

<p><b>Form 5500</b></p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p>	<p><b>Annual Return/Report of Employee Benefit Plan</b></p> <p>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).</p> <p>▶ <b>Complete all entries in accordance with the instructions to the Form 5500.</b></p>	<p>OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: 24pt; font-weight: bold;">2024</p> <hr/> <p><b>This Form is Open to Public Inspection</b></p>
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**Part I Annual Report Identification Information**  
 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**

<p><b>1a</b> Name of plan <u>OPPENHEIMER GLOBAL RET OPT</u></p>	<p><b>1b</b> Three-digit plan number (PN) ▶ <u>216</u></p>
<p><b>2a</b> 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></p> <p><u>6400 C ST SW</u> <u>CEDAR RAPIDS, IA 52404</u></p>	<p><b>1c</b> Effective date of plan</p> <hr/> <p><b>2b</b> Employer Identification Number (EIN) <u>39-0989781</u></p> <p><b>2c</b> Plan Sponsor's telephone number <u>319-355-6449</u></p> <p><b>2d</b> Business code (see instructions)</p>

**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.

<b>SIGN HERE</b>		Date	
	Signature of plan administrator		Enter name of individual signing as plan administrator
<b>SIGN HERE</b>		Date	
	Signature of employer/plan sponsor		Enter name of individual signing as employer or plan sponsor
<b>SIGN HERE</b>	<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

<b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	<b>3b</b> Administrator's EIN  <b>3c</b> Administrator's telephone number  <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
<b>4</b> 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: <b>a</b> Sponsor's name <b>c</b> Plan Name	<b>4b</b> EIN  <b>4d</b> PN
<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b>
<b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ). <b>a(1)</b> Total number of active participants at the beginning of the plan year ..... <b>a(2)</b> Total number of active participants at the end of the plan year ..... <b>b</b> Retired or separated participants receiving benefits..... <b>c</b> Other retired or separated participants entitled to future benefits ..... <b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> ..... <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. .... <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> ..... <b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) ..... <b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) ..... <b>h</b> 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> <b>6a(1)</b> <b>6a(2)</b> <b>6b</b> <b>6c</b> <b>6d</b> <b>6e</b> <b>6f</b> <b>6g(1)</b> <b>6g(2)</b> <b>6h</b>
<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....	<b>7</b>

**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:

<b>9a</b> 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	<b>9b</b> 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)

<b>a Pension Schedules</b> (1) <input type="checkbox"/> <b>R</b> (Retirement Plan Information) (2) <input type="checkbox"/> <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input type="checkbox"/> <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary (4) <input type="checkbox"/> <b>DCG</b> (Individual Plan Information) – Number Attached _____ (5) <input type="checkbox"/> <b>MEP</b> (Multiple-Employer Retirement Plan Information)	<b>b General Schedules</b> (1) <input checked="" type="checkbox"/> <b>H</b> (Financial Information) (2) <input type="checkbox"/> <b>I</b> (Financial Information – Small Plan) (3) <input type="checkbox"/> <b>A</b> (Insurance Information) – Number Attached _____ (4) <input type="checkbox"/> <b>C</b> (Service Provider Information) (5) <input checked="" type="checkbox"/> <b>D</b> (DFE/Participating Plan Information) (6) <input type="checkbox"/> <b>G</b> (Financial Transaction Schedules)
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**Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)**

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**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.

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**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 \_\_\_\_\_

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**SCHEDULE D  
(Form 5500)**

Department of the Treasury  
Internal Revenue Service

Department of Labor  
Employee Benefits Security Administration

**DFE/Participating Plan Information**

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

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

**2024**

**This Form is Open to Public Inspection.**

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

<b>A</b> Name of plan <u>OPPENHEIMER GLOBAL RET OPT</u>	<b>B</b> Three-digit plan number (PN) ▶ <u>216</u>
<b>C</b> Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>TRANSAMERICA LIFE INSURANCE COMPANY</u>	<b>D</b> 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)

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
<b>a</b>	Plan name BANYAN EDUCATION CONSULTANCY USA, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor BANYAN EDUCATIONAL CONSULTANCY USA, LLC	<b>c</b> EIN-PN 84-1746095-001
<b>a</b>	Plan name ENVISION FOODS 401(K) PLAN	
<b>b</b>	Name of plan sponsor ENVISION FOODS, LLC	<b>c</b> EIN-PN 20-4278964-001
<b>a</b>	Plan name THE VALLEY FERTILIZER CHEMICAL CO, INC. 401K PLAN	
<b>b</b>	Name of plan sponsor THE VALLEY FERTILIZER CHEMICAL CO, INC.	<b>c</b> EIN-PN 54-0415185-002
<b>a</b>	Plan name BONE-A-PATREAT 401(K) PLAN	
<b>b</b>	Name of plan sponsor BONE-A-PATREAT	<b>c</b> EIN-PN 20-1319477-001
<b>a</b>	Plan name REGINA INTER-PARISH CATHOLIC EDUCATION CENTER 401(K) PLAN	
<b>b</b>	Name of plan sponsor REGINA INTER-PARISH CATHOLIC EDUCATION CENTER	<b>c</b> EIN-PN 42-0957166-001
<b>a</b>	Plan name TURNER TRANS LIFT, INC. PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor TURNER TRANS LIFT, INC.	<b>c</b> EIN-PN 26-0731612-001
<b>a</b>	Plan name BURLEIGH DENTAL, S.C. CASH OR DEFERRED PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor BURLEIGH DENTAL, S.C.	<b>c</b> EIN-PN 39-1170894-001
<b>a</b>	Plan name CAPITAL STEEL ERECTORS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor CAPITAL STEEL ERECTORS, INC.	<b>c</b> EIN-PN 27-1376167-001
<b>a</b>	Plan name CHERRY & WILLIAMS DDS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor CHERRY & WILLIAMS DDS, INC.	<b>c</b> EIN-PN 34-1319955-001
<b>a</b>	Plan name GORDON AND DESANTIS ORTHODONTICS LLC PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor GORDON AND DESANTIS ORTHODONTICS LLC	<b>c</b> EIN-PN 36-4513149-001
<b>a</b>	Plan name W & D IMPORTS, INC. PROFIT SHARING & 401(K) PLAN	
<b>b</b>	Name of plan sponsor W & D IMPORTS, INC.	<b>c</b> EIN-PN 22-2148916-003
<b>a</b>	Plan name MISSOURI JACK LLC & ILLINOIS JACK LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor MISSOURI JACK, LLC	<b>c</b> EIN-PN 45-2037527-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	SANCHEZ & AMADOR, LLP 401(K) PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor	SANCHEZ & AMADOR, LLP	<b>c</b> EIN-PN 95-4460273-001
<b>a</b>	Plan name	CONSERVATION FOUNDATION GC PLAN	
<b>b</b>	Name of plan sponsor	CONSERVATION FOUNDATION OF THE GULF COAST	<b>c</b> EIN-PN 20-0345249-001
<b>a</b>	Plan name	NAPD 401(K) PLAN	
<b>b</b>	Name of plan sponsor	NEW ADVANCES FOR PEOPLE WITH DISABILITIES	<b>c</b> EIN-PN 95-2630398-001
<b>a</b>	Plan name	NATURESCAPE 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	NATURESCAPE	<b>c</b> EIN-PN 03-0448406-001
<b>a</b>	Plan name	YOUR LOGISTICS CORP. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	YOUR LOGISTICS CORP.	<b>c</b> EIN-PN 83-2760497-001
<b>a</b>	Plan name	HOLIDAY POOLS OF WEST FLORIDA 401(K) PLAN	
<b>b</b>	Name of plan sponsor	HOLIDAY POOLS OF WEST FLORIDA, INC.	<b>c</b> EIN-PN 65-0546905-001
<b>a</b>	Plan name	ADVANCED COSMETIC RESEARCH LABORATORIES, INC. 401(K) AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ADVANCED COSMETIC RESEARCH LABORATORIES, INC	<b>c</b> EIN-PN 95-4493756-001
<b>a</b>	Plan name	ALPINE PHYSICAL THERAPY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DODGEWORKSPT, INC. DBA ALPINE PHYSICAL THERAPY	<b>c</b> EIN-PN 81-0535790-001
<b>a</b>	Plan name	AMBIO INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	AMBIO INC.	<b>c</b> EIN-PN 45-5506902-001
<b>a</b>	Plan name	AMBIOPHARM, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	AMBIOPHARM, INC.	<b>c</b> EIN-PN 22-3940281-001
<b>a</b>	Plan name	STINSON STATIONERS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	STINSON STATIONERS, INC.	<b>c</b> EIN-PN 95-3052095-001
<b>a</b>	Plan name	ANANT OPERATIONS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ANANT OPERATIONS, INC.	<b>c</b> EIN-PN 46-3991171-001

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.)		
<b>a</b>	Plan name ANDERSON PIPING COMPANY 401(K) PLAN	
<b>b</b>	Name of plan sponsor ANDERSON PIPING COMPANY, INC.	<b>c</b> EIN-PN 62-1199871-001
<b>a</b>	Plan name PEAK POWER, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor PEAK POWER, LLC	<b>c</b> EIN-PN 81-3169295-001
<b>a</b>	Plan name DRIVEN TO GIVE BACK MEDIA 401(K) PLAN	
<b>b</b>	Name of plan sponsor DRIVEN TO GIVE BACK MEDIA, LLC	<b>c</b> EIN-PN 84-3674774-001
<b>a</b>	Plan name MADISEN MAHER ARCHITECTS 401(K) PLAN	
<b>b</b>	Name of plan sponsor MADISEN MAHER ARCHITECTS, INC.	<b>c</b> EIN-PN 45-4762447-001
<b>a</b>	Plan name RINAUDO ENTERPRISES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor RINAUDO ENTERPRISES, INC.	<b>c</b> EIN-PN 59-3384145-001
<b>a</b>	Plan name GERKEN RENT-ALL 401(K) PLAN	
<b>b</b>	Name of plan sponsor GERKEN RENT-ALL, INC.	<b>c</b> EIN-PN 75-3082715-001
<b>a</b>	Plan name VALLEY NORTH DISTRIBUTING, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor VALLEY NORTH DISTRIBUTING, INC.	<b>c</b> EIN-PN 39-1711392-001
<b>a</b>	Plan name RUGS AS ART, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor RUGS AS ART, INC.	<b>c</b> EIN-PN 65-0261601-001
<b>a</b>	Plan name GRAPHIC WEST PACKAGING MACHINERY, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor GRAPHIC WEST PACKAGING MACHINERY, LLC	<b>c</b> EIN-PN 06-1622227-001
<b>a</b>	Plan name MERJIL'S STEEL FABRICATION, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor MERJIL'S STEEL FABRICATION, INC.	<b>c</b> EIN-PN 42-1732830-001
<b>a</b>	Plan name HALEIWA FAMILY DENTAL CENTER, LTD. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor HALEIWA FAMILY DENTAL CENTER, LTD.	<b>c</b> EIN-PN 99-0322411-001
<b>a</b>	Plan name HALLMARK CONSTRUCTION, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor HALLMARK CONSTRUCTION, INC.	<b>c</b> EIN-PN 38-2163727-001

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.)		
<b>a</b>	Plan name <b>MO-TECH CORPORATION 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MO-TECH CORPORATION</b>	<b>c</b> EIN-PN <b>47-0884754-001</b>
<b>a</b>	Plan name <b>HERZOG ROOFING, INC. 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>HERZOG ROOFING, INC.</b>	<b>c</b> EIN-PN <b>41-1380767-001</b>
<b>a</b>	Plan name <b>SHOEMAKER LUMBER CO. 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>SHOEMAKER LUMBER CO., INC.</b>	<b>c</b> EIN-PN <b>22-1756787-001</b>
<b>a</b>	Plan name <b>HOME INSTEAD SENIOR CARE 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BOKKER, INC DBA HOME INSTEAD SENIOR CARE</b>	<b>c</b> EIN-PN <b>45-2590810-001</b>
<b>a</b>	Plan name <b>DELAWARE ELECTRICAL CONTRACTORS, INC. 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>DELAWARE ELECTRICAL CONTRACTORS, INC.</b>	<b>c</b> EIN-PN <b>23-2016945-001</b>
<b>a</b>	Plan name <b>INTEGRATED TAX ACCOUNTING INC. 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>INTEGRATED TAX ACCOUNTING INC.</b>	<b>c</b> EIN-PN <b>81-0699291-001</b>
<b>a</b>	Plan name <b>INTEGRITY CONSTRUCTION &amp; DEVELOPMENT SERVICES, INC. 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>INTEGRITY CONSTRUCTION &amp; DEVELOPMENT SERVICES, INC.</b>	<b>c</b> EIN-PN <b>33-1168311-001</b>
<b>a</b>	Plan name <b>IRA PLAN PARTNERS LLC 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>IRA PLAN PARTNERS LLC</b>	<b>c</b> EIN-PN <b>46-4246162-001</b>
<b>a</b>	Plan name <b>ATLANTA OFFICE TECHNOLOGIES, INC. 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>ATLANTA OFFICE TECHNOLOGIES, INC.</b>	<b>c</b> EIN-PN <b>47-2600973-001</b>
<b>a</b>	Plan name <b>ATLANTIC GOLF AND TURF 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>ATLANTIC GOLF AND TURF LLC</b>	<b>c</b> EIN-PN <b>27-1400038-001</b>
<b>a</b>	Plan name <b>POPP EXCAVATING 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>POPP EXCAVATING</b>	<b>c</b> EIN-PN <b>84-4897634-001</b>
<b>a</b>	Plan name <b>PORTWOOD FARMS 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>PORTWOOD FARMS</b>	<b>c</b> EIN-PN <b>77-0323294-001</b>

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
<b>a</b>	Plan name	BASSETT MIRROR COMPANY, INC. EMPLOYEE SAVINGS AND RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	BASSETT MIRROR COMPANY, INC.	<b>c</b> EIN-PN 54-0478011-002
<b>a</b>	Plan name	PROPERTIES TITLE, LLC 401K PLAN	
<b>b</b>	Name of plan sponsor	PROPERTIES TITLE, LLC	<b>c</b> EIN-PN 82-2623090-001
<b>a</b>	Plan name	THOMPSON SANITATION INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	THOMPSON SANITATION INC	<b>c</b> EIN-PN 20-5580339-001
<b>a</b>	Plan name	PALLA AG SERVICES, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PALLA AG SERVICES, LLC	<b>c</b> EIN-PN 81-1409263-001
<b>a</b>	Plan name	POWER HOLDINGS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	POWER HOLDINGS LLC	<b>c</b> EIN-PN 20-0711558-001
<b>a</b>	Plan name	PROSERVICE HAWAII 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PROSERVICE PACIFIC, LLC DBA PROSERVICE HAWAII	<b>c</b> EIN-PN 61-1582293-001
<b>a</b>	Plan name	SKS COMMUNICATIONS 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	SKS COMMUNICATIONS	<b>c</b> EIN-PN 57-1235666-001
<b>a</b>	Plan name	STEM CIDERS, LLC 401(K) PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor	STEM CIDERS, LLC	<b>c</b> EIN-PN 46-2031245-001
<b>a</b>	Plan name	TOTAL MEDICAL COMPLIANCE 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	TMCC, INC DBA TOTAL MEDICAL COMPLIANCE	<b>c</b> EIN-PN 56-1970120-001
<b>a</b>	Plan name	UNIQUE LAWN, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	UNIQUE LAWN, INC. DBA TRUGREEN	<b>c</b> EIN-PN 41-1346668-001
<b>a</b>	Plan name	WATERCENTRIC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	WATERCENTRIC, LLC	<b>c</b> EIN-PN 46-4173970-001
<b>a</b>	Plan name	WATERMAN BROTHERS CONSTRUCTION, INC. PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	WATERMAN BROTHERS CONSTRUCTION, INC.	<b>c</b> EIN-PN 36-3713511-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	WAYNE PALLA 401(K) PLAN	
<b>b</b>	Name of plan sponsor	WAYNE E. PALLA	<b>c</b> EIN-PN 95-2431917-001
<b>a</b>	Plan name	911 CELLULAR 401(K) PLAN	
<b>b</b>	Name of plan sponsor	911 CELLULAR LLC	<b>c</b> EIN-PN 46-2956466-001
<b>a</b>	Plan name	ADAMS COUNTY LIBRARY SYSTEM 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ADAMS COUNTY LIBRARY SYSTEM	<b>c</b> EIN-PN 23-1352002-002
<b>a</b>	Plan name	BLUE CLOUD SOLUTIONS, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	BLUE CLOUD SOLUTIONS, INC.	<b>c</b> EIN-PN 85-3966443-001
<b>a</b>	Plan name	BLUE EARTH DRUG 401(K) PLAN	
<b>b</b>	Name of plan sponsor	B.E. DRUG, INC. DBA BLUE EARTH DRUG	<b>c</b> EIN-PN 41-1968188-001
<b>a</b>	Plan name	BOYS & GIRLS CLUB OF HAWTHORNE 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	BOYS & GIRLS CLUB OF HAWTHORNE	<b>c</b> EIN-PN 23-7112349-001
<b>a</b>	Plan name	CHUZE FITNESS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	RACHAS, INC. DBA CHUZE FITNESS	<b>c</b> EIN-PN 26-2396678-001
<b>a</b>	Plan name	CREEKSIDE ORGANICS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CREEKSIDE ORGANICS, INC.	<b>c</b> EIN-PN 45-1558441-001
<b>a</b>	Plan name	ELECTRICAL WORKS, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ELECTRICAL WORKS, LLC	<b>c</b> EIN-PN 59-3666692-001
<b>a</b>	Plan name	FABIAN A RAMOS MD PLLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FABIAN A RAMOS MD PLLC	<b>c</b> EIN-PN 20-1861799-001
<b>a</b>	Plan name	FIELD SERVICES 401(K) PLAN	
<b>b</b>	Name of plan sponsor	AGRONOMIC FIELD SERVICES, LLC DBA FIELD SERVICES LLC	<b>c</b> EIN-PN 68-0625733-001
<b>a</b>	Plan name	GAVRILOV LAW CORPORATION 401(K) PROFIT SHARING & TRUST	
<b>b</b>	Name of plan sponsor	GAVRILOV LAW CORPORATION	<b>c</b> EIN-PN 27-0151979-001

