

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

- A This return/report is for: [] a multiemployer plan [] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) [] a single-employer plan [X] a DFE (specify) P
B This return/report is: [] the first return/report [] the final return/report [] an amended return/report [] a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here. []
D Check box if filing under: [] Form 5558 [] automatic extension [] the DFVC program [] special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. []

Part II Basic Plan Information—enter all requested information

1a Name of plan: TEMPLETON GLOBAL BOND RET OPT
1b Three-digit plan number (PN): 313
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.

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>TEMPLETON GLOBAL BOND RET OPT</u>	B Three-digit plan number (PN) ▶	<u>313</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:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

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

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<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	BLAHNIK INVESTMENT GROUP RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	BLAHNIK INVESTMENT GROUP	c EIN-PN 46-0495940-001
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	CALIFORNIA SOCIETY OF HEALTH-SYSTEM PHARMACISTS 401(K) PLAN	
b	Name of plan sponsor	CALIFORNIA SOCIETY OF HEALTH-SYSTEM PHARMACISTS	c EIN-PN 94-6252725-001
a	Plan name	CAM CONSTRUCTION & PAINTING 401(K) PLAN & TRUST	
b	Name of plan sponsor	CAM CONSTRUCTION & PAINTING INC.	c EIN-PN 45-5255646-001
a	Plan name	CANAM MINERALS, INC. 401(K) PLAN	
b	Name of plan sponsor	CANAM MINERALS, INC.	c EIN-PN 94-1535782-001
a	Plan name	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 MEDICAL SOCIETY RETIREMENT PLAN	
b	Name of plan sponsor	COLORADO MEDICAL SOCIETY	c EIN-PN 84-0174440-001
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	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	DIAKON LOGISTICS 401(K) PLAN	
b	Name of plan sponsor	DIAKON LOGISTICS, INC.	c EIN-PN 20-0446970-001
a	Plan name	ECLIPSE ENGINEERING, INC. 401(K) PLAN	
b	Name of plan sponsor	ECLIPSE ENGINEERING, INC.	c EIN-PN 84-1477890-001
a	Plan name	EDES CUSTOM MEATS, LLC 401(K) PLAN	
b	Name of plan sponsor	BOTTOMLAND PRIME, LLC	c EIN-PN 87-3797281-001

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	EDGE 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	EDGE PLASTICS, INC.	c EIN-PN 33-0397325-001
a	Plan name	FAMILY PET CLINIC OF REDONDO BEACH 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KKD PET VET	c EIN-PN 46-1590293-001
a	Plan name	FRANK C. LAWRENCE DAIRY PROFIT SHARING PLAN	
b	Name of plan sponsor	FRANK LAWRENCE DAIRY	c EIN-PN 94-1220748-001
a	Plan name	FRAZER DENTAL CARE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FRAZER DENTAL CARE	c EIN-PN 23-3077648-001
a	Plan name	GOLDEN GIANT, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GOLDEN GIANT, INC.	c EIN-PN 34-1087997-001
a	Plan name	GOOD TIMES RESTAURANTS, INC. 401(K) SAVINGS & INVESTMENT PLAN	
b	Name of plan sponsor	GOOD TIMES RESTAURANTS, INC.	c EIN-PN 84-1133368-001
a	Plan name	HAUCK BROS, INC. 401(K) PLAN	
b	Name of plan sponsor	HAUCK BROTHERS, INC.	c EIN-PN 31-0599870-001
a	Plan name	HAWAII CELLULAR THERAPY AND TRANSPLANT LABORATORY 401(K) PLAN	
b	Name of plan sponsor	HAWAII CELLULAR THERAPY AND TRANSPLANT LABORATORY	c EIN-PN 47-2107270-001
a	Plan name	HOTEL MANAGEMENT AND CONSULTING 401(K) PLAN	
b	Name of plan sponsor	HOTEL MANAGEMENT AND CONSULTING	c EIN-PN 45-3388643-001
a	Plan name	HOUSING AUTHORITY OF THE CITY OF DUBOIS, PA MONEY PURCHASE RETIREMENT PLAN	
b	Name of plan sponsor	HOUSING AUTHORITY OF THE CITY OF DUBOIS, PA	c EIN-PN 02-1234567-001
a	Plan name	J & P PAVING MASONRY & SEALANT RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	J & P PAVING MASONRY & SEALANT, INC.	c EIN-PN 31-1121622-001
a	Plan name	J GOOD-IN INC. - 401(K) PLAN	
b	Name of plan sponsor	J GOOD-IN INC.	c EIN-PN 95-4100491-001

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	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	KENNETH O. KARP, MD, PA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KENNETH O. KARP, MD, PA	c EIN-PN 20-0112151-001
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	MARGUERITE CONCRETE, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MARGUERITE CONCRETE, INC.	c EIN-PN 04-3035873-001
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	MOODY PRICE, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MOODY PRICE, LLC	c EIN-PN 72-1044462-003
a	Plan name	NORTHERN NJ CHAPTER, INC. NECA SAFE HARBOR 401(K) PLAN	
b	Name of plan sponsor	NORTHERN NJ CHAPTER, INC. NECA	c EIN-PN 22-1455827-002
a	Plan name	NORTHWEST ELECTRIC OF VANCOUVER, INC. 401(K) PLAN	
b	Name of plan sponsor	NORTHWEST ELECTRIC OF VANCOUVER, INC.	c EIN-PN 20-8108991-001
a	Plan name	PACIFIC FISHING & SUPPLY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PACIFIC FISHING & SUPPLY, INC.	c EIN-PN 99-0302309-777
a	Plan name	PACIFIC LOCK & SAFE 401(K) PLAN	
b	Name of plan sponsor	COMMERCIAL SERVICES, INC. DBA PACIFIC LOCK & SAFE	c EIN-PN 99-0285551-001
a	Plan name	PACIFIC MEDICAL 401(K) PLAN	
b	Name of plan sponsor	PACIFIC MEDICAL MANAGEMENT SERVICES, INC.	c EIN-PN 56-2321193-001

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	PHOENIX PRINTING 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PHOENIX PRINTING GROUP, INC. D/B/A PHOENIX PRINTING	c EIN-PN 26-1995352-001
a	Plan name	PHOTON INFOTECH 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PHOTON INFOTECH, INC.	c EIN-PN 26-0106960-001
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	REYES & SONS ELECTRIC, INC. PREVAILING WAGE RETIREMENT PLAN	
b	Name of plan sponsor	REYES & SONS ELECTRIC, INC.	c EIN-PN 27-0007015-001
a	Plan name	RFNRCPAS RETIREMENT PLAN	
b	Name of plan sponsor	RFNR, LLP	c EIN-PN 95-4664923-001
a	Plan name	RHYS VINEYARDS LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	RHYS VINEYARDS LLC	c EIN-PN 51-0499236-001
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	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	SIGNMEDIA, INC. 401(K) PLAN	
b	Name of plan sponsor	SIGNMEDIA, INC.	c EIN-PN 54-1254298-001
a	Plan name	SILVER CREEK MODULAR LLC 401(K) PLAN	
b	Name of plan sponsor	SILVER CREEK MODULAR LLC	c EIN-PN 92-3730178-001

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 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 STEVEN A. VARANO, ESQ. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor STEVEN A. VARANO, ESQ.	c EIN-PN 22-3143496-001
a	Plan name STEVEN G. SAFRAN, MD, PA 401(K) PLAN	
b	Name of plan sponsor STEVEN G. SAFRAN, M.D., P.A.	c EIN-PN 22-3282121-001
a	Plan name STEVENS TRANSPORTATION, INC. 401(K) PLAN	
b	Name of plan sponsor STEVENS TRANSPORTATION, INC.	c EIN-PN 77-0009655-001
a	Plan name TENNESSEE ASSOCIATED ELECTRIC 401(K) PLAN	
b	Name of plan sponsor TENNESSEE ASSOCIATED ELECTRIC, LLC	c EIN-PN 46-1537499-001
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 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 W/S MACHINE & TOOL, INC. SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor W/S MACHINE & TOOL, INC.	c EIN-PN 39-1764609-001
a	Plan name WTP 401(K) PLAN	
b	Name of plan sponsor WESTRAN THERMAL PROCESSING	c EIN-PN 81-2963161-001
a	Plan name XP SERVICES, INC. PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor XP SERVICES, INC.	c EIN-PN 80-0316734-001
a	Plan name 1ST LIGHT SALES CORP 401(K) PROFIT SHARING PLAN AND TRUST 3	
b	Name of plan sponsor 1ST LIGHT SALES CORP	c EIN-PN 35-2431013-001
a	Plan name APPLIED AQUATIC EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor APPLIED AQUATIC MANAGEMENT, INC.	c EIN-PN 59-2100923-001

