

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

Complete all entries in accordance with the instructions to the Form 5500.

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, 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, 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, E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here

Part II Basic Plan Information—enter all requested information

1a Name of plan: AMERICAN FUNDS GROWTH FUND OF AMERICA RET OPT
1b Three-digit plan number (PN): 250
1c Effective date of plan
2a Plan sponsor's name (employer, if for a single-employer plan): TRANSAMERICA LIFE INSURANCE COMPANY
2b Employer Identification Number (EIN): 39-0989781
2c Plan Sponsor's telephone number: 319-355-6449
2d Business code (see instructions)

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

Table with 4 columns: SIGN HERE, Signature of plan administrator, Date, Enter name of individual signing as plan administrator. Includes entries for employer/plan sponsor and DFE.

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

Form 5500 (2024) v. 240311

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> 6a(1) 6a(2) 6b 6c 6d 6e 6f 6g(1) 6g(2) 6h
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>AMERICAN FUNDS GROWTH FUND OF AMERICA RET OPT</u>	B Three-digit plan number (PN)	<u>250</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>TRANSAMERICA LIFE INSURANCE COMPANY</u>	D Employer Identification Number (EIN) <u>39-0989781</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
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e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name BLAGER CONCRETE COMPANY 401(K) PLAN	
b	Name of plan sponsor BLAGER CONCRETE COMPANY	c EIN-PN 20-0634151-001
a	Plan name BMD MEDICAL CONSULTING 401(K) PLAN	
b	Name of plan sponsor BMD MEDICAL CONSULTING	c EIN-PN 01-0841421-001
a	Plan name CESAR'S WAY, INC. 401(K) PLAN PROFIT SHARING PLAN	
b	Name of plan sponsor CESAR'S WAY, INC.	c EIN-PN 04-3812367-001
a	Plan name COLORADO SURGICAL AFFILIATES, LLC PROFIT-SHARING PLAN AND TRUST	
b	Name of plan sponsor COLORADO SURGICAL AFFILIATES, LLC	c EIN-PN 81-3228396-001
a	Plan name COMCARE, INC. 401(K) PLAN	
b	Name of plan sponsor COMCARE, INC.	c EIN-PN 62-1019649-004
a	Plan name CUEVAS AND VILLA, INC. 401(K) PLAN AND TRUST	
b	Name of plan sponsor CUEVAS AND VILLA, INC.	c EIN-PN 20-0367962-001
a	Plan name DIAMOND EQUIPMENT, INC. 401(K) PLAN	
b	Name of plan sponsor DIAMOND EQUIPMENT, INC.	c EIN-PN 35-1161961-001
a	Plan name EATON DRILLING 401(K) PLAN	
b	Name of plan sponsor EATON DRILLING CO., INC.	c EIN-PN 94-1207118-001
a	Plan name ECHO BAY MARINA, LLC PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor ECHO BAY MARINA, LLC	c EIN-PN 06-1385013-001
a	Plan name ECOS ENERGY, LLC 401(K) PLAN	
b	Name of plan sponsor ECOS ENERGY, LLC	c EIN-PN 26-4332281-001
a	Plan name EDGE 401(K) RETIREMENT PLAN	
b	Name of plan sponsor EDGE PLASTICS, INC.	c EIN-PN 33-0397325-001
a	Plan name FALCON BRIDGE CAPITAL 401(K) PLAN & TRUST	
b	Name of plan sponsor FALCON BRIDGE CAPITAL, LLC	c EIN-PN 32-0206781-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	FOUR SEASONS AWNING, LLC SAVINGS PLAN	
b	Name of plan sponsor	FOUR SEASONS AWNING, LLC	c EIN-PN 20-3665808-001
a	Plan name	FRANTZ, INC. 401(K) PLAN	
b	Name of plan sponsor	FRANTZ, INC.	c EIN-PN 61-0436803-002
a	Plan name	GOSHGARIAN & ASSOCIATES, PLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GOSHGARIAN & ASSOCIATES, PROFESSIONAL LAW CORP.	c EIN-PN 95-4126355-001
a	Plan name	HAUCK BROS, INC. 401(K) PLAN	
b	Name of plan sponsor	HAUCK BROTHERS, INC.	c EIN-PN 31-0599870-001
a	Plan name	HAVIN RED E MIX, LLC 401(K) PLAN	
b	Name of plan sponsor	HAVIN RED E MIX, LLC	c EIN-PN 87-3702291-001
a	Plan name	HAWKE MEDIA, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HAWKE MEDIA, LLC	c EIN-PN 46-3254493-001
a	Plan name	HBL GROUP 401(K) PLAN	
b	Name of plan sponsor	HBL GROUP, LLC	c EIN-PN 46-0807868-001
a	Plan name	HOWARD FINISHING, LLC RETIREMENT PLAN	
b	Name of plan sponsor	HOWARD FINISHING, LLC	c EIN-PN 03-0383740-001
a	Plan name	IVANCICH & COSTIS, LLP 401(K) PLAN	
b	Name of plan sponsor	IVANCICH & COSTIS, LLP	c EIN-PN 26-2298861-001
a	Plan name	J. AMBROGI FOOD DISTRIBUTORS, INC. 401(K) PLAN	
b	Name of plan sponsor	J. AMBROGI FOOD DISTRIBUTION, INC.	c EIN-PN 51-0297646-001
a	Plan name	KEITH A. COHRS D.D.S., P.C. 401(K) PLAN	
b	Name of plan sponsor	KEITH A. COHRS D.D.S., P.C.	c EIN-PN 20-2818829-001
a	Plan name	KEITH M. KOGA, DDS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KEITH M. KOGA, DDS	c EIN-PN 99-0297840-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name KENNEDY & HAN, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KENNEDY & HAN, P.C.	c EIN-PN 85-0482265-001
a	Plan name LAVIN NATIONAL, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor LAVIN NATIONAL, LLC	c EIN-PN 72-1482691-001
a	Plan name LAWRENCE SEMICONDUCTOR RESEARCH LABORATORIES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor LAWRENCE SEMICONDUCTOR RESEARCH LABORATORY, INC.	c EIN-PN 86-0711627-777
a	Plan name MAPP DIGITAL US, LLC 401(K) PLAN	
b	Name of plan sponsor MAPP DIGITAL US, LLC	c EIN-PN 33-0901880-001
a	Plan name MENCHIE'S GLOBAL HEADQUARTERS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor MENCHIE'S GLOBAL HEADQUARTERS	c EIN-PN 26-1658984-777
a	Plan name MERCER COUNTY ELECTRIC 401(K) PLAN	
b	Name of plan sponsor MERCER COUNTY ELECTRIC, INC.	c EIN-PN 34-1278022-001
a	Plan name MERROW MANUFACTURING 401(K) PLAN	
b	Name of plan sponsor MERROW MANUFACTURING, LLC.	c EIN-PN 82-1734889-001
a	Plan name MONTANO'S RESTAURANT 401(K) PLAN	
b	Name of plan sponsor BADDOC'S, INC. DBA MONTANO'S RESTAURANT	c EIN-PN 04-3021643-001
a	Plan name NORTHERN SASH, INC. DBA THERMAL GARD WINDOW AND DOOR 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NORTHERN SASH, INC. DBA THERMAL GARD WINDOW AND DOOR 401K PROFIT SHA	c EIN-PN 35-1644182-001
a	Plan name PACIFIC HEALTHCARE GROUP LLC 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor PACIFIC HEALTHCARE GROUP LLC	c EIN-PN 88-4181241-777
a	Plan name PHILIP CIAMPA SALON 401(K) PLAN	
b	Name of plan sponsor PHILIP CIAMPA SALON	c EIN-PN 04-2784425-001
a	Plan name PHILLIPS FURNITURE, INC. EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor PHILLIPS FURNITURE, INC.	c EIN-PN 62-0969492-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	PROJEX PACIFIC INC. 401(K) PLAN	
b	Name of plan sponsor	PROJEX PACIFIC INC	c EIN-PN 51-0470194-001
a	Plan name	PROSPERA LAW, LLP 401(K) PLAN	
b	Name of plan sponsor	PROSPERA LAW, LLP	c EIN-PN 27-3613349-001
a	Plan name	PROTECTION TECHNOLOGIES, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	PROTECTION TECHNOLOGIES, INC.	c EIN-PN 88-0163638-001
a	Plan name	SAGE PARTNERS, LLC 401(K) PLAN	
b	Name of plan sponsor	SAGE PARTNERS, LLC	c EIN-PN 46-3113665-001
a	Plan name	SAKOR TECHNOLOGIES PROFIT SHARING PLAN	
b	Name of plan sponsor	SAKOR TECHNOLOGIES, INC.	c EIN-PN 38-2712885-001
a	Plan name	SALIL TREHAN MD PA 401(K) PLAN	
b	Name of plan sponsor	SALIL TREHAN MD PA	c EIN-PN 75-2894667-001
a	Plan name	SIGHT SAVERS OF AMERICA, INC. RETIREMENT PLAN	
b	Name of plan sponsor	SIGHT SAVERS OF AMERICA, INC.	c EIN-PN 30-0188234-001
a	Plan name	SIGNATURE DESTINATION MANAGEMENT 401(K) PLAN AND TRUST	
b	Name of plan sponsor	SIGNATURE DESTINATION MANAGEMENT, LLC	c EIN-PN 72-1409387-001
a	Plan name	SIMONS BROTHERS COMPANY, INC. 401(K) THRIFT/PROFIT SHARING PLAN	
b	Name of plan sponsor	SIMONS BROTHERS COMPANY, INC.	c EIN-PN 23-1089910-001
a	Plan name	TEXARKANA FUNERAL HOME, INC. RETIREMENT PLAN	
b	Name of plan sponsor	TEXARKANA FUNERAL HOME, INC.	c EIN-PN 75-0601897-001
a	Plan name	THOMAS R. PATACCA, D.D.S., INC. RETIREMENT SAVINGS TRUST AND PLAN	
b	Name of plan sponsor	THOMAS R. PATACCA, D.D.S., INC.	c EIN-PN 34-1133350-001
a	Plan name	THOMAS TRI QUACH, M.D., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	THOMAS TRI QUACH, M.D., INC.	c EIN-PN 33-0856862-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	THOMPSON PHARMACY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	THOMPSON PHARMACY, INC.	c EIN-PN 38-2171852-001
a	Plan name	THREAD INFORMATION DESIGN 401(K) PLAN	
b	Name of plan sponsor	THREAD INFORMATION DESIGN	c EIN-PN 34-1537882-001
a	Plan name	UNIVERSITY VILLAGE 401(K) PLAN	
b	Name of plan sponsor	WESTPORT HOLDINGS TAMPA, LP	c EIN-PN 65-1059079-001
a	Plan name	UP WITH PEOPLE, INC. 401(K) PLAN	
b	Name of plan sponsor	UP WITH PEOPLE, INC.	c EIN-PN 95-2563102-001
a	Plan name	VULCAN FIRE SYSTEMS, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	VULCAN FIRE SYSTEMS, INC.	c EIN-PN 61-1057957-001
a	Plan name	WADE'S FOOD CENTER, INC. 401(K) PLAN	
b	Name of plan sponsor	WADE'S FOOD CENTER, INC.	c EIN-PN 62-0976364-001
a	Plan name	AIR CLEANING TECHNOLOGIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	AIR CLEANING TECHNOLOGIES, INC.	c EIN-PN 54-2003736-001
a	Plan name	APS 401(K) PLAN	
b	Name of plan sponsor	ADVANCED POWDER SOLUTIONS OF TEXAS	c EIN-PN 20-3150581-001
a	Plan name	AYERS & BROWN, P.C. RETIREMENT PLAN	
b	Name of plan sponsor	AYERS & BROWN, P.C.	c EIN-PN 86-0541873-001
a	Plan name	AZTECS TELECOM, INC. 401(K) PLAN	
b	Name of plan sponsor	AZTECS TELECOM, INC.	c EIN-PN 33-0915556-001
a	Plan name	B & D LAW OFFICES 401(K) PLAN	
b	Name of plan sponsor	B & D LAW OFFICES, P.C.	c EIN-PN 87-3361600-001
a	Plan name	DIDAX, INC. EMPLOYEES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DIDAX, INC.	c EIN-PN 04-2599602-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name DIGITAL TOOL & DIE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DIGITAL TOOL & DIE, INC.	c EIN-PN 38-2852638-001
a	Plan name DIRECT FLOORING, INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor DIRECT FLOORING, INC.	c EIN-PN 27-3853454-001
a	Plan name FAMMA GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor FAMMA GROUP, INC.	c EIN-PN 45-5002659-001
a	Plan name FARIBORZ RODEF, DDS, INC. 401(K) PLAN	
b	Name of plan sponsor FARIBORZ RODEF, DDS, INC. DBA CHILDREN'S DENTAL FUN ZONE	c EIN-PN 32-0012113-001
a	Plan name FRAZIER & SABIN, LLP 401(K) PLAN	
b	Name of plan sponsor FRAZIER & SABIN, LLP	c EIN-PN 37-1137275-001
a	Plan name FRC 401(K) PLAN	
b	Name of plan sponsor THE FINANCIAL RESOURCE CENTER, INC.	c EIN-PN 35-1883522-001
a	Plan name FRED LAU HAWAIIAN LANDSCAPE CO., INC. PROFIT SHARING PLAN	
b	Name of plan sponsor FRED LAU HAWAIIAN LANDSCAPE CO., INC.	c EIN-PN 99-0321837-002
a	Plan name FROST ROOFING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor FROST ROOFING, INC.	c EIN-PN 34-4493960-001
a	Plan name GRABER ANIMAL HOSPITAL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GRABER ANIMAL HOSPITAL, INC.	c EIN-PN 34-1903123-001
a	Plan name GRAEAGLE CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor GRAEAGLE CONSTRUCTION	c EIN-PN 88-0499070-001
a	Plan name GRAHAM REAL ESTATE, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor GRAHAM REAL ESTATE, INC.	c EIN-PN 38-3442079-001
a	Plan name GRAND FUNDING GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor GRAND FUNDING GROUP, INC.	c EIN-PN 27-3273076-002