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.)	
<b>a</b>	Plan name GREAT LAKES ENERGY NON-UNION 401(K) PLAN	
<b>b</b>	Name of plan sponsor GREAT LAKES ENERGY COOPERATIVE, INC.	<b>c</b> EIN-PN 38-3321875-001
<b>a</b>	Plan name GREAT LAKES ENERGY UNION 401(K) PLAN	
<b>b</b>	Name of plan sponsor GREAT LAKES ENERGY COOPERATIVE, INC.	<b>c</b> EIN-PN 38-3321875-003
<b>a</b>	Plan name INTERNATIONAL UNION OF POLICE ASSOCIATIONS AFL-CIO 401(K) PLAN	
<b>b</b>	Name of plan sponsor INTERNATIONAL UNION OF POLICE ASSOCIATIONS AFL-CIO	<b>c</b> EIN-PN 52-1139564-001
<b>a</b>	Plan name KENNIE'S MARKETS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor KENNIE'S MARKETS, INC.	<b>c</b> EIN-PN 23-1579478-001
<b>a</b>	Plan name LANDSCAPING SUN VALLEY, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor LANDSCAPING SUN VALLEY, INC. DBA TERRA LANDSCAPES	<b>c</b> EIN-PN 26-2425399-001
<b>a</b>	Plan name A.K.O. INC. 401(K) & PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor A.K.O. INC.	<b>c</b> EIN-PN 06-0249990-001
<b>a</b>	Plan name COMMONWEALTH TRUST COMPANY 401(K) PLAN	
<b>b</b>	Name of plan sponsor COMMONWEALTH TRUST COMPANY	<b>c</b> EIN-PN 51-0009125-001
<b>a</b>	Plan name JACK PIXLEY SWEEPS 401(K) PLAN	
<b>b</b>	Name of plan sponsor JACK PIXLEY SWEEPS	<b>c</b> EIN-PN 41-1374763-002
<b>a</b>	Plan name MORELAND PLAZA PHARMACY, INC. PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor MORELAND PLAZA PHARMACY, INC.	<b>c</b> EIN-PN 39-0968183-001
<b>a</b>	Plan name PARK SIDE FINANCIAL CREDIT UNION 401(K) PLAN & TRUST	
<b>b</b>	Name of plan sponsor PARK SIDE FINANCIAL CREDIT UNION	<b>c</b> EIN-PN 23-7155544-001
<b>a</b>	Plan name TOYS FOR TRUCKS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor TOYS FOR TRUCKS, INC.	<b>c</b> EIN-PN 39-1646646-001
<b>a</b>	Plan name WINTERS, LLP. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor WINTERS, LLP	<b>c</b> EIN-PN 37-1366508-001

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.)	
<b>a</b>	Plan name <a href="#">ICONERGY LTD 401(K) PROFIT SHARING PLAN AND TRUST</a>	
<b>b</b>	Name of plan sponsor <a href="#">ICONERGY LTD</a>	<b>c</b> EIN-PN <a href="#">27-2414344-001</a>
<b>a</b>	Plan name <a href="#">NOVA AMP 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">NOVA ASSOCIATION MANAGEMENT PARTNERS, LLC</a>	<b>c</b> EIN-PN <a href="#">83-3585159-001</a>
<b>a</b>	Plan name <a href="#">PAUL MEYER ARCHITECTS, INC. 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">PAUL MEYER ARCHITECTS, INC.</a>	<b>c</b> EIN-PN <a href="#">41-1846160-001</a>
<b>a</b>	Plan name <a href="#">PRESTIGE ELECTRIC CO. OF FLORIDA, LLC 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">PRESTIGE ELECTRIC CO. OF FLORIDA, LLC</a>	<b>c</b> EIN-PN <a href="#">82-3714094-001</a>
<b>a</b>	Plan name <a href="#">R.L. BODEKER &amp; SONS, INC. RETIREMENT PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">R.L. BODEKER &amp; SONS, INC.</a>	<b>c</b> EIN-PN <a href="#">41-1379442-001</a>
<b>a</b>	Plan name <a href="#">RABB WATER SYSTEMS, INC. 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">RABB WATER SYSTEMS, INC.</a>	<b>c</b> EIN-PN <a href="#">35-1750694-001</a>
<b>a</b>	Plan name <a href="#">ALESIG CONSULTING 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">ALESIG CONSULTING</a>	<b>c</b> EIN-PN <a href="#">61-1591534-001</a>
<b>a</b>	Plan name <a href="#">BROADLEAF, INC. 401(K) PROFIT SHARING PLAN &amp; TRUST</a>	
<b>b</b>	Name of plan sponsor <a href="#">BROADLEAF, INC.</a>	<b>c</b> EIN-PN <a href="#">26-2561880-001</a>
<b>a</b>	Plan name <a href="#">COMPASS RETIREMENT CONSULTING GROUP, INC. 401(K) PROFIT SHARING PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">COMPASS RETIREMENT CONSULTING GROUP, INC.</a>	<b>c</b> EIN-PN <a href="#">20-4795685-001</a>
<b>a</b>	Plan name <a href="#">ENCOMPASS DESIGN 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">ENCOMPASS DESIGN INC</a>	<b>c</b> EIN-PN <a href="#">26-1677400-001</a>
<b>a</b>	Plan name <a href="#">GMS MINE REPAIR &amp; MAINTENANCE, INC. 401(K) PROFIT SHARING PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GMS MINE REPAIR &amp; MAINTENANCE, INC.</a>	<b>c</b> EIN-PN <a href="#">52-1908118-001</a>
<b>a</b>	Plan name <a href="#">MY FIRST MONTESSORI, INC. 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">MY FIRST MONTESSORI, INC.</a>	<b>c</b> EIN-PN <a href="#">80-0770264-001</a>

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.)	
<b>a</b>	Plan name PAUL NAFTALI, O.D., P.A. PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor PAUL NAFTALI, O.D., P.A.	<b>c</b> EIN-PN 22-3361281-001
<b>a</b>	Plan name PAVLIC VENDING SERVICE, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor PAVLIC VENDING SERVICE, INC.	<b>c</b> EIN-PN 39-1143309-001
<b>a</b>	Plan name PRISM CAPITAL MANAGEMENT RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor PRISM CAPITAL MANAGEMENT, LLC	<b>c</b> EIN-PN 27-0125515-001
<b>a</b>	Plan name SEVEN CORNERS PRINTING 401(K) PLAN	
<b>b</b>	Name of plan sponsor SEVEN CORNERS PRINTING COMPANY	<b>c</b> EIN-PN 41-0992291-001
<b>a</b>	Plan name SGI 401(K) PLAN	
<b>b</b>	Name of plan sponsor SGI	<b>c</b> EIN-PN 93-4216744-001
<b>a</b>	Plan name TRENT NEISEN, DDS, PLLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor TRENT NEISEN, DDS, PLLC	<b>c</b> EIN-PN 85-2718212-001
<b>a</b>	Plan name WRA ARCHITECTS, INC. 401K PLAN	
<b>b</b>	Name of plan sponsor WRA ARCHITECTS, INC	<b>c</b> EIN-PN 75-1084671-001
<b>a</b>	Plan name ALL GLASS & WINDOWS, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor ALL GLASS & WINDOWS, LLC	<b>c</b> EIN-PN 36-4845255-001
<b>a</b>	Plan name ALL INSURANCE AGENCY 401(K) PLAN	
<b>b</b>	Name of plan sponsor ALL INSURANCE AGENCY, INC.	<b>c</b> EIN-PN 39-1809610-001
<b>a</b>	Plan name ASCEND DENTAL SERVICES, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor ASCEND DENTAL SERVICES, LLC	<b>c</b> EIN-PN 83-2589578-001
<b>a</b>	Plan name BEST CLEANERS, INC. RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor BEST CLEANERS, INC.	<b>c</b> EIN-PN 06-1333413-001
<b>a</b>	Plan name CET & ASSOCIATES, LLC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor CET & ASSOCIATES, LLC	<b>c</b> EIN-PN 80-0660613-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	COMPLETELY FLOORED 401(K) PLAN	
<b>b</b>	Name of plan sponsor	BLAIGE CORPORATION DBA COMPLETELY FLOORED	<b>c</b> EIN-PN 20-3680924-001
<b>a</b>	Plan name	COMPOSITE HOLDINGS, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	COMPOSITE HOLDINGS, INC.	<b>c</b> EIN-PN 47-0769139-001
<b>a</b>	Plan name	CONCIERGE PHYSICAL THERAPY, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CONCIERGE PHYSICAL THERAPY, INC.	<b>c</b> EIN-PN 47-4420844-001
<b>a</b>	Plan name	ENTHUSIAST ENTERPRISE 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ENTHUSIAST ENTERPRISE	<b>c</b> EIN-PN 46-2378541-001
<b>a</b>	Plan name	GOGICK TECHNOLOGY CONSULTING, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	GOGICK TECHNOLOGY CONSULTING, LLC	<b>c</b> EIN-PN 82-3068700-001
<b>a</b>	Plan name	IED GROUP PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	IED GROUP, INC.	<b>c</b> EIN-PN 56-2303651-001
<b>a</b>	Plan name	JEFFREY A. WILBUR PLUMBING & HEATING, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	JEFFREY A. WILBUR PLUMBING & HEATING, INC.	<b>c</b> EIN-PN 25-1724402-001
<b>a</b>	Plan name	MCLEOD LAND SERVICES 401(K) PLAN 2	
<b>b</b>	Name of plan sponsor	MCLEOD LAND & EQUIPMENT, INC.	<b>c</b> EIN-PN 65-0810917-002
<b>a</b>	Plan name	CINDERELLA DIVINE INC. RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	CINDERELLA DIVINE, INC.	<b>c</b> EIN-PN 20-4533301-002
<b>a</b>	Plan name	LOUISVILLE LAW, PLLC	
<b>b</b>	Name of plan sponsor	LOUISVILLE LAW, PLLC	<b>c</b> EIN-PN 84-4442393-001
<b>a</b>	Plan name	MICHIGAN FENCE CO., INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	MICHIGAN FENCE CO., INC.	<b>c</b> EIN-PN 38-2266859-001
<b>a</b>	Plan name	WELLNESS LIFE CENTER, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	WELLNESS LIFE CENTER, LLC	<b>c</b> EIN-PN 45-2349447-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	ALLSTAR PLUMBERS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ALLSTAR PLUMBERS, INC.	<b>c</b> EIN-PN 26-0425473-001
<b>a</b>	Plan name	ALLURE MEDSPA 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ALLURE MEDSPA, LLC	<b>c</b> EIN-PN 46-6663339-001
<b>a</b>	Plan name	DAVID DAVIS ENTERPRISE, INC. T/A DAVIS ACURA 401K PLAN	
<b>b</b>	Name of plan sponsor	DAVID DAVIS ENTERPRISE, INC.	<b>c</b> EIN-PN 23-2439385-001
<b>a</b>	Plan name	FOUR STAR MECHANICAL 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	FOUR STAR MECHANICAL, INC.	<b>c</b> EIN-PN 31-1590413-001
<b>a</b>	Plan name	JSS ALMONDS, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	JSS ALMONDS, LLC	<b>c</b> EIN-PN 45-4443854-001
<b>a</b>	Plan name	JWC BUILDING SPECIALTIES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	JWC BUILDING SPECIALTIES, INC.	<b>c</b> EIN-PN 39-1569926-001
<b>a</b>	Plan name	LUBOVICH EXCAVATING, INC. RETIREMENT READINESS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	LUBOVICH EXCAVATING, INC.	<b>c</b> EIN-PN 35-1972657-001
<b>a</b>	Plan name	OMEGA BENEFIT STRATEGIES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	OMEGA BENEFIT STRATEGIES, INC.	<b>c</b> EIN-PN 83-1866543-001
<b>a</b>	Plan name	TEXAS SAFFIRE, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	TEXAS SAFFIRE, LLC	<b>c</b> EIN-PN 27-5482729-001
<b>a</b>	Plan name	BLOOSTON, MORDKOFKY, DICKENS & PRENDERGAST, LLP 401(K) PLAN	
<b>b</b>	Name of plan sponsor	BLOOSTON, MORDKOFKY, DICKENS & PRENDERGAST, LLP	<b>c</b> EIN-PN 52-1136273-001
<b>a</b>	Plan name	BNL INDUSTRIES, INC. 401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	BNL INDUSTRIES, INC.	<b>c</b> EIN-PN 06-1226220-001
<b>a</b>	Plan name	CALIFORNIA SIDECAR 401(K) PLAN	
<b>b</b>	Name of plan sponsor	LEISURE PRODUCTS, INC. DBA CALIFORNIA SIDECAR	<b>c</b> EIN-PN 33-0770432-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	CAM CONSTRUCTION & PAINTING 401(K) PLAN & TRUST	
<b>b</b>	Name of plan sponsor	CAM CONSTRUCTION & PAINTING INC.	<b>c</b> EIN-PN 45-5255646-001
<b>a</b>	Plan name	CERRONE OLDS-GMC TRUCK 401(K) PLAN	
<b>b</b>	Name of plan sponsor	AL CERRONE'S HARRIS AUTO SALES INC.	<b>c</b> EIN-PN 04-2608042-001
<b>a</b>	Plan name	CHAMPION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CHAMPION EMPLOYER SERVICES	<b>c</b> EIN-PN 35-2178929-333
<b>a</b>	Plan name	COLORADO SURGICAL AFFILIATES, LLC PROFIT-SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	COLORADO SURGICAL AFFILIATES, LLC	<b>c</b> EIN-PN 81-3228396-001
<b>a</b>	Plan name	CULVER GROUP PROFIT SHARING & 401(K) PLAN	
<b>b</b>	Name of plan sponsor	THE CULVER GROUP	<b>c</b> EIN-PN 33-0789218-001
<b>a</b>	Plan name	DHR MANAGEMENT, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DHR MANAGEMENT, LLC	<b>c</b> EIN-PN 27-2018400-001
<b>a</b>	Plan name	DIABLO COUNTRY CLUB 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	DIABLO COUNTRY CLUB	<b>c</b> EIN-PN 94-0699700-003
<b>a</b>	Plan name	DIAMOND EQUIPMENT, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DIAMOND EQUIPMENT, INC.	<b>c</b> EIN-PN 35-1161961-001
<b>a</b>	Plan name	ECHO BAY MARINA, LLC PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	ECHO BAY MARINA, LLC	<b>c</b> EIN-PN 06-1385013-001
<b>a</b>	Plan name	FAMILY FORD, INC. 401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	FAMILY FORD, INC.	<b>c</b> EIN-PN 04-3459007-001
<b>a</b>	Plan name	FAMILY RESOURCE CENTER RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	FAMILY RESOURCE CENTER	<b>c</b> EIN-PN 36-3532803-001
<b>a</b>	Plan name	FRANK MARTIN SONS, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	FRANK MARTIN SONS, INC.	<b>c</b> EIN-PN 01-0279609-003

