCIATES PC 401(K) PLAN	
b	Name of plan sponsor	EASTERN RADIOLOGY ASSOCIATES PC	c EIN-PN 81-0306627-001
a	Plan name	ENGELHARDT DAIRY OF WISCONSIN, LLC 401(K) PLAN	
b	Name of plan sponsor	ENGELHARDT DAIRY OF WISCONSIN, LLC	c EIN-PN 45-2174947-001

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 F.H. DAILEY CHEVROLET 401(K) PLAN	
b	Name of plan sponsor INFINITE VELOCITY AUTOMOTIVE, INC. DBA F.H. DAILEY CHEVROLET	c EIN-PN 45-3126103-001
a	Plan name FAIRMONT DESIGNS RETIREMENT PLAN	
b	Name of plan sponsor CAMBIUM BUSINESS GROUP, INC. DBA FAIRMONT DESIGNS	c EIN-PN 94-2930113-001
a	Plan name FAIRWAY MARKET III 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor FAIRWAY MARKET III	c EIN-PN 77-0084733-001
a	Plan name FISCHER CUNNANE & ASSOCIATES LTD. TAX FAVORED SAVINGS PLAN	
b	Name of plan sponsor FISCHER CUNNANE & ASSOCIATES LTD.	c EIN-PN 23-3060583-001
a	Plan name FOSTER THOMAS RETIREMENT PLAN	
b	Name of plan sponsor FOSTER THOMAS, INC.	c EIN-PN 52-1826441-001
a	Plan name FOUNDATION FOR INTERNATIONAL SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor FOUNDATION FOR INTERNATIONAL SERVICES, INC.	c EIN-PN 91-1300363-001
a	Plan name GIBSON OVERSEAS, INC. 401(K) PLAN	
b	Name of plan sponsor GIBSON OVERSEAS, INC.	c EIN-PN 95-3393699-002
a	Plan name GSI CORPORATION 401(K) PLAN & TRUST	
b	Name of plan sponsor GSI CORPORATION	c EIN-PN 52-0809975-001
a	Plan name HISTORIC FAMILY PHYSICIANS 401(K) PLAN	
b	Name of plan sponsor HISTORIC FAMILY PHYSICIANS, P.C.	c EIN-PN 27-0357836-777
a	Plan name HORSHAM SQUARE PHARMACY, INC. 401K PLAN	
b	Name of plan sponsor HORSHAM SQUARE PHARMACY, INC.	c EIN-PN 23-2409251-002
a	Plan name INTERFAITH NEIGHBORS, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor INTERFAITH NEIGHBORS, INC.	c EIN-PN 22-2896129-001
a	Plan name IRONTITE PRODUCTS INC. EMPLOYEES SAVINGS & INVESTMENT PLAN	
b	Name of plan sponsor IRONTITE	c EIN-PN 42-1500949-001