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
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a	Plan name GRANITE STATE ACOUSTICS, INC. 401(K) PLAN	
b	Name of plan sponsor GRANITE STATE ACOUSTICS, INC.	c EIN-PN 02-0276885-001
a	Plan name HEALTHY FUTURES CLINIC, PLLC RETIREMENT PLAN	
b	Name of plan sponsor HEALTHY FUTURES CLINIC PLLC PENSION PLAN	c EIN-PN 20-0539476-001
a	Plan name HEART CENTER OF NEVADA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SOHAIL ANJUM-DOST WATTOO, M.D.'S, LTD.	c EIN-PN 88-0161856-001
a	Plan name HEARTLIGHT PHARMACY SERVICES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SCHAAF DRUGS, LLC.	c EIN-PN 20-0329214-001
a	Plan name J.H. PENCE COMPANY RETIREMENT SAVINGS PLAN & TRUST	
b	Name of plan sponsor J.H. PENCE COMPANY	c EIN-PN 54-0838544-001
a	Plan name J.R. LENNEN CONSTRUCTION, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor LENNEN CONSTRUCTION	c EIN-PN 94-3399511-001
a	Plan name JAE 401(K) RETIREMENT PLAN	
b	Name of plan sponsor JEWELL ASSOCIATES ENGINEERS, INC.	c EIN-PN 26-1811972-001
a	Plan name KENTON FAMILY EYE CARE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KENTON FAMILY EYE CARE, INC.	c EIN-PN 34-1214040-003
a	Plan name KES SYSTEMS, INC. CROSS TESTED 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KES SYSTEMS, INC.	c EIN-PN 59-3532089-001
a	Plan name KEVIN C. GROWNEY, DDS, PC 401(K) PLAN	
b	Name of plan sponsor KEVIN C. GROWNEY, DDS, PC	c EIN-PN 36-4612196-001
a	Plan name KEYROCK ENERGY, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KEYROCK ENERGY, LLC	c EIN-PN 26-0602410-001
a	Plan name LEE, SPERLING, HISAMUNE ACCOUNTANCY CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor LEE, SPERLING, HISAMUNE ACCOUNTANCY CORPORATION	c EIN-PN 95-3308709-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	LEEDCO INTERIOR SYSTEMS, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MARION TOOL & DIE, INC. DBA MARION MANUFACTURING	c EIN-PN 61-0900219-001
a	Plan name	MARION MANUFACTURING 401(K) PLAN	
b	Name of plan sponsor	MARION TOOL & DIE, INC. DBA MARION MANUFACTURING	c EIN-PN 35-2010769-001
a	Plan name	MARK A. PRICE, DDS, MSD, P.C. 401 (K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MARK A. PRICE, DDS, MSD, P.C.	c EIN-PN 03-0352887-001
a	Plan name	METALLIC RECOVERY GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	METALLIC RECOVERY GROUP, INC.	c EIN-PN 23-2949661-001
a	Plan name	MEYLAN DAVITT JAIN AREVIAN & KIM LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MEYLAN DAVITT JAIN AREVIAN & KIM LLP	c EIN-PN 46-1854265-777
a	Plan name	MG CONSULTING, INCORPORATED FINANCIAL FREEDOM 401(K) PLAN	
b	Name of plan sponsor	MG CONSULTING, INCORPORATED	c EIN-PN 35-2070247-001
a	Plan name	MOUNTAIN VALLEY LIVESTOCK, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MOUNTAIN VALLEY LIVESTOCK, INC.	c EIN-PN 83-0220671-001
a	Plan name	MOUNTAIN WEST HOLDING CO. 401(K) PLAN AND TRUST	
b	Name of plan sponsor	MOUNTAIN WEST HOLDING CO.	c EIN-PN 26-4507278-001
a	Plan name	PAKOIL COMPANY EMPLOYEES' PROFIT-SHARING TRUST	
b	Name of plan sponsor	PAKOIL COMPANY	c EIN-PN 23-1940681-002
a	Plan name	PARADIGM HEALTH PLANS 401(K) PLAN	
b	Name of plan sponsor	PARADIGM HEALTH PLANS 401(K) PLAN	c EIN-PN 45-3581579-001
a	Plan name	PARADIGM PROPERTIES, LLC EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor	PARADIGM PROPERTIES, LLC	c EIN-PN 06-1533601-001
a	Plan name	PIONEER GROUP, INC. SAFE HARBOR 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PIONEER GROUP, INC.	c EIN-PN 48-1194272-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	PUEBLO OF ACOMA HOUSING AUTHORITY 401(K) PLAN	
b	Name of plan sponsor	PUEBLO OF ACOMA HOUSING AUTHORITY	c EIN-PN 65-1303187-001
a	Plan name	PULMONARY & CRITICAL CARE ASSOCIATES, S.C. EMPLOYEES PROFIT SHARING PLAN	
b	Name of plan sponsor	PULMONARY & CRITICAL CARE ASSOCIATES, S.C.	c EIN-PN 39-1830838-002
a	Plan name	PUNCTUAL ABSTRACT CO. INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PUNCTUAL ABSTRACT CO. INC.	c EIN-PN 72-1228652-001
a	Plan name	RICHARD ELSINGER, DMD 401(K) PLAN	
b	Name of plan sponsor	RICHARD ELSINGER, DMD	c EIN-PN 22-3433645-001
a	Plan name	RICHARD ROWAN 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	RICHARD ROWAN, DMD	c EIN-PN 94-2861305-001
a	Plan name	RINEY RONQUILLO SOULE, PLLC 401(K) PLAN	
b	Name of plan sponsor	RINEY RONQUILLO SOULE, PLLC	c EIN-PN 20-4072167-001
a	Plan name	SAN JOSE SHARKS 401(K) PLAN	
b	Name of plan sponsor	SAN JOSE SHARKS, LLC	c EIN-PN 73-1638357-002
a	Plan name	STORIED MANAGEMENT 401(K) PLAN	
b	Name of plan sponsor	STORIED MANAGEMENT, LLC	c EIN-PN 82-4913513-001
a	Plan name	STRATEGIC CONTRACTING SERVICES INC. 401(K) PLAN	
b	Name of plan sponsor	STRATEGIC CONTRACTING SERVICES INC.	c EIN-PN 20-8612710-001
a	Plan name	STREET KITCHENS, INC. 401(K) PLAN	
b	Name of plan sponsor	STREET KITCHENS, INC.	c EIN-PN 26-4082769-001
a	Plan name	TFC MANUFACTURING, INC. RETIREMENT PLAN TRUST	
b	Name of plan sponsor	TFC MANUFACTURING, INC.	c EIN-PN 91-1951857-001
a	Plan name	THE AEROLITE GROUP 401(K) PLAN	
b	Name of plan sponsor	AEROLITE EXTRUSION COMPANY	c EIN-PN 82-3731073-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	TILLERY CHEVROLET/GMC INC. 401(K) PLAN	
b	Name of plan sponsor	TILLERY CHEVROLET/GMC	c EIN-PN 85-0281064-001
a	Plan name	TIMOTHY P. MILLER TRUCKING 401(K) PLAN	
b	Name of plan sponsor	TIMOTHY P. MILLER TRUCKING, INC.	c EIN-PN 20-2756682-001
a	Plan name	VACCINE RESEARCH INSTITUTE OF SAN DIEGO 401(K) PLAN	
b	Name of plan sponsor	VACCINE RESEARCH INSTITUTE OF SAN DIEGO	c EIN-PN 33-0903864-001
a	Plan name	VALLEY AIR CRAFTS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MICHAEL SCHOENAU DBA VALLEY AIR CRAFTS	c EIN-PN 33-1129677-001
a	Plan name	VALLEY ARMATURE & ELECTRIC CO. 401(K) PLAN	
b	Name of plan sponsor	VALLEY ARMATURE & ELECTRIC COMPANY INC.	c EIN-PN 74-1915576-002
a	Plan name	VALLEY CENTRAL VETERINARY REFERRAL AND EMERGENCY CENTER 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DR. CARLOS HODGES DVM PC DBA VALLEY CENTRAL VETERINARY REFERRAL AND	c EIN-PN 23-2874136-001
a	Plan name	VALLEY DELUXE CLEANERS & INTERIOR, INC. 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	VALLEY DELUXE CLEANERS & INTERIOR, INC. 401(K) & PROFIT SHARING PLAN	c EIN-PN 22-3220586-001
a	Plan name	WAILEA GOLF LLC 401(K) AND PROFIT SHARING PLAN (NON-UNION EMPLOYEES)	
b	Name of plan sponsor	WAILEA GOLF LLC	c EIN-PN 76-0741485-001
a	Plan name	WAILEA GOLF LLC BU / GA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WAILEA GOLF LLC	c EIN-PN 76-0741485-003
a	Plan name	WAKEMAN EQUIPMENT SALES, INC. 401(K) PLAN	
b	Name of plan sponsor	WAKEMAN EQUIPMENT SALES, INC.	c EIN-PN 39-1747018-001
a	Plan name	WALEED MARI & ASSOCIATES SAFE HARBOR 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WALEED MARI & ASSOCIATES	c EIN-PN 77-0453687-001
a	Plan name	YC RUBBER CO. (NORTH AMERICA) LLC 401(K) PLAN	
b	Name of plan sponsor	YC RUBBER CO. (NORTH AMERICA) LLC	c EIN-PN 47-2227720-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
a Plan name	401(K) & PROFIT SHARING PLAN FOR KYLE HUNT & PARTNERS, INC.	
b Name of plan sponsor	KYLE HUNT & PARTNERS, INC.	c EIN-PN 41-1800701-001
a Plan name	5TZ SERVICES, LLC 401(K) PLAN	
b Name of plan sponsor	5TZ SERVICES, LLC	c EIN-PN 46-1326300-001
a Plan name	ALBRECO, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b Name of plan sponsor	ALBRECO, INC.	c EIN-PN 31-1638056-001
a Plan name	BABCOCK CONSULTING GROUP 401(K) PLAN	
b Name of plan sponsor	BABCOCK CONSULTING GROUP	c EIN-PN 72-1385871-001
a Plan name	BACK EAST, LTD 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	BACK EAST LTD	c EIN-PN 65-0706506-001
a Plan name	BONE & JOINT CLINIC OF HAWAII LLC 401(K) RETIREMENT SAVINGS PLAN	
b Name of plan sponsor	BONE & JOINT CLINIC OF HAWAII LLC	c EIN-PN 61-1747406-001
a Plan name	CANYON MEDICAL CENTER 401(K) RETIREMENT PLAN	
b Name of plan sponsor	R. MUTHAIAH, M.D., P.C. DBA CANYON MEDICAL CENTER	c EIN-PN 20-3215319-001
a Plan name	CHEM PRO LABORATORY, INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	CHEM PRO LABORATORY, INC.	c EIN-PN 95-2297708-001
a Plan name	COMMUNITIES IN SCHOOLS 401(K) RETIREMENT PLAN	
b Name of plan sponsor	COMMUNITIES IN SCHOOLS OF EL PASO, INC.	c EIN-PN 74-2024715-001
a Plan name	COMMUNITY STATE BANKSHARES, INC. EMPLOYEE STOCK OWNERSHIP PLAN	
b Name of plan sponsor	COMMUNITY STATE BANK	c EIN-PN 26-0620241-001
a Plan name	CYPRESS POINT CLUB 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	CYPRESS POINT CLUB	c EIN-PN 94-6008058-002
a Plan name	D & D PLUMBING, LLC 401(K) PLAN	
b Name of plan sponsor	D & D PLUMBING, LLC	c EIN-PN 88-0164801-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name LEHMAN DAMAN CONSTRUCTION SERVICES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor LEHMAN DAMAN CONSTRUCTION SERVICES, INC.	c EIN-PN 31-1123984-001
a	Plan name LEINGANG HOME CENTER 401(K) PLAN	
b	Name of plan sponsor LEINGANG GROUP, INC. D/B/A LEINGANG HOME CENTER	c EIN-PN 46-3955538-001
a	Plan name LESSITER PUBLICATIONS INC. 401(K) PLAN	
b	Name of plan sponsor LESSITER PUBLICATIONS INC.	c EIN-PN 39-1169768-222
a	Plan name MCCAULEY MANAGEMENT 401(K) PLAN	
b	Name of plan sponsor MCCAULEY MANAGEMENT, INC.	c EIN-PN 45-4536598-001
a	Plan name MS INTERNATIONAL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MS INTERNATIONAL, INC.	c EIN-PN 35-1562013-003
a	Plan name ONO ENTERPRISE LTD. 401(K) PROFIT SHARING PLAN (001)	
b	Name of plan sponsor ONO ENTERPRISE LTD.	c EIN-PN 99-0090333-001
a	Plan name OPERAM SAVINGS PLAN	
b	Name of plan sponsor OPERAM, INC.	c EIN-PN 47-4299682-001
a	Plan name PLENARY AMERICAS USA LTD. 401(K) PLAN	
b	Name of plan sponsor PLENARY AMERICAS USA LTD.	c EIN-PN 38-3923534-001
a	Plan name RAPT 401(K) PLAN	
b	Name of plan sponsor RICHMOND AUTO PARTS TECHNOLOGY, INC.	c EIN-PN 61-1321586-001
a	Plan name SANDHILLS STATE BANK 401(K) PLAN	
b	Name of plan sponsor SANDHILLS STATE BANK	c EIN-PN 47-0130530-001
a	Plan name SAUGUS CONSTRUCTION CORPORATION PROFIT SHARING PLAN	
b	Name of plan sponsor SAUGUS CONSTRUCTION CORPORATION	c EIN-PN 04-3131744-001
a	Plan name SAV-MORE DRUG, LLC PHARMACISTS AND MANAGERS PLAN	
b	Name of plan sponsor SAV-MORE DRUG, LLC	c EIN-PN 75-2047264-002