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 APS 401(K) PLAN	
b	Name of plan sponsor ADVANCED POWDER SOLUTIONS OF TEXAS	c EIN-PN 20-3150581-001
a	Plan name B & E PETROLEUM, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor B & E PETROLEUM, INC.	c EIN-PN 99-0215751-002
a	Plan name DIDAX, INC. EMPLOYEES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DIDAX, INC.	c EIN-PN 04-2599602-001
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 EDUCATIUS GROUP 401(K) PLAN	
b	Name of plan sponsor EDUCATIUS, INC. DBA EDUCATIUS INTERNATIONAL	c EIN-PN 26-4005699-001
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 GOTEC PLUS SUN, LLC 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor GOTEC PLUS SUN, LLC	c EIN-PN 20-4320976-001
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 GRAND FUNDING GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor GRAND FUNDING GROUP, INC.	c EIN-PN 27-3273076-002
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

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 HEFTY SEED COMPANY 401(K) PLAN AND TRUST	
b	Name of plan sponsor AGRONOMY SCIENCES, LLC DBA HEFTY SEED COMPANY	c EIN-PN 20-2149647-001
a	Plan name HURON VALLEY RESTAURANT EQUIPMENT, INC. 401(K) PLAN	
b	Name of plan sponsor HURON VALLEY RESTAURANT EQUIPMENT, INC.	c EIN-PN 38-3072272-001
a	Plan name HWO, INC. 401(K) PLAN	
b	Name of plan sponsor HWO, INC.	c EIN-PN 83-2185021-001
a	Plan name J.M. O'NEILL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor J.M. O'NEILL, INC.	c EIN-PN 94-2918101-001
a	Plan name JACK YATES DRYWALL PROFIT SHARING PLAN	
b	Name of plan sponsor JACK YATES DRYWALL	c EIN-PN 27-1959275-001
a	Plan name JAH ENTERPRISES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JAH ENTERPRISES, INC.	c EIN-PN 72-1250656-001
a	Plan name KENTUCKY EDUCATION ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor KENTUCKY EDUCATION ASSOCIATION	c EIN-PN 61-0245450-001
a	Plan name KETTER & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor KETTER & ASSOCIATES	c EIN-PN 47-0806233-001
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 LAWRENCE TRACTOR COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor LAWRENCE TRACTOR COMPANY, INC.	c EIN-PN 94-1713405-001
a	Plan name LAWYERS FOR JUSTICE PC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor LAWYERS FOR JUSTICE PC	c EIN-PN 27-4652068-001
a	Plan name MARK J. REDD DDS, INC. 401(K) PLAN	
b	Name of plan sponsor MARK J. REDD DDS, INC.	c EIN-PN 72-1519503-001

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 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 NOT-FOR-PROFIT RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor COMMUNITY LIVING OPTIONS, INC.	c EIN-PN 37-1079626-001
a	Plan name NOVATO CHEVROLET 401(K) PLAN	
b	Name of plan sponsor VELOCITY PRIME AUTOMOTIVE, INC. DBA NOVATO CHEVROLET	c EIN-PN 47-1726382-001
a	Plan name PALMETTO REHABILITATION SPECIALISTS LLC 401(K) PLAN	
b	Name of plan sponsor PALMETTO REHABILITATION SPECIALISTS	c EIN-PN 20-4474119-001
a	Plan name PANTECH WIRELESS EMPLOYEE 401(K) PLAN	
b	Name of plan sponsor PANTECH WIRELESS, INC.	c EIN-PN 04-3629687-001
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 RICHARD ROWAN 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor RICHARD ROWAN, DMD	c EIN-PN 94-2861305-001
a	Plan name SIMPSON SPENCE YOUNG 401(K) RETIREMENT PLAN	
b	Name of plan sponsor SIMPSON SPENCE YOUNG	c EIN-PN 13-5395270-001
a	Plan name SKL PRIME SERVICES, LLC SAFE HARBOR 401(K) PLAN	
b	Name of plan sponsor SKL PRIME SERVICES, LLC	c EIN-PN 01-0551573-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a Plan name	SKLO 401(K) PLAN	
b Name of plan sponsor	SKLO STUDIO, INC.	c EIN-PN 27-4554699-001
a Plan name	STREET FACTORY MEDIA, INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	STREET FACTORY MEDIA, INC.	c EIN-PN 20-8005581-001
a Plan name	TEXAS GOLF ASSOCIATION 401(K) PLAN	
b Name of plan sponsor	TEXAS GOLF ASSOCIATION	c EIN-PN 75-0715222-001
a Plan name	THA ARCHITECTS ENGINEERS 401(K) PLAN	
b Name of plan sponsor	TOMBLINSON, HARBURN ASSOCIATES ARCHITECTS & PLANNERS, INC.	c EIN-PN 38-1561901-002
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	TIM SNELSON'S PUMPING UNIT 401(K) RETIREMENT PLAN	
b Name of plan sponsor	TIM SNELSON'S PUMPING UNIT	c EIN-PN 75-2715506-001
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 BULK, INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	VALLEY BULK, INC.	c EIN-PN 33-0674207-001
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	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	YARBROUGH ELECTRONICS SALES, LLC CASH BALANCE PENSION PLAN	
b Name of plan sponsor	YARBROUGH ELECTRONICS SALES	c EIN-PN 86-0911466-002

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	YEZCO1, INC. 401(K) PLAN	
b	Name of plan sponsor	YEZCO1, INC.	c EIN-PN 35-2395294-001
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	AREA AMBULANCE SERVICE 401(K) PLAN	
b	Name of plan sponsor	AREA AMBULANCE SERVICE	c EIN-PN 20-3693455-001
a	Plan name	ARGENT FEDERAL CREDIT UNION 401(K) PLAN	
b	Name of plan sponsor	ARGENT FEDERAL CREDIT UNION	c EIN-PN 54-0623641-002
a	Plan name	ARIAS, TOVAR & ASSOCIATES, P.A. 401(K) PLAN	
b	Name of plan sponsor	ARIAS, TOVAR & ASSOCIATES, P.A.	c EIN-PN 65-0971956-001
a	Plan name	BACKERWORKS MANUFACTURING, LLC 401(K) PLAN	
b	Name of plan sponsor	BACKERWORKS MANUFACTURING, LLC	c EIN-PN 85-0481972-001
a	Plan name	BOB BITER ELECTRICAL ENTERPRISES, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	BOB BITER ELECTRICAL ENTERPRISES, INC.	c EIN-PN 25-1301034-001
a	Plan name	BOB RIDINGS, INC. EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor	BOB RIDINGS, INC.	c EIN-PN 37-0994988-001
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	BONINFANTE FRICTON INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	BONINFANTE FRICTON INC.	c EIN-PN 27-4188636-001
a	Plan name	COMMERCIAL WATERPROOFING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	COMMERCIAL WATERPROOFING, INC.	c EIN-PN 23-2589948-001
a	Plan name	CYPRESS POINTE SURGICAL HOSPITAL 401(K) PLAN	
b	Name of plan sponsor	HAMMOND SURGICAL HOSPITAL, L.L.C. DBA CYPRESS POINT SURGICAL HOSPIT	c EIN-PN 27-2765802-777

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 D & D PLUMBING, LLC 401(K) PLAN	
b	Name of plan sponsor D & D PLUMBING, LLC	c EIN-PN 88-0164801-001
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 LESSITER PUBLICATIONS INC. 401(K) PLAN	
b	Name of plan sponsor LESSITER PUBLICATIONS INC.	c EIN-PN 39-1169768-222
a	Plan name MCCLAIN PRINTING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MCCLAIN PRINTING COMPANY, INC.	c EIN-PN 55-0421933-002
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 OPHTHALMOLOGY CENTER OF ILLINOIS RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor OPHTHALMOLOGY CENTER OF ILLINOIS	c EIN-PN 46-3808527-001
a	Plan name PISGAH MEDICAL CLINIC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor PISGAH MEDICAL CLINIC	c EIN-PN 45-4192694-001
a	Plan name PLAY VISIONS 401(K) PLAN	
b	Name of plan sponsor PLAY VISIONS, INC.	c EIN-PN 91-1242563-001
a	Plan name RAVEN RESOURCES, LLC 401(K) PLAN	
b	Name of plan sponsor RAVEN RESOURCES, LLC	c EIN-PN 36-4618634-001
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