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.)	
<b>a</b>	Plan name GOSHEN COSMETIC AND FAMILY DENTISTRY, P.C. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor GOSHEN COSMETIC AND ADVANCED FAMILY DENTISTRY, P.C.	<b>c</b> EIN-PN 30-0138117-001
<b>a</b>	Plan name HBL GROUP 401(K) PLAN	
<b>b</b>	Name of plan sponsor HBL GROUP, LLC	<b>c</b> EIN-PN 46-0807868-001
<b>a</b>	Plan name HOUSTON CRITICAL CARE 401(K) PLAN	
<b>b</b>	Name of plan sponsor WAEL ASI M.D. P.A DBA HOUSTON CRITICAL CARE	<b>c</b> EIN-PN 76-0567380-222
<b>a</b>	Plan name J & S CONSULTING ENGINEERS 401(K) PLAN	
<b>b</b>	Name of plan sponsor J&S CONSULTING ENGINEERS, INC.	<b>c</b> EIN-PN 20-3982143-001
<b>a</b>	Plan name KEITH A. COHRS D.D.S., P.C. 401(K) PLAN	
<b>b</b>	Name of plan sponsor KEITH A. COHRS D.D.S., P.C.	<b>c</b> EIN-PN 20-2818829-001
<b>a</b>	Plan name MARBLE WORKS, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor MARBLE WORKS, INC.	<b>c</b> EIN-PN 65-0069516-001
<b>a</b>	Plan name MENGWASSER MARTIN LALL & CLARK PC PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor MENGWASSER, MARTIN, LALL, & CLARK PC	<b>c</b> EIN-PN 43-1564913-001
<b>a</b>	Plan name MERCER COUNTY ELECTRIC 401(K) PLAN	
<b>b</b>	Name of plan sponsor MERCER COUNTY ELECTRIC, INC.	<b>c</b> EIN-PN 34-1278022-001
<b>a</b>	Plan name MESSAGE BROADCAST LLC 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor MESSAGEBROADCAST.COM, LLC	<b>c</b> EIN-PN 77-0480271-001
<b>a</b>	Plan name PACKAGE MATERIALS CORPORATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor PACKAGE MATERIALS CORPORATION	<b>c</b> EIN-PN 22-1914421-002
<b>a</b>	Plan name PACKAGING SPECIALTIES 401(K) PLAN	
<b>b</b>	Name of plan sponsor PACKAGING SPECIALTIES, LLC	<b>c</b> EIN-PN 88-2479890-001
<b>a</b>	Plan name PHELAN MANAGEMENT SERVICES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor PHELAN MANAGEMENT SERVICES, INC.	<b>c</b> EIN-PN 20-0647101-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	PHILLIPS FURNITURE, INC. EMPLOYEE SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	PHILLIPS FURNITURE, INC.	<b>c</b> EIN-PN 62-0969492-001
<b>a</b>	Plan name	PROPOINT TECHNOLOGY, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	PROPOINT TECHNOLOGY, INC	<b>c</b> EIN-PN 20-2925475-001
<b>a</b>	Plan name	SAA LAW, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	SCHATZ, ANDERSON & ASSOCIATES LLC	<b>c</b> EIN-PN 05-0565472-001
<b>a</b>	Plan name	SIGNATURE PAYMENTS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CKC HOLDINGS, INC.	<b>c</b> EIN-PN 61-2013413-001
<b>a</b>	Plan name	STEVEN A. VARANO, ESQ. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	STEVEN A. VARANO, ESQ.	<b>c</b> EIN-PN 22-3143496-001
<b>a</b>	Plan name	TERRANET, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	TERRANET, INC.	<b>c</b> EIN-PN 52-1782317-001
<b>a</b>	Plan name	THREAD INFORMATION DESIGN 401(K) PLAN	
<b>b</b>	Name of plan sponsor	THREAD INFORMATION DESIGN	<b>c</b> EIN-PN 34-1537882-001
<b>a</b>	Plan name	UNIVERSITY ELECTRIC CO., INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	UNIVERSITY ELECTRIC CO., INC.	<b>c</b> EIN-PN 94-1493225-002
<b>a</b>	Plan name	VREELAND ENGINEERS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	VREELAND ENGINEERS, INCORPORATED	<b>c</b> EIN-PN 62-1480752-001
<b>a</b>	Plan name	W/S MACHINE & TOOL, INC. SAVINGS AND RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	W/S MACHINE & TOOL, INC.	<b>c</b> EIN-PN 39-1764609-001
<b>a</b>	Plan name	WULCO, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	WULCO, INC.	<b>c</b> EIN-PN 61-1171211-222
<b>a</b>	Plan name	X-CEL HAIR SALON 401(K) PLAN	
<b>b</b>	Name of plan sponsor	RANDA VISIONS, INC. DBA X-CEL HAIR SALON	<b>c</b> EIN-PN 03-0379464-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	AIR GROUP, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	AIR GROUP, LLC	<b>c</b> EIN-PN 22-3620908-001
<b>a</b>	Plan name	ARCHITECTURE, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ARCHITECTURE, INC.	<b>c</b> EIN-PN 54-1371604-001
<b>a</b>	Plan name	AXXIOME USA LLC RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	AXXIOME USA LLC	<b>c</b> EIN-PN 90-1017436-001
<b>a</b>	Plan name	AYERS & BROWN, P.C. RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	AYERS & BROWN, P.C.	<b>c</b> EIN-PN 86-0541873-001
<b>a</b>	Plan name	AZURE GREEN CONSULTANTS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	AZURE GREEN CONSULTANTS, LLC	<b>c</b> EIN-PN 20-5174912-001
<b>a</b>	Plan name	DIDAX, INC. EMPLOYEES 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	DIDAX, INC.	<b>c</b> EIN-PN 04-2599602-001
<b>a</b>	Plan name	FAMILY SERVICES OF OAHU, LLC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	FAMILY SERVICES OF OAHU, LLC	<b>c</b> EIN-PN 99-0359636-001
<b>a</b>	Plan name	FRAZIER & SABIN, LLP 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FRAZIER & SABIN, LLP	<b>c</b> EIN-PN 37-1137275-001
<b>a</b>	Plan name	GRABER ANIMAL HOSPITAL, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	GRABER ANIMAL HOSPITAL, INC.	<b>c</b> EIN-PN 34-1903123-001
<b>a</b>	Plan name	GRAEAGLE CONSTRUCTION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	GRAEAGLE CONSTRUCTION	<b>c</b> EIN-PN 88-0499070-001
<b>a</b>	Plan name	HEALTHY FUTURES CLINIC, PLLC RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	HEALTHY FUTURES CLINIC PLLC PENSION PLAN	<b>c</b> EIN-PN 20-0539476-001
<b>a</b>	Plan name	HUESCHEN AND SAGE PLLC RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	HUESCHEN AND SAGE, PLLC ATTORNEYS AND COUNSELORS	<b>c</b> EIN-PN 38-3574838-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	HULL BROTHERS, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	HULL BROTHERS, INC.	<b>c</b> EIN-PN 34-0971398-001
<b>a</b>	Plan name	HWA LANDSCAPE ARCHITECTS RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	HWA LANDSCAPE ARCHITECTS	<b>c</b> EIN-PN 68-0176703-001
<b>a</b>	Plan name	JAG, INC. 401(K) RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	JAG, INC.	<b>c</b> EIN-PN 20-4383697-001
<b>a</b>	Plan name	KES SYSTEMS, INC. CROSS TESTED 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	KES SYSTEMS, INC.	<b>c</b> EIN-PN 59-3532089-001
<b>a</b>	Plan name	KETTER & ASSOCIATES 401(K) PLAN	
<b>b</b>	Name of plan sponsor	KETTER & ASSOCIATES	<b>c</b> EIN-PN 47-0806233-001
<b>a</b>	Plan name	KEYROCK ENERGY, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	KEYROCK ENERGY, LLC	<b>c</b> EIN-PN 26-0602410-001
<b>a</b>	Plan name	LAZAR LANDSCAPE DESIGN & CONSTRUCTION, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	LAZAR LANDSCAPE DESIGN & CONSTRUCTION, INC.	<b>c</b> EIN-PN 30-0160288-001
<b>a</b>	Plan name	LEADING EDGE GROUP, INC. PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	LEADING EDGE GROUP, INC.	<b>c</b> EIN-PN 36-2679145-001
<b>a</b>	Plan name	LEE, SPERLING, HISAMUNE ACCOUNTANCY CORPORATION 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	LEE, SPERLING, HISAMUNE ACCOUNTANCY CORPORATION	<b>c</b> EIN-PN 95-3308709-001
<b>a</b>	Plan name	LEGACY TRUCKING, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	LEGACY TRUCKING, INC.	<b>c</b> EIN-PN 84-1268710-001
<b>a</b>	Plan name	MARIAN COLLEGE RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	MARIAN COLLEGE	<b>c</b> EIN-PN 95-4775118-001
<b>a</b>	Plan name	METRO FENCE CO., INC. 401(K) PLAN & TRUST	
<b>b</b>	Name of plan sponsor	METRO FENCE COMPANY, INC.	<b>c</b> EIN-PN 74-6514295-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	METROLIST 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	METROLIST, INC.	<b>c</b> EIN-PN 84-0943682-001
<b>a</b>	Plan name	MOTION MACHINERY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	MOTION MACHINERY, LTD	<b>c</b> EIN-PN 76-0566121-001
<b>a</b>	Plan name	MOUNTAIN WEST SURGICAL RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	MOUNTAIN WEST SURGICAL	<b>c</b> EIN-PN 88-0418505-001
<b>a</b>	Plan name	NORTHWEST EYE PHYSICIANS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	NORTHWEST EYE PHYSICIANS, P.C.	<b>c</b> EIN-PN 38-1861527-002
<b>a</b>	Plan name	NORWALK COMMUNITY HEALTH CENTER 401(K) PLAN	
<b>b</b>	Name of plan sponsor	NORWALK COMMUNITY HEALTH CENTER, INC.	<b>c</b> EIN-PN 06-1436620-001
<b>a</b>	Plan name	NOT-FOR-PROFIT RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	COMMUNITY LIVING OPTIONS, INC.	<b>c</b> EIN-PN 37-1079626-001
<b>a</b>	Plan name	NRG MEDIA, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	NRG MEDIA, LLC	<b>c</b> EIN-PN 56-2501807-001
<b>a</b>	Plan name	NUOZ CORPORATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	NUOZ CORPORATION	<b>c</b> EIN-PN 91-1927010-001
<b>a</b>	Plan name	PALLO, MARKS & HERNANDEZ, P.A. 401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	PALLO, MARKS & HERNANDEZ, GECHIJIAN & DEMAY, P.A.	<b>c</b> EIN-PN 65-0746369-001
<b>a</b>	Plan name	PICKERING MANOR HOME 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PICKERING MANOR HOME	<b>c</b> EIN-PN 51-0244585-001
<b>a</b>	Plan name	PINNACLE ADVISORY GROUP, INC. 401(K) PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor	PINNACLE ADVISORY GROUP, INC.	<b>c</b> EIN-PN 04-3134580-001
<b>a</b>	Plan name	PROVIDENT MANAGEMENT CORPORATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PROVIDENT MANAGEMENT CORPORATION	<b>c</b> EIN-PN 59-1870484-001

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.)	
<b>a</b>	Plan name PSYCHOLOGY ASSOCIATES OF BETHLEHEM, P.C. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor PSYCHOLOGY ASSOCIATES OF BETHLEHEM, P.C.	<b>c</b> EIN-PN 23-2704845-002
<b>a</b>	Plan name PUEBLO OF ACOMA HOUSING AUTHORITY 401(K) PLAN	
<b>b</b>	Name of plan sponsor PUEBLO OF ACOMA HOUSING AUTHORITY	<b>c</b> EIN-PN 65-1303187-001
<b>a</b>	Plan name PUTNAM TRUCKING, INC. 401(K)/PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor PUTNAM TRUCKING, INC.	<b>c</b> EIN-PN 37-1272751-001
<b>a</b>	Plan name RICHARD BROS. ELECTRIC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor RICHARD BROTHERS COMPANY, INC.	<b>c</b> EIN-PN 04-2889819-001
<b>a</b>	Plan name RICHARD GROUP 401(K) PLAN	
<b>b</b>	Name of plan sponsor RICHARD GROUP, LLC	<b>c</b> EIN-PN 46-1249708-001
<b>a</b>	Plan name RINDERKNECHT ASSOCIATES, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor RINDERKNECHT ASSOCIATES, INC.	<b>c</b> EIN-PN 42-0959632-001
<b>a</b>	Plan name SALVATORE ANGELO DMD, PC 401(K) PLAN	
<b>b</b>	Name of plan sponsor SALVATORE ANGELO II DMD, PC	<b>c</b> EIN-PN 04-3214907-001
<b>a</b>	Plan name SIMPSON SPENCE YOUNG 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor SIMPSON SPENCE YOUNG	<b>c</b> EIN-PN 13-5395270-001
<b>a</b>	Plan name SKLO 401(K) PLAN	
<b>b</b>	Name of plan sponsor SKLO STUDIO, INC.	<b>c</b> EIN-PN 27-4554699-001
<b>a</b>	Plan name STOCKTON PATHOLOGY MEDICAL GROUP 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor STOCKTON PATHOLOGY MEDICAL GROUP	<b>c</b> EIN-PN 68-0005184-003
<b>a</b>	Plan name STORIED MANAGEMENT 401(K) PLAN	
<b>b</b>	Name of plan sponsor STORIED MANAGEMENT, LLC	<b>c</b> EIN-PN 82-4913513-001
<b>a</b>	Plan name STRATEGIC CONTRACTING SERVICES INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor STRATEGIC CONTRACTING SERVICES INC.	<b>c</b> EIN-PN 20-8612710-001

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.)		
<b>a</b>	Plan name TEXAS HEALTHCARE PHARMACY 401(K) PLAN	
<b>b</b>	Name of plan sponsor TEXAS THCP OPERATIONS, LP	<b>c</b> EIN-PN 26-0058682-001
<b>a</b>	Plan name TIM SNELSON'S PUMPING UNIT 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor TIM SNELSON'S PUMPING UNIT	<b>c</b> EIN-PN 75-2715506-001
<b>a</b>	Plan name VACCINE RESEARCH INSTITUTE OF SAN DIEGO 401(K) PLAN	
<b>b</b>	Name of plan sponsor VACCINE RESEARCH INSTITUTE OF SAN DIEGO	<b>c</b> EIN-PN 33-0903864-001
<b>a</b>	Plan name YOUNG AUDIENCES OF NEW JERSEY, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor YOUNG AUDIENCES OF NEW JERSEY, INC.	<b>c</b> EIN-PN 23-7384991-001
<b>a</b>	Plan name YOUNG ELECTRICAL CONTRACTORS, INC. PROFIT SHARING & 401(K) PLAN	
<b>b</b>	Name of plan sponsor YOUNG ELECTRICAL CONTRACTORS, INC.	<b>c</b> EIN-PN 52-1646564-001
<b>a</b>	Plan name ZAHARONI INDUSTRIES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor ZAHARONI INDUSTRIES, INC.	<b>c</b> EIN-PN 95-3768219-001
<b>a</b>	Plan name ZAWADSKI HOMES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor ZAWADSKI HOMES, INC.	<b>c</b> EIN-PN 47-0885206-001
<b>a</b>	Plan name 3NSOLUTIONS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor 3NSOLUTIONS, INC.	<b>c</b> EIN-PN 76-0732644-001
<b>a</b>	Plan name A & L COORS, INC. PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor A & L COORS, INC.	<b>c</b> EIN-PN 84-0534580-001
<b>a</b>	Plan name ALBERS & COMPANY 401(K) PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor ALBERS & COMPANY	<b>c</b> EIN-PN 52-1470240-001
<b>a</b>	Plan name ARGENT FEDERAL CREDIT UNION 401(K) PLAN	
<b>b</b>	Name of plan sponsor ARGENT FEDERAL CREDIT UNION	<b>c</b> EIN-PN 54-0623641-002
<b>a</b>	Plan name ARIAS, TOVAR & ASSOCIATES, P.A. 401(K) PLAN	
<b>b</b>	Name of plan sponsor ARIAS, TOVAR & ASSOCIATES, P.A.	<b>c</b> EIN-PN 65-0971956-001

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.)	
<b>a</b>	Plan name <b>BALEMET EMPLOYEE BENEFIT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BALEMET RECYCLING METALS, INC.</b>	<b>c</b> EIN-PN <b>22-2907788-001</b>
<b>a</b>	Plan name <b>BOOS &amp; CHAN INC. 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BOOS &amp; CHAN, INC.</b>	<b>c</b> EIN-PN <b>04-3493211-001</b>
<b>a</b>	Plan name <b>CHARLES R. HUNT 401(K) RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CHARLES R. HUNT, ATTY</b>	<b>c</b> EIN-PN <b>58-2110149-001</b>
<b>a</b>	Plan name <b>D &amp; F, LOBO CONSTRUCTION, INC. PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>D &amp; F CONSTRUCTION, INC.</b>	<b>c</b> EIN-PN <b>54-1206616-001</b>
<b>a</b>	Plan name <b>LESLIE T. HASKINS, INC. 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>LESLIE T. HASKINS DBA HASKINS OLDS, INC.</b>	<b>c</b> EIN-PN <b>04-1425210-001</b>
<b>a</b>	Plan name <b>ONEGENERATION 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>ONEGENERATION</b>	<b>c</b> EIN-PN <b>95-4066979-001</b>
<b>a</b>	Plan name <b>OPAL SOFT, INC. RETIREMENT SAVINGS PLAN</b>	
<b>b</b>	Name of plan sponsor <b>OPALSOFT, INC.</b>	<b>c</b> EIN-PN <b>94-3280543-001</b>
<b>a</b>	Plan name <b>OPEN MRI OF NEW ENGLAND, INC. 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>OPEN MRI OF NEW ENGLAND, INC.</b>	<b>c</b> EIN-PN <b>05-0495348-002</b>
<b>a</b>	Plan name <b>PLAN DE RETIRO 1081.01(D) PARA EMPLEADOS DE GOYA DE PUERTO RICO, INC.</b>	
<b>b</b>	Name of plan sponsor <b>GOYA DE PUERTO RICO, INC.</b>	<b>c</b> EIN-PN <b>66-0429097-002</b>
<b>a</b>	Plan name <b>RATLIFF ENTERPRISES 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>RATLIFF ENTERPRISES</b>	<b>c</b> EIN-PN <b>43-0831684-001</b>
<b>a</b>	Plan name <b>SANTA FE RUBBER PRODUCTS, INC. 401(K) PROFIT SHARING PLAN &amp; TRUST</b>	
<b>b</b>	Name of plan sponsor <b>SANTA FE RUBBER PRODUCTS, INC.</b>	<b>c</b> EIN-PN <b>95-3864316-001</b>
<b>a</b>	Plan name <b>SARAT FORD SALES, INC. 401(K) SAVINGS PLAN</b>	
<b>b</b>	Name of plan sponsor <b>SARAT FORD SALES, INC.</b>	<b>c</b> EIN-PN <b>04-2385735-001</b>