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name SOUTHERN PAINT & SUPPLY COMPANY 401(K) PLAN	
b	Name of plan sponsor SOUTHERN PAINT & SUPPLY COMPANY	c EIN-PN 59-0719579-001
a	Plan name SOUTHSIDE PEDIATRICS OF AIKEN, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SOUTHSIDE PEDIATRICS OF AIKEN, LLC	c EIN-PN 56-2228905-001
a	Plan name THE BLACK HAWK CASINO 401(K) PLAN	
b	Name of plan sponsor SAUK BUSINESS ENTERPRISES	c EIN-PN 02-0713814-001
a	Plan name THE BOYLAND GROUP 401(K) SAVINGS PLAN	
b	Name of plan sponsor BOYLAND AUTO ORLANDO, LLC	c EIN-PN 05-0546979-777
a	Plan name TRINITY DIRECT, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TRINITY DIRECT, LLC	c EIN-PN 22-3499334-001
a	Plan name TRIS PHARMA 401(K) PLAN	
b	Name of plan sponsor TRIS PHARMA, INC.	c EIN-PN 22-3747409-001
a	Plan name A CENTER FOR VISION CARE 401(K) RETIREMENT PLAN	
b	Name of plan sponsor A CENTER FOR VISIONCARE	c EIN-PN 95-4435884-001
a	Plan name A WISIALKO AND COMPANY 401(K) PLAN	
b	Name of plan sponsor A WISIALKO AND COMPANY LLC	c EIN-PN 46-1598908-001
a	Plan name A&G PIPING 401(K) PLAN	
b	Name of plan sponsor A&G PIPING, INC.	c EIN-PN 75-1972619-001
a	Plan name A-1 ELECTRIC COMPANY, INC. EMPLOYEES' PROFIT SHARING PLAN	
b	Name of plan sponsor A-1 ELECTRIC COMPANY, INC.	c EIN-PN 33-6004115-001
a	Plan name A. N. ABELL CO. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor A. N. ABELL AUCTION CO.	c EIN-PN 95-1872203-001
a	Plan name BARBICH HOOPER KING DILL HOFFMAN LLP 401(K) PLAN	
b	Name of plan sponsor BARBICH HOOPER KING DILL HOFFMAN	c EIN-PN 95-3705481-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name BARLEVI & CO., ACCOUNTANCY CORPORATION 401(K) PSP	
b	Name of plan sponsor BARLEVI & CO., ACCOUNTANCY CORPORATION	c EIN-PN 54-2081513-001
a	Plan name BUDGET DRY WATERPROOFING INC. 401(K) PLAN	
b	Name of plan sponsor BUDGET DRY WATERPROOFING, INC.	c EIN-PN 20-8805605-001
a	Plan name CHILD CARE COUNCIL OF KENTUCKY, INC. 401(K) PLAN	
b	Name of plan sponsor CHILD CARE COUNCIL OF KENTUCKY, INC.	c EIN-PN 31-1102545-001
a	Plan name CHILDPLACE, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor CHILDPLACE, INC.	c EIN-PN 35-1129180-001
a	Plan name CORNERSTONE ANESTHESIA GROUP, PLLC 401(K) PLAN	
b	Name of plan sponsor CORNERSTONE ANESTHESIA GROUP, PLLC	c EIN-PN 46-5671673-001
a	Plan name CORNERSTONE FELLOWSHIP 401(K) PLAN	
b	Name of plan sponsor CORNERSTONE FELLOWSHIP	c EIN-PN 73-1316703-001
a	Plan name DIVERSIFIED SITE WORKS, LLC 401(K) PLAN	
b	Name of plan sponsor DIVERSIFIED SITE WORKS, LLC	c EIN-PN 52-2212873-001
a	Plan name DIVFINSERV 401(K)	
b	Name of plan sponsor DIVERSIFIED FINANCIAL SERVICES, INC.	c EIN-PN 20-1848122-001
a	Plan name DIXON AUTOMATIC TOOL, INC. EMPLOYEES' PROFIT SHARING & 401(K) RETIREMENT PLAN	
b	Name of plan sponsor DIXON AUTOMATIC TOOL, INC.	c EIN-PN 36-2231217-001
a	Plan name DK SYSTEMS 401(K) PLAN	
b	Name of plan sponsor DK SYSTEMS, INC.	c EIN-PN 75-3054397-001
a	Plan name FUSION INTEGRATED SOLUTIONS, LLC 401(K) PLAN	
b	Name of plan sponsor FUSION INTEGRATED SOLUTIONS, LLC	c EIN-PN 20-1651003-001
a	Plan name GULATI & ASSOCIATES, INC. PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor GULATI & ASSOCIATES, INC.	c EIN-PN 03-0447697-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name GWINNETT COUNTY HABITAT FOR HUMANITY, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor GWINNETT COUNTY HABITAT FOR HUMANITY, INC.	c EIN-PN 58-1795694-001
a	Plan name I & C ENGINEERING COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor I & C ENGINEERING COMPANY, INC.	c EIN-PN 04-3059259-003
a	Plan name JOHN P. FRANGIE, M.D., P.C. RETIREMENT PLAN	
b	Name of plan sponsor JOHN P. FRANGIE, M.D., P.C.	c EIN-PN 46-0538578-001
a	Plan name AMERICAN TELEPHONE 401(K) PLAN	
b	Name of plan sponsor DESIGN BUSINESS COMMUNICATIONS, INC.	c EIN-PN 86-0736656-001
a	Plan name AMES, INC. 401(K) PLAN	
b	Name of plan sponsor AMES, INC.	c EIN-PN 52-1039531-001
a	Plan name BARNARD MEZZANOTTE PINNIE & SEELAUS 401(K) PLAN	
b	Name of plan sponsor BARNARD MEZZANOTTE PINNIE & SEELAUS, LLP	c EIN-PN 23-2114178-002
a	Plan name BULTYNCK & CO. 401(K) PLAN	
b	Name of plan sponsor BULTYNCK & CO., P.L.L.C.	c EIN-PN 20-3920878-777
a	Plan name BURCH COURT DENTAL RETIREMENT PLAN	
b	Name of plan sponsor BURCH COURT DENTAL	c EIN-PN 61-1338337-001
a	Plan name CHILES & SONS-LAMAN, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CHILES & SONS-LAMAN, INC.	c EIN-PN 34-4492949-003
a	Plan name COUNTRYSIDE CULLIGAN 401(K) & INCENTIVE SAVINGS PLAN	
b	Name of plan sponsor COUNTRYSIDE MANAGEMENT, INC.	c EIN-PN 41-1813535-001
a	Plan name COYLE REPRODUCTIONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COYLE REPRODUCTIONS, INC.	c EIN-PN 95-2955426-001
a	Plan name ETOLOGY, INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor ETOLOGY, INC.	c EIN-PN 20-2947536-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
a	Plan name	GAINLINE FINANCIAL PARTNERS, LLC 401(K) PLAN
b	Name of plan sponsor	GAINLINE FINANCIAL PARTNERS, LLC
c	EIN-PN	87-2523664-001
a	Plan name	GARDEN CITY EYE CARE INC. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	GARDEN CITY EYE CARE, INC.
c	EIN-PN	05-0464416-001
a	Plan name	IBEW LOCAL UNION NO. 444 PENSION PLAN
b	Name of plan sponsor	INTERNATIONAL BROTHERHOOD OF ELECTRICAL UNION WORKERS LOCAL UNION 44
c	EIN-PN	73-6153191-001
a	Plan name	ICU PRODUCTIONS, INC. 401K PROFIT SHARING PLAN
b	Name of plan sponsor	ICU PRODUCTION, INC.
c	EIN-PN	41-2252815-002
a	Plan name	ID SYSTEMS, INC. 401(K) PLAN
b	Name of plan sponsor	ID SYSTEMS, INC.
c	EIN-PN	38-2419366-002
a	Plan name	ILAPAK, INC. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	ILAPAK, INC.
c	EIN-PN	13-3036089-002
a	Plan name	ILLI'S AUTO SERVICE, INC. 401(K) PLAN
b	Name of plan sponsor	ILLI'S AUTO SERVICE, INC.
c	EIN-PN	38-2283299-002
a	Plan name	JOHNSON QUARRIES 401(K) PLAN
b	Name of plan sponsor	JOHNSON QUARRIES, INC.
c	EIN-PN	23-2976143-001
a	Plan name	JOHNSON-FRANK & ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	JOHNSON-FRANK & ASSOCIATES, INC.
c	EIN-PN	95-3086260-001
a	Plan name	MCCUTCHEON AGENCY LTD RETIREMENT SAVINGS PLAN
b	Name of plan sponsor	MCCUTCHEON INSURANCE AGENCY LTD
c	EIN-PN	36-3087849-001
a	Plan name	MCDONALD LIQUOR INC. 401(K) PLAN
b	Name of plan sponsor	MCDONALD LIQUOR INC.
c	EIN-PN	41-1833330-001
a	Plan name	MCDOUGALL & SONS, INC. RETIREMENT PLAN
b	Name of plan sponsor	MCDOUGALL & SONS, INC.
c	EIN-PN	91-0978839-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name MUSKEGON COUNTY MUSEUM PROFIT SHARING AND SAVINGS PLAN	
b	Name of plan sponsor MUSKEGON COUNTY MUSEUM	c EIN-PN 38-1367319-001
a	Plan name MUSSEY, SARBER & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor MUSSEY, SARBER & ASSOCIATES, P.C.	c EIN-PN 75-3025214-001
a	Plan name MXD PROCESS RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor MIXER DIRECT INC., DBA MXD PROCESS	c EIN-PN 27-1855081-001
a	Plan name ORANGE-SOL BLENDING & PACKAGING, INC. 401(K) PLAN	
b	Name of plan sponsor ORANGE-SOL BLENDING & PACKAGING, INC.	c EIN-PN 86-0772941-001
a	Plan name OREGON COLLEGE OF ORIENTAL MEDICINE 401(K) PLAN	
b	Name of plan sponsor OREGON COLLEGE OF ORIENTAL MEDICINE	c EIN-PN 93-0845182-001
a	Plan name ORLANDO MEDICAL CENTER, P. L. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ORLANDO MEDICAL CENTER, P. L.	c EIN-PN 81-0736230-001
a	Plan name PORT PUBLICATIONS, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor PORT PUBLICATIONS, INC.	c EIN-PN 39-1017137-001
a	Plan name PORTER MCGUIRE KIAKONA, LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PORTER KIAKONA KOPPER, LLP	c EIN-PN 99-0210947-001
a	Plan name RAY HENSLEY, INC. RET. PLAN	
b	Name of plan sponsor RAY HENSLEY, INC.	c EIN-PN 31-0889689-001
a	Plan name RAZOR, USA, LLC EMPLOYEES' 401(K) PLAN	
b	Name of plan sponsor RAZOR, USA, LLC	c EIN-PN 95-4807765-001
a	Plan name SBAC ANIMAL CLINIC, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SBAC ANIMAL CLINIC, INC	c EIN-PN 33-4162060-001
a	Plan name SCHAEFFER DOUGLAS TITLE 401(K) PLAN	
b	Name of plan sponsor SCHAEFFER DOUGLAS TITLE	c EIN-PN 20-3601896-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name SPRING LAKE DENTAL GROUP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SPRING LAKE DENTAL GROUP	c EIN-PN 56-1957791-001
a	Plan name THE CITIZENS BANK EMPLOYEES PROFIT SHARING PLAN	
b	Name of plan sponsor THE CITIZENS BANK	c EIN-PN 61-0156390-002
a	Plan name TRUXAW & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor JOSEPH C. TRUXAW AND ASSOCIATES, INC.	c EIN-PN 95-2992708-001
a	Plan name WATTS COPY SYSTEMS, INC. EMPLOYEE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WATTS COPY SYSTEMS, INC.	c EIN-PN 37-1117989-001
a	Plan name AC + CO ARCHITECTURE COMMUNITY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor AC + CO ARCHITECTURE COMMUNITY	c EIN-PN 93-1228023-001
a	Plan name ACADEMIA MENONITA RETIREMENT PLAN	
b	Name of plan sponsor ACADEMIA MENONITA	c EIN-PN 66-0238935-001
a	Plan name ALL AIR MECHANICAL CONTRACTOR INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor ALL AIR MECHANICAL CONTRACTOR, INC.	c EIN-PN 20-5664372-001
a	Plan name ARICA CONSULTING & CONTRACTING, LLC 401(K)	
b	Name of plan sponsor ARICA CONSULTING & CONTRACTING, LLC	c EIN-PN 52-2292509-001
a	Plan name ARISE HIGH SCHOOL 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor ARISE HIGH SCHOOL	c EIN-PN 20-8887944-001
a	Plan name ARROW TRAILER AND EQUIPMENT 401(K) PLAN	
b	Name of plan sponsor ARROW TRAILER AND EQUIPMENT CO.	c EIN-PN 37-0755336-001
a	Plan name BASSETT SALES CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BASSETT SALES CORPORATION	c EIN-PN 95-3666930-001
a	Plan name BORCHARDT, CORONA & FAETH 401(K) PLAN	
b	Name of plan sponsor BORCHARDT, CORONA & FAETH	c EIN-PN 77-0144125-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name BOURNE ENTERPRISES, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor BOURNE ENTERPRISES, INC.	c EIN-PN 04-2489300-001
a	Plan name BOW CONSTRUCTION MANAGEMENT SERVICES, INC. 401(K) RETIREMENT SAVINGS PLAN (001)	
b	Name of plan sponsor BOW CONSTRUCTION MANAGEMENT SERVICE, INC.	c EIN-PN 26-3709796-001
a	Plan name CARDEL HOMES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CARDEL U.S. MANAGEMENT, LLC	c EIN-PN 84-1846681-001
a	Plan name CARDIOLOGY & VASCULAR ASSOCIATES, P.C. 401(K) SAFE HARBOR PROFIT SHARING PLAN	
b	Name of plan sponsor CARDIOLOGY & VASCULAR ASSOCIATES, P.C.	c EIN-PN 38-3468933-001
a	Plan name CHRISTIAN HEALTHCARE CENTERS 401(K) PLAN	
b	Name of plan sponsor CHRISTIAN HEALTHCARE CENTERS, INC.	c EIN-PN 47-4100326-001
a	Plan name CHRISTIAN HERITAGE ACADEMY 401(K) PLAN	
b	Name of plan sponsor CHRISTIAN HERITAGE ACADEMY	c EIN-PN 36-3237612-001
a	Plan name CHRISTOPHER M. PENNISI, DDS, PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CHRISTOPHER M. PENNISI, DDS, PLLC	c EIN-PN 26-3030636-001
a	Plan name CHSU 401(K) PLAN	
b	Name of plan sponsor CALIFORNIA HEALTH SCIENCES UNIVERSITY	c EIN-PN 45-4846058-001
a	Plan name CHURCHLAND ANIMAL CLINIC, INC. EMPLOYEE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CHURCHLAND ANIMAL CLINIC, INC.	c EIN-PN 54-0941437-001
a	Plan name COMPASS COMMERCIAL CONSTRUCTION GROUP 401(K) PLAN	
b	Name of plan sponsor COMPASS COMMERCIAL CONSTRUCTION GROUP	c EIN-PN 27-3042323-777
a	Plan name COMPREHENSIVE PAIN MANAGEMENT PARTNERS, LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COMPREHENSIVE PAIN MANAGEMENT PARTNERS, LLP	c EIN-PN 59-3426104-001
a	Plan name D.E.S., INC. 401(K) PLAN	
b	Name of plan sponsor DIVERSIFIED ENVIRONMENTAL SERVICES, INC.	c EIN-PN 59-3055432-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name D.I.J. CONSTRUCTION, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor D.I.J. CONSTRUCTION, INC.	c EIN-PN 74-2291006-001
a	Plan name DAN G. WILKER, DDS 401K PROFIT SHARING PLAN	
b	Name of plan sponsor DAN G. WILKER, DDS	c EIN-PN 34-1745172-001
a	Plan name DOUGHBOY RESTAURANT GROUP RETIREMENT PLAN	
b	Name of plan sponsor DOUGHBOY RESTAURANT GROUP, LLC	c EIN-PN 47-2447231-001
a	Plan name DOUGLAS MACHINES CORP 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor DOUGLAS MACHINES CORP	c EIN-PN 59-1906520-001
a	Plan name DOVER TANK AND PLATE CO. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor THE DOVER TANK & PLATE CO.	c EIN-PN 34-0188810-002
a	Plan name DOWN RIVER OBSTETRICS AND GYNECOLOGY PLC 401(K) PLAN	
b	Name of plan sponsor DOWN RIVER OBSTETRICS AND GYNECOLOGY, PLC	c EIN-PN 51-0417353-001
a	Plan name FCNB BANK EMPLOYEES SAVINGS & RETIREMENT PLAN	
b	Name of plan sponsor FCNB BANK	c EIN-PN 43-0224380-001
a	Plan name FENWEST, INC. 401(K) PLAN	
b	Name of plan sponsor FENWEST, INC.	c EIN-PN 02-0523632-001
a	Plan name GRANVILLE HOMES, INC. RETIREMENT PLAN	
b	Name of plan sponsor GRANVILLE HOMES, INC.	c EIN-PN 77-0236102-002
a	Plan name GRAPHIXDIRECT.COM, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GRAPHIXDIRECT.COM INC.	c EIN-PN 27-1287974-002
a	Plan name GRAYCO ENTERPRISES, INC. 401(K) PLAN	
b	Name of plan sponsor GRAYCO ENTERPRISES, INC.	c EIN-PN 36-4322896-001
a	Plan name GREAT LAKES PULMONARY AND SLEEP ASSOCIATES S.C. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor GREAT LAKES PULMONARY AND SLEEP ASSOCIATES, INC.	c EIN-PN 20-0676469-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name IMPAC SALES, INC. 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor IMPAC SALES, INC.	c EIN-PN 20-8221129-001
a	Plan name IMPACT LABEL CORPORATION EMPLOYEE'S 401(K) SAVINGS PLAN	
b	Name of plan sponsor IMPACT LABEL CORPORATION	c EIN-PN 38-1746654-002
a	Plan name IMPORT LOGISTICS, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor IMPORT LOGISTICS, INC.	c EIN-PN 36-3798354-001
a	Plan name JAMES L. GRAVES CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor JAMES L. GRAVES CONSTRUCTION	c EIN-PN 26-4072884-001
a	Plan name KIDZ BIZ PEDIATRICS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor KIDZ BIZ PEDIATRICS	c EIN-PN 43-1940340-001
a	Plan name MARPLES GEARS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MARPLES GEARS, INC.	c EIN-PN 95-4226164-001
a	Plan name MARTHINSEN AND SALVITTI INSURANCE GROUP 401(K) SALARY REDUCTION PLAN AND TRUST	
b	Name of plan sponsor MARTHINSEN AND SALVITTI INSURANCE GROUP	c EIN-PN 25-1724440-001
a	Plan name MARTY'S PIZZA 401(K) PLAN	
b	Name of plan sponsor MARTY'S BROOKFIELD, INC.	c EIN-PN 39-1647623-001
a	Plan name MIAMI REGIONAL UNIVERSITY INVEST YOUR FUTURE PLAN	
b	Name of plan sponsor MANAGEMENT RESOURCES, INC. DBA MIAMI REGIONAL UNIVERSITY	c EIN-PN 65-0633679-001
a	Plan name NWGE 401(K) PLAN	
b	Name of plan sponsor NORTHWEST GENERAL ENGINEERING	c EIN-PN 68-0454297-001
a	Plan name O SKIN CARE LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor O SKIN CARE LLC	c EIN-PN 26-0374403-001
a	Plan name PARAGON PLUS, INC. DBA PARAGON STEEL 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PARAGON PLUS, INC. DBA PARAGON STEEL	c EIN-PN 33-0300619-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	PARAMOUNT REHABILITATION SERVICES 401(K) PLAN	
b	Name of plan sponsor	PARAMOUNT REHABILITATION SERVICES	c EIN-PN 38-3378702-001
a	Plan name	PARTNERS SUPPLY COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	PARTNERS SUPPLY COMPANY, INC.	c EIN-PN 62-1633017-001
a	Plan name	POWER DELIVERY CONSULTANTS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	POWER DELIVERY CONSULTANTS, INC.	c EIN-PN 14-1749813-001
a	Plan name	PWA RETIREMENT PLAN	
b	Name of plan sponsor	PERHATS WENSTROM ASSOCIATES, INC.	c EIN-PN 36-3611103-002
a	Plan name	Q3 TECHNOLOGIES 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	Q3 TECHNOLOGIES LLC	c EIN-PN 20-4855347-001
a	Plan name	QUALITY ASSURED LABEL, INC. SAVINGS PLAN	
b	Name of plan sponsor	QUALITY ASSURED LABEL, INC.	c EIN-PN 41-1492638-002
a	Plan name	RITTER MAHER ARCHITECTS, LLC 401(K) PLAN	
b	Name of plan sponsor	RITTER MAHER ARCHITECTS, LLC	c EIN-PN 03-0497336-001
a	Plan name	SCHOOL MANAGEMENT SERVICES RETIREMENT PLAN	
b	Name of plan sponsor	SCHOOL MANAGEMENT SERVICES, LLC	c EIN-PN 56-2545979-001
a	Plan name	SLEEP SOLUTIONS SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor	SLEEP SOLUTIONS SERVICES, LLC	c EIN-PN 43-2067227-001
a	Plan name	SLIM CHICKENS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SLIM CHICKENS	c EIN-PN 45-3985800-001
a	Plan name	SMART, LLC 401(K) PLAN	
b	Name of plan sponsor	SMART, LLC	c EIN-PN 30-0269003-001
a	Plan name	TODD W. YOUNG & ASSOCIATES, INC. 401(K) PLAN	
b	Name of plan sponsor	TODD W. YOUNG & ASSOCIATES, INC DBA ZIMMER BIOMET SOUTHWEST OHIO	c EIN-PN 47-5068498-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	TOM AHL CHRYSLER-BUICK 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TOM AHL CHRYSLER-BUICK, INC.	c EIN-PN 34-1151496-001
a	Plan name	WELL GO USA, INC. 401(K) PLAN	
b	Name of plan sponsor	WELL GO USA, INC.	c EIN-PN 75-2542366-001
a	Plan name	FOLEY EXCAVATING, INC. RETIREMENT PLAN	
b	Name of plan sponsor	FOLEY EXCAVATING, INC.	c EIN-PN 25-1810597-001
a	Plan name	FONTENELLE & GOODREAU INSURANCE, LLC RETIREMENT PLAN	
b	Name of plan sponsor	FONTENELLE & GOODREAU INSURANCE, LLC	c EIN-PN 20-5889299-001
a	Plan name	CCEDA 401(K) PLAN	
b	Name of plan sponsor	CALIFORNIA COMMUNITY ECONOMIC DEVELOPMENT ASSOCIATION	c EIN-PN 94-3080095-001
a	Plan name	L.E.C. SERVICE, INC. 401(K) PLAN	
b	Name of plan sponsor	L.E.C. SERVICE, INC.	c EIN-PN 95-2891617-001
a	Plan name	TAHLEQUAH LUMBER COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TAHLEQUAH LUMBER COMPANY, INC.	c EIN-PN 73-0733285-001
a	Plan name	TANIS CONCRETE, INC. 401(K) PLAN	
b	Name of plan sponsor	TANIS CONCRETE, INC.	c EIN-PN 22-1567712-001
a	Plan name	ACCESS TO INDEPENDENCE 401(K) PLAN	
b	Name of plan sponsor	ACCESS TO INDEPENDENCE	c EIN-PN 34-1389369-001
a	Plan name	CITRON CLOTHING, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	CITRON CLOTHING, INC.	c EIN-PN 95-4145110-001
a	Plan name	CITY OF METTER RETIREMENT PLAN	
b	Name of plan sponsor	CITY OF METTER	c EIN-PN 58-6000621-001
a	Plan name	GENE'S AUTO PARTS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GENE'S AUTO PARTS, INC	c EIN-PN 38-1577811-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	GENERAL PLASTICS, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	GENERAL PLASTICS, INC.	c EIN-PN 39-1593017-001
a	Plan name	PRE-BANC BUSINESS CREDIT, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PRE-BANC BUSINESS CREDIT, INC.	c EIN-PN 95-4359826-001
a	Plan name	PRECISION CABLE ASSEMBLIES, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PRECISION CABLE ASSEMBLIES, INC.	c EIN-PN 39-1787647-002
a	Plan name	THE EMF COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	THE EMF COMPANY, INC.	c EIN-PN 75-1552044-001
a	Plan name	THE FIRST TRUST HOLDINGS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FIRST TRUST HOLDINGS, INC.	c EIN-PN 37-1307139-222
a	Plan name	ADROIT USA, INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor	ADROIT USA, INC.	c EIN-PN 27-2254964-001
a	Plan name	ADVANCED CARGO CORPORATION 401(K) P/S PLAN	
b	Name of plan sponsor	ADVANCED CARGO CORPORATION	c EIN-PN 41-1663563-001
a	Plan name	ADVANCED MACHINING & AUTOMATION, INC. 401(K) PLAN	
b	Name of plan sponsor	ADVANCED MACHINING & AUTOMATION, INC.	c EIN-PN 42-1482013-001
a	Plan name	ADVANCED MECHANICAL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ADVANCED MECHANICAL, INC.	c EIN-PN 93-1321840-001
a	Plan name	COASTAL BEND WORKFORCE DEVELOPMENT BOARD 401(K) PLAN	
b	Name of plan sponsor	COASTAL BEND WORKFORCE DEVELOPMENT BOARD	c EIN-PN 74-2424633-001
a	Plan name	COBRA MOTO LLC 401(K) PLAN	
b	Name of plan sponsor	COBRA MOTO, LLC	c EIN-PN 27-1784830-001
a	Plan name	GILLIE HYDE FORD LINCOLN, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	GILLIE HYDE FORD LINCOLN, INC.	c EIN-PN 61-0700786-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	MAAS BROTHERS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	MAAS BROTHERS, INC. PROFIT SHARING PLAN	c EIN-PN 91-1907561-001
a	Plan name	MACIA AND MARIN PROFIT SHARING PLAN	
b	Name of plan sponsor	MACIA AND MARIN	c EIN-PN 65-0920438-001
a	Plan name	MACOMB NEUROLOGY ASSOCIATES, P.C. PROFIT SHARING PLAN	
b	Name of plan sponsor	MACOMB NEUROLOGY ASSOCIATES, P.C.	c EIN-PN 38-3587490-001
a	Plan name	MADDEN ELEVATOR COMPANY RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	MADDEN ELEVATOR COMPANY	c EIN-PN 27-4404800-001
a	Plan name	MAETZOLD HOMES, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MAETZOLD HOMES, INC.	c EIN-PN 41-2009271-001
a	Plan name	PRIMECARE HOME CARE SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	PRIMECARE HOME CARE SERVICES, INC.	c EIN-PN 65-1317901-001
a	Plan name	PRINCESS ANNE ENT & ALLERGY, PC 401(K) PLAN	
b	Name of plan sponsor	PRINCESS ANNE ENT & ALLERGY, P.C.	c EIN-PN 45-5573995-001
a	Plan name	PRIORITY MOTOR GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	PRIORITY MOTOR GROUP, INC.	c EIN-PN 47-2044656-001
a	Plan name	TOTAL NETWORK MANUFACTURING 401(K) PLAN	
b	Name of plan sponsor	TOTAL NETWORK MANUFACTURING	c EIN-PN 35-2644359-001
a	Plan name	ALLESCO 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	JOHN SHURTLEFF COMPANY, INC.	c EIN-PN 73-0783500-001
a	Plan name	ALPHA CONSULTING ENGINEERS, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	ALPHA CONSULTING ENGINEERS, INC.	c EIN-PN 25-1719838-001
a	Plan name	COMSTOCK JOHNSON ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	COMSTOCK JOHNSON ARCHITECTS, INC.	c EIN-PN 68-0039251-003