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 SOUTHWEST NEUROSPINE INSTITUTE RETIREMENT TRUST	
b	Name of plan sponsor SOUTHWEST NEUROSPINE INSTITUTE, P.A.	c EIN-PN 26-2906915-001
a	Plan name SPARKS COMMERCIAL TIRE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SPARKS COMMERCIAL TIRE, INC.	c EIN-PN 34-1506914-001
a	Plan name THE ART SOURCE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE ART SOURCE, INC.	c EIN-PN 99-0280665-001
a	Plan name 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 TRIPLE H FOOD PROCESSORS, LLC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TRIPLE H FOOD PROCESSORS, LLC.	c EIN-PN 47-4431714-001
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 AMERICAN NATION BANK SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor AMERICAN NATION BANK	c EIN-PN 73-1258880-001
a	Plan name BARBARA E. WHITWORTH, D.D.S. 401(K) PLAN	
b	Name of plan sponsor BARBARA E. WHITWORTH, D.D.S.	c EIN-PN 75-2633818-001
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 BUCS ANALYTICS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BUCS, LLC DBA BUCS ANALYTICS	c EIN-PN 68-0641573-001
a	Plan name BUG MAN EXTERMINATING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BUG MAN EXTERMINATING, INC.	c EIN-PN 54-1884547-001
a	Plan name BUILDERS STEEL SERVICE, INC. 401(K) PROFIT SHARING & TRUST	
b	Name of plan sponsor BUILDER'S STEEL SERVICE, INC.	c EIN-PN 34-1719798-002

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 CHILDREN'S RECEIVING HOME OF SACRAMENTO 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CHILDREN'S RECEIVING HOME OF SACRAMENTO	c EIN-PN 94-1322166-001
a	Plan name CORETRUST MANAGEMENT, LP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CORETRUST MANAGEMENT, LP	c EIN-PN 32-0475371-001
a	Plan name CORNERSTONE FELLOWSHIP 401(K) PLAN	
b	Name of plan sponsor CORNERSTONE FELLOWSHIP	c EIN-PN 73-1316703-001
a	Plan name CORRA 401(K) PLAN	
b	Name of plan sponsor CORRA	c EIN-PN 04-3819932-001
a	Plan name DOCUFREE CORPORATION 401(K) PLAN	
b	Name of plan sponsor DOCUFREE CORPORATION	c EIN-PN 58-2483016-001
a	Plan name GULATI & ASSOCIATES, INC. PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor GULATI & ASSOCIATES, INC.	c EIN-PN 03-0447697-001
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 WOOD DESIGN 401K PLAN	
b	Name of plan sponsor I WOOD DESIGN, INC.	c EIN-PN 95-4805073-001
a	Plan name I-TECH USA 401(K) PLAN	
b	Name of plan sponsor I-TECH USA	c EIN-PN 32-0015143-001
a	Plan name JOELLE W. LEWIS, D.D.S., P.C. 401(K) PLAN	
b	Name of plan sponsor JOELLE W. LEWIS, D.D.S., P.C.	c EIN-PN 38-2182823-002
a	Plan name JOHN MAGALHAES AND ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JOHN MAGALHAES AND ASSOCIATES, INC.	c EIN-PN 04-3539096-001
a	Plan name JOHN R. MADISON, M.D., INC. PROFIT SHARING PLAN	
b	Name of plan sponsor JOHN R. MADISON, M.D., INC.	c EIN-PN 34-1080310-002

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	A/E GRAPHICS, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	A/E GRAPHICS, INC.	c EIN-PN 39-1252452-001
a	Plan name	AARON A. ADAOAG, M.D., LTD. DBA ALOHA MEDICAL CENTER 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	AARON A. ADAOAG, M.D., LTD.	c EIN-PN 26-0880609-001
a	Plan name	ABBATELLO ELECTRIC, LLC 401(K) PLAN	
b	Name of plan sponsor	ABBATELLO ELECTRIC, LLC	c EIN-PN 06-1632260-001
a	Plan name	ABCO CORPORATION 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	ABCO CORPORATION	c EIN-PN 54-0838480-001
a	Plan name	AMICUS ARTHRITIS AND OSTEOPOROSIS CENTER, INC. 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	AMICUS ARTHRITIS AND OSTEOPOROSIS CENTER, INC.	c EIN-PN 47-4037872-001
a	Plan name	BASE CONSTRUCTION, INC. 401(K) PLAN	
b	Name of plan sponsor	BASE CONSTRUCTION, INC.	c EIN-PN 74-3103732-001
a	Plan name	BULLDOG RACK HOLDING COMPANY 401(K) PLAN	
b	Name of plan sponsor	BULLDOG RACK HOLDING COMPANY	c EIN-PN 46-1606192-001
a	Plan name	CHINATOWN PHARMACY 401(K) PLAN	
b	Name of plan sponsor	CHINATOWN PHARMACY	c EIN-PN 47-5552705-001
a	Plan name	COUNTRY ROADS TRUCKING SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	COUNTRY ROADS TRUCKING SYSTEMS, INC.	c EIN-PN 35-1696225-001
a	Plan name	DODDS BODYWORKS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DODDS BODYWORKS, INC.	c EIN-PN 31-1018566-001
a	Plan name	DONWAS INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor	DONWAS INC.	c EIN-PN 45-4958843-001
a	Plan name	EQUINE MEDICAL CENTER OF OCALA 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	EQUINE MEDICAL CENTER OF OCALA	c EIN-PN 20-3993544-001

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	ESSNER MANUFACTURING, L.P. 401(K) PLAN
b	Name of plan sponsor	ESSNER MANUFACTURING, L.P.
c	EIN-PN	52-2439789-001
a	Plan name	ESTATE & PENSION ADVISORY BOARD 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	M PENSION GROUP LIMITED, D.B.A. ESTATE & PENSION ADVISORY BOARD
c	EIN-PN	27-0475956-001
a	Plan name	FYI SYSTEMS, INC. 401(K) SAVINGS PLAN
b	Name of plan sponsor	FYI SYSTEMS, INC.
c	EIN-PN	22-2562534-001
a	Plan name	H & R HEALTHCARE 401(K) PLAN
b	Name of plan sponsor	H & R HEALTHCARE
c	EIN-PN	22-3324234-001
a	Plan name	HAGOOD HOMES, INC. 401(K) PLAN
b	Name of plan sponsor	HAGOOD HOMES, INC.
c	EIN-PN	56-1965580-001
a	Plan name	JOHNSON COUNTY DERMATOLOGY, P. A. 401(K) PROFIT SHARING PLAN AND TRUST
b	Name of plan sponsor	JOHNSON COUNTY DERMATOLOGY, P.A.
c	EIN-PN	04-3586031-002
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	LINCOLN PARK SCHOOLS 401(K) PLAN
b	Name of plan sponsor	LINCOLN PARK NURSERY SCHOOL, INC.
c	EIN-PN	36-3940940-001
a	Plan name	MCDERMOTT-COSTA, INC. 401(K) PLAN
b	Name of plan sponsor	MCDERMOTT-COSTA CO., INC.
c	EIN-PN	94-1375883-002
a	Plan name	MCDOUGALL & SONS, INC. RETIREMENT PLAN
b	Name of plan sponsor	MCDOUGALL & SONS, INC.
c	EIN-PN	91-0978839-001
a	Plan name	MUNCIE FAMILY DENTAL CARE, INC. 401(K) PLAN
b	Name of plan sponsor	MUNCIE FAMILY DENTAL CARE, INC.
c	EIN-PN	35-1520023-001
a	Plan name	MUSTO WINE GRAPE CO, LLC 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	MUSTO WINE GRAPE CO, LLC
c	EIN-PN	26-1316055-001

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 ORION COMMERCIAL PARTNERS, LLC 401(K) PLAN AND TRUST	
b	Name of plan sponsor ORION COMMERCIAL PARTNERS, LLC.	c EIN-PN 27-3247725-001
a	Plan name ORLANDO SPRING CORP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ORLANDO SPRING CORP	c EIN-PN 95-1933966-001
a	Plan name 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 RAYO WHOLESALE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor RAYO WHOLESALERS, INC.	c EIN-PN 33-0764606-001
a	Plan name SAVANT SYSTEMS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SAVANT SYSTEMS, INC.	c EIN-PN 85-1002349-777
a	Plan name SCG CAPITAL CORPORATION 401(K) SAVINGS PLAN	
b	Name of plan sponsor SCG CAPITAL CORPORATION	c EIN-PN 06-0961259-005
a	Plan name SPAY 401(K) PLAN	
b	Name of plan sponsor SPAY, INC.	c EIN-PN 47-4011165-777
a	Plan name THE CELLAR LUMBER COMPANY 401(K) / PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor THE CELLAR LUMBER COMPANY	c EIN-PN 31-4144745-001
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 TRUE GRIT REDI-MIX/TRUE GRIT CONCRETE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TRUE GRIT REDI-MIX LTD	c EIN-PN 20-2018457-001
a	Plan name TRUE LINE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TRUE LINE, INC.	c EIN-PN 55-0651663-001
a	Plan name WASSERMAN & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor WASSERMAN & ASSOCIATES	c EIN-PN 46-1597804-001