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	ISPACE, INC. 401(K) PLAN	
b	Name of plan sponsor	ISPACE, INC.	c EIN-PN 95-4833855-001
a	Plan name	JESSICA R. BENTOSKI, DDS 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	JESSICA R. BENTOSKI, DDS PLLC	c EIN-PN 46-4379759-001
a	Plan name	JIM CRAWFORD CONSTRUCTION COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	JIM CRAWFORD CONSTRUCTION COMPANY, INC.	c EIN-PN 77-0072198-001
a	Plan name	JOE HURLEY 401(K) PLAN	
b	Name of plan sponsor	JOE HURLEY, INC.	c EIN-PN 22-3237676-001
a	Plan name	KAPOOR ENTERPRISES, INC. 401(K) PLAN	
b	Name of plan sponsor	KAPOOR ENTERPRISES, INC.	c EIN-PN 77-0374359-001
a	Plan name	KAWANA & GONG, LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KAWANA & GONG, LLP	c EIN-PN 20-0427747-001
a	Plan name	KC SALLEY 401(K) PLAN	
b	Name of plan sponsor	OLER RELO ONE LTD.	c EIN-PN 20-4736622-001
a	Plan name	KEEL ENTERPRISES OF LA LLC 401(K) PLAN	
b	Name of plan sponsor	KEEL ENTERPRISES OF LA LLC	c EIN-PN 72-1158560-001
a	Plan name	KOSTER INSURANCE AGENCY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KOSTER INSURANCE AGENCY, INC.	c EIN-PN 04-3244788-001
a	Plan name	KRADLE TO KINDERGARTEN RETIREMENT AND 401(K) PLAN	
b	Name of plan sponsor	KRADLE TO KINDERGARTEN, INC.	c EIN-PN 22-3406810-001
a	Plan name	LATITUDE 33 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LATITUDE 33 PLANNING & ENGINEERING	c EIN-PN 33-0582561-001
a	Plan name	LYONS GROUP 401(K) PLAN	
b	Name of plan sponsor	LYONS GROUP	c EIN-PN 04-2707878-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
a	Plan name	MANAGED HEALTHCARE UNLIMITED, INC. 401(K) PLAN
b	Name of plan sponsor	MANAGED HEALTHCARE UNLIMITED, INC.
c	EIN-PN	95-4587291-001
a	Plan name	MANAGEMENT MATERIALS, INC. PROFIT SHARING AND 401(K) PLAN
b	Name of plan sponsor	MANAGEMENT MATERIALS INC.
c	EIN-PN	38-2412976-001
a	Plan name	MANUFACTURING SOLUTIONS, INC. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	MANUFACTURING SOLUTIONS, INC.
c	EIN-PN	48-1180359-001
a	Plan name	MAYS OCHOA RETIREMENT PLAN
b	Name of plan sponsor	MAYS CHEMICAL COMPANY OF PUERTO RICO, INC.
c	EIN-PN	98-0215646-001
a	Plan name	MELTON, ESPY & WILLIAMS P.C. PROFIT SHARING PLAN
b	Name of plan sponsor	MELTON, ESPY & WILLIAMS P.C.
c	EIN-PN	63-0720022-001
a	Plan name	MEMBERS 1ST CREDIT UNION CAPITAL ACCUMULATION PLAN
b	Name of plan sponsor	MEMBERS 1ST CREDIT UNION
c	EIN-PN	43-6032141-033
a	Plan name	MILILANI PHYSICAL THERAPY, LLC 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	MILILANI PHYSICAL THERAPY, LLC
c	EIN-PN	91-6551087-001
a	Plan name	NOBLE BANK 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	NOBLE BANK & TRUST
c	EIN-PN	20-3340543-001
a	Plan name	NORTH AMERICAN FOOD PROFIT SHARING/401(K) PLAN
b	Name of plan sponsor	NORTH AMERICAN FOOD DISTRIBUTING CO., INC.
c	EIN-PN	94-1717567-001
a	Plan name	NORTH AMERICAN WARHORSE 401(K) PLAN
b	Name of plan sponsor	NORTH AMERICAN WARHORSE, INC.
c	EIN-PN	23-3047289-001
a	Plan name	NORTH ATLANTA PEDIATRIC ASSOCIATES, P.C. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	NORTH ATLANTA PEDIATRIC ASSOCIATES, P.C.
c	EIN-PN	58-1633173-777
a	Plan name	ON TIME & RIGHT, INC. 401(K) PLAN
b	Name of plan sponsor	ON TIME & RIGHT, INC.
c	EIN-PN	02-0585740-001

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	P.S. GREETINGS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	P.S. GREETINGS, INC.	c EIN-PN 36-2995710-001
a	Plan name	PBHK, INC. RETIREMENT PLAN	
b	Name of plan sponsor	PBHK, INC.	c EIN-PN 99-0306811-001
a	Plan name	PRESTIGE RESIDENTIAL CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor	PRESTIGE RESIDENTIAL CONSTRUCTION	c EIN-PN 91-1366230-001
a	Plan name	PRIMARY MECHANICAL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PRIMARY MECHANICAL, INC.	c EIN-PN 33-0964975-001
a	Plan name	PROFESSIONAL PAINT CENTER, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PROFESSIONAL PAINT CENTER, INC.	c EIN-PN 94-1731587-001
a	Plan name	PROFUNDUS HOLDINGS, INC. DBA AUDLEY FARM RETIREMENT PLAN	
b	Name of plan sponsor	PROFUNDUS HOLDINGS, INC. DBA AUDLEY FARM	c EIN-PN 13-3140621-001
a	Plan name	PROGRESSIVE TECHNOLOGY, INC. 401(K) PLAN	
b	Name of plan sponsor	PROGRESSIVE TECHNOLOGY, INC.	c EIN-PN 68-0229180-001
a	Plan name	PROJECT HOPE BOSTON, INC. RETIREMENT PLAN	
b	Name of plan sponsor	PROJECT HOPE BOSTON, INC.	c EIN-PN 04-2748880-001
a	Plan name	RAFAEL BENITEZ CARRILLO, INC. CODA PROFIT SHARING PLAN	
b	Name of plan sponsor	RAFAEL BENITEZ CARRILLO, INC.	c EIN-PN 66-0213972-002
a	Plan name	REPRODUCTIVE MEDICINE INSTITUTE, LLC PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	REPRODUCTIVE MEDICINE INSTITUTE, LLC	c EIN-PN 27-1248611-001
a	Plan name	RODMAN & RODMAN 401(K) PLAN	
b	Name of plan sponsor	RODMAN & RODMAN, LLC	c EIN-PN 84-1098791-001
a	Plan name	RON WILLIAMS CONSTRUCTION, INC. 401(K) PLAN	
b	Name of plan sponsor	RON WILLIAMS CONSTRUCTION, INC.	c EIN-PN 72-1296459-001