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name CONNECTICUT FOOT SPECIALISTS, P.C. 401(K) PLAN	
b	Name of plan sponsor CONNECTICUT FOOT SPECIALISTS, P.C.	c EIN-PN 06-1012932-001
a	Plan name CONNELL & ASSOCIATES LTD. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CONNELL & ASSOCIATES LTD.	c EIN-PN 26-3776281-001
a	Plan name CONNERY CONSTRUCTION, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor CONNERY CONSTRUCTION, INC.	c EIN-PN 39-1845420-001
a	Plan name GREATER MILWAUKEE PLASTIC SURGEONS, S.C. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor GREATER MILWAUKEE PLASTIC SURGEONS, S.C.	c EIN-PN 39-1819941-001
a	Plan name QUALITY LAPEL PINS, INC. 401(K) PLAN	
b	Name of plan sponsor QUALITY LAPEL PINS, INC.	c EIN-PN 41-2119859-001
a	Plan name TTI LOGISTICS, LLC PROFIT SHARING 401(K) PLAN AND TRUST	
b	Name of plan sponsor TTI LOGISTICS, LLC	c EIN-PN 22-3461921-002
a	Plan name TUCKER, ALBIN & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor TUCKER, ALBIN & ASSOCIATES	c EIN-PN 32-0386771-001
a	Plan name TURBO TRANSPORTATION, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TURBO TRANSPORTATION, INC.	c EIN-PN 47-2895452-001
a	Plan name ANDERSON ORAL AND MAXILLOFACIAL SURGERY, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ANDERSON ORAL AND MAXILLOFACIAL SURGERY, P.C.	c EIN-PN 57-1122288-001
a	Plan name CPS SACRAMENTO 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor LAWRENCE B. LONG INSURANCE SERVICES, INC. DBA CPS SACRAMENTO	c EIN-PN 68-0046629-001
a	Plan name CRAFT HOUSE PIZZA, LLC 401K SAVINGS PLAN	
b	Name of plan sponsor CRAFT HOUSE PIZZA, LLC	c EIN-PN 27-3274820-001
a	Plan name CREATIVE DESIGN CONCEPTS, INC. 401(K) PLAN	
b	Name of plan sponsor CREATIVE DESIGN CONCEPTS, INC. 401(K) PLAN	c EIN-PN 47-2388058-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a Plan name	MDL 401(K) PLAN	
b Name of plan sponsor	MINERAL DEVELOPMENT, LLC	c EIN-PN 46-5488841-001
a Plan name	REICH INSTALLATION SERVICES RETIREMENT PLAN	
b Name of plan sponsor	REICH INSTALLATION SERVICES, INC.	c EIN-PN 39-1727024-001
a Plan name	ROAM ARTISAN BURGERS 401(K) PLAN	
b Name of plan sponsor	ROAM RESTAURANT GROUP, INC.	c EIN-PN 88-3541442-001
a Plan name	ARTERIOCYTE 401(K) PROFIT SHARING PLAN & TRUST	
b Name of plan sponsor	ARTERIOCYTE, INC.	c EIN-PN 26-1272740-001
a Plan name	DANHAUER DRUG COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	DANHAUER DRUG, INC.	c EIN-PN 61-0992161-001
a Plan name	HICKORY HILL RETIREMENT COMMUNITY, LLC 401(K)/PROFIT SHARING PLAN	
b Name of plan sponsor	HICKORY HILL RETIREMENT COMMUNITY, LLC	c EIN-PN 37-1544274-001
a Plan name	VANDERFORD & RUIZ, LLP 401(K) PLAN	
b Name of plan sponsor	VANDERFORD & RUIZ, LLP	c EIN-PN 56-2531267-001
a Plan name	DEGRAFFENRIED & COMPANY RETIREMENT PLAN	
b Name of plan sponsor	DEGRAFFENRIED & COMPANY	c EIN-PN 72-1349735-001
a Plan name	DELBIAGGIO CONSTRUCTION, INC. 401K PLAN	
b Name of plan sponsor	DELBIAGGIO CONSTRUCTION, INC.	c EIN-PN 68-0257089-001
a Plan name	DELL-COMM, INC. 401(K) PLAN	
b Name of plan sponsor	DELL-COMM, INC.	c EIN-PN 41-1660280-001
a Plan name	HLN CONSULTING, LLC 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	HLN CONSULTING, LLC	c EIN-PN 22-3516344-001
a Plan name	HM MEDICAL CONSULTANTS PROFESS 401(K) PROFIT SHARING PLAN TRUST	
b Name of plan sponsor	HM MEDICAL CONSULTANTS PROFESS	c EIN-PN 84-1440532-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	MISTLIN MOTORS 401(K) PLAN	
b	Name of plan sponsor	MISTLIN MOTORS	c EIN-PN 94-2540043-001
a	Plan name	VICTOR EMANUEL NATURE TOURS 401(K) PLAN	
b	Name of plan sponsor	VICTOR EMANUEL NATURE TOURS, INC.	c EIN-PN 74-1942295-001
a	Plan name	NASHVILLE TENT & AWNING 401(K) PLAN PROFIT SHARING PLAN	
b	Name of plan sponsor	NASHVILLE TENT & AWNING CO., INC.	c EIN-PN 85-3079357-001
a	Plan name	NATIONAL AUTO LENDERS, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	NATIONAL AUTO LENDERS, INC.	c EIN-PN 65-0660723-001
a	Plan name	NATIONAL FIELD REPRESENTATIVES 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	NATIONAL FIELD REPRESENTATIVES, LLC	c EIN-PN 02-0451448-001
a	Plan name	NATIONAL TECHNOLOGIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NATIONAL TECHNOLOGIES, INC.	c EIN-PN 39-0981304-001
a	Plan name	NATURAL CARE WELLNESS CENTER 401(K) PLAN	
b	Name of plan sponsor	NATURAL CARE WELLNESS CENTER	c EIN-PN 20-5364037-001
a	Plan name	BECKWITH LUMBER COMPANY, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	BECKWITH LUMBER COMPANY, INC.	c EIN-PN 55-0525058-001
a	Plan name	DOYLE & ASSOCIATES, PLLC 401(K) PLAN	
b	Name of plan sponsor	DOYLE & ASSOCIATES, PLLC	c EIN-PN 20-1414332-001
a	Plan name	DR PEPPER MUSEUM AND FREE ENTERPRISE INSTITUTE 401(K) PLAN	
b	Name of plan sponsor	DR PEPPER MUSEUM AND FREE ENTERPRISE INSTITUTE	c EIN-PN 74-2497117-001
a	Plan name	DR. GEORGE T. MATHAI PLLC 401(K) PLAN	
b	Name of plan sponsor	DR. GEORGE T. MATHAI PLLC	c EIN-PN 20-0461962-001
a	Plan name	INFRONT DEVICES & SYSTEMS, LLC 401(K) SAVINGS PLAN	
b	Name of plan sponsor	INFRONT DEVICES & SYSTEMS, LLC	c EIN-PN 73-1646352-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name INNOVATION EDGE 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor INNOVATION EDGE	c EIN-PN 20-8196742-002
a	Plan name SCOTT A. FISHMAN, DDS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SCOTT A. FISHMAN, D.D.S., INC. DBA PEDIATRIC DENTAL ARTS	c EIN-PN 27-1598713-001
a	Plan name SCOTT MCLEOD PLUMBING, INC. DEFINED BENEFIT PLAN	
b	Name of plan sponsor SCOTT MCLEOD PLUMBING, INC.	c EIN-PN 32-0067594-002
a	Plan name WEST COAST FIRESTOPPING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WEST COAST FIRESTOPPING, INC.	c EIN-PN 20-8550680-001
a	Plan name WESTERN CAMPS, INC. 401(K) PLAN	
b	Name of plan sponsor WESTERN CAMPS, INC.	c EIN-PN 95-2499851-001
a	Plan name SEW MANY PARTS, INC. SAFE HARBOR 401(K) PLAN	
b	Name of plan sponsor SEW MANY PARTS	c EIN-PN 27-0130750-001
a	Plan name BERGSTRESSER & POLLOCK, LLC 401(K) PLAN	
b	Name of plan sponsor BERGSTRESSER & POLLOCK, LLC	c EIN-PN 45-3592245-001
a	Plan name BERICH MASONRY, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor BERICH MASONRY, INC.	c EIN-PN 20-2612940-001
a	Plan name BERNIE GRUNDMAN MASTERING STUDIO 401(K) PLAN	
b	Name of plan sponsor BERNIE GRUNDMAN MASTERING STUDIO	c EIN-PN 95-3839051-003
a	Plan name BESTCO ELECTRIC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BESTCO ELECTRIC, INC.	c EIN-PN 94-2212170-002
a	Plan name BHP MANAGEMENT 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor BHP MANAGEMENT CORP.	c EIN-PN 26-1404372-001
a	Plan name DUVALL FORD COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DUVALL FORD COMPANY, INC.	c EIN-PN 58-1538949-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	DYNAMIC DOWNHOLE SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor	DYNAMIC DOWNHOLE SERVICES, LLC	c EIN-PN 26-2612443-001
a	Plan name	INTERNATIONAL TANK SERVICE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	INTERNATIONAL TANK SERVICE, INC.	c EIN-PN 34-1277387-001
a	Plan name	INTERPRINT INCORPORATED SAVINGS PLAN	
b	Name of plan sponsor	INTERPRINT, INC.	c EIN-PN 59-0871253-001
a	Plan name	INTERVENTIONAL PAIN CONSULTANTS, LLC 401(K) PLAN	
b	Name of plan sponsor	INTERVENTIONAL PAIN CONSULTANTS LLC	c EIN-PN 83-0901793-001
a	Plan name	INTRINSYX TECHNOLOGIES 401(K) PLAN	
b	Name of plan sponsor	INTRINSYX TECHNOLOGIES	c EIN-PN 77-0539893-001
a	Plan name	NEW KNOXVILLE SUPPLY CO. INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NEW KNOXVILLE SUPPLY CO. INC.	c EIN-PN 34-4314480-001
a	Plan name	NEW LIFE VENTURES, INC. 401(K) PS PLAN	
b	Name of plan sponsor	NEW LIFE VENTURES, INC.	c EIN-PN 20-0339207-001
a	Plan name	NEW TITLE SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	NEW TITLE SERVICES	c EIN-PN 20-0337649-001
a	Plan name	WHITTIER MEDICAL MANAGEMENT ASSOCIATES, INC. RETIREMENT PLAN	
b	Name of plan sponsor	WHITTIER MEDICAL MANAGEMENT ASSOCIATES, INC.	c EIN-PN 46-3012973-001
a	Plan name	OASIS AIR AND SOLAR 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	OASIS AIR AND SOLAR	c EIN-PN 95-2865840-001
a	Plan name	OASYS 401(K) PLAN	
b	Name of plan sponsor	OFFICE AUTOMATION SYSTEMS, LTD. DBA OASYS, LTD.	c EIN-PN 52-1747644-001
a	Plan name	OC AUTO TEAM 401(K) PLAN	
b	Name of plan sponsor	PB&J AUTOMOTIVE, INC. DBA TUSTIN MAZDA/TUSTIN HYUNDAI	c EIN-PN 16-1690678-002