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 WATER WORKS INDUSTRIAL SERVICES, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WATER WORKS INDUSTRIAL SERVICES, LLC	c EIN-PN 72-1399822-001
a	Plan name WATKINS CONSTRUCTION COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor WATKINS CONSTRUCTION COMPANY, INC.	c EIN-PN 95-3084079-001
a	Plan name WAVE CREST DEVELOPMENT 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor WAVE CREST DEVELOPMENT	c EIN-PN 94-2349728-001
a	Plan name WAY HOLDING, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor WAY HOLDING, LLC	c EIN-PN 76-0207435-001
a	Plan name ABEL'S EXPRESS, INC. 401(K) PLAN	
b	Name of plan sponsor ABEL'S EXPRESS, INC.	c EIN-PN 23-2245413-001
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 ACADEMIC ENDOCRINOLOGY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ACADEMIC ENDOCRINE, METABOLISM & NUTRITION, INC.	c EIN-PN 36-4180316-001
a	Plan name ALI IRANMANESH, DMD. MD, INC. 401(K) PLAN	
b	Name of plan sponsor ALI IRANMANESH, DMD, MD, INC.	c EIN-PN 20-4791452-001
a	Plan name ALIKA C. GARCIA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ALIKA C. GARCIA	c EIN-PN 81-0742572-001
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 ALLEN'S TREE SERVICE, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor ALLEN'S TREE SERVICE, INC.	c EIN-PN 58-1997275-001
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

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 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 BAY TRADERS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BAY TRADERS, INC.	c EIN-PN 92-0140124-002
a	Plan name BORCHARDT, CORONA & FAETH 401(K) PLAN	
b	Name of plan sponsor BORCHARDT, CORONA & FAETH	c EIN-PN 77-0144125-001
a	Plan name CARDEN ARBOR VIEW SCHOOL 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CARDEN ARBOR VIEW SCHOOL, INC.	c EIN-PN 95-3695686-002
a	Plan name CARDIOVASCULAR CONSULTANTS 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor CARDIOVASCULAR CONSULTANTS PA	c EIN-PN 59-1923037-001
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 COMPUTHINK, INC. 401(K) PLAN	
b	Name of plan sponsor COMPUTHINK, INC.	c EIN-PN 36-3953691-001
a	Plan name DOUGLAS TELECOMMUNICATIONS, INC. 401(K) PLAN	
b	Name of plan sponsor DOUGLAS TELECOMMUNICATIONS, INC.	c EIN-PN 94-3215975-001
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 FEDERAL MACHINERY & EQUIPMENT CO. 401(K) PLAN	
b	Name of plan sponsor FEDERAL MACHINERY & EQUIPMENT COMPANY	c EIN-PN 34-0811973-001
a	Plan name GEMINI CORP. 401(K) PLAN & TRUST	
b	Name of plan sponsor GEMINI CORP.	c EIN-PN 45-2731123-001

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	GREAT KIDS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GREAT KIDS, INC.	c EIN-PN 62-1798100-001
a	Plan name	HENNESSEY ENGINEERS, INC. 401(K) PLAN AND TRUST	
b	Name of plan sponsor	HENNESSEY ENGINEERS, INC.	c EIN-PN 38-2047389-004
a	Plan name	HENSLEY LAMKIN RACHEL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HENSLEY LAMKIN RACHEL, INC.	c EIN-PN 75-2377361-001
a	Plan name	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	INDEPENDENT CAPITAL MANAGEMENT LLC 401(K) PLAN	
b	Name of plan sponsor	INDEPENDENT CAPITAL MANAGEMENT LLC	c EIN-PN 26-3029556-001
a	Plan name	JAMES G. MURPHY, INC. 401(K) PLAN	
b	Name of plan sponsor	JAMES G. MURPHY, INC.	c EIN-PN 91-0901239-002
a	Plan name	JAN-PRO, INC. 401(K) PLAN	
b	Name of plan sponsor	TRI-VISION CORPORATION II	c EIN-PN 47-5110107-001
a	Plan name	JANET H. LEE, D.O., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	JANET H. LEE	c EIN-PN 87-0754052-001
a	Plan name	JAPAT, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	JAPAT, INC.	c EIN-PN 94-2694329-001
a	Plan name	KILLION COMMUNICATIONS CONSULTANTS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KILLION COMMUNICATIONS CONSULTANTS, INC.	c EIN-PN 37-1367165-001
a	Plan name	LISA M. SIMONE, ATTORNEY AT LAW, A PROFESSIONAL CORPORATION 401(K) PLAN	
b	Name of plan sponsor	LISA M. SIMONE ATTORNEY AT LAW, A PROFESSIONAL CORPORATION	c EIN-PN 87-4041442-001

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 MICHAEL L. FITZGERALD INSURANCE SERVICES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MICHAEL L. FITZGERALD INSURANCE SERVICES, INC.	c EIN-PN 20-2103543-001
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 MY OFFICE, INC. 401(K) PLAN	
b	Name of plan sponsor MY OFFICE, INC.	c EIN-PN 48-1289900-001
a	Plan name NANOSHIFT 401(K) PLAN	
b	Name of plan sponsor NANOSHIFT	c EIN-PN 59-3810848-001
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 O'BRIEN BROS. BUSINESS FORMS, INC. 401(K) PLAN	
b	Name of plan sponsor O'BRIEN BROS. BUSINESS FORMS, INC.	c EIN-PN 36-2796459-001
a	Plan name OAHU METAL & GLAZING, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor OAHU METAL & GLAZING, LLC	c EIN-PN 84-3089701-001
a	Plan name PASADENA SENIOR CENTER 401(K) PLAN	
b	Name of plan sponsor PASADENA SENIOR CENTER	c EIN-PN 95-2085393-001
a	Plan name POSITIVEEDGE SOLUTIONS 401(K) PLAN & TRUST	
b	Name of plan sponsor POSITIVEEDGE SOLUTIONS	c EIN-PN 37-1552390-001
a	Plan name PWA RETIREMENT PLAN	
b	Name of plan sponsor PERHATS WENSTROM ASSOCIATES, INC.	c EIN-PN 36-3611103-002
a	Plan name QIU ACCOUNTANCY CORP. 401(K) PLAN	
b	Name of plan sponsor QIU ACCOUNTANCY CORP.	c EIN-PN 95-4629680-001

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 SCHMIDT & STACY CONSULTING ENGINEERS, INC. 401(K) PLAN	
b	Name of plan sponsor SCHMIDT & STACY CONSULTING ENGINEERS, INC.	c EIN-PN 75-2410170-001
a	Plan name SCHOOL PORTRAITS BY ADAMS PHOTOGRAPHY, INC. 401(K) PLAN	
b	Name of plan sponsor SCHOOL PORTRAITS BY ADAMS PHOTOGRAPHY, INC.	c EIN-PN 27-2959933-001
a	Plan name SCHULKAMP ELECTRIC 401(K) PLAN	
b	Name of plan sponsor SCHULKAMP COMPANY, INC.	c EIN-PN 26-1505393-001
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 SMC CONSTRUCTION CO. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SMC CONSTRUCTION CO.	c EIN-PN 88-0319132-001
a	Plan name SULLIVANS USA, INC. 401(K) PLAN	
b	Name of plan sponsor SULLIVANS USA, INC. 401(K) PLAN	c EIN-PN 36-3815229-001
a	Plan name THE CREDIT UNION FOR ROBERTSON COUNTY 401(K) PLAN	
b	Name of plan sponsor THE CREDIT UNION FOR ROBERTSON COUNTY	c EIN-PN 62-6118790-001
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
a	Plan name TOIGO FOUNDATION RETIREMENT PLAN	
b	Name of plan sponsor THE ROBERT A. TOIGO FOUNDATION	c EIN-PN 13-3565426-001
a	Plan name TOM MALLOY CORPORATION 401(K) PLAN	
b	Name of plan sponsor TOM MALLOY CORPORATION	c EIN-PN 95-2674327-004
a	Plan name WEINBERG & COMPANY 401K PLAN	
b	Name of plan sponsor WEINBERG & COMPANY, LLP	c EIN-PN 05-0401635-001
a	Plan name FLORIDA BUSINESS TECHNOLOGIES LLC 401(K) PLAN	
b	Name of plan sponsor FLORIDA BUSINESS TECHNOLOGIES LLC	c EIN-PN 26-0000350-001