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.)	
<b>a</b>	Plan name SASAKI PAINTING & SERVICES LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor SASAKI PAINTING & SERVICES LLC	<b>c</b> EIN-PN 82-4675241-001
<b>a</b>	Plan name SAUK-SUIATTLE 401(K) PLAN	
<b>b</b>	Name of plan sponsor SAUK SUIATTLE INDIAN TRIBE	<b>c</b> EIN-PN 91-0961478-001
<b>a</b>	Plan name SPATARO PLUMBING & HEATING, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor SPATARO PLUMBING & HEATING, INC.	<b>c</b> EIN-PN 04-3095746-001
<b>a</b>	Plan name THE ART SOURCE, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor THE ART SOURCE, INC.	<b>c</b> EIN-PN 99-0280665-001
<b>a</b>	Plan name THE CARING CENTER 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor THE CARING CENTER, INC.	<b>c</b> EIN-PN 23-2623819-001
<b>a</b>	Plan name A WISIALKO AND COMPANY 401(K) PLAN	
<b>b</b>	Name of plan sponsor A WISIALKO AND COMPANY LLC	<b>c</b> EIN-PN 46-1598908-001
<b>a</b>	Plan name AMERICAN HXSYSTEMS LLC PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor AMERICAN HXSYSTEMS LLC	<b>c</b> EIN-PN 93-4817220-001
<b>a</b>	Plan name AMERICAN PAPER CORPORATION CODA PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor AMERICAN PAPER CORPORATION	<b>c</b> EIN-PN 66-0392240-001
<b>a</b>	Plan name AMERICAN PROFICIENCY INSTITUTE 401(K) PLAN	
<b>b</b>	Name of plan sponsor AMERICAN PROFICIENCY INSTITUTE, INC.	<b>c</b> EIN-PN 38-2949312-001
<b>a</b>	Plan name AMERICAN SECURITY PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor AMERICAN IRONWORKS, INC. DBA AMERICAN SECURITY	<b>c</b> EIN-PN 95-4677496-001
<b>a</b>	Plan name BAN-GAR CONSTRUCTION 401(K) PLAN	
<b>b</b>	Name of plan sponsor BAN-GAR CONSTRUCTION COMPANY, INC.	<b>c</b> EIN-PN 34-1628127-001
<b>a</b>	Plan name BAR 20 PENSION PROFIT SHARING - 401(K) PLAN	
<b>b</b>	Name of plan sponsor BAR 20 DAIRY LLC	<b>c</b> EIN-PN 20-2670418-001

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.)	
<b>a</b>	Plan name BUDGET DRY WATERPROOFING INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor BUDGET DRY WATERPROOFING, INC.	<b>c</b> EIN-PN 20-8805605-001
<b>a</b>	Plan name BUG MAN EXTERMINATING, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor BUG MAN EXTERMINATING, INC.	<b>c</b> EIN-PN 54-1884547-001
<b>a</b>	Plan name CORRA 401(K) PLAN	
<b>b</b>	Name of plan sponsor CORRA	<b>c</b> EIN-PN 04-3819932-001
<b>a</b>	Plan name DISHMAN DODGE 401(K) PLAN	
<b>b</b>	Name of plan sponsor M&G INVESTMENTS, INC. DBA DISHMAN DODGE	<b>c</b> EIN-PN 91-0953903-002
<b>a</b>	Plan name FULGENT CONTRACTING CORPORATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor FULGENT CONTRACTING CORPORATION	<b>c</b> EIN-PN 52-2116656-001
<b>a</b>	Plan name GULF COAST VALVE, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor GULF COAST VALVE, INC.	<b>c</b> EIN-PN 74-1792339-001
<b>a</b>	Plan name GULF SOUTH EYE ASSOCIATES (APMC) PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor GULF SOUTH EYE ASSOCIATES (APMC)	<b>c</b> EIN-PN 72-1076001-777
<b>a</b>	Plan name GUYOUNGTECH USA, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor GUYOUNGTECH USA, INC.	<b>c</b> EIN-PN 20-1963180-001
<b>a</b>	Plan name HYPOTENUSE RETIREMENT & PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor HYPOTENUSE, INC. DBA SURVEYUSA	<b>c</b> EIN-PN 13-3592138-001
<b>a</b>	Plan name HYUNDAI DYMOS 401(K) PLAN	
<b>b</b>	Name of plan sponsor HYUNDAI DYMOS MICHIGAN, LLC	<b>c</b> EIN-PN 32-0423491-001
<b>a</b>	Plan name JOHN DEERE CLASSIC 401K PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor JOHN DEERE CLASSIC	<b>c</b> EIN-PN 93-1332421-001
<b>a</b>	Plan name JOHN P. CALCATERA 401(K)/PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor JOHN P. CALCATERA DPM PC	<b>c</b> EIN-PN 26-1562402-001

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.)		
<b>a</b>	Plan name AMERICAN SOCIETY FOR SURGERY OF THE HAND 401(K) AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor AMERICAN SOCIETY FOR SURGERY OF THE HAND	<b>c</b> EIN-PN 31-6051199-001
<b>a</b>	Plan name AMERICAN TIRE & AUTO 401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor AMERICAN TIRE & AUTO CARE, INC.	<b>c</b> EIN-PN 47-5563950-001
<b>a</b>	Plan name BASIS INTERNATIONAL LTD. 401(K) PLAN	
<b>b</b>	Name of plan sponsor BASIS INTERNATIONAL LTD.	<b>c</b> EIN-PN 85-0327924-001
<b>a</b>	Plan name BULLDOG RACK HOLDING COMPANY 401(K) PLAN	
<b>b</b>	Name of plan sponsor BULLDOG RACK HOLDING COMPANY	<b>c</b> EIN-PN 46-1606192-001
<b>a</b>	Plan name BULTYNCK & CO. 401(K) PLAN	
<b>b</b>	Name of plan sponsor BULTYNCK & CO., P.L.L.C.	<b>c</b> EIN-PN 20-3920878-777
<b>a</b>	Plan name BURBANK-GLENDALE-PASADENA AIRPORT AUTHORITY POLICE OFFICERS' ASSOCIATION 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor BURBANK-GLENDALE-PASADENA AIRPORT AUTHORITY POLICE OFFICERS'	<b>c</b> EIN-PN 41-2153109-001
<b>a</b>	Plan name COSTA BROTHERS MASONRY 401(K)/PREVAILING WAGE PLAN	
<b>b</b>	Name of plan sponsor COSTA BROTHERS MASONRY, INC.	<b>c</b> EIN-PN 04-3054314-003
<b>a</b>	Plan name COUNTRY ROADS TRUCKING SYSTEMS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor COUNTRY ROADS TRUCKING SYSTEMS, INC.	<b>c</b> EIN-PN 35-1696225-001
<b>a</b>	Plan name DOERRE CONSTRUCTION CO., LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor DOERRE CONSTRUCTION CO., LLC	<b>c</b> EIN-PN 56-2177316-001
<b>a</b>	Plan name ERMAN RETIREMENT ADVISORY 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor ERMAN RETIREMENT ADVISORY	<b>c</b> EIN-PN 95-3677994-001
<b>a</b>	Plan name ESSNER MANUFACTURING, L.P. 401(K) PLAN	
<b>b</b>	Name of plan sponsor ESSNER MANUFACTURING, L.P.	<b>c</b> EIN-PN 52-2439789-001
<b>a</b>	Plan name G.C.S. SALES & MARKETING, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor G.C.S. SALES & MARKETING, INC.	<b>c</b> EIN-PN 04-3268496-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	H&R OPERATOR SERVICES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	H&R OPERATOR SERVICES, INC.	<b>c</b> EIN-PN 76-0000842-002
<b>a</b>	Plan name	HAGEN INSURANCE 401(K) PLAN	
<b>b</b>	Name of plan sponsor	HO'O ILINA, INC. DBA HAGEN INSURANCE	<b>c</b> EIN-PN 51-0640656-001
<b>a</b>	Plan name	IFE 401(K) PLAN	
<b>b</b>	Name of plan sponsor	INTERNATIONAL FIRE EQUIPMENT	<b>c</b> EIN-PN 68-0124960-001
<b>a</b>	Plan name	IITC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ISLAND INFORMATION TECHNOLOGY CONSULTANTS, INC.	<b>c</b> EIN-PN 20-1314597-001
<b>a</b>	Plan name	JOHNSON'S MECHANICAL 401(K) PLAN	
<b>b</b>	Name of plan sponsor	JOHNSON'S MECHANICAL, INC.	<b>c</b> EIN-PN 59-3155826-001
<b>a</b>	Plan name	LEVIN LEGAL GROUP, P.C. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	LEVIN LEGAL GROUP, P.C.	<b>c</b> EIN-PN 23-2830283-001
<b>a</b>	Plan name	LIBERTY CHEVROLET, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	LIBERTY CHEVROLET, INC.	<b>c</b> EIN-PN 04-3027316-001
<b>a</b>	Plan name	LINENS BY ALICE PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	LINENS BY ALICE, INC.	<b>c</b> EIN-PN 04-3068509-001
<b>a</b>	Plan name	MCDONALD LIQUOR INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	MCDONALD LIQUOR INC.	<b>c</b> EIN-PN 41-1833330-001
<b>a</b>	Plan name	MCDONALDS' DESIGN & BUILD PROFIT SHARING AND SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	MCDONALDS' DESIGN & BUILD, INC.	<b>c</b> EIN-PN 34-1313478-001
<b>a</b>	Plan name	MULHERN BELTING, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	MULHERN BELTING, INC.	<b>c</b> EIN-PN 22-2142028-001
<b>a</b>	Plan name	ORANGE COUNTY EMPLOYEES ASSOCIATION, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ORANGE COUNTY EMPLOYEES ASSOCIATION, INC.	<b>c</b> EIN-PN 95-1685796-002

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.)	
<b>a</b>	Plan name OREGON COLLEGE OF ORIENTAL MEDICINE 401(K) PLAN	
<b>b</b>	Name of plan sponsor OREGON COLLEGE OF ORIENTAL MEDICINE	<b>c</b> EIN-PN 93-0845182-001
<b>a</b>	Plan name OREGON FISH GUYS 401(K) PLAN	
<b>b</b>	Name of plan sponsor OREGON FISH GUYS, INC.	<b>c</b> EIN-PN 20-3065360-001
<b>a</b>	Plan name ORLANDO MEDICAL CENTER, P. L. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor ORLANDO MEDICAL CENTER, P. L.	<b>c</b> EIN-PN 81-0736230-001
<b>a</b>	Plan name REA & ASSOCIATES 401(K)/PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor REA & ASSOCIATES LLP	<b>c</b> EIN-PN 77-0164868-001
<b>a</b>	Plan name SPAULDING BRICK CO., INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor SPAULDING BRICK CO., INC.	<b>c</b> EIN-PN 04-1203530-001
<b>a</b>	Plan name SPRING LAKE DENTAL GROUP 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor SPRING LAKE DENTAL GROUP	<b>c</b> EIN-PN 56-1957791-001
<b>a</b>	Plan name THE CEDAR RAPIDS DENTAL CENTER 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor THE CEDAR RAPIDS DENTAL CENTER	<b>c</b> EIN-PN 42-1012892-002
<b>a</b>	Plan name TRUTECH, L.L.C. 401(K) PLAN	
<b>b</b>	Name of plan sponsor TRUTECH, L.L.C.	<b>c</b> EIN-PN 82-0509464-001
<b>a</b>	Plan name TRUTRON CORPORATION PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor TRUTRON CORPORATION	<b>c</b> EIN-PN 38-1858530-001
<b>a</b>	Plan name TRUXAW & ASSOCIATES 401(K) PLAN	
<b>b</b>	Name of plan sponsor JOSEPH C. TRUXAW AND ASSOCIATES, INC.	<b>c</b> EIN-PN 95-2992708-001
<b>a</b>	Plan name WASSERMAN & ASSOCIATES 401(K) PLAN	
<b>b</b>	Name of plan sponsor WASSERMAN & ASSOCIATES	<b>c</b> EIN-PN 46-1597804-001
<b>a</b>	Plan name WATSON REALTY COMPANY 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor WATSON REALTY COMPANY	<b>c</b> EIN-PN 95-3462904-001

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.)	
<b>a</b>	Plan name ABESCO DISTRIBUTING PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor ABESCO DISTRIBUTING CO. INC.	<b>c</b> EIN-PN 94-2416739-001
<b>a</b>	Plan name ABLE SALES COMPANY, INC. SAVINGS AND INVESTMENT PLAN	
<b>b</b>	Name of plan sponsor ABLE SALES COMPANY INC.	<b>c</b> EIN-PN 66-0320315-001
<b>a</b>	Plan name ALIKA C. GARCIA 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor ALIKA C. GARCIA	<b>c</b> EIN-PN 81-0742572-001
<b>a</b>	Plan name ALLENS PLUMBING, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor ALLENS PLUMBING, INC.	<b>c</b> EIN-PN 99-0241127-001
<b>a</b>	Plan name BAY TRADERS, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor BAY TRADERS, INC.	<b>c</b> EIN-PN 92-0140124-002
<b>a</b>	Plan name BC2 ENVIRONMENTAL 401(K) PLAN	
<b>b</b>	Name of plan sponsor BC2 ENVIRONMENTAL, LLC	<b>c</b> EIN-PN 83-2585853-001
<b>a</b>	Plan name BOURN & KOCH MACHINE TOOL CO. PROFIT SHARING & SAVINGS PLAN	
<b>b</b>	Name of plan sponsor BOURN & KOCH MACHINE TOOL CO.	<b>c</b> EIN-PN 36-2827595-001
<b>a</b>	Plan name CAPRI & ASSOCIATES INC. 401(K) AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor CAPRI & ASSOCIATES INC.	<b>c</b> EIN-PN 23-3095696-002
<b>a</b>	Plan name CHSU 401(K) PLAN	
<b>b</b>	Name of plan sponsor CALIFORNIA HEALTH SCIENCES UNIVERSITY	<b>c</b> EIN-PN 45-4846058-001
<b>a</b>	Plan name CIERRA PIPE, INC. RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor CIERRA PIPE, INC.	<b>c</b> EIN-PN 76-0058138-777
<b>a</b>	Plan name COMPLETE BUSINESS SOLUTIONS 401(K) PLAN	
<b>b</b>	Name of plan sponsor COMPLETE BUSINESS SOLUTIONS	<b>c</b> EIN-PN 65-0807304-001
<b>a</b>	Plan name COMPUTHINK, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor COMPUTHINK, INC.	<b>c</b> EIN-PN 36-3953691-001

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.)	
<b>a</b>	Plan name <a href="#">DAHME HEATING AND AIR CONDITIONING 401(K) PROFIT SHARING PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">DAHME HEATING AND AIRCONDITIONING, INC.</a>	<b>c</b> EIN-PN <a href="#">77-0250781-001</a>
<b>a</b>	Plan name <a href="#">DOUGHBOY RESTAURANT GROUP RETIREMENT PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">DOUGHBOY RESTAURANT GROUP, LLC</a>	<b>c</b> EIN-PN <a href="#">47-2447231-001</a>
<b>a</b>	Plan name <a href="#">DOUGLAS TELECOMMUNICATIONS, INC. 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">DOUGLAS TELECOMMUNICATIONS, INC.</a>	<b>c</b> EIN-PN <a href="#">94-3215975-001</a>
<b>a</b>	Plan name <a href="#">DOUGLASS INDUSTRIES, INC. 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">DOUGLASS INDUSTRIES</a>	<b>c</b> EIN-PN <a href="#">22-1912538-002</a>
<b>a</b>	Plan name <a href="#">EL POLLO LOCO, INC. 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">EL POLLO LOCO, INC.</a>	<b>c</b> EIN-PN <a href="#">33-0377527-777</a>
<b>a</b>	Plan name <a href="#">ELDREDGE COMPANIES, INC. 401(K) SALARY SAVINGS PLAN AND TRUST</a>	
<b>b</b>	Name of plan sponsor <a href="#">THE ELDREDGE COMPANIES, INC.</a>	<b>c</b> EIN-PN <a href="#">23-2372461-001</a>
<b>a</b>	Plan name <a href="#">ELECTRO-MECHANICAL INDUSTRIES, INC. 401(K) RETIREMENT SAVINGS PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">ELECTRO-MECHANICAL INDUSTRIES, INC.</a>	<b>c</b> EIN-PN <a href="#">76-0626218-002</a>
<b>a</b>	Plan name <a href="#">GAYLORD MANUFACTURING CO., A DIVISION OF ENOVA, LLC PROFIT SHARING 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GAYLORD MANUFATURING CO., A DIVISION OF ENOVA ENGINEERING, LLC</a>	<b>c</b> EIN-PN <a href="#">77-0489033-001</a>
<b>a</b>	Plan name <a href="#">GELBER &amp; ASSOCIATES PROFIT SHARING 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GELBER &amp; ASSOCIATES CORP.</a>	<b>c</b> EIN-PN <a href="#">76-0572605-001</a>
<b>a</b>	Plan name <a href="#">GRANVILLE HOMES, INC. RETIREMENT PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GRANVILLE HOMES, INC.</a>	<b>c</b> EIN-PN <a href="#">77-0236102-002</a>
<b>a</b>	Plan name <a href="#">GRAY SERVICES, LLC RETIREMENT PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GRAY SERVICES, LLC</a>	<b>c</b> EIN-PN <a href="#">27-0480631-001</a>
<b>a</b>	Plan name <a href="#">GREAT KIDS, INC. 401(K) PROFIT SHARING PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GREAT KIDS, INC.</a>	<b>c</b> EIN-PN <a href="#">62-1798100-001</a>