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name OCEAN VIEW DENTAL 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor SUMMER T. WOOD, D.M.D. DBA OCEAN VIEW DENTAL	c EIN-PN 45-3512542-001
a	Plan name JCL SERVICE COMPANY 401(K) PLAN	
b	Name of plan sponsor JCL SERVICE COMPANY LLC	c EIN-PN 46-0577895-001
a	Plan name SMEED COMMUNICATION SERVICES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SMEED SOUND SERVICE, INC. DBA SMEED COMMUNICATION SERVICES	c EIN-PN 93-0776324-001
a	Plan name SMITH'S ADDRESSING MACHINE SERVICES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SMITH'S ADDRESSING MACHINE SERVICES, INC.	c EIN-PN 56-1099952-001
a	Plan name SMP 401(K) PLAN	
b	Name of plan sponsor SCOTT MCLEOD PLUMBING, INC.	c EIN-PN 32-0067594-001
a	Plan name C & C DESIGN OF WISCONSIN, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor C & C DESIGN OF WISCONSIN, LLC	c EIN-PN 39-1480298-001
a	Plan name EVER READY ELECTRIC, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor EVER READY ELECTRIC, INC.	c EIN-PN 39-1948378-001
a	Plan name JOSEPH LAMPARELLI, INC. DBA SUPREME FUEL CO. 401(K) SAVINGS PLAN	
b	Name of plan sponsor JOSEPH LAMPARELLI, INC. DBA SUPREME FUEL CO.	c EIN-PN 04-2679773-001
a	Plan name SPRINGFIELD TRACTOR & TRAILER SALES, INC. 401(K) PLAN	
b	Name of plan sponsor SPRINGFIELD TRACTOR & TRAILER SALES, INC.	c EIN-PN 37-1013499-003
a	Plan name ST. FRANCIS SCHOOL SAVINGS AND INVESTMENT PENSION PLAN	
b	Name of plan sponsor ST. FRANCIS SCHOOL	c EIN-PN 66-0327985-001
a	Plan name PATEL, GREENE & ASSOCIATES, LLC 401(K) PLAN	
b	Name of plan sponsor PATEL, GREENE & ASSOCIATES, LLC	c EIN-PN 45-2209743-001
a	Plan name CARDIOVASCULAR SOLUTIONS, LLC PROFIT SHARING PLAN	
b	Name of plan sponsor CARDIOVASCULAR SOLUTIONS, LLC	c EIN-PN 26-0170867-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	CARLIN SALES CORPORATION 401(K) PLAN	
b	Name of plan sponsor	CARLIN SALES CORPORATION	c EIN-PN 39-1171459-001
a	Plan name	CARPET ONE 401(K) PLAN	
b	Name of plan sponsor	HOUSE OF CARPET, INC.	c EIN-PN 43-0957081-001
a	Plan name	CARR TOOL COMPANY RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	CARR TOOL COMPANY	c EIN-PN 31-0578372-002
a	Plan name	FFTT, LLC 401 (K) PLAN	
b	Name of plan sponsor	FFTT, LLC	c EIN-PN 81-0860100-001
a	Plan name	FIKES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FIKES PUGET SOUND, INC	c EIN-PN 72-1572875-001
a	Plan name	FILOLI CENTER 401(K) PLAN	
b	Name of plan sponsor	FILOLI CENTER	c EIN-PN 95-2996648-001
a	Plan name	KIMBERLY PARK DENTAL ASSOCIATES, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KIMBERLY PARK DENTAL ASSOCIATES, P.C.	c EIN-PN 42-1049323-001
a	Plan name	KING SYSTEMS 401(K) PLAN	
b	Name of plan sponsor	KING SYSTEMS, LLC	c EIN-PN 81-0553940-001
a	Plan name	KLEAN KANTEEN 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KLEAN KANTEEN	c EIN-PN 94-2537951-002
a	Plan name	LUCAS PLUMBING & HEATING, INC. 401(K) PLAN	
b	Name of plan sponsor	LUCAS PLUMBING & HEATING, INC.	c EIN-PN 34-0967099-005
a	Plan name	THE JIM O'NEAL FORD 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	JIM O'NEAL FORD	c EIN-PN 35-1091372-001
a	Plan name	ACOUSTICAL SURFACES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ACOUSTICAL SURFACES, INC.	c EIN-PN 81-0664002-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name CIVIL DESIGN CONCEPTS 401(K)/NEW COMPARABILITY PLAN	
b	Name of plan sponsor CIVIL DESIGN CONCEPTS PA	c EIN-PN 56-2244957-001
a	Plan name CLARITY TELECOM, LLC 401(K) PLAN	
b	Name of plan sponsor CLARITY TELECOM LLC DBA BLUEPEAK	c EIN-PN 46-2667900-001
a	Plan name CLARKE PACKING 401(K) PLAN	
b	Name of plan sponsor CLARKE PACKING & CRATING COMPANY	c EIN-PN 36-3828267-001
a	Plan name GENTILOZZI REAL ESTATE, INC. 401(K) PLAN	
b	Name of plan sponsor GENTILOZZI REAL ESTATE, INC.	c EIN-PN 38-2361521-001
a	Plan name GERALD GRAIN INCENTIVE SAVINGS PLAN	
b	Name of plan sponsor GERALD GRAIN CENTER, INC.	c EIN-PN 34-1526549-001
a	Plan name PRECISION ROADWAY SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor PRECISION ROADWAY SERVICES, LLC	c EIN-PN 27-2553193-001
a	Plan name PRECISION SMALL ENGINE CO., INC. 401(K) PLAN	
b	Name of plan sponsor PRECISION SMALL ENGINE CO., INC.	c EIN-PN 59-1985940-001
a	Plan name PREMIER DENTAL ASSOCIATES, PLLC SAFE HARBOR 401(K) PSP	
b	Name of plan sponsor PREMIER DENTAL ASSOCIATES, PLLC	c EIN-PN 20-2051976-001
a	Plan name ADVANCED REPRODUCTIVE CENTER OF HAWAII 401(K) PLAN	
b	Name of plan sponsor CHRISTOPHER T.F. HUANG, M.D., INC	c EIN-PN 01-0674989-001
a	Plan name AEM PARTNERS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor AEM PARTNERS, LLC	c EIN-PN 20-0857620-001
a	Plan name COLLAGE ARCHITECTS LLC EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor COLLAGE ARCHITECTS LLC	c EIN-PN 26-3215943-001
a	Plan name GLENWOOD HOT SPRINGS LODGE AND POOL SAVINGS & RETIREMENT PLAN	
b	Name of plan sponsor GLENWOOD HOT SPRINGS LODGE AND POOL, INC.	c EIN-PN 84-0457400-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	PRO-TEK MANUFACTURING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PRO-TEK MANUFACTURING, INC.	c EIN-PN 94-2862885-002
a	Plan name	PRODUCE WORLD INCORPORATED 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PRODUCE WORLD INCORPORATED	c EIN-PN 36-3787658-001
a	Plan name	THE SELECT FAMILY 401(K) PLAN	
b	Name of plan sponsor	THE SELECT FAMILY	c EIN-PN 93-0994537-001
a	Plan name	ALTA PROFESSIONAL INSURANCE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ALTA PROFESSIONAL INSURANCE SERVICES AGENCY, LLC	c EIN-PN 20-1151904-001
a	Plan name	ALTERNA-CARE EMPLOYEE'S PROFIT SHARING PLAN	
b	Name of plan sponsor	ALTERNA-CARE, INC	c EIN-PN 37-1162589-001
a	Plan name	MATTHEW L. BRIDGES DDS SAFE HARBOR 401(K) PLAN	
b	Name of plan sponsor	MATTHEW L. BRIDGES DDS PLLC	c EIN-PN 82-1972625-001
a	Plan name	CONSOLIDATED CONSTRUCTION CO, INC. EMPLOYEE 401(K) PLAN	
b	Name of plan sponsor	CONSOLIDATED CONSTRUCTION CO., INC.	c EIN-PN 20-5220958-001
a	Plan name	GREENSBORO FARMER'S CO-OP RETIREMENT PLAN	
b	Name of plan sponsor	GREENSBORO FARMER'S CO-OP	c EIN-PN 63-0645197-001
a	Plan name	GREENWAY WEALTH MANAGEMENT, LLC 401(K) PLAN	
b	Name of plan sponsor	GREENWAY WEALTH MANAGEMENT, LLC	c EIN-PN 81-5323726-001
a	Plan name	R & M EQUIPMENT COMPANY 401(K) PLAN	
b	Name of plan sponsor	TRIBMS, LLC DBA R & M EQUIPMENT COMPANY	c EIN-PN 23-3084608-001
a	Plan name	TRADITIONAL BANK, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TRADITIONAL BANK, INC.	c EIN-PN 61-0284535-003
a	Plan name	MEDIA WATCH, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	MEDIA WATCH, INC.	c EIN-PN 43-1587643-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	MEDINA LAW GROUP PA 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	MEDINA LAW GROUP PA	c EIN-PN 59-3666180-001
a	Plan name	ANTIQUE SILVER 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	ANTIQUE SILVER OF WAUKESHA, INC.	c EIN-PN 39-2044240-001
a	Plan name	HANS TRUCK & TRAILER REPAIR, INC. DBA HANS FREIGHTLINER 401(K) PLAN	
b	Name of plan sponsor	HANS' TRUCK & TRAILER REPAIR, INC. DBA HANS' FREIGHTLINER OF CLEVELA	c EIN-PN 34-1165089-001
a	Plan name	HARDY ORTHODONTICS, INC. 401(K) PLAN	
b	Name of plan sponsor	HARDY ORTHODONTICS, INC.	c EIN-PN 20-3607838-001
a	Plan name	HARPREET SAINI DDS, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	HARPREET SAINI DDS, INC.	c EIN-PN 27-4236646-001
a	Plan name	RENHILL STAFFING SERVICE 401(K) PLAN	
b	Name of plan sponsor	RENHILL STAFFING SERVICE	c EIN-PN 74-2982537-001
a	Plan name	U.S. COMMUNICATION 401 (K) PLAN	
b	Name of plan sponsor	U.S. COMMUNICATION INDUSTRIES, INC.	c EIN-PN 36-3138121-001
a	Plan name	ULRICHSEN, ROSEN & FREED LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	ULRICHSEN ROSEN & FREED LLC	c EIN-PN 20-4413474-001
a	Plan name	ULTIMA DESIGN OF SOUTH FLORIDA, INC. RETIREMENT PLAN AND TRUST	
b	Name of plan sponsor	ULTIMA DESIGN OF SOUTH FLORIDA, INC.	c EIN-PN 65-0407058-001
a	Plan name	DAVID FELKER, MD, P.A. 401(K) SAFE HARBOR PLAN	
b	Name of plan sponsor	DAVID FELKER, MD, P.A.	c EIN-PN 65-0932108-001
a	Plan name	DAVID HUVAL'S TRUCKING CO. 401(K) PLAN	
b	Name of plan sponsor	DAVID HUVAL'S TRUCKING CO., INC.	c EIN-PN 72-1470730-001
a	Plan name	MIDICI GROUP, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MIDICI GROUP, LLC	c EIN-PN 47-1810714-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name MIDWEST WELL & PUMP 401(K) PLAN	
b	Name of plan sponsor MIDWEST WELL & PUMP, INC.	c EIN-PN 74-2819991-001
a	Plan name ROBERT W. JANSEN, DDS & ASSOCIATES, P.C. RETIREMENT PLAN	
b	Name of plan sponsor ROBERT W. JANSEN, DDS & ASSOCIATES, P.C.	c EIN-PN 38-2712051-001
a	Plan name ROBIN II, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor ROBIN II, INC.	c EIN-PN 39-1314862-001
a	Plan name VEEX 401(K) PLAN	
b	Name of plan sponsor VEEX, INC.	c EIN-PN 20-4527700-001
a	Plan name AUSTIN FEDERAL CREDIT UNION CAPITAL ACCUMULATION PLAN	
b	Name of plan sponsor AUSTIN FEDERAL CREDIT UNION	c EIN-PN 74-1593594-001
a	Plan name AUTOMOTIVE TRANSPORT UNION PLAN	
b	Name of plan sponsor VALIANT MANAGEMENT, LLC UNION PLAN	c EIN-PN 20-4853723-001
a	Plan name AUTOMOTIVE TRANSPORTATION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor RCS TRANSPORTATION, LLC	c EIN-PN 20-2646999-001
a	Plan name DELTA SYSTEMS & AUTOMATION LLC 401(K) PLAN	
b	Name of plan sponsor DELTA SYSTEMS & AUTOMATION LLC	c EIN-PN 83-2468256-001
a	Plan name DENTAL HEALTH SERVICES 401(K) RETIREMENT PLAN	
b	Name of plan sponsor DENTAL HEALTH SERVICES 401(K) RETIREMENT PLAN	c EIN-PN 34-1117652-001
a	Plan name HOLLY TREE COUNTRY CLUB 401(K) PLAN	
b	Name of plan sponsor HOLLY TREE COUNTRY CLUB	c EIN-PN 57-0863116-001
a	Plan name HOLOCENE RETIREMENT PLAN	
b	Name of plan sponsor HOLOCENE DRILLING	c EIN-PN 88-1200636-001
a	Plan name HOME INSTEAD 401(K) PLAN	
b	Name of plan sponsor HOME INSTEAD SENIOR CARE	c EIN-PN 26-1145117-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name MOBILE SYSTEMS WIRELESS INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MOBILE SYSTEMS WIRELESS INC.	c EIN-PN 91-1879582-001
a	Plan name RULE CONSTRUCTION, LTD. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor RULE CONSTRUCTION, LTD.	c EIN-PN 39-1708690-001
a	Plan name RUNNING AWAY INCORPORATED 401(K) PLAN	
b	Name of plan sponsor RUNNING AWAY INCORPORATED DBA JOHN'S RUN WALK SHOP	c EIN-PN 61-0950094-001
a	Plan name RUSSELL J. S. TOM, D.D.S. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor RUSSELL J. S. TOM, D.D.S.	c EIN-PN 99-0261249-001
a	Plan name RUSSELL S. KELLY M.D. LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor RUSSELL S. KELLY, M.D. LLC	c EIN-PN 20-5215599-001
a	Plan name VITAL RETIREMENT PLAN	
b	Name of plan sponsor VITAL VENTURES	c EIN-PN 81-0972460-001
a	Plan name NEANY, INC. 401(K) PLAN	
b	Name of plan sponsor NEANY, INC.	c EIN-PN 23-2792310-001
a	Plan name BELGRADE STATE BANK 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BELGRADE STATE BANK	c EIN-PN 43-0177195-001
a	Plan name DR. TODD S. LARSEN DMD PC RETIREMENT PLAN	
b	Name of plan sponsor DR. TODD S. LARSEN, DMD, PC	c EIN-PN 87-0632806-001
a	Plan name DR. TUNGS PRODUCTS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DR. TUNG'S PRODUCTS, INC	c EIN-PN 94-3269880-001
a	Plan name DRABIK MANUFACTURING, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor DRABIK MANUFACTURING, INC.	c EIN-PN 34-1503007-001
a	Plan name DREXELBROOK ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor DREXELBROOK ASSOCIATES	c EIN-PN 23-1552101-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	DRI-VIEW 401(K) SAVINGS PLAN	
b	Name of plan sponsor	DRI-VIEW MANUFACTURING CO.	c EIN-PN 61-0702002-001
a	Plan name	INNOVATIVE TURNAROUND CONTROLS 401(K) PLAN	
b	Name of plan sponsor	INNOVATIVE TURNAROUND CONTROLS	c EIN-PN 20-2435857-001
a	Plan name	INSPIRE MEDICAL, INC. 401(K) PLAN	
b	Name of plan sponsor	INSPIRE MEDICAL, INC.	c EIN-PN 62-1691089-001
a	Plan name	INSTITUTIONAL CASEWORK INCORPORATED 401(K) PLAN	
b	Name of plan sponsor	INSTITUTIONAL CASEWORK, INC.	c EIN-PN 20-4225695-001
a	Plan name	SEMO ALLIANCE FOR DISABILITY INDEPENDENCE INC. 401(K) PLAN	
b	Name of plan sponsor	SEMO ALLIANCE FOR DISABILITY INDEPENDENCE INC.	c EIN-PN 43-1645037-001
a	Plan name	BIRD LADDER & EQUIPMENT CO. INC. 401(K) PLAN	
b	Name of plan sponsor	BIRD LADDER & EQUIPMENT CO. INC.	c EIN-PN 39-1227787-001
a	Plan name	E.S. EVANS & COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	E.S. EVANS & COMPANY	c EIN-PN 34-1717857-001
a	Plan name	EARTHLITE 401(K) PLAN	
b	Name of plan sponsor	EARTHLITE ACQUISITION, INC.	c EIN-PN 33-0493452-001
a	Plan name	EASLEY HEAD & NECK SURGERY, P.A. 401(K) PS PLAN	
b	Name of plan sponsor	EASLEY HEAD & NECK SURGERY, P.A.	c EIN-PN 57-0752346-002
a	Plan name	INVEST CAST INCORPORATED 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	INVEST CAST INCORPORATED	c EIN-PN 41-1404239-001
a	Plan name	IOWA GROCERY INDUSTRY ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor	IOWA GROCERY INDUSTRY ASSOCIATION	c EIN-PN 42-0334665-001
a	Plan name	NIELSEN MOTORS SALARY REDUCTION PROFIT SHARING PLAN	
b	Name of plan sponsor	NIELSEN CAPITAL LLC DBA NIELSEN MOTORS	c EIN-PN 93-2601344-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	NISBET ENTERPRISES, INC. 401(K) PLAN	
b	Name of plan sponsor	NISBET ENTERPRISES, INC.	c EIN-PN 65-0685929-001
a	Plan name	NISSIN PRECISION NA 401(K) PLAN	
b	Name of plan sponsor	NISSIN PRECISION NORTH AMERICA, INC.	c EIN-PN 31-1279356-001
a	Plan name	SHAW'S COVE ORTHOPAEDICS, LLC 401(K) PLAN & TRUST	
b	Name of plan sponsor	SHAW'S COVE ORTHOPAEDICS, LLC	c EIN-PN 56-2397586-001
a	Plan name	SHAWNEE COUNTRY CLUB 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SHAWNEE COUNTRY CLUB	c EIN-PN 34-4353200-001
a	Plan name	SHEGERIAN CONNIFF LLP 401(K) PLAN	
b	Name of plan sponsor	SHEGERIAN CONNIFF LLP	c EIN-PN 83-1614034-001
a	Plan name	SHEKHAR A. DAGAM, MD, NEUROLOGICAL SURGERY, SC 401(K) PLAN	
b	Name of plan sponsor	SHEKHAR A. DAGAM, MD, NEUROLOGICAL SURGERY, S.C.	c EIN-PN 20-0048495-001
a	Plan name	WINTERGREEN CONSTRUCTION SERVICES, INC. 401(K) EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor	WINTERGREEN CONSTRUCTION SERVICES, INC.	c EIN-PN 59-3034069-001
a	Plan name	ELLEFSON TRANSPORTATION GROUP, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ELLEFSON TRANSPORTATION GROUP, INC.	c EIN-PN 58-1654796-001
a	Plan name	ELMER SCHULTZ SERVICES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ELMER SCHULTZ SERVICES, INC.	c EIN-PN 23-1937880-001
a	Plan name	EMBER, LLC 401(K) PLAN	
b	Name of plan sponsor	EMBER, LLC	c EIN-PN 42-1760276-001
a	Plan name	JENNIFER A. KENNEDY, DDS., LLC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	JENNIFER A. KENNEDY, DDS., LLC.	c EIN-PN 37-1101326-001
a	Plan name	JENNIFER M. SASADA, D.M.D., LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	JENNIFER M. SASADA, D.M.D., LLC	c EIN-PN 90-0426102-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name OHIO COUNCIL OF RETAIL MERCHANTS 401(K) PLAN	
b	Name of plan sponsor OHIO COUNCIL OF RETAIL MERCHANTS	c EIN-PN 31-4269320-002
a	Plan name SONOMA GRAPHIC PRODUCTS 401(K) PLAN	
b	Name of plan sponsor SONOMA GRAPHIC PRODUCTS	c EIN-PN 68-0441691-001
a	Plan name C. CARAMANICO & SONS, INC. 401(K) PLAN	
b	Name of plan sponsor C. CARAMANICO & SONS, INC.	c EIN-PN 23-2349249-001
a	Plan name CABLE MAN, INC. 401(K) PLAN	
b	Name of plan sponsor CABLE MAN, INC.	c EIN-PN 64-0576514-001
a	Plan name EXECUTIVE BENEFIT PROGRAMS, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor EXECUTIVE BENEFIT PROGRAMS, INC.	c EIN-PN 95-3617290-001
a	Plan name EXPOTEL HOSPITALITY SERVICES 401K PLAN	
b	Name of plan sponsor EXPOTEL HOSPITALITY SERVICES, INC.	c EIN-PN 72-1456101-001
a	Plan name OXFORD GARDEN 401(K) PLAN	
b	Name of plan sponsor OXFORD LTD DBA OXFORD GARDEN	c EIN-PN 31-1525511-777
a	Plan name STARDUST CELEBRATIONS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor STARDUST CELEBRATIONS, LLC	c EIN-PN 75-2839427-001
a	Plan name STAUFFER'S LANDSCAPE, INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor STAUFFER'S LANDSCAPE, INC.	c EIN-PN 33-0428005-001
a	Plan name FIRST MISSOURI CREDIT UNION 401(K) PLAN AND TRUST	
b	Name of plan sponsor FIRST MISSOURI CREDIT UNION	c EIN-PN 43-0492167-001
a	Plan name FIRST SECURITY MORTGAGE SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor FIRST SECURITY MORTGAGE SERVICES, INC.	c EIN-PN 59-3153355-001
a	Plan name CARROLL ACE HARDWARE 401(K) PLAN	
b	Name of plan sponsor CARROLL ACE HARDWARE	c EIN-PN 42-1461838-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	CARTER STREET CORPORATION EMPLOYEE 401(K) SAVINGS PLAN	
b	Name of plan sponsor	CARTER STREET CORPORATION	c EIN-PN 62-1125122-001
a	Plan name	PAUL MILLER FORD AND ASSOCIATES RETIREMENT AND SAVINGS PLAN	
b	Name of plan sponsor	PAUL MILLER FORD, INC.	c EIN-PN 61-0481346-001
a	Plan name	PBD 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	THREE PIRATES, LLC DBA POINT BLANK DISTRIBUTING	c EIN-PN 76-0736584-001
a	Plan name	SUPERSTORE 401(K) PLAN	
b	Name of plan sponsor	FURNITURE SUPERSTORE LLC	c EIN-PN 87-0698757-001
a	Plan name	SUTTON SWIM SCHOOL INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	SUTTON SWIM SCHOOL, INC.	c EIN-PN 77-0624364-001
a	Plan name	CELINA ANIMAL HOSPITAL, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	CELINA ANIMAL HOSPITAL, INC.	c EIN-PN 34-1339371-001
a	Plan name	CELINA COMPANY EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor	CELINA TENT, INC.	c EIN-PN 34-1894249-001
a	Plan name	CENTER POINT FAMILY DENTISTRY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CENTER POINT FAMILY DENTISTRY, PLLC	c EIN-PN 27-4512893-002
a	Plan name	LAKOTA CONTRACTING, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	LAKOTA CONTRACTING, INC.	c EIN-PN 26-0060538-001
a	Plan name	LANDWORKS 401(K) PLAN	
b	Name of plan sponsor	LANDWORKS, LLC	c EIN-PN 39-1913555-001
a	Plan name	PERM MACHINE & TOOL CO., INC. BASIC PROFIT SHARING PLAN	
b	Name of plan sponsor	PERM MACHINE & TOOL CO., INC.	c EIN-PN 36-2817667-001
a	Plan name	PERSONNEL SPECIALISTS, LLC 401(K) PLAN	
b	Name of plan sponsor	PERSONNEL SPECIALISTS, LLC	c EIN-PN 39-1319507-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name PETE'S PLUMBING 401(K) PLAN	
b	Name of plan sponsor PETE'S PLUMBING, INC.	c EIN-PN 20-0937994-001
a	Plan name TATE WILSON JOHNSON MEYER CHERRY PLLC 401(K) PLAN	
b	Name of plan sponsor TATE WILSON JOHNSON MEYER CHERRY PLLC	c EIN-PN 20-5974889-001
a	Plan name TEAM NEXT LEVEL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TEAM NEXT LEVEL, INC. DBA DOMINO'S PIZZA	c EIN-PN 81-4118651-001
a	Plan name TECHNOALPIN 401(K) PLAN	
b	Name of plan sponsor TECHNOALPIN USA, INC.	c EIN-PN 22-3857446-001
a	Plan name WHISNANT & COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WHISNANT & COMPANY, LLC	c EIN-PN 56-1084523-001
a	Plan name WHITEHEAD & ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WHITEHEAD & ASSOCIATES, INC.	c EIN-PN 58-1096001-001
a	Plan name WHITSON HOTEL INVESTORS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WHITSON HOTEL INVESTORS, LLC	c EIN-PN 46-2342594-001
a	Plan name AVKARE, LLC 401(K) PLAN	
b	Name of plan sponsor AVKARE, LLC	c EIN-PN 20-8622803-001
a	Plan name AVMEDICAL, LLC 401(K) PLAN	
b	Name of plan sponsor AVMEDICAL, LLC	c EIN-PN 83-2573744-001
a	Plan name AXIS FABRICATION & MACHINE CO. 401(K) PLAN	
b	Name of plan sponsor AXIS FABRICATION & MACHINE COMPANY, LLC	c EIN-PN 26-3961265-001
a	Plan name BELL COMPANIES 401(K) PLAN	
b	Name of plan sponsor Q VEST, INC.	c EIN-PN 76-0622763-001
a	Plan name BENETRENDS, INC. PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor BENETRENDS, INC.	c EIN-PN 35-2519056-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	BERGER & JEN KIN DDS, INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	BERGER & JEN KIN DDS, INC.	c EIN-PN 95-4666002-001
a	Plan name	BISBEE PLUMBING & HEATING 401(K) PLAN	
b	Name of plan sponsor	ROADSIDE DEVELOPERS, INC. DBA BISBEE PLUMBING & HEATING	c EIN-PN 41-0915726-001
a	Plan name	BL AGRISERVICE, INC. 401(K) PLAN	
b	Name of plan sponsor	BL AGRISERVICE, INC.	c EIN-PN 39-1485813-001
a	Plan name	BROWNLEE EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor	BROWNLEE LUMBER COMPANY	c EIN-PN 25-1542521-001
a	Plan name	BSB RETIREMENT READINESS 401(K) PLAN	
b	Name of plan sponsor	THE BIPPUS STATE BANK	c EIN-PN 35-0180140-001
a	Plan name	CAIN THOMAS ASSOCIATES RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	CAIN THOMAS ASSOCIATES, INC.	c EIN-PN 41-1453222-001
a	Plan name	CAL-MED 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	CALIFORNIA MEDICAL PHARMACY	c EIN-PN 95-2320679-001
a	Plan name	CALCIUM PRODUCTS, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	CALCIUM PRODUCTS, INC.	c EIN-PN 42-1300275-001
a	Plan name	CALCO FENCE, INC. 401(K) PLAN	
b	Name of plan sponsor	CALCO FENCE, INC.	c EIN-PN 94-2926990-001
a	Plan name	CASTILLO & WEST ACCOUNTANCY CORPORATION 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	CASTILLO & WEST ACCOUNTANCY CORPORATION	c EIN-PN 56-2433686-001
a	Plan name	CASTOR ENGINEERING, INC. RETIREMENT PLAN	
b	Name of plan sponsor	ABL AERO, LLC	c EIN-PN 83-4503603-001
a	Plan name	CAVINS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CAVINS, INC.	c EIN-PN 27-3977682-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name CENTRAL DISTRIBUTING RETIREMENT PLAN	
b	Name of plan sponsor NORTHERN CENTRAL DISTRIBUTING, INC. DBA CENTRAL DISTRIBUTING	c EIN-PN 77-0135542-001
a	Plan name CLINT PHARMACEUTICALS 401(K) PLAN	
b	Name of plan sponsor CLINT PHARMACEUTICALS, INC.	c EIN-PN 62-1322467-001
a	Plan name COLLIERS ARKANSAS, INC. DBA COLLIERS INTERNATIONAL 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COLLIERS ARKANSAS, INC. DBA COLLIERS INTERNATIONAL	c EIN-PN 71-0577085-004
a	Plan name COLLINS & HYING LLC RETIREMENT PLAN	
b	Name of plan sponsor COLLINS & HYING LLC	c EIN-PN 82-0712958-001
a	Plan name COLONIAL HEIGHTS VETERINARY HOSPITAL 401(K) PLAN	
b	Name of plan sponsor COLONIAL HEIGHTS VETERINARY HOSPITAL	c EIN-PN 54-2031691-001
a	Plan name CONTRACT SOURCE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CONTRACT SOURCE, INC.	c EIN-PN 34-1605726-001
a	Plan name CONTRACT TRANSPORT, INC. 401(K) PLAN AND TRUST	
b	Name of plan sponsor CONTRACT TRANSPORT, INC.	c EIN-PN 42-0981821-002
a	Plan name CSRA 401(K) PLAN	
b	Name of plan sponsor CSRA HOME HEALTH AGENCY-COLUMBIA, INC. DBA CSRA HOME HEALTH AGENCY	c EIN-PN 58-1369830-333
a	Plan name CTCO BENEFIT SERVICES 401(K) PLAN	
b	Name of plan sponsor CTCO BENEFIT SERVICES, LLC	c EIN-PN 30-0515404-002
a	Plan name CTS PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor CTS, INC.	c EIN-PN 36-4198749-001
a	Plan name DAWN INDUSTRIES RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor DAWN INDUSTRIES, INC.	c EIN-PN 84-0798733-001
a	Plan name DE LA GUARDIA VICTORIA ARCHITECTS AND URBANISTS, INC. 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor DE LA GUARDIA VICTORIA ARCHITECTS AND URBANISTS, INC	c EIN-PN 54-2099947-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name	DESSER TIRE & RUBBER CO., LLC 401(K) PLAN
b	Name of plan sponsor	DESSER TIRE & RUBBER CO., LLC
c	EIN-PN	47-1440306-001
a	Plan name	DESSERT OASIS COFFEE ROASTERS 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	DOCR, LLC
c	EIN-PN	84-4056726-001
a	Plan name	DEUMITE CONSTRUCTION, LLC 401(K) PLAN
b	Name of plan sponsor	DEUMITE CONSTRUCTION, LLC
c	EIN-PN	01-0825625-001
a	Plan name	EAST WEST MARTIAL ARTS LLC RETIREMENT PLAN
b	Name of plan sponsor	EAST WEST MARTIAL ARTS
c	EIN-PN	91-2063355-001
a	Plan name	EASTERN RADIOLOGY ASSOCIATES PC 401(K) PLAN
b	Name of plan sponsor	EASTERN RADIOLOGY ASSOCIATES PC
c	EIN-PN	81-0306627-001
a	Plan name	EASTSIDE PREMIER NEPHROLOGY AND HYPERTENSION, P.C. PROFIT SHARING/401(K) PLAN
b	Name of plan sponsor	EASTSIDE PREMIER NEPHROLOGY AND HYPERTENSION, P.C.
c	EIN-PN	58-2642240-001
a	Plan name	ENGINEERED SYSTEMS, INC. 401(K) PLAN
b	Name of plan sponsor	ENGINEERED SYSTEMS, INC.
c	EIN-PN	04-3194781-001
a	Plan name	F.N. CUTHBERT, INC. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	F. N. CUTHBERT, INC.
c	EIN-PN	34-4412513-001
a	Plan name	FIRST STOP URGENT CARE 401(K) RETIREMENT PLAN
b	Name of plan sponsor	FIRST STOP URGENT CARE
c	EIN-PN	84-1649267-001
a	Plan name	FISCHER CUNNANE & ASSOCIATES LTD. TAX FAVORED SAVINGS PLAN
b	Name of plan sponsor	FISCHER CUNNANE & ASSOCIATES LTD.
c	EIN-PN	23-3060583-001
a	Plan name	FITZPATRICK, ZIMMERMAN & ROSE CO. LPA 401(K) PLAN
b	Name of plan sponsor	FITZPATRICK, ZIMMERMAN & ROSE CO. LPA
c	EIN-PN	34-1094182-001
a	Plan name	FLINT CHILDREN'S CENTER, P.C. 401(K) PROFIT SHARING PLAN AND TRUST
b	Name of plan sponsor	FLINT CHILDREN'S CENTER, P.C.
c	EIN-PN	38-1858407-009