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 CECOS 401(K) PLAN	
b	Name of plan sponsor CYRIACKS ENVIRONMENTAL CONSULTING SERVICES, INC.	c EIN-PN 90-0106680-001
a	Plan name CEDAR VALLEY PEDIATRIC DENTISTRY 401(K) PLAN	
b	Name of plan sponsor CEDAR VALLEY PEDIATRIC DENTISTRY	c EIN-PN 27-0521322-001
a	Plan name LA-Z-BOY 401(K) RETIREMENT PLAN	
b	Name of plan sponsor MGM GALLERIES LLC DBA LA-Z-BOY FURNITURE GALLERIES	c EIN-PN 46-0513963-001
a	Plan name PELION ACTUARIAL SERVICES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PELION ACTUARIAL SERVICES, INC.	c EIN-PN 45-2927368-001
a	Plan name TAKING CARE OF BENEFITS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TAKING CARE OF BENEFITS, INC.	c EIN-PN 45-3305885-001
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 ACCURATE CONSTRUCTION COMPANY 401(K) PLAN	
b	Name of plan sponsor ACCURATE CONSTRUCTION COMPANY, INC.	c EIN-PN 35-2243037-001
a	Plan name ACE FURNITURE & TV, INC. 401(K) PLAN	
b	Name of plan sponsor ACE FURNITURE & TV, INC.	c EIN-PN 47-0541683-001
a	Plan name GENERAL TRANSERVICE, INC. AND SURE FLIGHT, LLC RETIREMENT PLAN	
b	Name of plan sponsor GENERAL TRANSERVICE, INC.	c EIN-PN 23-1717902-001
a	Plan name LOS ANGELES CHAMBER ORCHESTRA SOCIETY, INC. 401(K) PLAN	
b	Name of plan sponsor LOS ANGELES CHAMBER ORCHESTRA SOCIETY, INC.	c EIN-PN 23-7010825-001
a	Plan name PRATT & ASSOCIATES, LLC 401(K) PLAN	
b	Name of plan sponsor PRATT & ASSOCIATES, LLC	c EIN-PN 62-1725882-001
a	Plan name PRECIOUS MOMENTS FOUNDATION EMPLOYEES 401K AND PROFIT SHARING PLAN	
b	Name of plan sponsor PRECIOUS MOMENTS FOUNDATION	c EIN-PN 31-1721271-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name PRECISION INDUSTRIAL CONTRACTORS, INC. 401(K) PLAN	
b	Name of plan sponsor PRECISION INDUSTRIAL CONTRACTORS, INC.	c EIN-PN 91-2139290-001
a	Plan name THE FULLINWIDER FIRM, LLC 401(K) PLAN	
b	Name of plan sponsor THE FULLINWIDER FIRM, LLC	c EIN-PN 46-2738081-001
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 ADVANCED NETWORK PRODUCTS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ADVANCED NETWORK PRODUCTS, INC.	c EIN-PN 23-2316443-001
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 COBITCO INC 401(K) PLAN	
b	Name of plan sponsor COBITCO, INC.	c EIN-PN 84-0504239-001
a	Plan name GIBSON WINE COMPANY EMPLOYEES' 401(K) PLAN	
b	Name of plan sponsor GIBSON WINE COMPANY	c EIN-PN 94-0840555-003
a	Plan name GILBERT C. DOLES, ATTORNEY AT LAW, A LAW CORPORATION 401(K) PLAN	
b	Name of plan sponsor GILBERT C. DOLES, ATTORNEY AT LAW, A LAW CORPORATION	c EIN-PN 99-0359339-001
a	Plan name GILTON SOLID WASTE MANAGEMENT, INC.	
b	Name of plan sponsor GILTON SOLID WASTE MANAGEMENT, INC.	c EIN-PN 94-2268035-001
a	Plan name GISCLAIR & ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GISCLAIR & ASSOCIATES, INC.	c EIN-PN 72-1012609-001
a	Plan name MAETZOLD HOMES, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor MAETZOLD HOMES, INC.	c EIN-PN 41-2009271-001

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 MAFIAPAPERS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MAFIAPAPERS, INC.	c EIN-PN 42-1634622-002
a	Plan name THE PARK HOME DBA THE MEADOWS PERSONAL CARE COMMUNITY 401(K)	
b	Name of plan sponsor THE PARK HOME DBA THE MEADOWS PERSONAL CARE COMMUNITY	c EIN-PN 24-0522575-001
a	Plan name THE REALTIME GROUP 401(K) PLAN	
b	Name of plan sponsor RT BLUESHOES, L.P. DBA THE REALTIME GROUP, LLC	c EIN-PN 46-0876004-001
a	Plan name THE RICE PARTNERSHIP, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE RICE PARTNERSHIP, LLC	c EIN-PN 81-0671115-001
a	Plan name ALOHA HABILITATION SERVICES, INC. 401(K) PLAN AND TRUST	
b	Name of plan sponsor ALOHA HABILITATION SERVICES, INC.	c EIN-PN 99-0356254-001
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 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 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
a	Plan name GREEN CHARGE ENVIRONMENTAL 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GREEN CHARGE ENVIRONMENTAL, INC.	c EIN-PN 46-2745824-001
a	Plan name GREEN CHARGE TECHNOLOGIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GREEN CHARGE TECHNOLOGIES, INC.	c EIN-PN 81-2651743-001
a	Plan name MASFAB, INC. 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor MASFAB, INC. T/A FORMIT STEEL, INC.	c EIN-PN 23-2065665-002
a	Plan name MATERIALS TESTING, INC. 401(K) PLAN	
b	Name of plan sponsor MATERIALS TESTING, INC.	c EIN-PN 06-1321309-001

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	QUALITY AUTO BODY 401(K) PLAN
b	Name of plan sponsor	QUALITY AUTO BODY
c	EIN-PN	22-2130034-001
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	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	TWH ARCHITECTS, INC. SAFE HARBOR 401(K) PLAN
b	Name of plan sponsor	TWH ARCHITECTS, INC.
c	EIN-PN	62-0951425-002
a	Plan name	ANDRADE GONZALEZ 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	ANDRADE GONZALEZ LLP
c	EIN-PN	46-2892257-001
a	Plan name	ANDRADE GONZALEZ LLP 401(K) EMPLOYEE PLAN
b	Name of plan sponsor	ANDRADE GONZALEZ LLP
c	EIN-PN	46-2892257-003
a	Plan name	CRAZY CAT CYCLERY 401(K) PLAN
b	Name of plan sponsor	CRAZY CAT CYCLERY, LLC
c	EIN-PN	46-1509105-001
a	Plan name	HAMILTON MARTENS, LLC 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	HAMILTON MARTENS, LLC
c	EIN-PN	20-1343616-001
a	Plan name	HANGMAN PRODUCTS, INC. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	HANGMAN PRODUCTS, INC.
c	EIN-PN	95-4749074-001
a	Plan name	MCR SERVICES LLC 401(K) PLAN
b	Name of plan sponsor	MCR SERVICES LLC
c	EIN-PN	39-1969575-002
a	Plan name	MCZ CONSTRUCTION, INC. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	MCZ CONSTRUCTION, INC.
c	EIN-PN	20-0634943-001
a	Plan name	MED ONE MEDICAL GROUP EMPLOYEES' RETIREMENT PLAN
b	Name of plan sponsor	MED ONE FAMILY MEDICAL GROUP, INC.
c	EIN-PN	33-0776463-001