<b>Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
<b>a</b>	Plan name	IMPACT LABEL CORPORATION EMPLOYEE'S 401(K) SAVINGS PLAN
<b>b</b>	Name of plan sponsor	IMPACT LABEL CORPORATION
<b>c</b>	EIN-PN	38-1746654-002
<b>a</b>	Plan name	INDEPENDENCE BANCSHARES, INC. 401(K) PROFIT SHARING PLAN
<b>b</b>	Name of plan sponsor	INDEPENDENCE BANCSHARES, INC.
<b>c</b>	EIN-PN	42-1191386-001
<b>a</b>	Plan name	JAN-PRO, INC. 401(K) PLAN
<b>b</b>	Name of plan sponsor	TRI-VISION CORPORATION II
<b>c</b>	EIN-PN	47-5110107-001
<b>a</b>	Plan name	JANITORS SUPPLY CO., INC. EMPLOYEES' SAVINGS AND RETIREMENT 401(K) PLAN
<b>b</b>	Name of plan sponsor	THE JANITORS SUPPLY CO., INC.
<b>c</b>	EIN-PN	35-0981768-001
<b>a</b>	Plan name	KILLION COMMUNICATIONS CONSULTANTS, INC. 401(K) PROFIT SHARING PLAN
<b>b</b>	Name of plan sponsor	KILLION COMMUNICATIONS CONSULTANTS, INC.
<b>c</b>	EIN-PN	37-1367165-001
<b>a</b>	Plan name	MHS LIFT HOLDINGS INC. RETIREMENT SAVINGS PLAN
<b>b</b>	Name of plan sponsor	MHS LIFT HOLDINGS INC.
<b>c</b>	EIN-PN	23-1738019-001
<b>a</b>	Plan name	MICHAEL BATES CHEVROLET, INC. 401(K) PLAN
<b>b</b>	Name of plan sponsor	MICHAEL BATES CHEVROLET, INC.
<b>c</b>	EIN-PN	82-1909065-001
<b>a</b>	Plan name	MICHAEL STARS, INC. 401(K) PLAN
<b>b</b>	Name of plan sponsor	MICHAEL STARS
<b>c</b>	EIN-PN	35-3962410-222
<b>a</b>	Plan name	MY OFFICE, INC. 401(K) PLAN
<b>b</b>	Name of plan sponsor	MY OFFICE, INC.
<b>c</b>	EIN-PN	48-1289900-001
<b>a</b>	Plan name	NAAB ELECTRIC, INC. 401(K) PLAN
<b>b</b>	Name of plan sponsor	NAAB ELECTRIC, INC.
<b>c</b>	EIN-PN	48-0907544-001
<b>a</b>	Plan name	PARK INDUSTRIES, INC. 401(K) PLAN
<b>b</b>	Name of plan sponsor	PARK PRODUCTIONS INC.
<b>c</b>	EIN-PN	83-2355487-001
<b>a</b>	Plan name	PASCARELLA EYE CARE AND CONTACT LENSES 401(K) PLAN
<b>b</b>	Name of plan sponsor	PASCARELLA EYE CARE AND CONTACT LENSES
<b>c</b>	EIN-PN	27-1874057-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	POS TECHNICAL SERVICES INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	POS TECHNICAL SERVICES, INC.	<b>c</b> EIN-PN 33-0695227-001
<b>a</b>	Plan name	POWER SOLUTIONS, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	POWER SOLUTIONS, LLC.	<b>c</b> EIN-PN 52-2100793-222
<b>a</b>	Plan name	PWA RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	PERHATS WENSTROM ASSOCIATES, INC.	<b>c</b> EIN-PN 36-3611103-002
<b>a</b>	Plan name	RIPLEY INDUSTRIES 401(K) PLAN	
<b>b</b>	Name of plan sponsor	RIPLEY INDUSTRIES, INC.	<b>c</b> EIN-PN 62-0606312-001
<b>a</b>	Plan name	RIVERMOOR ENGINEERING, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	RIVERMOOR ENGINEERING, LLC	<b>c</b> EIN-PN 20-0597795-001
<b>a</b>	Plan name	SLADE GLASS CO. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	IMMACULATE GLASS, LLC	<b>c</b> EIN-PN 87-3806033-001
<b>a</b>	Plan name	SMART, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	SMART, LLC	<b>c</b> EIN-PN 30-0269003-001
<b>a</b>	Plan name	SUBURBAN & TRI-STATE SUBARU 401(K) PLAN	
<b>b</b>	Name of plan sponsor	SUBURBAN & TRI-STATE SUBARU, INC.	<b>c</b> EIN-PN 06-1210980-001
<b>a</b>	Plan name	SULLIVAN COUNTER TOPS, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	SULLIVAN COUNTER TOPS, INC.	<b>c</b> EIN-PN 94-3020284-001
<b>a</b>	Plan name	SULLIVAN'S ADMINISTRATIVE MANAGERS, LLC 401(K)/PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	SULLIVAN'S ADMINISTRATIVE MANAGERS, LLC	<b>c</b> EIN-PN 58-2519444-002
<b>a</b>	Plan name	THE COLONIAL MANOR 401(K) PLAN	
<b>b</b>	Name of plan sponsor	COLONIAL MANOR HEALTH CARE CENTER, INC.	<b>c</b> EIN-PN 31-0868001-001
<b>a</b>	Plan name	THE DUNCAN COMPANIES 401(K) AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	THE DUNCAN COMPANIES, INC.	<b>c</b> EIN-PN 59-3537237-001

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.)	
<b>a</b>	Plan name THE DYNAMIC CONSTRUCTION, INC. PROFIT SHARING & 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor DYNAMIC CONSTRUCTION, INC.	<b>c</b> EIN-PN 31-1526251-001
<b>a</b>	Plan name TODD W. YOUNG & ASSOCIATES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor TODD W. YOUNG & ASSOCIATES, INC DBA ZIMMER BIOMET SOUTHWEST OHIO	<b>c</b> EIN-PN 47-5068498-002
<b>a</b>	Plan name TOM AHL CHRYSLER-BUICK 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor TOM AHL CHRYSLER-BUICK, INC.	<b>c</b> EIN-PN 34-1151496-001
<b>a</b>	Plan name WEB2WEB MARKETING, INC. 401(K) PLAN AND TRUST	
<b>b</b>	Name of plan sponsor WEB2WEB MARKETING INC.	<b>c</b> EIN-PN 94-3327028-001
<b>a</b>	Plan name WECKWORTH-LANGDON 401(K) PLAN	
<b>b</b>	Name of plan sponsor WECKWORTH MANUFACTURING, INC.	<b>c</b> EIN-PN 48-1137303-001
<b>a</b>	Plan name WEGENER WELDING, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor WEGENER WELDING, LLC	<b>c</b> EIN-PN 20-4664586-001
<b>a</b>	Plan name WEINBERG & COMPANY 401K PLAN	
<b>b</b>	Name of plan sponsor WEINBERG & COMPANY, LLP	<b>c</b> EIN-PN 05-0401635-001
<b>a</b>	Plan name ZELENKOFKSKE AXELROD, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor ZELENKOFKSKE AXELROD, LLC	<b>c</b> EIN-PN 23-3022325-001
<b>a</b>	Plan name FLOURISH, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor FLOURISH, INC.	<b>c</b> EIN-PN 34-1938082-001
<b>a</b>	Plan name FMF RACING EMPLOYEE RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor FMF RACING	<b>c</b> EIN-PN 33-0667541-001
<b>a</b>	Plan name FOCUS IMAGING GROUP EMPLOYEES RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor FOCUS IMAGING GROUP INC.	<b>c</b> EIN-PN 65-0910156-001
<b>a</b>	Plan name FOOD 4 LESS SALARY SAVINGS PLAN	
<b>b</b>	Name of plan sponsor PAQ, INC. DBA FOOD 4 LESS	<b>c</b> EIN-PN 68-0363934-002

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.)	
<b>a</b>	Plan name CBW AUTOMATION, INC. 401(K) PROFIT SHARING PLAN AND RETIREMENT TRUST	
<b>b</b>	Name of plan sponsor MULLER TECHNOLOGY COLORADO	<b>c</b> EIN-PN 48-0775210-001
<b>a</b>	Plan name CDSS RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor CENTER FOR DISEASES & SURGERY OF THE SPINE	<b>c</b> EIN-PN 88-0340195-001
<b>a</b>	Plan name CEAR RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor CALIFORNIA ELECTRONIC ASSET RECOVERY	<b>c</b> EIN-PN 68-0443725-001
<b>a</b>	Plan name CEDAR VALLEY PEDIATRIC DENTISTRY 401(K) PLAN	
<b>b</b>	Name of plan sponsor CEDAR VALLEY PEDIATRIC DENTISTRY	<b>c</b> EIN-PN 27-0521322-001
<b>a</b>	Plan name LAFATA MANAGEMENT, INC. EMPLOYEES' 401(K) PLAN	
<b>b</b>	Name of plan sponsor LAFATA MANAGEMENT, INC.	<b>c</b> EIN-PN 20-1965835-001
<b>a</b>	Plan name LAGESTEE INSURANCE SAVINGS AND RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor LAGESTEE INSURANCE AGENCY, LTD.	<b>c</b> EIN-PN 62-1081657-001
<b>a</b>	Plan name PELION ACTUARIAL SERVICES, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor PELION ACTUARIAL SERVICES, INC.	<b>c</b> EIN-PN 45-2927368-001
<b>a</b>	Plan name TAG INTERNATIONAL, L.L.P. PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor TAG INTERNATIONAL, L.L.P.	<b>c</b> EIN-PN 74-2862644-001
<b>a</b>	Plan name TANIS CONCRETE, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor TANIS CONCRETE, INC.	<b>c</b> EIN-PN 22-1567712-001
<b>a</b>	Plan name LOMMA CONSTRUCTION CORP. RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor LOMMA CONSTRUCTION CORP.	<b>c</b> EIN-PN 11-2435487-001
<b>a</b>	Plan name LOMONT MOLDING, LLC. 401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor LOMONT MOLDING, LLC	<b>c</b> EIN-PN 47-1306587-001
<b>a</b>	Plan name PRAIRIEFIRE COMMUNICATIONS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor PRAIRIEFIRE COMMUNICATIONS, INC.	<b>c</b> EIN-PN 26-1885084-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
<b>a</b>	Plan name	PRECISION DOSE, INC. EMPLOYEE SAVINGS AND RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	PRECISION DOSE, INC.	<b>c</b> EIN-PN 68-0551203-001
<b>a</b>	Plan name	PRECISION ELECTRIC, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	PRECISION ELECTRIC, INC.	<b>c</b> EIN-PN 88-0203624-001
<b>a</b>	Plan name	PRECISION INDUSTRIAL CONTRACTORS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PRECISION INDUSTRIAL CONTRACTORS, INC.	<b>c</b> EIN-PN 91-2139290-001
<b>a</b>	Plan name	THE FRATE GROUP 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	THE FRATE GROUP	<b>c</b> EIN-PN 20-5168941-001
<b>a</b>	Plan name	ADVANCED AUTOMATION TECHNOLOGIES, INC. 401(K) PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor	ADVANCED AUTOMATION TECHNOLOGIES, INC.	<b>c</b> EIN-PN 52-1749594-001
<b>a</b>	Plan name	ADVANCED MANUFACTURING TECHNOLOGY 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ADVANCED MANUFACTURING TECHNOLOGY	<b>c</b> EIN-PN 84-1390588-001
<b>a</b>	Plan name	MAGE, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	MAGE, LLC	<b>c</b> EIN-PN 04-3448554-001
<b>a</b>	Plan name	PRIMECARE HOME CARE SERVICES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PRIMECARE HOME CARE SERVICES, INC.	<b>c</b> EIN-PN 65-1317901-001
<b>a</b>	Plan name	PRINCETON CORPORATE CONSULTANTS, INC. PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PRINCETON CORPORATE CONSULTANTS, INC.	<b>c</b> EIN-PN 95-3169800-001
<b>a</b>	Plan name	PRIORITY MOTOR GROUP, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PRIORITY MOTOR GROUP, INC.	<b>c</b> EIN-PN 47-2044656-001
<b>a</b>	Plan name	THE ROBERTS LAW GROUP, PLLC 401(K)/NEW COMPARABILITY PLAN	
<b>b</b>	Name of plan sponsor	THE ROBERTS LAW GROUP, PLLC	<b>c</b> EIN-PN 06-1701395-001
<b>a</b>	Plan name	TOUCHTURNS, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	TOUCHTURNS, LLC	<b>c</b> EIN-PN 45-2688671-001

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.)	
<b>a</b>	Plan name TOWN OF KENNETH CITY A MUNICIPAL CORP PENSION PLAN	
<b>b</b>	Name of plan sponsor TOWN OF KENNETH CITY	<b>c</b> EIN-PN 59-6033546-001
<b>a</b>	Plan name ALLESCO 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor JOHN SHURTLEFF COMPANY, INC.	<b>c</b> EIN-PN 73-0783500-001
<b>a</b>	Plan name ALLIED BUILDING MATERIALS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor ALLIED BUILDING MATERIALS, INC.	<b>c</b> EIN-PN 88-0068520-001
<b>a</b>	Plan name COMSTOCK JOHNSON ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor COMSTOCK JOHNSON ARCHITECTS, INC.	<b>c</b> EIN-PN 68-0039251-003
<b>a</b>	Plan name GREAT SOUTHERN CAPITAL CORPORATION SALARY REDUCTION PLAN	
<b>b</b>	Name of plan sponsor GREAT SOUTHERN CAPITAL CORPORATION	<b>c</b> EIN-PN 64-0604860-010
<b>a</b>	Plan name MARYLAND PORTABLE CONCRETE, INC. 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor MARYLAND PORTABLE CONCRETE, INC.	<b>c</b> EIN-PN 52-1207242-002
<b>a</b>	Plan name MASADA HOMES RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor MASADA HOMES	<b>c</b> EIN-PN 95-2479348-001
<b>a</b>	Plan name MASFAB, INC. 401(K) AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor MASFAB, INC. T/A FORMIT STEEL, INC.	<b>c</b> EIN-PN 23-2065665-002
<b>a</b>	Plan name QUALITY FURNITURE COMPANY 401(K) PLAN	
<b>b</b>	Name of plan sponsor QUALITY FURNITURE COMPANY	<b>c</b> EIN-PN 25-1390936-001
<b>a</b>	Plan name QUIK TRAVEL STAFFING, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor QUIK TRAVEL STAFFING, INC.	<b>c</b> EIN-PN 95-4826235-001
<b>a</b>	Plan name QUINCY DONUTS & AFFILIATES 401(K) PLAN	
<b>b</b>	Name of plan sponsor QUINCY DONUTS, INC	<b>c</b> EIN-PN 04-2664992-001
<b>a</b>	Plan name TSM VENTURES, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor TSM VENTURES, INC.	<b>c</b> EIN-PN 37-0809985-001

<b>Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>		
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
<b>a</b>	Plan name	TURNBRIDGE CAPITAL MANAGEMENT 401(K) PLAN
<b>b</b>	Name of plan sponsor	TURNBRIDGE CAPITAL MANAGEMENT, LLC
<b>c</b>	EIN-PN	47-0963603-001
<b>a</b>	Plan name	AMPLIFIED BY DESIGN 401(K) PLAN
<b>b</b>	Name of plan sponsor	AMPLIFIED BY DESIGN, INC.
<b>c</b>	EIN-PN	73-1648552-001
<b>a</b>	Plan name	CRAFT HOUSE PIZZA, LLC 401K SAVINGS PLAN
<b>b</b>	Name of plan sponsor	CRAFT HOUSE PIZZA, LLC
<b>c</b>	EIN-PN	27-3274820-001
<b>a</b>	Plan name	MEALS ON WHEELS, ETC., INC. EMPLOYEE 401(K) RETIREMENT PLAN
<b>b</b>	Name of plan sponsor	MEALS ON WHEELS, ETC., INC.
<b>c</b>	EIN-PN	59-2977907-001
<b>a</b>	Plan name	REFRICENTER 401(K) PLAN
<b>b</b>	Name of plan sponsor	REFRICENTER OF MIAMI, INC.
<b>c</b>	EIN-PN	59-1362709-001
<b>a</b>	Plan name	RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC. RETIREMENT PLAN
<b>b</b>	Name of plan sponsor	RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC.
<b>c</b>	EIN-PN	95-2846605-001
<b>a</b>	Plan name	RNB & K 401(K) PROFIT SHARING PLAN
<b>b</b>	Name of plan sponsor	RIPES NELSON BAGGOT & KALOBRATSOS P.C.
<b>c</b>	EIN-PN	36-4233711-001
<b>a</b>	Plan name	ROBERT L. KRASNEY, A PLC PROFIT SHARING PLAN
<b>b</b>	Name of plan sponsor	ROBERT L. KRASNEY, A PLC
<b>c</b>	EIN-PN	95-3996418-001
<b>a</b>	Plan name	ARTISTIC TILE PROFIT SHARING AND 401(K) PLAN
<b>b</b>	Name of plan sponsor	ARTISTIC TILE, INC.
<b>c</b>	EIN-PN	22-3247240-001
<b>a</b>	Plan name	DANIEL LEE 401(K) RETIREMENT PLAN
<b>b</b>	Name of plan sponsor	DANIEL LEE
<b>c</b>	EIN-PN	20-2116948-001
<b>a</b>	Plan name	MID-ATLANTIC NEUROSURGICAL ASSOC., P.A. 401(K) PLAN
<b>b</b>	Name of plan sponsor	MID-ATLANTIC NEUROSURGICAL ASSOC., P.A.
<b>c</b>	EIN-PN	52-1982174-001
<b>a</b>	Plan name	ATSUMI CAR EQUIPMENT, INC. 401(K) PROFIT SHARING PLAN
<b>b</b>	Name of plan sponsor	ATSUMI CAR EQUIPMENT, INC.
<b>c</b>	EIN-PN	54-2044418-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	AUBURN CONSTRUCTORS, INC. 401(K)/PW PLAN	
<b>b</b>	Name of plan sponsor	AUBURN CONSTRUCTORS, INC.	<b>c</b> EIN-PN 68-0230575-002
<b>a</b>	Plan name	DEGRUCHY MASONRY, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DEGRUCHY MASONRY, INC.	<b>c</b> EIN-PN 23-2460052-001
<b>a</b>	Plan name	DELAWARE CLAIMS PROCESSING FACILITY, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DELAWARE CLAIMS PROCESSING FACILITY, LLC	<b>c</b> EIN-PN 20-5453231-001
<b>a</b>	Plan name	HM MEDICAL CONSULTANTS PROFESS 401(K) PROFIT SHARING PLAN TRUST	
<b>b</b>	Name of plan sponsor	HM MEDICAL CONSULTANTS PROFESS	<b>c</b> EIN-PN 84-1440532-001
<b>a</b>	Plan name	HOGE LUMBER COMPANY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	HOGE LUMBER COMPANY	<b>c</b> EIN-PN 34-1819246-002
<b>a</b>	Plan name	MISKO, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	MISKO, INC.	<b>c</b> EIN-PN 23-2506409-001
<b>a</b>	Plan name	ROTEK INSTRUMENT CORP. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ROTEK INSTRUMENT CORP.	<b>c</b> EIN-PN 04-2468423-001
<b>a</b>	Plan name	RPB, INC. 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	RPB PLUMBING, INC.	<b>c</b> EIN-PN 01-0550125-001
<b>a</b>	Plan name	VILLAGE OF WOLVERINE LAKE RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	VILLAGE OF WOLVERINE LAKE	<b>c</b> EIN-PN 38-6024587-003
<b>a</b>	Plan name	VINVISION, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	VINVISION, INC.	<b>c</b> EIN-PN 77-0315550-001
<b>a</b>	Plan name	NATIONAL AUTO LENDERS, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	NATIONAL AUTO LENDERS, INC.	<b>c</b> EIN-PN 65-0660723-001
<b>a</b>	Plan name	NATIONAL FIELD REPRESENTATIVES 401(K) PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor	NATIONAL FIELD REPRESENTATIVES, LLC	<b>c</b> EIN-PN 02-0451448-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	BEACON TRI-STATE SOLUTIONS, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	BEACON TRI-STATE SOLUTIONS, INC.	<b>c</b> EIN-PN 32-0277555-001
<b>a</b>	Plan name	BEC SYSTEMS LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	BEC SYSTEMS LLC	<b>c</b> EIN-PN 88-1082676-001
<b>a</b>	Plan name	BECK LEASING, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	BECK LEASING, INC.	<b>c</b> EIN-PN 26-1793936-001
<b>a</b>	Plan name	DOWNEY & COMPANY, LLP 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DOWNEY & COMPANY, LLP	<b>c</b> EIN-PN 04-3106302-001
<b>a</b>	Plan name	DOYLE EQUIPMENT MANUFACTURING COMPANY 401(K) RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	DOYLE EQUIPMENT MANUFACTURING COMPANY	<b>c</b> EIN-PN 37-0806868-001
<b>a</b>	Plan name	DPE, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DPE, INC.	<b>c</b> EIN-PN 58-2110906-001
<b>a</b>	Plan name	SCI 401(K) PLAN	
<b>b</b>	Name of plan sponsor	SYSTEM CONTROLS & INSTRUMENTATION, LTD.	<b>c</b> EIN-PN 46-0638297-001
<b>a</b>	Plan name	SCOOTERWORKS 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	SCOOTERWORKS HOLDINGS LLC	<b>c</b> EIN-PN 45-2033633-001
<b>a</b>	Plan name	SEABOLD GROUP 401(K) RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	SEABOLD CONSTRUCTION CO., INC.	<b>c</b> EIN-PN 93-0876271-001
<b>a</b>	Plan name	WEST JERSEY AC & HEATING 401(K) PLAN & TRUST	
<b>b</b>	Name of plan sponsor	WEST JERSEY AC & HEATING COMPANY	<b>c</b> EIN-PN 26-0003283-001
<b>a</b>	Plan name	WEST SIDE MARKET SAVINGS AND RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	ROMEO'S INC. DBA WEST SIDE MARKET	<b>c</b> EIN-PN 06-1026857-001
<b>a</b>	Plan name	SERVICE TRANSPORT GROUP, INC. 401(K) PSP	
<b>b</b>	Name of plan sponsor	SERVICE TRANSPORT GROUP, INC.	<b>c</b> EIN-PN 23-2981850-001