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name FORT MITCHELL COUNTRY CLUB 401(K) PLAN	
b	Name of plan sponsor FORT MITCHELL COUNTRY CLUB	c EIN-PN 61-0195230-001
a	Plan name FOUNDATION FOR INTERNATIONAL SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor FOUNDATION FOR INTERNATIONAL SERVICES, INC.	c EIN-PN 91-1300363-001
a	Plan name GIBSON & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor GIBSON & ASSOCIATES, INC.	c EIN-PN 75-2057660-001
a	Plan name GLOBAL WIDGET, LLC 401(K) PLAN	
b	Name of plan sponsor GLOBAL WIDGET, LLC	c EIN-PN 81-2430361-001
a	Plan name GLOBALTEK COMPONENTS, LLC 401(K) PLAN	
b	Name of plan sponsor GLOBALTEK COMPONENTS, LLC	c EIN-PN 11-3777016-001
a	Plan name HARRISS & HARTMAN LAW FIRM, P.C. 401(K) EMPLOYEES SAVINGS PLAN	
b	Name of plan sponsor HARRISS & HARTMAN LAW FIRM, P.C.	c EIN-PN 58-1385781-001
a	Plan name HILLYER COMPANIES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HILLYERS MID-CITY FORD, INC.	c EIN-PN 93-1118673-001
a	Plan name HIT PRODUCTS CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HIT PRODUCTS CORPORATION	c EIN-PN 94-2823123-001
a	Plan name HITCHCOCK SCRAP YARD, INC. 401(K) PLAN	
b	Name of plan sponsor HITCHCOCK SCRAP YARD, INC.	c EIN-PN 37-1156962-001
a	Plan name HOME REWARDS GROUP INC., 401(K) PLAN	
b	Name of plan sponsor HOME REWARDS GROUP INC.	c EIN-PN 81-5201340-001
a	Plan name INTERNAL MEDICINE PRIMARY CARE, INC. 401(K) PLAN	
b	Name of plan sponsor INTERNAL MEDICINE PRIMARY CARE, INC.	c EIN-PN 34-1712938-001
a	Plan name IRONWOOD INDUSTRIES, INC. 401(K) RETIREMENT & SAVINGS PLAN	
b	Name of plan sponsor IRONWOOD INDUSTRIES, INC.	c EIN-PN 36-2590290-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name JERO, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor JERO, INC.	c EIN-PN 31-0959027-002
a	Plan name JI IN KIM, D.D.S., PROFESSIONAL CORPORATION 401(K) PORIFT SHARING PLAN	
b	Name of plan sponsor JI IN KIM, D.D.S., PROFESSIONAL CORPORATION	c EIN-PN 45-2050276-001
a	Plan name JODY L. KELLY, M.D. & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor JODY L. KELLY, M.D. & ASSOCIATES, LLC	c EIN-PN 20-0882318-001
a	Plan name KANO TRUCKING 401(K) RETIREMENT SAVINGS PLAN (001)	
b	Name of plan sponsor THEOPHYLLUS, INC. DBA KANO TRUCKING SERVICE	c EIN-PN 99-0283834-001
a	Plan name KAWAIOA DEVELOPMENT 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KAWAIOA DEVELOPMENT	c EIN-PN 99-0313071-001
a	Plan name KRIEGSMAN TRANSFER COMPANY MONEY PURCHASE PLAN	
b	Name of plan sponsor KRIEGSMAN TRANSFER COMPANY	c EIN-PN 37-0635587-001
a	Plan name KURTZ, ANDERSON & ASSOCIATES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KURTZ, ANDERSON & ASSOCIATES	c EIN-PN 33-0320621-001
a	Plan name LANDWORKS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor LANDWORKS, LLC	c EIN-PN 39-1913554-001
a	Plan name LARICHE CHEVROLET CADILLAC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor LARICHE CHEVROLET CADILLAC, INC.	c EIN-PN 34-1352811-001
a	Plan name LASER TECH USA, INC 401(K) PLAN	
b	Name of plan sponsor LASER TECH USA, INC	c EIN-PN 42-1459197-001
a	Plan name MANAGEMENT MATERIALS, INC. PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor MANAGEMENT MATERIALS INC.	c EIN-PN 38-2412976-001
a	Plan name MANSKE COMPANIES 401(K) PLAN AND TRUST	
b	Name of plan sponsor MANSKE MACHINERY INC.	c EIN-PN 39-1644408-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	MAX A. SASS & SONS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	MAX A. SASS & SONS, INC.	c EIN-PN 39-1129503-001
a	Plan name	MAYHEW STEEL/DEERFIELD PACKAGING RETIREMENT BENEFIT PLAN	
b	Name of plan sponsor	MAYHEW STEEL PRODUCTS, INC.	c EIN-PN 04-1595240-777
a	Plan name	MEL BUTTERFIELD & SON INSURANCE AGENCY, INC. 401(K) PSP	
b	Name of plan sponsor	MEL BUTTERFIELD & SON INSURANCE AGENCY, INC.	c EIN-PN 34-1242268-001
a	Plan name	MEMBERS 1ST CREDIT UNION CAPITAL ACCUMULATION PLAN	
b	Name of plan sponsor	MEMBERS 1ST CREDIT UNION	c EIN-PN 43-6032141-033
a	Plan name	MILLER ENVIRONMENTAL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MILLER ENVIRONMENTAL, INC.	c EIN-PN 33-0878786-002
a	Plan name	MILLER LUMBER COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MILLER LUMBER COMPANY	c EIN-PN 34-1312270-001
a	Plan name	MINNEAPOLIS AREA ASSOCIATION OF REALTORS 401(K) PLAN AND TRUST	
b	Name of plan sponsor	MINNEAPOLIS AREA ASSOCIATION OF REALTORS	c EIN-PN 41-0415490-003
a	Plan name	MONFORT MANAGEMENT SERVICES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MONFORT MANAGEMENT, INC.	c EIN-PN 77-0012053-001
a	Plan name	MONROE INDUSTRIAL MACHINE SHOP, LLC 401(K) PLAN	
b	Name of plan sponsor	MONROE INDUSTRIAL MACHINE SHOP, LLC	c EIN-PN 20-1041002-001
a	Plan name	NEUSOFT AMERICA, INC. 401(K) PLAN	
b	Name of plan sponsor	NEUSOFT AMERICA, INC.	c EIN-PN 20-5601470-001
a	Plan name	NORKING/MATRIX 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	MATRIX METAL PRODUCTS/ THE NORKING COMPANY	c EIN-PN 04-2855070-001
a	Plan name	NORTH ATLANTA PEDIATRIC ASSOCIATES, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NORTH ATLANTA PEDIATRIC ASSOCIATES, P.C.	c EIN-PN 58-1633173-777