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 MED-FAST PHARMACY, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor MED-FAST PHARMACY, INC.	c EIN-PN 25-1631348-001
a	Plan name REFRICENTER 401(K) PLAN	
b	Name of plan sponsor REFRICENTER OF MIAMI, INC.	c EIN-PN 59-1362709-001
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 REIF LAW GROUP, P.C. 401(K) PLAN	
b	Name of plan sponsor REIF LAW GROUP, P.C.	c EIN-PN 26-4085758-001
a	Plan name RIZZETTA & COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor RIZZETTA & COMPANY, INC.	c EIN-PN 59-3075187-001
a	Plan name ARTHUR Y. MORI & ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ARTHUR Y. MORI & ASSOCIATES, INC.	c EIN-PN 99-0112411-001
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 DANIEL S. BANDARI, M.D., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DANIEL S. BANDARI, M.D., INC.	c EIN-PN 26-3401605-001
a	Plan name DASTON CORPORATION 401(K) PLAN	
b	Name of plan sponsor DASTON CORPORATION	c EIN-PN 54-1638058-001
a	Plan name DATA PATH, INC. 401(K) P/S PLAN	
b	Name of plan sponsor DATA PATH, INC.	c EIN-PN 90-0242296-001
a	Plan name HI-TECH LABELS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HI-TECH LABELS, INC.	c EIN-PN 95-3836900-001
a	Plan name MID-VALLEY HEALTH SERVICES LONG TERM CARE, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor MID-VALLEY HEALTH SERVICES LONG TERM CARE, INC.	c EIN-PN 26-1365260-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name MID-VALLEY PLUMBING SUPPLY, INC. EMPLOYEE PROFIT SHARING PLAN	
b	Name of plan sponsor MID-VALLEY PLUMBING SUPPLY, INC.	c EIN-PN 23-1691324-001
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 VANDERVART CONCRETE PRODUCTS, LLC EMPLOYEE SAVINGS AND PROFIT SHARING PLAN	
b	Name of plan sponsor VANDERVART CONCRETE PRODUCTS, LLC	c EIN-PN 46-5469386-001
a	Plan name AUS DECKING, INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor AUS DECKING, INC.	c EIN-PN 20-1259014-001
a	Plan name DEG CONSTRUCTION CO., INC. 401(K) PLAN	
b	Name of plan sponsor DEG CONSTRUCTION CO., INC.	c EIN-PN 86-0640575-001
a	Plan name DEL AMO MOTORSPORTS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TOO FAST INC. DBA DEL AMO MOTORSPORTS OF REDONDO BEACH	c EIN-PN 33-0546509-001
a	Plan name HIX & SNEDEKER COMPANIES, LLC 401(K) PLAN	
b	Name of plan sponsor HIX SNEDEKER COMPANIES, LLC	c EIN-PN 27-1982876-001
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 HMC CONSTRUCTION, INC. 401(K) PLAN	
b	Name of plan sponsor HODGDON MANAGEMENT AND CONSTRUCTION, INC. DBA HMC CONSTRUCTION, INC.	c EIN-PN 56-2467203-002
a	Plan name MISTLIN MOTORS 401(K) PLAN	
b	Name of plan sponsor MISTLIN MOTORS	c EIN-PN 94-2540043-001
a	Plan name ROTO-ROOTER 401(K) PLAN	
b	Name of plan sponsor ROOTER SEWER CLEANERS, INC.	c EIN-PN 39-0989392-222
a	Plan name ROUNDERS 401(K) PLAN AND TRUST	
b	Name of plan sponsor ROUNDERS BAR & GRILL, INC.	c EIN-PN 20-5823096-001

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	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	VILLAGE GREEN LANDSCAPES 401(K) PLAN	
b	Name of plan sponsor	VILLAGE GREEN LAWN MAINTENANCE & LANDSCAPING, INC.	c EIN-PN 41-1933240-001
a	Plan name	NATHANIEL LEEDY, DMD, PA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NATHANIEL LEEDY, DMD, PA	c EIN-PN 84-3728355-001
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 WELDING, INC. 401(K) PLAN	
b	Name of plan sponsor	NATIONAL WELDING, INC.	c EIN-PN 56-2396369-001
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	INNOVATION EDGE 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	INNOVATION EDGE	c EIN-PN 20-8196742-002
a	Plan name	SCHUMANN HANLON LLC EMPLOYEES' 401(K) PLAN	
b	Name of plan sponsor	SCHUMANN HANLON LLC	c EIN-PN 20-1967882-001
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	WESTERN CAMPS, INC. 401(K) PLAN	
b	Name of plan sponsor	WESTERN CAMPS, INC.	c EIN-PN 95-2499851-001
a	Plan name	SERVICE TRACKING SYSTEMS 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	SERVICE TRACKING SYSTEMS	c EIN-PN 20-8077674-001
a	Plan name	SERVICE TRANSPORT GROUP, INC. 401(K) PSP	
b	Name of plan sponsor	SERVICE TRANSPORT GROUP, INC.	c EIN-PN 23-2981850-001

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 SEWINGMACHINESPLUS.COM, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SEWINGMACHINESPLUS.COM, INC.	c EIN-PN 26-4413184-001
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 BI-QEM INC. 401(K) PLAN	
b	Name of plan sponsor BI-QEM INC.	c EIN-PN 04-2783625-001
a	Plan name DWELLINGS ON MADISON 401(K) PLAN	
b	Name of plan sponsor DWELLINGS ON MADISON	c EIN-PN 45-4310435-001
a	Plan name DYNAMIC AIR, INC. 401(K) PLAN	
b	Name of plan sponsor DYNAMIC AIR, INC.	c EIN-PN 99-0322399-001
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 INTERPRET, LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor INTERPRET, LLC	c EIN-PN 20-4554232-002
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 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

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 WILLIAM J.T. COULMAN, D.D.S. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DR. BILL COULMAN, D.D.S., INC.	c EIN-PN 31-1643764-001
a	Plan name WILLIAMS, DECLARK & TUSCHMAN CO., LPA PROFIT SHARING PLAN	
b	Name of plan sponsor WILLIAMS, DECLARK & TUSCHMAN CO., LPA	c EIN-PN 34-1311244-001
a	Plan name 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
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 BRANDMINDED, LLC 401(K) PLAN	
b	Name of plan sponsor BRANDMINDED, LLC	c EIN-PN 80-2122970-001
a	Plan name BREAKING GROUND EXCAVATION INC. 401(K) PLAN	
b	Name of plan sponsor BREAKING GROUND EXCAVATION INC.	c EIN-PN 91-2118848-001
a	Plan name BREEZWAY THRIFTY GLASS 401(K) PLAN	
b	Name of plan sponsor JOJO ENTERPRISES, INC. DBA BREEZWAY THRIFTY GLASS	c EIN-PN 33-0433751-001
a	Plan name ELECTRO-TECH, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ELECTRO-TECH, INC.	c EIN-PN 06-1107977-001
a	Plan name ELITE PT LLC 401(K) PLAN	
b	Name of plan sponsor ELITE PT LLC	c EIN-PN 20-8004587-001
a	Plan name JARMER ELECTRIC, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JARMER ELECTRIC, INC.	c EIN-PN 93-0694887-001
a	Plan name JCJ, LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JCJ, LLP	c EIN-PN 27-4442059-001
a	Plan name JD DOGGY, INC. 401(K) PLAN	
b	Name of plan sponsor JD DOGGY, INC.	c EIN-PN 47-3843337-001

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	JD SPINE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	JD MEDICAL LLC D/B/A JD SPINE	c EIN-PN 27-1574562-001
a	Plan name	SNRA COMMODITIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SNRA COMMODITIES, INC.	c EIN-PN 46-3031744-001
a	Plan name	OTOGENETICS CORPORATION 401(K) PLAN	
b	Name of plan sponsor	OTOGENETICS CORPORATION	c EIN-PN 26-1343895-001
a	Plan name	OVERLAKE GOLF & COUNTRY CLUB 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	OVERLAKE GOLF & COUNTRY CLUB	c EIN-PN 91-0588580-002
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	BUTLER-JUSTICE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BUTLER-JUSTICE, INC. 401(K) PROFIT SHARING PLAN	c EIN-PN 88-0401243-002
a	Plan name	C & C INSULATION, INC. 401(K) PLAN	
b	Name of plan sponsor	C & C INSULATION, INC.	c EIN-PN 23-2110326-001
a	Plan name	EVERGREEN AVIATION & SPACE MUSEUM 401(K) PLAN	
b	Name of plan sponsor	EVERGREEN AVIATION & SPACE MUSEUM	c EIN-PN 93-1069203-001
a	Plan name	JOLLEY'S COMPOUNDING PHARMACY INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	JOLLEY'S COMPOUNDING PHARMACY INC.	c EIN-PN 20-0513036-001
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	PATRICK COUNTY FAMILY PRACTICE 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	PATRICK COUNTY FAMILY PRACTICE	c EIN-PN 54-1583691-001