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.)	
<b>a</b>	Plan name SGA DESIGN GROUP 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor SGA DESIGN GROUP, P.C.	<b>c</b> EIN-PN 73-1466773-001
<b>a</b>	Plan name BERGMAN, WALLS & ASSOCIATES, LTD. 401(K) PLAN	
<b>b</b>	Name of plan sponsor BERGMAN, WALLS & ASSOCIATES, LTD.	<b>c</b> EIN-PN 88-0318867-002
<b>a</b>	Plan name BERGSTRESSER & POLLOCK, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor BERGSTRESSER & POLLOCK, LLC	<b>c</b> EIN-PN 45-3592245-001
<b>a</b>	Plan name DYNAMIC PLASTICS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor DYNAMIC PLASTICS, INC.	<b>c</b> EIN-PN 38-3094135-001
<b>a</b>	Plan name INTERNATIONAL PARKING DESIGN, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor INTERNATIONAL PARKING DESIGN, INC.	<b>c</b> EIN-PN 95-2696753-003
<b>a</b>	Plan name NEW HAMPSHIRE HYDRAULICS, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor NEW HAMPSHIRE HYDRAULICS, INC.	<b>c</b> EIN-PN 02-0338098-001
<b>a</b>	Plan name NEWS RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor NEWS	<b>c</b> EIN-PN 94-2745889-001
<b>a</b>	Plan name WILEY SANDERS TRUCK LINES, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor WILEY SANDERS TRUCK LINES, INC.	<b>c</b> EIN-PN 63-0630434-001
<b>a</b>	Plan name OCEAN MARINE LLC RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor OCEAN MARINE	<b>c</b> EIN-PN 54-1950803-001
<b>a</b>	Plan name BR&GL CONSTRUCTION LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor BR&GL CONSTRUCTION LLC	<b>c</b> EIN-PN 81-2970140-002
<b>a</b>	Plan name ELEVATE GROUP, LLC 401(K) PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor ELEVATE GROUP, LLC	<b>c</b> EIN-PN 26-4319131-001
<b>a</b>	Plan name ELITE MEDICAL STAFFING, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor ELITE MEDICAL STAFFING, INC.	<b>c</b> EIN-PN 59-3585945-001

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.)	
<b>a</b>	Plan name JAX CAFE, INC. PROFIT SHARING & 401(K) PLAN	
<b>b</b>	Name of plan sponsor JAX CAFE, INC.	<b>c</b> EIN-PN 41-0887103-001
<b>a</b>	Plan name JD SPINE 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor JD MEDICAL LLC D/B/A JD SPINE	<b>c</b> EIN-PN 27-1574562-001
<b>a</b>	Plan name SMEED COMMUNICATION SERVICES 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor SMEED SOUND SERVICE, INC. DBA SMEED COMMUNICATION SERVICES	<b>c</b> EIN-PN 93-0776324-001
<b>a</b>	Plan name SNAPPY SPORT SENTER, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor SNAPPY SPORT SENTER, INC.	<b>c</b> EIN-PN 81-0426659-001
<b>a</b>	Plan name OUTAGAMIE CO-OP SERVICES, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor OUTAGAMIE CO-OP SERVICES, INC.	<b>c</b> EIN-PN 39-1316865-001
<b>a</b>	Plan name EXCEL PAYROLL SERVICES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor EXCEL PAYROLL SERVICES, INC.	<b>c</b> EIN-PN 26-1943089-001
<b>a</b>	Plan name JOSEPH PEDOTT ADVERTISING & MARKETING, INC. PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor JOSEPH PEDOTT ADVERTISING & MARKETING, INC.	<b>c</b> EIN-PN 94-2346172-001
<b>a</b>	Plan name JPM DONUTS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor JPM DONUTS, INC.	<b>c</b> EIN-PN 02-0523315-001
<b>a</b>	Plan name JSC REALTY SERVICES, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor JSC REALTY SERVICES, INC.	<b>c</b> EIN-PN 75-2319565-001
<b>a</b>	Plan name SPRINGFIELD TRACTOR & TRAILER SALES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor SPRINGFIELD TRACTOR & TRAILER SALES, INC.	<b>c</b> EIN-PN 37-1013499-003
<b>a</b>	Plan name PATHFINDER SOFTWARE, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor PATHFINDER SOFTWARE, LLC	<b>c</b> EIN-PN 45-1068132-001
<b>a</b>	Plan name PATHMARK HR, INC. 401(K) PSP	
<b>b</b>	Name of plan sponsor PATHMARK HR, INC.	<b>c</b> EIN-PN 81-4987330-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	PATRICK COUNTY FAMILY PRACTICE 401(K) AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	PATRICK COUNTY FAMILY PRACTICE	<b>c</b> EIN-PN 54-1583691-001
<b>a</b>	Plan name	CARRANO TRANSPORTATION AND LOGISTICS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CARRANO TRANSPORTATION AND LOGISTICS, LLC	<b>c</b> EIN-PN 06-0995395-001
<b>a</b>	Plan name	FILOLI CENTER 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FILOLI CENTER	<b>c</b> EIN-PN 95-2996648-001
<b>a</b>	Plan name	KING CHIROPRACTIC RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	KING CHIROPRACTIC INSTITUTE	<b>c</b> EIN-PN 52-2210480-001
<b>a</b>	Plan name	KJLA 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	COSTA DE ORO MEDIA, LLC	<b>c</b> EIN-PN 77-0139492-001
<b>a</b>	Plan name	KLEIN PRODUCTS, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	KLEIN PRODUCTS, INC.	<b>c</b> EIN-PN 95-2105141-001
<b>a</b>	Plan name	LTC SUPPORT SERVICES, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	LTC SUPPORT SERVICES, LLC	<b>c</b> EIN-PN 20-8401158-001
<b>a</b>	Plan name	LUBY PUBLISHING, INC. PROFIT SHARING & 401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	LUBY PUBLISHING, INC.	<b>c</b> EIN-PN 36-1521240-002
<b>a</b>	Plan name	LUCKY CAB CO. OF NEVADA 401(K) PLAN	
<b>b</b>	Name of plan sponsor	LUCKY CAB CO. OF NEVADA	<b>c</b> EIN-PN 88-0269865-001
<b>a</b>	Plan name	THE LAW OFFICE OF PAUL M. GOODSON, P.C. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	THE LAW OFFICE OF PAUL M. GOODSON, P.C.	<b>c</b> EIN-PN 56-2227506-001
<b>a</b>	Plan name	THE LIFELINK OF PUERTO RICO SUPPLEMENTAL RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	LIFELINK FOUNDATION, INC. D/B/A LIFELINK OF PUERTO RICO	<b>c</b> EIN-PN 59-2193032-001
<b>a</b>	Plan name	ACME ENGRAVING PROFIT SHARING AND 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ACME ENGRAVING COMPANY, INC.	<b>c</b> EIN-PN 22-2136958-001

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.)		
<b>a</b>	Plan name CIVIL SERVICES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor CIVIL SERVICES, INC.	<b>c</b> EIN-PN 59-2975137-001
<b>a</b>	Plan name CLASSIC CARRIERS/CLASSIC WAREHOUSING 401(K) PLAN	
<b>b</b>	Name of plan sponsor CLASSIC CARRIERS, INC.	<b>c</b> EIN-PN 31-1152938-001
<b>a</b>	Plan name GENESIS MARINE LLC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor GENESIS MARINE	<b>c</b> EIN-PN 45-2448783-001
<b>a</b>	Plan name GENTILOZZI REAL ESTATE, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor GENTILOZZI REAL ESTATE, INC.	<b>c</b> EIN-PN 38-2361521-001
<b>a</b>	Plan name GENUS ARCHITECTURE 401(K) PLAN	
<b>b</b>	Name of plan sponsor GENUS ARCHITECTURE LLC	<b>c</b> EIN-PN 46-2002299-001
<b>a</b>	Plan name GEORGIA CAREER INSTITUTE 401(K) PLAN	
<b>b</b>	Name of plan sponsor HMS EDUCATIONAL SERVICES, INC. DBA GEORGIA CAREER INSTITUTE	<b>c</b> EIN-PN 58-1838344-001
<b>a</b>	Plan name PRECISION OF NEW HAMPTON, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor PRECISION OF NEW HAMPTON, INC.	<b>c</b> EIN-PN 42-1294107-222
<b>a</b>	Plan name PRECISION PLUS PLUMBING AND HEATING, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor PRECISION PLUS PLUMBING & HEATING, INC.	<b>c</b> EIN-PN 20-4553034-001
<b>a</b>	Plan name PREMIERE BUILDING MAINTENANCE CORPORATION 401(K) PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor PREMIERE BUILDING MAINTENANCE CORPORATION	<b>c</b> EIN-PN 62-1643357-001
<b>a</b>	Plan name AEIFS 401(K) PLAN	
<b>b</b>	Name of plan sponsor AEIFS INC.	<b>c</b> EIN-PN 54-2087640-001
<b>a</b>	Plan name COHN RESTAURANT GROUP, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor COHN RESTAURANT GROUP, INC.	<b>c</b> EIN-PN 33-0709920-777
<b>a</b>	Plan name PRO WINE, INC. DBA JULIO'S LIQUORS 401(K) PLAN	
<b>b</b>	Name of plan sponsor PRO WINE, INC. DBA JULIO'S LIQUORS	<b>c</b> EIN-PN 64-3526205-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	THE SPAULDING FOUNDATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	THE SPAULDING FOUNDATION	<b>c</b> EIN-PN 31-1096254-001
<b>a</b>	Plan name	ALTAONE FEDERAL CREDIT UNION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ALTAONE FEDERAL CREDIT UNION	<b>c</b> EIN-PN 95-1658623-222
<b>a</b>	Plan name	ALUMINUM COMPANY OF NC, INC. 401(K)/PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ALUMINUM COMPANY OF NC, INC.	<b>c</b> EIN-PN 83-0791382-001
<b>a</b>	Plan name	ALZHEIMER'S TEXAS PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ALZHEIMER'S TEXAS, INC.	<b>c</b> EIN-PN 74-2286105-002
<b>a</b>	Plan name	MATIKON AMERICA INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	MATIKON AMERICA INC.	<b>c</b> EIN-PN 38-3498737-002
<b>a</b>	Plan name	MATRIX VISUAL SOLUTIONS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	LOGIC TECHNOLOGY GROUP, INC. DBA MATRIX VISUAL SOLUTIONS	<b>c</b> EIN-PN 33-0773727-001
<b>a</b>	Plan name	CONROE GREENHOUSE, INC. PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CONROE GREENHOUSE, INC.	<b>c</b> EIN-PN 74-1982448-001
<b>a</b>	Plan name	CONSOLIDATED MANAGEMENT AGENCY, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	CONSOLIDATED MANAGEMENT AGENCY, INC.	<b>c</b> EIN-PN 20-1176567-001
<b>a</b>	Plan name	GREENFIELD GROUP, INC. PROFIT SHARING & RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	THE GREENFIELD GROUP, INC.	<b>c</b> EIN-PN 65-0347678-001
<b>a</b>	Plan name	GREENSBORO FARMER'S CO-OP RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	GREENSBORO FARMER'S CO-OP	<b>c</b> EIN-PN 63-0645197-001
<b>a</b>	Plan name	R & R WARREN, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	R & R WARREN, INC.	<b>c</b> EIN-PN 04-2937148-001
<b>a</b>	Plan name	R.F.M.S., INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	R.F.M.S., INC.	<b>c</b> EIN-PN 36-3114893-001

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.)		
<b>a</b>	Plan name TRAFFIC BUILDERS, INC. PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor TRAFFIC BUILDERS, INC.	<b>c</b> EIN-PN 04-3264448-001
<b>a</b>	Plan name TRANSLITE ENTERPRISES, INC. 401(K) & PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor TRANSLITE ENTERPRISES, INC.	<b>c</b> EIN-PN 22-3836998-001
<b>a</b>	Plan name TRANSPORTATION SOLUTIONS, INC. 401(K) SAVINGS & RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor TRANSPORTATION SOLUTIONS, INC.	<b>c</b> EIN-PN 58-2160437-001
<b>a</b>	Plan name MEDI-WEIGHT LOSS CLINICS, LLC 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor MEDI-WEIGHT LOSS CLINICS, LLC	<b>c</b> EIN-PN 20-3753744-001
<b>a</b>	Plan name ANDREWS OIL COMPANY, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor ANDREWS OIL CO. & GAS SERVICES, INC.	<b>c</b> EIN-PN 06-0812862-001
<b>a</b>	Plan name ANGEL CITY DATA 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor ANGEL CITY DATA, INC.	<b>c</b> EIN-PN 80-0674775-001
<b>a</b>	Plan name ANNAPOLIS JEWELRY 401(K) PLAN	
<b>b</b>	Name of plan sponsor ANNAPOLIS JEWELRY & LOAN, INC.	<b>c</b> EIN-PN 52-2319988-001
<b>a</b>	Plan name ANNIE B. JONES COMMUNITY SERVICES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor ANNIE B. JONES CIVIC ARTS CENTER	<b>c</b> EIN-PN 36-3883523-001
<b>a</b>	Plan name ANTIQUE SILVER 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor ANTIQUE SILVER OF WAUKESHA, INC.	<b>c</b> EIN-PN 39-2044240-001
<b>a</b>	Plan name CROMPION INTERNATIONAL, LLC 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor CROMPION INTERNATIONAL, LLC	<b>c</b> EIN-PN 72-1468104-001
<b>a</b>	Plan name HARKRIDER, DEMYAN & RODWELL LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor HARKRIDER, DEMYAN & RODWELL LLC	<b>c</b> EIN-PN 41-2067761-001
<b>a</b>	Plan name RELIABLE INDUSTRIES, INC. EMPLOYEES 401(K) PLAN	
<b>b</b>	Name of plan sponsor RELIABLE INDUSTRIES INC. OF NEW ORLEANS	<b>c</b> EIN-PN 72-0936490-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	UBORA ENGINEERING & PLANNING RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	UBORA ENGINEERING & PLANNING, INC	<b>c</b> EIN-PN 20-2459818-001
<b>a</b>	Plan name	UCOPB, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	UNDERWOOD CHEVROLET OLDS PONTIAC BUICK	<b>c</b> EIN-PN 38-1887779-001
<b>a</b>	Plan name	ASSIGN CORP. EMPLOYEE RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	ASSIGN CORP.	<b>c</b> EIN-PN 95-4664862-001
<b>a</b>	Plan name	DATAWORKS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DW EDUCATIONAL RESEARCH, INC. DBA DATAWORKS EDUCATIONAL RESEARCH	<b>c</b> EIN-PN 77-0584790-001
<b>a</b>	Plan name	DAVID M. FINKELSTEIN, O.D. & RYAN SHEA, O.D., L.L.C. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DAVID M. FINKELSTEIN, O.D. & RYAN SHEA, O.D., L.L.C.	<b>c</b> EIN-PN 27-0631471-001
<b>a</b>	Plan name	HIGHGATE RETIREMENT LIVING 401(K)/PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	BURON, INC.	<b>c</b> EIN-PN 91-1644879-001
<b>a</b>	Plan name	HIGHPOINT SOLUTIONS, INC. PROFIT SHARING & 401(K) PLAN	
<b>b</b>	Name of plan sponsor	HIGHPOINT SOLUTIONS, INC.	<b>c</b> EIN-PN 22-3462774-002
<b>a</b>	Plan name	HILLMAN SECURITY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	HILLMAN SECURITY & FIRE TECHNOLOGIES	<b>c</b> EIN-PN 23-1996146-001
<b>a</b>	Plan name	MIKE COUNCIL PLUMBING, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	MIKE COUNCIL PLUMBING, INC.	<b>c</b> EIN-PN 77-0547651-001
<b>a</b>	Plan name	ROBERT W. CRAVEN 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ROBERT W. CRAVEN, MD	<b>c</b> EIN-PN 91-1735437-001
<b>a</b>	Plan name	ROCKY'S HARDWARE, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ROCKY'S HARDWARE, INC.	<b>c</b> EIN-PN 04-2373758-001
<b>a</b>	Plan name	VELTEC, INC. THRIFT PLAN	
<b>b</b>	Name of plan sponsor	VELTEC, INC.	<b>c</b> EIN-PN 51-0308236-001