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	PACIFIC DESIGN AND SOURCING 401(K) PLAN	
b	Name of plan sponsor	PACIFIC DESIGN AND SOURCING	c EIN-PN 27-2403668-001
a	Plan name	PBHM 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PERSPECTIVE BEHAVIORAL HEALTH MANAGEMENT, LLC	c EIN-PN 33-1048513-001
a	Plan name	PDMA CORPORATION SAVINGS PLAN	
b	Name of plan sponsor	PDMA CORPORATION	c EIN-PN 59-3191224-001
a	Plan name	PETERSON, OLIVER & POLL 401(K) PLAN	
b	Name of plan sponsor	PETERSON, OLIVER & POLL	c EIN-PN 33-0551209-001
a	Plan name	PETROLEUM EQUIPMENT COMPANY 401(K) PLAN	
b	Name of plan sponsor	PETROLEUM EQUIPMENT COMPANY	c EIN-PN 62-1366038-001
a	Plan name	PGI PROFIT SHARING PLAN	
b	Name of plan sponsor	THE PERSIMMON GROUP, INC.	c EIN-PN 75-2515316-001
a	Plan name	PREWITT MECHANICAL CONTRACTORS, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	PREWITT MECHANICAL CONTRACTORS, INC.	c EIN-PN 61-0851976-001
a	Plan name	RADWELL INTERNATIONAL LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	RADWELL INTERNATIONAL LLC	c EIN-PN 23-2106278-001
a	Plan name	ROSHER ELECTRIC COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	ROSHER ELECTRIC COMPANY, INC.	c EIN-PN 63-0626370-001
a	Plan name	S&S MANAGEMENT, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	S&S MANAGEMENT, INC.	c EIN-PN 31-1493783-001
a	Plan name	SENECA PETROLEUM COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	SENECA PETROLEUM COMPANY, INC.	c EIN-PN 36-1755250-002
a	Plan name	SENSOR MANUFACTURING COMPANY 401(K) PLAN	
b	Name of plan sponsor	SENSOR MANUFACTURING COMPANY	c EIN-PN 38-2140109-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name SERRA COMMUNITY MEDICAL CLINIC, INC. 401(K) PLAN	
b	Name of plan sponsor SERRA COMMUNITY MEDICAL CLINIC, INC.	c EIN-PN 95-4786125-001
a	Plan name SHORT LINE EXPRESS MARKET 401(K) PLAN	
b	Name of plan sponsor SHORT LINE EXPRESS MARKET	c EIN-PN 88-0296690-001
a	Plan name SID GRINKER RESTORATION, INC. EMPLOYEES' FLEXIBLE PROFIT SHARING PLAN	
b	Name of plan sponsor SID GRINKER RESTORATION, INC.	c EIN-PN 39-0983766-005
a	Plan name SOUTH SHORE HEARING CENTER, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SOUTH SHORE HEARING CENTER, LLC	c EIN-PN 47-4480052-001
a	Plan name SOUTHERN AUTOBODY SUPPLY, INC. 401(K) PLAN	
b	Name of plan sponsor SOUTHERN AUTOBODY SUPPLY, INC.	c EIN-PN 62-1592592-001
a	Plan name SOUTHERN CHEM 401(K) PLAN	
b	Name of plan sponsor SOUTHERN CHEM, LLC	c EIN-PN 72-0701959-001
a	Plan name STEELTECH BUILDING PRODUCTS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor STEELTECH BUILDING PRODUCTS, INC.	c EIN-PN 06-0805933-001
a	Plan name STERLING ENERGY OPERATIONS, LLC PROFIT SHARING PLAN	
b	Name of plan sponsor STERLING ENERGY OPERATIONS, LLC	c EIN-PN 33-0969595-001
a	Plan name TELECOMMUNICATIONS LAW PROFESSIONALS PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TELECOMMUNICATIONS LAW PROFESSIONALS PLLC	c EIN-PN 45-2585545-001
a	Plan name TELECOMMUNICATIONS MANAGEMENT SOLUTIONS, INC. 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor TELECOMMUNICATIONS MANAGEMENT SOLUTIONS, INC.	c EIN-PN 77-0000356-001
a	Plan name THE MILWAUKEE ATHLETIC CLUB, 401(K) PLAN	
b	Name of plan sponsor THE MILWAUKEE ATHLETIC CLUB	c EIN-PN 39-0475250-001
a	Plan name ADJ OF STAMFORD, INC. 401(K) PLAN	
b	Name of plan sponsor ADJ OF STAMFORD, INC.	c EIN-PN 13-7562991-004