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	ROSHER ELECTRIC COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	ROSHER ELECTRIC COMPANY, INC.	c EIN-PN 63-0626370-001
a	Plan name	SENIOR CITIZENS NURSING HOME 401(K)/PROFIT SHARING PLAN	
b	Name of plan sponsor	SENIOR CITIZENS NURSING HOME, INC.	c EIN-PN 56-0929049-001
a	Plan name	SENSOR MANUFACTURING COMPANY 401(K) PLAN	
b	Name of plan sponsor	SENSOR MANUFACTURING COMPANY	c EIN-PN 38-2140109-001
a	Plan name	SEQUEL CONTRACTORS INC. FLEXIBLE 401(K) PLAN	
b	Name of plan sponsor	SEQUEL CONTRACTORS, INC.	c EIN-PN 95-4301424-002
a	Plan name	SHERIDAN SHEET METAL COMPANY 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	SHERIDAN SHEET METAL COMPANY	c EIN-PN 41-1631666-001
a	Plan name	SIERRA WEST CONSTRUCTION, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SIERRA WEST CONSTRUCTION, INC.	c EIN-PN 68-0153330-002
a	Plan name	SOUTH SHORE HEARING CENTER, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SOUTH SHORE HEARING CENTER, LLC	c EIN-PN 47-4480052-001
a	Plan name	SOUTHEAST PET 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SEACO NATIONAL CORP DBA SOUTHEAST PET	c EIN-PN 58-1478160-001
a	Plan name	STEFURA ASSOCIATES RETIREMENT PLAN	
b	Name of plan sponsor	STEFURA ASSOCIATES, INC.	c EIN-PN 04-3544620-001
a	Plan name	TECO, INC. 401(K) PLAN	
b	Name of plan sponsor	TECO, INC.	c EIN-PN 52-2038001-001
a	Plan name	TEKTEAM 401(K) PLAN	
b	Name of plan sponsor	TECHTEAM, LLC DBA TEKTEAM	c EIN-PN 94-3335438-001
a	Plan name	TELECOMMUNICATIONS LAW PROFESSIONALS PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TELECOMMUNICATIONS LAW PROFESSIONALS PLLC	c EIN-PN 45-2585545-001

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 TELECOMMUNICATIONS MANAGEMENT SOLUTIONS, INC. 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor TELECOMMUNICATIONS MANAGEMENT SOLUTIONS, INC.	c EIN-PN 77-0000356-001
a	Plan name THE MJ SIMPSON CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE M.J. SIMPSON CORPORATION	c EIN-PN 65-0352263-001
a	Plan name ACSI 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor ADVANCED CONTROL SOLUTIONS, INC.	c EIN-PN 34-1711260-001
a	Plan name AD-IN, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor AD-IN, INC.	c EIN-PN 94-2546440-002
a	Plan name ADAX MACHINE CO., INC. 401(K) / PROFIT SHARING PLAN	
b	Name of plan sponsor ADAX MACHINE CO., INC.	c EIN-PN 04-3138263-001
a	Plan name ADJ OF STAMFORD, INC. 401(K) PLAN	
b	Name of plan sponsor ADJ OF STAMFORD, INC.	c EIN-PN 13-7562991-004
a	Plan name ADROIT USA, INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor ADROIT USA, INC.	c EIN-PN 27-2254964-001
a	Plan name THINK TWICE 401(K) PLAN	
b	Name of plan sponsor THINK TWICE, INC.	c EIN-PN 94-3246206-001
a	Plan name AEROSPACE & MARINE INTERNATIONAL CORPORATION 401(K) PLAN	
b	Name of plan sponsor AEROSPACE & MARINE INTERNATIONAL CORPORATION	c EIN-PN 77-0280581-001
a	Plan name AGUA CALIENTE BAND OF CAHUILLA INDIANS/SPA HOTEL & CASINO 401(K) PLAN	
b	Name of plan sponsor AGUA CALIENTE BAND OF CAHUILLA INDIANS	c EIN-PN 95-2549724-001
a	Plan name AHWATUKEE SPORTS & SPINE, PLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor AHWATUKEE SPORTS & SPINE, PLC	c EIN-PN 86-1002624-001
a	Plan name TRAVELERS RENTAL CO., INC. 401(K) PLAN	
b	Name of plan sponsor PARK SHUTTLE & FLY, INC.	c EIN-PN 04-2628087-001