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 CARDIOVASCULAR SOLUTIONS, LLC PROFIT SHARING PLAN	
b	Name of plan sponsor CARDIOVASCULAR SOLUTIONS, LLC	c EIN-PN 26-0170867-001
a	Plan name CARPETS UNLIMITED 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SPECIALTIES UNLIMITED, INC.	c EIN-PN 43-1986186-001
a	Plan name FILOLI CENTER 401(K) PLAN	
b	Name of plan sponsor FILOLI CENTER	c EIN-PN 95-2996648-001
a	Plan name KING CHIROPRACTIC RETIREMENT PLAN	
b	Name of plan sponsor KING CHIROPRACTIC INSTITUTE	c EIN-PN 52-2210480-001
a	Plan name LTC SUPPORT SERVICES, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor LTC SUPPORT SERVICES, LLC	c EIN-PN 20-8401158-001
a	Plan name ACON LABORATORIES, INC. 401(K) PLAN	
b	Name of plan sponsor ACON LABORATORIES, INC.	c EIN-PN 22-3642050-001
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
a	Plan name CJ15 LLC 401(K) PLAN	
b	Name of plan sponsor CJ15 LLC	c EIN-PN 47-4824628-001
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 CLASSIC CARRIERS/CLASSIC WAREHOUSING 401(K) PLAN	
b	Name of plan sponsor CLASSIC CARRIERS, INC.	c EIN-PN 31-1152938-001
a	Plan name GENUS ARCHITECTURE 401(K) PLAN	
b	Name of plan sponsor GENUS ARCHITECTURE LLC	c EIN-PN 46-2002299-001
a	Plan name PREMIER FLOOR CARE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PREMIER FLOOR CARE, INC..	c EIN-PN 88-0480004-002

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 MAGNUM MACHINE 401(K) PLAN	
b	Name of plan sponsor MAGCO MACHINE & MANUFACTURING DBA MAGNUM MACHINE & MANUFACTURING	c EIN-PN 74-2978531-001
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 ADVANCED SPINE & SPORTS CARE RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor ADVANCED SPINE & SPORTS CARE	c EIN-PN 36-4426097-001
a	Plan name ADVENTURE DENTAL 401(K) PLAN	
b	Name of plan sponsor NEIL, HILLYARD AND HEATON, PLLC DBA ADVENTURE DENTAL	c EIN-PN 26-2659646-001
a	Plan name GLAZE 'N' SEAL PRODUCTS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GLAZE 'N' SEAL PRODUCTS, INC.	c EIN-PN 45-3147432-001
a	Plan name GLENN A ZEH, DDS, PC 401(K) PLAN	
b	Name of plan sponsor GLENN A ZEH, DDS, PC	c EIN-PN 84-1596272-001
a	Plan name PROACTIVE WEST 401(K) PLAN	
b	Name of plan sponsor PROACTIVE ENGINEERING CONSULTANTS WEST, INC.	c EIN-PN 45-1479995-001
a	Plan name PROCESSES BY MARTIN, INC. 401(K) PLAN	
b	Name of plan sponsor PROCESSES BY MARTIN, INC.	c EIN-PN 95-4434945-001
a	Plan name THE VISIT NAPA VALLEY 401(K) PLAN	
b	Name of plan sponsor VISIT NAPA VALLEY	c EIN-PN 68-0217381-001
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 ALWAYS A PLEASURE 401(K) PLAN	
b	Name of plan sponsor ALWAYS A PLEASURE, INC.	c EIN-PN 26-1101887-001
a	Plan name MATICH CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MATICH CORPORATION	c EIN-PN 95-1810911-002

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	MATRIX MANUFACTURING, INC. 401(K) PLAN	
b	Name of plan sponsor	MATRIX MANUFACTURING, INC.	c EIN-PN 38-3622804-001
a	Plan name	CONSOLIDATED DOORS, INC. 401(K) PLAN	
b	Name of plan sponsor	CONSOLIDATED DOORS, INC.	c EIN-PN 39-1757450-001
a	Plan name	GREEN HILLS MEMORIAL PARK EMPLOYEES' RETIREMENT PLAN	
b	Name of plan sponsor	GREEN HILLS MEMORIAL PARK	c EIN-PN 95-1955721-001
a	Plan name	QUIVX 401(K) PLAN & TRUST	
b	Name of plan sponsor	QUIVX	c EIN-PN 26-4736334-001
a	Plan name	R & L INSURANCE AGENCY LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	R & L INSURANCE AGENCY, LLC	c EIN-PN 30-0119097-001
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	R&F, INC. EMPLOYEES BENEFIT PLAN	
b	Name of plan sponsor	R&F, INC.	c EIN-PN 34-1016464-001
a	Plan name	R.F.M.S., INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	R.F.M.S., INC.	c EIN-PN 36-3114893-001
a	Plan name	MEDICORE, LLC 401(K) PLAN	
b	Name of plan sponsor	MEDICORE, LLC	c EIN-PN 30-0852928-001
a	Plan name	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	CRESS INSURANCE CONSULTANTS, INC. RETIREMENT PLAN	
b	Name of plan sponsor	CRESS INSURANCE CONSULTANTS, INC.	c EIN-PN 85-0324896-001
a	Plan name	HARBOR AGENCY, INC. 401(K) PLAN	
b	Name of plan sponsor	HARBOR AGENCY, INC.	c EIN-PN 38-2153954-001

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 HARPREET SAINI DDS, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor HARPREET SAINI DDS, INC.	c EIN-PN 27-4236646-001
a	Plan name RELIABLE INDUSTRIES, INC. EMPLOYEES 401(K) PLAN	
b	Name of plan sponsor RELIABLE INDUSTRIES INC. OF NEW ORLEANS	c EIN-PN 72-0936490-001
a	Plan name U.S. PERMA, INC. RETIREMENT PLAN	
b	Name of plan sponsor U.S. PERMA, INC. DBA CALIFORNIA TILE INSTALLERS	c EIN-PN 94-2910930-001
a	Plan name ASSOCIATED ENGINEERING CONSULTANTS, INC. 401(K) PLAN	
b	Name of plan sponsor ASSOCIATED ENGINEERING CONSULTANTS, INC.	c EIN-PN 23-2837113-001
a	Plan name ASSURANCE LABS RETIREMENT READINESS PLAN	
b	Name of plan sponsor ASSURANCE DRUG TESTING LABORATORIES, LLC	c EIN-PN 20-4013455-001
a	Plan name DAVID A. PARIS, D.D.S., S.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DAVID A. PARIS, D.D.S., S.C.	c EIN-PN 39-1696459-001
a	Plan name DAVID M. FINKELSTEIN, O.D. & RYAN SHEA, O.D., L.L.C. 401(K) PLAN	
b	Name of plan sponsor DAVID M. FINKELSTEIN, O.D. & RYAN SHEA, O.D., L.L.C.	c EIN-PN 27-0631471-001
a	Plan name HIGHPOINT SOLUTIONS, INC. PROFIT SHARING & 401(K) PLAN	
b	Name of plan sponsor HIGHPOINT SOLUTIONS, INC.	c EIN-PN 22-3462774-002
a	Plan name MIDWEST NEUROSCIENCES ASSOCIATES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NEUROSURGERY AND ENDOVASCULAR ASSOCIATES OF MILWAUKEE, S.C.	c EIN-PN 39-1832237-002
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 ROCHESTER TELEPHONE COMPANY INC EMPLOYEES' RETIREMENT PLAN	
b	Name of plan sponsor ROCHESTER TELEPHONE COMPANY INC	c EIN-PN 35-0619275-777
a	Plan name VEGAS OPTICS, LLC 401(K) PLAN	
b	Name of plan sponsor VEGAS OPTICS, LLC	c EIN-PN 55-0896350-001

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	AUTOMATED GIVING SOLUTIONS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	AUTOMATED GIVING SOLUTIONS, LLC.	c EIN-PN 90-0284345-333
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	DENALI CONSTRUCTION SERVICES 401(K) PLAN	
b	Name of plan sponsor	DENALI CONSTRUCTION SERVICES, LP DBA THERMAL DYNAMIN, DENALI COMFORT	c EIN-PN 20-1036081-001
a	Plan name	DENBESTE COMPANIES, INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor	DENBESTE COMPANIES, INC.	c EIN-PN 93-3878708-001
a	Plan name	HOLOCENE RETIREMENT PLAN	
b	Name of plan sponsor	HOLOCENE DRILLING	c EIN-PN 88-1200636-001
a	Plan name	HOME GUARD INDUSTRIES, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	HOME GUARD INDUSTRIES, INC.	c EIN-PN 35-1568735-001
a	Plan name	MIXER SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	MIXER SYSTEMS, INC.	c EIN-PN 39-1322266-222
a	Plan name	RUPP SEEDS, INC. 401(K) PLAN	
b	Name of plan sponsor	RUPP SEEDS, INC.	c EIN-PN 34-1384132-001
a	Plan name	VIRGINIA PEDIATRIC AND ADOLESCENT MEDICINE 401(K) PLAN	
b	Name of plan sponsor	VIRGINIA PEDIATRIC AND ADOLESCENT MEDICINE	c EIN-PN 76-0804445-001
a	Plan name	VISION ELECTRIC, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	VISION ELECTRIC, INC.	c EIN-PN 06-1420597-002
a	Plan name	VISTA BEHAVIORAL HEALTH, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	VISTA BEHAVIORAL HEALTH, INC.	c EIN-PN 45-2979166-001
a	Plan name	VITAL RETIREMENT PLAN	
b	Name of plan sponsor	VITAL VENTURES	c EIN-PN 81-0972460-001