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	THE WESTFIELD COMPANY OF WISCONSIN, INC. 401(K) PLAN	
b	Name of plan sponsor	THE WESTFIELD COMPANY OF WISCONSIN, INC.	c EIN-PN 39-1628929-001
a	Plan name	TRAVIS POINTE COUNTRY CLUB 401(K) PLAN AND TRUST	
b	Name of plan sponsor	TRAVIS POINTE COUNTRY CLUB	c EIN-PN 38-2037327-001
a	Plan name	TRIBLER ORPETT & MEYER, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TRIBLER ORPETT & MEYER, P.C.	c EIN-PN 36-3317353-001
a	Plan name	AM2 SOLUTIONS, LLC RETIREMENT PLAN	
b	Name of plan sponsor	AM2 SOLUTIONS LLC	c EIN-PN 20-8887397-001
a	Plan name	AMANI ENGINEERING, INC. 401(K) PLAN	
b	Name of plan sponsor	AMANI ENGINEERING, INC.	c EIN-PN 76-0614439-001
a	Plan name	UNITED COMMUNITY CENTER PENSION & 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	UNITED COMMUNITY CENTER	c EIN-PN 39-1146191-001
a	Plan name	ANY WAY YOU WANT IT MOVING & STORAGE, INC. 401(K) PLAN	
b	Name of plan sponsor	ANY WAY YOU WANT IT MOVING & STORAGE, INC.	c EIN-PN 11-3679750-001
a	Plan name	APEX ENDODONTICS 401(K) PLAN	
b	Name of plan sponsor	SANG YUN RO, DDS, PC	c EIN-PN 05-0577077-001
a	Plan name	ATLANTA HEADACHE SPECIALIST 401(K) PLAN	
b	Name of plan sponsor	ATLANTA HEADACHE SPECIALISTS	c EIN-PN 26-3517084-001
a	Plan name	ATLAS DEVELOPMENT GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor	ATLAS DEVELOPMENT GROUP, LLC	c EIN-PN 47-2377876-001
a	Plan name	VON'S JEWELRY, INC. 401(K) PLAN	
b	Name of plan sponsor	VON'S JEWELRY, INC.	c EIN-PN 34-1162214-001
a	Plan name		
b	Name of plan sponsor		c EIN-PN

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan AMERICAN FUNDS GROWTH FUND OF AMERICA RET OPT	B Three-digit plan number (PN) ▶ 250
C Plan sponsor's name as shown on line 2a of Form 5500 TRANSAMERICA LIFE INSURANCE COMPANY	D Employer Identification Number (EIN) 39-0989781

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

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	153299579	162334283
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	153299579	162334283
Liabilities			
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
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	153299578	162334282

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)		
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)		
(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)	1009460	
(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)	26232462	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		12775419
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		40017341

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)		
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	1041145	
(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)		1041145
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1041145

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		38976196
l Transfers of assets:			
(1) To this plan.....	2l(1)		12576652
(2) From this plan	2l(2)		42518144

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name:

(2) EIN:

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)			
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
e Was this plan covered by a fidelity bond?			
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?			
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)			
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
l Has the plan failed to provide any benefit when due under the plan?			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

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

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