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.)	
<b>a</b>	Plan name AVA ELECTRIC COMPANY 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor AVA ELECTRIC COMPANY INCORPORATED	<b>c</b> EIN-PN 52-1711437-001
<b>a</b>	Plan name DELUCA HOMES, LP PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor DELUCA HOMES, LP	<b>c</b> EIN-PN 23-1892084-001
<b>a</b>	Plan name DENNIS K. STOLLER, D.D.S., LTD. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor DENNIS K. STOLLER, D.D.S., LTD.	<b>c</b> EIN-PN 37-1067546-003
<b>a</b>	Plan name HOLLY TREE COUNTRY CLUB 401(K) PLAN	
<b>b</b>	Name of plan sponsor HOLLY TREE COUNTRY CLUB	<b>c</b> EIN-PN 57-0863116-001
<b>a</b>	Plan name HOLMDEL FINANCIAL SERVICES, INC. PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor HOLMDEL FINANCIAL SERVICES, INC.	<b>c</b> EIN-PN 20-0793991-001
<b>a</b>	Plan name MJD TRUCKING, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor MJD TRUCKING, INC.	<b>c</b> EIN-PN 65-0831291-001
<b>a</b>	Plan name MODERN DAIRY, INC. PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor MODERN DAIRY, INC.	<b>c</b> EIN-PN 77-0499501-001
<b>a</b>	Plan name VITAL RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor VITAL VENTURES	<b>c</b> EIN-PN 81-0972460-001
<b>a</b>	Plan name NATURE DESIGNS LANDSCAPE 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor ESCONDIDO LANDSCAPE, INC.	<b>c</b> EIN-PN 33-0348276-001
<b>a</b>	Plan name NEARTERM CORPORATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor NEARTERM CORPORATION	<b>c</b> EIN-PN 76-0531760-001
<b>a</b>	Plan name BEHRMANN MEAT & PROCESSING, INC. PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor BEHRMANN MEAT & PROCESSING, INC	<b>c</b> EIN-PN 37-0920912-001
<b>a</b>	Plan name DR. TROY A. HEUER SAFE HARBOR 401(K) PLAN	
<b>b</b>	Name of plan sponsor DR. TROY A. HEUER	<b>c</b> EIN-PN 23-2724478-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	INSTITUTE OF INFORMATION TECHNOLOGY, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	INSTITUTE OF INFORMATION TECHNOLOGY, INC.	<b>c</b> EIN-PN 90-0014215-001
<b>a</b>	Plan name	WESTON PROPERTIES 401K	
<b>b</b>	Name of plan sponsor	WESTON PROPERTIES, LC	<b>c</b> EIN-PN 74-2722024-112
<b>a</b>	Plan name	BILLET & ASSOCIATES, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	BILLET & ASSOCIATES, LLC	<b>c</b> EIN-PN 23-2637057-001
<b>a</b>	Plan name	BIRCKHEAD ELECTRIC, INC. 401(K) AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	BIRCKHEAD ELECTRIC, INC.	<b>c</b> EIN-PN 52-1614154-001
<b>a</b>	Plan name	E-SAFE TECHNOLOGIES, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	E-SAFE TECHNOLOGIES, LLC	<b>c</b> EIN-PN 27-3784047-001
<b>a</b>	Plan name	INVENA CORPORATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	INVENA CORPORATION	<b>c</b> EIN-PN 48-1233142-001
<b>a</b>	Plan name	INVESTMENT CENTER 401(K) PLAN	
<b>b</b>	Name of plan sponsor	INVESTMENT CENTER	<b>c</b> EIN-PN 42-1485034-001
<b>a</b>	Plan name	IOWA DRAINAGE, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	IOWA DRAINAGE, INC.	<b>c</b> EIN-PN 42-0999823-003
<b>a</b>	Plan name	WINDFALL ASSOCIATES 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	WINDFALL ASSOCIATES, INC.	<b>c</b> EIN-PN 04-3474966-001
<b>a</b>	Plan name	WINTERGREEN CONSTRUCTION SERVICES, INC. 401(K) EMPLOYEE SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	WINTERGREEN CONSTRUCTION SERVICES, INC.	<b>c</b> EIN-PN 59-3034069-001
<b>a</b>	Plan name	WISCONSIN WOMEN'S HEALTH FOUNDATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	WISCONSIN WOMEN'S HEALTH FOUNDATION	<b>c</b> EIN-PN 39-1900678-001
<b>a</b>	Plan name	WMX LOGISTICS, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	WMX LOGISTICS	<b>c</b> EIN-PN 82-0570015-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	BRISTOL BROADCASTING CO. INC. 401(K) AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	BRISTOL BROADCASTING CO., INC.	<b>c</b> EIN-PN 54-0491651-001
<b>a</b>	Plan name	BRITTON INDUSTRIES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	BRITTON INDUSTRIES, INC.	<b>c</b> EIN-PN 22-3769860-001
<b>a</b>	Plan name	EMG, INC. PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	EMG, INC.	<b>c</b> EIN-PN 94-2903016-001
<b>a</b>	Plan name	JEANS' EXTRUSIONS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	JEANS' EXTRUSIONS, INC.	<b>c</b> EIN-PN 35-1540242-001
<b>a</b>	Plan name	JENKINS CONSTRUCTION RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	JENKINS CONSTRUCTION, INC.	<b>c</b> EIN-PN 38-2894052-002
<b>a</b>	Plan name	ODESUS, INC. 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	ODESUS, INC.	<b>c</b> EIN-PN 95-4864544-001
<b>a</b>	Plan name	OLIVERA SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	OLIVERA EGG RANCH LLC	<b>c</b> EIN-PN 77-0467975-001
<b>a</b>	Plan name	C.C. CONSTRUCTION, INC. 401(K) AND PREVAILING WAGE PLAN	
<b>b</b>	Name of plan sponsor	C.C. CONSTRUCTION, INC.	<b>c</b> EIN-PN 04-2903497-222
<b>a</b>	Plan name	C.J.M. LIGHTING SERVICE, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	C.J.M ELECTRIC & LIGHTING SERVICE, INC.	<b>c</b> EIN-PN 33-0393497-001
<b>a</b>	Plan name	JTI ELECTRICAL INSTRUMENTATION 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	JTI ELECTRICAL & INSTRUMENTATION, LLC	<b>c</b> EIN-PN 80-0927449-001
<b>a</b>	Plan name	P. AGNES, INC. PROFIT SHARING AND 401(K) PLAN	
<b>b</b>	Name of plan sponsor	P. AGNES, INC.	<b>c</b> EIN-PN 23-1583648-888
<b>a</b>	Plan name	STAR ELECTRIC, LLC 401(K) SALARY REDUCTION PLAN & TRUST	
<b>b</b>	Name of plan sponsor	STAR ELECTRIC, LLC	<b>c</b> EIN-PN 46-4073312-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
<b>a</b>	Plan name	STARDUST CELEBRATIONS, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	STARDUST CELEBRATIONS, LLC	<b>c</b> EIN-PN 75-2839427-001
<b>a</b>	Plan name	STATE EMPLOYEES ASSOCIATION OF NORTH CAROLINA, INC. RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	STATE EMPLOYEES ASSOCIATION OF NORTH CAROLINA	<b>c</b> EIN-PN 58-1575076-001
<b>a</b>	Plan name	STATE READY MIX 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	STATE READY MIX, INC.	<b>c</b> EIN-PN 77-0225273-001
<b>a</b>	Plan name	FINELINES SAVINGS AND RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	KSG ENTERPRISES, INC.	<b>c</b> EIN-PN 04-3291695-001
<b>a</b>	Plan name	CARROLL ACE HARDWARE 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CARROLL ACE HARDWARE	<b>c</b> EIN-PN 42-1461838-001
<b>a</b>	Plan name	CARSON CORPORATION RETIREMENT PLAN FOR LOCAL 55	
<b>b</b>	Name of plan sponsor	CARSON CORPORATION	<b>c</b> EIN-PN 22-2852356-003
<b>a</b>	Plan name	KOBBER/HANSSEN/MITCHELL ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	KOBBER/HANSSEN/MITCHELL ARCHITECTS	<b>c</b> EIN-PN 99-0237714-001
<b>a</b>	Plan name	PAUL E. ANTALIK, MD, PC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PAUL E. ANTALIK, MD, P.C.	<b>c</b> EIN-PN 25-1347137-001
<b>a</b>	Plan name	PAUL'S AUTO REPAIR, LLC 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	PAUL'S AUTO REPAIR, LLC	<b>c</b> EIN-PN 27-2538433-001
<b>a</b>	Plan name	FOREWAY TRANSPORTATION EMPLOYEE RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	FOREWAY TRANSPORTATION, INC.	<b>c</b> EIN-PN 38-2165402-001
<b>a</b>	Plan name	FORT DEARBORN PARTNERS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FORT DEARBORN PARTNERS	<b>c</b> EIN-PN 36-3745996-001
<b>a</b>	Plan name	CENTENNIAL TECHNOLOGIES, INC. PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor	CENTENNIAL TECHNOLOGIES, INC.	<b>c</b> EIN-PN 38-2164329-001

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.)		
<b>a</b>	Plan name <b>CENTER FOR CHILDREN WITH SPECIAL NEEDS LLC 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CENTER FOR CHILDREN WITH SPECIAL NEEDS LLC</b>	<b>c</b> EIN-PN <b>06-1485324-001</b>
<b>a</b>	Plan name <b>LAKOTA CONTRACTING, INC. 401(K) RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>LAKOTA CONTRACTING, INC.</b>	<b>c</b> EIN-PN <b>26-0060538-001</b>
<b>a</b>	Plan name <b>LAMATTINA'S 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>LAMATTINA'S PLUMBING &amp; HEATING CORP.</b>	<b>c</b> EIN-PN <b>80-0007649-001</b>
<b>a</b>	Plan name <b>WHITSON HOTEL INVESTORS, LLC 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>WHITSON HOTEL INVESTORS, LLC</b>	<b>c</b> EIN-PN <b>46-2342594-001</b>
<b>a</b>	Plan name <b>AXXIOME AMERICAS, INC. RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>AXXIOME AMERICAS, INC.</b>	<b>c</b> EIN-PN <b>74-3213150-001</b>
<b>a</b>	Plan name <b>WOLVERINE POWER SUPPLY COOPERATIVE, INC. NON-UNION 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>WOLVERINE POWER SUPPLY COOPERATIVE, INC.</b>	<b>c</b> EIN-PN <b>38-1326766-002</b>
<b>a</b>	Plan name <b>WOMER AND ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>WOMER AND ASSOCIATES, INC.</b>	<b>c</b> EIN-PN <b>91-1570424-001</b>
<b>a</b>	Plan name <b>BEMEL, ROSS &amp; AVEDON, LLP, 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BEMEL, ROSS &amp; AVEDON, LLP</b>	<b>c</b> EIN-PN <b>82-3833377-001</b>
<b>a</b>	Plan name <b>BERG &amp; ASSOCIATES, INC. 401(K)/PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BERG &amp; ASSOCIATES, INC.</b>	<b>c</b> EIN-PN <b>33-0075557-001</b>
<b>a</b>	Plan name <b>BIRMINGHAM PODIATRY, P.C. 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BIRMINGHAM PODIATRY, P.C.</b>	<b>c</b> EIN-PN <b>63-0826296-002</b>
<b>a</b>	Plan name <b>BLACK DOG SALVAGE 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BDS HOLDINGS, INC.</b>	<b>c</b> EIN-PN <b>54-1968963-001</b>
<b>a</b>	Plan name <b>BUCHHOLZ TRANSPORT 401(K) &amp; PSP</b>	
<b>b</b>	Name of plan sponsor <b>BUCHHOLZ TRANSPORT INC.</b>	<b>c</b> EIN-PN <b>38-2497552-001</b>

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.)	
<b>a</b>	Plan name CBI REHABILITATION SERVICES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor CBI REHABILITATION SERVICES, INC.	<b>c</b> EIN-PN 26-0894212-001
<b>a</b>	Plan name CENTRAL SHEET METAL FABRICATORS 401(K) PLAN	
<b>b</b>	Name of plan sponsor CENTRAL SHEET METAL FABRICATORS	<b>c</b> EIN-PN 22-2688946-002
<b>a</b>	Plan name CERIC FABRICATION COMPANY 401(K)/PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor CERIC FABRICATION COMPANY, INC.	<b>c</b> EIN-PN 04-2838553-001
<b>a</b>	Plan name COLLIERS ARKANSAS, INC. DBA COLLIERS INTERNATIONAL 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor COLLIERS ARKANSAS, INC. DBA COLLIERS INTERNATIONAL	<b>c</b> EIN-PN 71-0577085-004
<b>a</b>	Plan name CONTEMPORARY WOMEN'S CARE 401(K) AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor CONTEMPORARY WOMEN'S CARE, P.A.	<b>c</b> EIN-PN 75-2822774-001
<b>a</b>	Plan name COOLING & HERBERS PROFIT SHARING & 401(K) PLAN	
<b>b</b>	Name of plan sponsor COOLING & HERBERS, P.C.	<b>c</b> EIN-PN 43-1093669-001
<b>a</b>	Plan name CROSSWAY ENTERPRISES, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor CROSSWAY ENTERPRISES, LLC	<b>c</b> EIN-PN 20-2024197-001
<b>a</b>	Plan name CROY CONTRACTING, INC. 401(K) RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor CROY CONTRACTING, INC.	<b>c</b> EIN-PN 54-1616963-001
<b>a</b>	Plan name CRYSTALASER PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor CRYSTALASER	<b>c</b> EIN-PN 86-0889160-002
<b>a</b>	Plan name CTS PROFIT SHARING AND 401(K) PLAN	
<b>b</b>	Name of plan sponsor CTS, INC.	<b>c</b> EIN-PN 36-4198749-001
<b>a</b>	Plan name DEEP BLUE CONSULTING, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor DEEP BLUE CONSULTING, INC.	<b>c</b> EIN-PN 93-1298450-001
<b>a</b>	Plan name DERMATOLOGY ALLERGY 401(K) PLAN	
<b>b</b>	Name of plan sponsor DERMATOLOGY ALLERGY GENERAL PHYSICIANS OF OHIO, INC.	<b>c</b> EIN-PN 31-1027818-001

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.)	
<b>a</b>	Plan name <a href="#">DERMATOLOGY ASSOCIATES, PC 401(K) PROFIT SHARING PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">DERMATOLOGY ASSOCIATES, PC</a>	<b>c</b> EIN-PN <a href="#">39-1896149-002</a>
<b>a</b>	Plan name <a href="#">DUCT &amp; VENT CLEANING OF AMERICA, INC. 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">DUCT &amp; VENT CLEANING OF AMERICA, INC.</a>	<b>c</b> EIN-PN <a href="#">04-3175810-001</a>
<b>a</b>	Plan name <a href="#">DUNLOP &amp; JOHNSTON, INC. SALARIED EMPLOYEES' RETIREMENT SAVINGS TRUST &amp; PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">DUNLOP &amp; JOHNSTON, INC.</a>	<b>c</b> EIN-PN <a href="#">34-0191480-001</a>
<b>a</b>	Plan name <a href="#">FAIRMONT DESIGNS RETIREMENT PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">CAMBIUM BUSINESS GROUP, INC. DBA FAIRMONT DESIGNS</a>	<b>c</b> EIN-PN <a href="#">94-2930113-001</a>
<b>a</b>	Plan name <a href="#">FAIRWAY MARKET III 401(K) PROFIT SHARING PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">FAIRWAY MARKET III</a>	<b>c</b> EIN-PN <a href="#">77-0084733-001</a>
<b>a</b>	Plan name <a href="#">FOSTER THOMAS RETIREMENT PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">FOSTER THOMAS, INC.</a>	<b>c</b> EIN-PN <a href="#">52-1826441-001</a>
<b>a</b>	Plan name <a href="#">FOUNDATION LABORATORY 401(K) RETIREMENT SAVINGS PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">LATARA ENTERPRISE, INC. DBA FOUNDATION LABORATORY</a>	<b>c</b> EIN-PN <a href="#">95-4467199-001</a>
<b>a</b>	Plan name <a href="#">GIBSON OVERSEAS, INC. 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GIBSON OVERSEAS, INC.</a>	<b>c</b> EIN-PN <a href="#">95-3393699-002</a>
<b>a</b>	Plan name <a href="#">GLOBALEDGE TECHNOLOGIES, INC. SECTION 401(K) PLAN AND TRUST</a>	
<b>b</b>	Name of plan sponsor <a href="#">GLOBALEDGE TECHNOLOGIES, INC.</a>	<b>c</b> EIN-PN <a href="#">20-0264454-001</a>
<b>a</b>	Plan name <a href="#">GLYMED PLUS 401(K) PROFIT SHARING PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GLYMED PLUS LLC</a>	<b>c</b> EIN-PN <a href="#">80-0112220-001</a>
<b>a</b>	Plan name <a href="#">GROKHALOV FAMILY VENTURES, INC. RETIREMENT PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GROKHALOV FAMILY VENTURES, INC.</a>	<b>c</b> EIN-PN <a href="#">46-3224549-001</a>
<b>a</b>	Plan name <a href="#">GROSOUTH 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GROSOUTH OF ALABAMA, INC.</a>	<b>c</b> EIN-PN <a href="#">63-0464231-001</a>