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	TREE OF LIFE NURSERY PROFIT SHARING 401(K) SAVINGS PLAN	
b	Name of plan sponsor	TREE OF LIFE NURSERY	c EIN-PN 33-0940948-002
a	Plan name	TRI-AGG, INC. EMPLOYEE SAVINGS & RETIREMENT PLAN	
b	Name of plan sponsor	TRI-AGG, INC.	c EIN-PN 93-0896445-001
a	Plan name	AON RISK SOLUTIONS OF PUERTO RICO, INC. 1081.01(D) PLAN	
b	Name of plan sponsor	AON RISK SOLUTIONS OF PUERTO RICO, INC.	c EIN-PN 66-0274215-002
a	Plan name	VERMONT AEROSPACE 401(K) PLAN	
b	Name of plan sponsor	VERMONT AEROSPACE INDUSTRIES, LLC	c EIN-PN 03-3582117-001
a	Plan name	VERSA TOOL & DIE MACHINING & ENGINEERING, INC. 401(K) PLAN	
b	Name of plan sponsor	VERSA TOOL & DIE MACHINING & ENGINEERING, INC.	c EIN-PN 39-1085074-002
a	Plan name	AST SPORTS SCIENCE, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	AST SPORTS SCIENCE, INC.	c EIN-PN 64-0823871-001
a	Plan name	ATLANTIC AND PACIFIC FREIGHTWAYS, INC. 401(K) PLAN	
b	Name of plan sponsor	ATLANTIC AND PACIFIC FREIGHTWAYS, INC.	c EIN-PN 93-0984994-001
a	Plan name	ATLANTIC CORRUGATED BOX, INC. 401(K) PLAN	
b	Name of plan sponsor	ATLANTIC CORRUGATED BOX, INC.	c EIN-PN 54-1297441-001
a	Plan name	ATLANTIC MANAGEMENT CENTER, INC. 401(K) PLAN	
b	Name of plan sponsor	ATLANTIC MANAGEMENT CENTER, INC.	c EIN-PN 54-1260528-001
a	Plan name	VOLAC, INC. 401(K) PLAN	
b	Name of plan sponsor	VOLAC, INC.	c EIN-PN 51-0375769-001
a	Plan name	VOLENTE INSURANCE PARTNERS LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	VOLENTE INSURANCE PARTNERS, LLC	c EIN-PN 75-3204608-001
a	Plan name		
b	Name of plan sponsor		c EIN-PN

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan LOOMIS SAYLES BOND RET OPT	B Three-digit plan number (PN) ▶ 150
C Plan sponsor's name as shown on line 2a of Form 5500 TRANSAMERICA LIFE INSURANCE COMPANY	D Employer Identification Number (EIN) 39-0989781

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.

	(a) Beginning of Year	(b) End of Year
Assets		
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)	587342 687926
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1346877 1241419
(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)	63213616 64372740
(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)	
(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)	
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	
(15) Other	1c(15)	

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	65147835	66302085
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	124219	9714
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	124219	9714
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	65023616	66292371

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)		
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
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)		
(F) Other.....	2b(1)(F)	2886819	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		2886819
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)	543264	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		543264
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	-1230381	
(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)	2504767	
(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)		
(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)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		4704469

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)		
(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)		
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)	798364	
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(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)		798364
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		798364

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		3906105
l Transfers of assets:			
(1) To this plan.....	2l(1)		8629938
(2) From this plan	2l(2)		11267288

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:

(2) EIN:

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?			
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)

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 _____.