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	GROUP CTI 401(K) & PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	GROUP CTI	<b>c</b> EIN-PN 54-1960500-001
<b>a</b>	Plan name	GSI CORPORATION 401(K) PLAN & TRUST	
<b>b</b>	Name of plan sponsor	GSI CORPORATION	<b>c</b> EIN-PN 52-0809975-001
<b>a</b>	Plan name	GTXCEL, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	GTXCEL, INC.	<b>c</b> EIN-PN 04-3177056-001
<b>a</b>	Plan name	HARRISS & HARTMAN LAW FIRM, P.C. 401(K) EMPLOYEES SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	HARRISS & HARTMAN LAW FIRM, P.C.	<b>c</b> EIN-PN 58-1385781-001
<b>a</b>	Plan name	HILLYER COMPANIES 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	HILLYERS MID-CITY FORD, INC.	<b>c</b> EIN-PN 93-1118673-001
<b>a</b>	Plan name	HISENSE PHOTONICS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	HISENSE PHOTONICS, INC.	<b>c</b> EIN-PN 33-0939548-001
<b>a</b>	Plan name	HOMESTAR COMPANIES SAFE HARBOR 401(K) PLAN	
<b>b</b>	Name of plan sponsor	HOMESTAR COMPANIES, LLC.	<b>c</b> EIN-PN 26-2775069-001
<b>a</b>	Plan name	HOSTAR MARINE TRANSPORT SYSTEMS, INC. PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	HOSTAR MARINE TRANSPORT SYSTEMS, INC.	<b>c</b> EIN-PN 04-2910283-001
<b>a</b>	Plan name	IROQUOIS BUILDERS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	IROQUOIS BUILDERS, INC.	<b>c</b> EIN-PN 36-4390501-001
<b>a</b>	Plan name	ISPACE, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ISPACE, INC.	<b>c</b> EIN-PN 95-4833855-001
<b>a</b>	Plan name	JEPSEN ELECTRIC INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	JEPSEN ELECTRIC, INC.	<b>c</b> EIN-PN 94-3393816-001
<b>a</b>	Plan name	JESSICA R. BENTOSKI, DDS 401(K) & PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	JESSICA R. BENTOSKI, DDS PLLC	<b>c</b> EIN-PN 46-4379759-001

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.)	
<b>a</b>	Plan name <b>JOE HURLEY 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>JOE HURLEY, INC.</b>	<b>c</b> EIN-PN <b>22-3237676-001</b>
<b>a</b>	Plan name <b>KAPOOR ENTERPRISES, INC. 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>KAPOOR ENTERPRISES, INC.</b>	<b>c</b> EIN-PN <b>77-0374359-001</b>
<b>a</b>	Plan name <b>LAURA V. KWIATKOWSKI RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>LAURA V. KWIATKOWSKI, ATTORNEY AT LAW</b>	<b>c</b> EIN-PN <b>33-0572642-001</b>
<b>a</b>	Plan name <b>LUSO FEDERAL CREDIT UNION RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>LUSO FEDERAL CREDIT UNION</b>	<b>c</b> EIN-PN <b>04-6279799-001</b>
<b>a</b>	Plan name <b>LYONS GROUP 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>LYONS GROUP</b>	<b>c</b> EIN-PN <b>04-2707878-001</b>
<b>a</b>	Plan name <b>MAYS OCHOA RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MAYS CHEMICAL COMPANY OF PUERTO RICO, INC.</b>	<b>c</b> EIN-PN <b>98-0215646-001</b>
<b>a</b>	Plan name <b>MEL'S COUNTRY CAFE, INC. 401(K) PROFIT SHARING PLAN AND TRUST</b>	
<b>b</b>	Name of plan sponsor <b>MEL'S COUNTRY CAFE</b>	<b>c</b> EIN-PN <b>76-0557980-001</b>
<b>a</b>	Plan name <b>MINING EQUIPMENT 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MINING EQUIPMENT, LTD.</b>	<b>c</b> EIN-PN <b>16-1646623-222</b>
<b>a</b>	Plan name <b>NEUSOFT AMERICA, INC. 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>NEUSOFT AMERICA, INC.</b>	<b>c</b> EIN-PN <b>20-5601470-001</b>
<b>a</b>	Plan name <b>NOBLE BANK 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>NOBLE BANK &amp; TRUST</b>	<b>c</b> EIN-PN <b>20-3340543-001</b>
<b>a</b>	Plan name <b>NORKING/MATRIX 401(K) AND PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MATRIX METAL PRODUCTS/ THE NORKING COMPANY</b>	<b>c</b> EIN-PN <b>04-2855070-001</b>
<b>a</b>	Plan name <b>NORTH AMERICAN FOOD PROFIT SHARING/401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>NORTH AMERICAN FOOD DISTRIBUTING CO., INC.</b>	<b>c</b> EIN-PN <b>94-1717567-001</b>

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	NORTH AMERICAN WARHORSE 401(K) PLAN	
<b>b</b>	Name of plan sponsor	NORTH AMERICAN WARHORSE, INC.	<b>c</b> EIN-PN 23-3047289-001
<b>a</b>	Plan name	OMNIPATH, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	OMNIPATH, INC.	<b>c</b> EIN-PN 31-1639546-002
<b>a</b>	Plan name	PACIFIC BRIDGE INSURANCE SERVICES, INC. 401(K) & PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	PACIFIC BRIDGE INSURANCE SERVICES, INC.	<b>c</b> EIN-PN 95-4618495-001
<b>a</b>	Plan name	PBHK, INC. RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	PBHK, INC.	<b>c</b> EIN-PN 99-0306811-001
<b>a</b>	Plan name	PDMA CORPORATION SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	PDMA CORPORATION	<b>c</b> EIN-PN 59-3191224-001
<b>a</b>	Plan name	PETROVAL, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PETROVAL, INC.	<b>c</b> EIN-PN 72-1559851-001
<b>a</b>	Plan name	PFDA ARCHITECTS, INC. EMPLOYEES 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PFDA ARCHITECTS, INC.	<b>c</b> EIN-PN 36-2929057-002
<b>a</b>	Plan name	PRIEST AMISTADI PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PRIEST AMISTADI	<b>c</b> EIN-PN 94-2507389-001
<b>a</b>	Plan name	PRIMARY MECHANICAL, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	PRIMARY MECHANICAL, INC.	<b>c</b> EIN-PN 33-0964975-001
<b>a</b>	Plan name	PROFESSIONAL EMPLOYMENT SERVICES 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PROFESSIONAL EMPLOYMENT SERVICES, INC.	<b>c</b> EIN-PN 54-1747161-001
<b>a</b>	Plan name	PROFESSIONAL PAINT CENTER, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	PROFESSIONAL PAINT CENTER, INC.	<b>c</b> EIN-PN 94-1731587-001
<b>a</b>	Plan name	PROFUNDUS HOLDINGS, INC. DBA AUDLEY FARM RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	PROFUNDUS HOLDINGS, INC. DBA AUDLEY FARM	<b>c</b> EIN-PN 13-3140621-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	PROGRESSIVE COMMUNICATIONS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PROGRESSIVE COMMUNICATIONS, INC.	<b>c</b> EIN-PN 58-2431088-001
<b>a</b>	Plan name	REPRODUCTIVE MEDICINE INSTITUTE, LLC PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor	REPRODUCTIVE MEDICINE INSTITUTE, LLC	<b>c</b> EIN-PN 27-1248611-001
<b>a</b>	Plan name	ROONEY'S WELDING & FABRICATION, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	ROONEY'S WELDING & FABRICATION, INC.	<b>c</b> EIN-PN 02-0514973-001
<b>a</b>	Plan name	RYAN'S GRAPHICS CORPORATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	RYAN'S GRAPHICS CORPORATION	<b>c</b> EIN-PN 99-0167906-001
<b>a</b>	Plan name	S&S MANAGEMENT, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	S&S MANAGEMENT, INC.	<b>c</b> EIN-PN 31-1493783-001
<b>a</b>	Plan name	SENIOR ADULT ACTIVITIES CENTER OF MONTGOMERY COUNTY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	SENIOR ADULT ACTIVITIES CENTER OF MONTGOMERY COUNTY	<b>c</b> EIN-PN 23-1659451-002
<b>a</b>	Plan name	SEQUEL CONTRACTORS INC. FLEXIBLE 401(K) PLAN	
<b>b</b>	Name of plan sponsor	SEQUEL CONTRACTORS, INC.	<b>c</b> EIN-PN 95-4301424-002
<b>a</b>	Plan name	SHNA 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DKSH NORTH AMERICA, INC.	<b>c</b> EIN-PN 52-1985590-001
<b>a</b>	Plan name	T.M.C. POWER EQUIPMENT, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	T.M.C. POWER EQUIPMENT, INC.	<b>c</b> EIN-PN 95-2862221-001
<b>a</b>	Plan name	T.M.C.I., INC. 401(K) RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	T.M.C.I., INC.	<b>c</b> EIN-PN 95-3185598-001
<b>a</b>	Plan name	TEMPLETON & ASSOCIATES EQUIPMENT SALES, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	TEMPLETON & ASSOCIATES EQUIPMENT SALES, INC.	<b>c</b> EIN-PN 84-2050914-001
<b>a</b>	Plan name	THE PADRE PIO FOUNDATION OF AMERICA, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	THE PADRE PIO FOUNDATION OF AMERICA, INC.	<b>c</b> EIN-PN 06-1023010-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	ACSI 401(K) RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	ADVANCED CONTROL SOLUTIONS, INC.	<b>c</b> EIN-PN 34-1711260-001
<b>a</b>	Plan name	ADAX MACHINE CO., INC. 401(K) / PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ADAX MACHINE CO., INC.	<b>c</b> EIN-PN 04-3138263-001
<b>a</b>	Plan name	ADM WELDING & FABRICATION 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ADM WELDING & FABRICATION	<b>c</b> EIN-PN 25-1514853-001
<b>a</b>	Plan name	THE ZITA GROUP, LLC RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	THE ZITA GROUP, LLC	<b>c</b> EIN-PN 20-8612123-001
<b>a</b>	Plan name	AGUA CALIENTE BAND OF CAHUILLA INDIANS/SPA HOTEL & CASINO 401(K) PLAN	
<b>b</b>	Name of plan sponsor	AGUA CALIENTE BAND OF CAHUILLA INDIANS	<b>c</b> EIN-PN 95-2549724-001
<b>a</b>	Plan name	TREE OF LIFE NURSERY PROFIT SHARING 401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	TREE OF LIFE NURSERY	<b>c</b> EIN-PN 33-0940948-002
<b>a</b>	Plan name	TRI-AGG, INC. EMPLOYEE SAVINGS & RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	TRI-AGG, INC.	<b>c</b> EIN-PN 93-0896445-001
<b>a</b>	Plan name	AMERICAN ANALYTICAL SERVICES, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	AMERICAN ANALYTICAL SERVICES, INC.	<b>c</b> EIN-PN 20-0935911-001
<b>a</b>	Plan name	VENTURE COMMERCIAL MANAGEMENT, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	VENTURE COMMERCIAL MANAGEMENT, LLC	<b>c</b> EIN-PN 75-2947910-001
<b>a</b>	Plan name	VEOLIA ES TECHNICAL SOLUTIONS, L.L.C. 1165(E) PLAN	
<b>b</b>	Name of plan sponsor	VEOLIA ES TECHNICAL SOLUTIONS, L.L.C	<b>c</b> EIN-PN 36-4287998-001
<b>a</b>	Plan name	AST SPORTS SCIENCE, INC. PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	AST SPORTS SCIENCE, INC.	<b>c</b> EIN-PN 64-0823871-001
<b>a</b>	Plan name	ATLANTIC AND PACIFIC FREIGHTWAYS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ATLANTIC AND PACIFIC FREIGHTWAYS, INC.	<b>c</b> EIN-PN 93-0984994-001



<b>SCHEDULE H</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Financial Information</b>  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).  ▶ <b>File as an attachment to Form 5500.</b>	OMB No. 1210-0110  <b>2024</b>  <b>This Form is Open to Public Inspection</b>
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For calendar plan year 2024 or fiscal plan year beginning <b>01/01/2024</b> and ending <b>12/31/2024</b>	
<b>A</b> Name of plan <b>OPPENHEIMER GLOBAL RET OPT</b>	<b>B</b> Three-digit plan number (PN) ▶ <b>216</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>TRANSAMERICA LIFE INSURANCE COMPANY</b>	<b>D</b> Employer Identification Number (EIN) <b>39-0989781</b>

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

Assets	(a) Beginning of Year	(b) End of Year
<b>a</b> Total noninterest-bearing cash .....	<b>1a</b>	
<b>b</b> Receivables (less allowance for doubtful accounts):		
<b>(1)</b> Employer contributions .....	<b>1b(1)</b>	
<b>(2)</b> Participant contributions .....	<b>1b(2)</b>	
<b>(3)</b> Other .....	<b>1b(3)</b>	
<b>c</b> General investments:		
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....	<b>1c(1)</b>	
<b>(2)</b> U.S. Government securities .....	<b>1c(2)</b>	
<b>(3)</b> Corporate debt instruments (other than employer securities):		
<b>(A)</b> Preferred .....	<b>1c(3)(A)</b>	
<b>(B)</b> All other .....	<b>1c(3)(B)</b>	
<b>(4)</b> Corporate stocks (other than employer securities):		
<b>(A)</b> Preferred .....	<b>1c(4)(A)</b>	
<b>(B)</b> Common .....	<b>1c(4)(B)</b>	
<b>(5)</b> Partnership/joint venture interests .....	<b>1c(5)</b>	
<b>(6)</b> Real estate (other than employer real property) .....	<b>1c(6)</b>	
<b>(7)</b> Loans (other than to participants) .....	<b>1c(7)</b>	
<b>(8)</b> Participant loans .....	<b>1c(8)</b>	
<b>(9)</b> Value of interest in common/collective trusts .....	<b>1c(9)</b>	
<b>(10)</b> Value of interest in pooled separate accounts .....	<b>1c(10)</b>	
<b>(11)</b> Value of interest in master trust investment accounts .....	<b>1c(11)</b>	
<b>(12)</b> Value of interest in 103-12 investment entities .....	<b>1c(12)</b>	
<b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....	<b>1c(13)</b>	79958618
<b>(14)</b> Value of funds held in insurance company general account (unallocated contracts).....	<b>1c(14)</b>	72308190
<b>(15)</b> Other.....	<b>1c(15)</b>	

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	79958618	72308190
<b>Liabilities</b>			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	1	1
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	1	1
<b>Net Assets</b>			
l Net assets (subtract line 1k from line 1f).....	1l	79958617	72308189

**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.

<b>Income</b>		(a) Amount	(b) Total
<b>a Contributions:</b>			
(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>b Earnings on investments:</b>			
(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)		
(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)		
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A), (B), and (C).....	2b(2)(D)		
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	12578111	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		12578111

		(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)		
<b>c</b> Other income .....	2c		
<b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total .....	2d		12578111

**Expenses**

<b>e</b> 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)		
<b>f</b> Corrective distributions (see instructions) .....	2f		
<b>g</b> Certain deemed distributions of participant loans (see instructions) .....	2g		
<b>h</b> Interest expense .....	2h		
<b>i</b> Administrative expenses:			
(1) Salaries and allowances .....	2i(1)		
(2) Contract administrator fees .....	2i(2)		
(3) Recordkeeping fees .....	2i(3)		
(4) IQPA audit fees .....	2i(4)		
(5) Investment advisory and investment management fees .....	2i(5)	862527	
(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)		862527
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total .....	2j		862527

**Net Income and Reconciliation**

<b>k</b> Net income (loss). Subtract line 2j from line 2d .....	2k		11715584
<b>l</b> Transfers of assets:			
(1) To this plan .....	2l(1)		5008892
(2) From this plan .....	2l(2)		24374904

**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
<b>a</b> 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>b</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.)			
<b>c</b> 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.)			
<b>d</b> 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.)			
<b>e</b> Was this plan covered by a fidelity bond?			
<b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?			
<b>g</b> 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?			
<b>h</b> 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?			
<b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)			
<b>j</b> 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.)			
<b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
<b>l</b> Has the plan failed to provide any benefit when due under the plan?			
<b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
<b>n</b> 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.)

<b>5b(1)</b> Name of plan(s)	<b>5b(2)</b> EIN(s)	<b>5b(3)</b> 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 \_\_\_\_\_.