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	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	BELINDA S. GRANADA DDS CASH BALANCE
b	Name of plan sponsor	BELINDA S. GRANADA DDS PC
c	EIN-PN	47-1502317-002
a	Plan name	BELINDA S. GRANADA DDS PC 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	BELINDA S. GRANADA DDS PC
c	EIN-PN	47-1502317-001
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	DRILLING & PRODUCTION CO. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	DRILLING & PRODUCTION CO.
c	EIN-PN	95-0803480-001
a	Plan name	INNOVATIVE 401(K) PLAN
b	Name of plan sponsor	INNOVATIVE STAMPING CORP.
c	EIN-PN	95-3018165-001
a	Plan name	INNOVATIVE INTEGRATION, INC. RETIREMENT PLAN
b	Name of plan sponsor	INNOVATIVE INTEGRATION, INC.
c	EIN-PN	20-3393992-001
a	Plan name	WESTERN SHEET METAL, INC. EMPLOYEE PROFIT SHARING PLAN
b	Name of plan sponsor	WESTERN SHEET METAL, INC.
c	EIN-PN	87-0296587-001
a	Plan name	WESTMINSTER CAPITAL, INC. 401(K) PLAN
b	Name of plan sponsor	WESTMINSTER CAPITAL, INC.
c	EIN-PN	95-2157201-001
a	Plan name	WESTON PROPERTIES 401K
b	Name of plan sponsor	WESTON PROPERTIES, LC
c	EIN-PN	74-2722024-112
a	Plan name	BIG PINE PAIUTE TRIBE 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	BIG PINE PAIUTE TRIBE
c	EIN-PN	95-3059258-001

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 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 NEXT LEVEL IT, LLC 401(K) PLAN	
b	Name of plan sponsor NEXT LEVEL IT, LLC	c EIN-PN 87-2800471-001
a	Plan name NLA 401(K) PLAN	
b	Name of plan sponsor NANCY LEDBETTER & ASSOCIATES, INC.	c EIN-PN 75-3059985-001
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 WISCONSIN LIFTING SPECIALISTS 401(K) PLAN	
b	Name of plan sponsor WISCONSIN LIFTING SPECIALISTS, INC.	c EIN-PN 39-1130436-001
a	Plan name WM RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor WIREMASTERS, INCORPORATED	c EIN-PN 36-2083604-003
a	Plan name WMX LOGISTICS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WMX LOGISTICS	c EIN-PN 82-0570015-001
a	Plan name BRETT HILL CONSTRUCTION, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BRETT HILL CONSTRUCTION, INC.	c EIN-PN 99-0345851-001
a	Plan name ELM HEATING AND COOLING, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor ELM HEATING & COOLING, INC.	c EIN-PN 36-4021033-001
a	Plan name 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 EMG, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor EMG, INC.	c EIN-PN 94-2903016-001

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	JEKK TOOLS & FASTENERS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	JEKK TOOLS & FASTENERS, INC.	c EIN-PN 23-2278532-001
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	C T LEWIS ENTERPRISES LP RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	C T LEWIS ENTERPRISES LP	c EIN-PN 51-0663685-001
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	EYE RESEARCH & FOUNDATION INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	EYE RESEARCH FOUNDATION INC.	c EIN-PN 81-5052515-001
a	Plan name	JULIE A. GUM, DMD P.C. 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	JULIE A. GUM, DMD P.C.	c EIN-PN 81-4299360-001
a	Plan name	K KERN PAINTING LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	K KERN PAINTING LLC	c EIN-PN 54-2101884-001
a	Plan name	P.J. ALBERT, INC. 401(K) PLAN	
b	Name of plan sponsor	P.J. ALBERT, INC.	c EIN-PN 04-2787609-001
a	Plan name	STANDARD BUILDERS 401(K) PLAN	
b	Name of plan sponsor	STANDARD BUILDERS, INC.	c EIN-PN 20-4989039-001
a	Plan name	STANDARD MAINTENANCE COMPANY 401(K) PLAN	
b	Name of plan sponsor	STANDARD MAINTENANCE COMPANY, LLC	c EIN-PN 62-1741930-001
a	Plan name	FINANCIAL NETWORK FID WEST, LLC RETIREMENT PLAN	
b	Name of plan sponsor	FINANCIAL NETWORK FID WEST, LLC	c EIN-PN 26-2039224-001
a	Plan name	CARRION, LAFFITTE & CASELLAS RETIREMENT PLAN	
b	Name of plan sponsor	CARRION, LAFFITTE & CASELLAS, INC.	c EIN-PN 66-0635623-001

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 CARSON CORPORATION NON-UNION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CARSON CORPORATION	c EIN-PN 22-2852356-001
a	Plan name CARSON CORPORATION RETIREMENT PLAN FOR LOCAL 55	
b	Name of plan sponsor CARSON CORPORATION	c EIN-PN 22-2852356-003
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 KMS 401(K) PLAN	
b	Name of plan sponsor KINETICS MECHANICAL SERVICES, INC.	c EIN-PN 77-0476369-001
a	Plan name KNS INTERNATIONAL RETIREMENT PLAN	
b	Name of plan sponsor KNS INTERNATIONAL	c EIN-PN 42-1539365-001
a	Plan name KO STONE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KO STONE, INC.	c EIN-PN 46-2842689-001
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 PAUL'S AUTO REPAIR, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor PAUL'S AUTO REPAIR, LLC	c EIN-PN 27-2538433-001
a	Plan name PAXTON VAN LINES 401(K) RETIREMENT PLAN	
b	Name of plan sponsor PAXTON VAN LINES, INC.	c EIN-PN 54-0585256-001
a	Plan name PAYNE, MALECHEK, SCHERR, CAMPBELL & MOORE, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PAYNE, MALECHEK, SCHERR, CAMPBELL & MOORE, P.C.	c EIN-PN 74-2459387-001
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

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	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	FOREMAN TOOL AND MOLD 401(K) PLAN	
b	Name of plan sponsor	FOREMAN TOOL AND MOLD	c EIN-PN 82-3225815-001
a	Plan name	LAKES TENNIS 401(K) PLAN	
b	Name of plan sponsor	KICK SERVICE, LTD. DBA LAKES TENNIS ACADEMY	c EIN-PN 20-1885263-001
a	Plan name	LAKOTA CONTRACTING, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	LAKOTA CONTRACTING, INC.	c EIN-PN 26-0060538-001
a	Plan name	LAMONI LIVESTOCK AUCTION MARKET, LLC PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	LAMONI LIVESTOCK AUCTION MARKET, LLC	c EIN-PN 83-1452702-001
a	Plan name	LANCE INDUSTRIES, INC. 401(K) PLAN AND TRUST	
b	Name of plan sponsor	LANCE INDUSTRIES, INC.	c EIN-PN 90-0613621-001
a	Plan name	LANDWORKS 401(K) PLAN	
b	Name of plan sponsor	LANDWORKS, LLC	c EIN-PN 39-1913555-001
a	Plan name	PENNY LANE SCHOOL, LTD. 401(K) PLAN	
b	Name of plan sponsor	PENNY LANE SCHOOL, LTD.	c EIN-PN 36-3864693-001
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	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	TEC ELECTRICAL CONTRACTING, INC. 401(K) PLAN	
b	Name of plan sponsor	TEC ELECTRICAL CONTRACTING, INC	c EIN-PN 46-0761832-001

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 WHITE BRENNER LLP 401(K) PLAN	
b	Name of plan sponsor WHITE BRENNER LLP	c EIN-PN 46-1799572-001
a	Plan name WHITE EYE ASSOCIATES, P.A. PROFIT SHARING PLAN	
b	Name of plan sponsor WHITE EYE ASSOCIATES, P.A.	c EIN-PN 56-1341154-001
a	Plan name AXAR RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor AXAR PHARMACEUTICALS, INC.	c EIN-PN 68-0665617-001
a	Plan name AXIUM HEALTHCARE DE PUERTO RICO 1165(E) PLAN	
b	Name of plan sponsor FARMACIA DORAL, INC. DBA AXIUM HEALTHCARE DE PUERTO RICO	c EIN-PN 66-0616318-001
a	Plan name AXSUN, CORP. 401(K) PLAN	
b	Name of plan sponsor AXSUN, CORP.	c EIN-PN 99-0376382-001
a	Plan name WOMENFIRST, LLC 401(K) PLAN	
b	Name of plan sponsor WOMENFIRST, LLC	c EIN-PN 41-2192392-001
a	Plan name BENETRENDS, INC. PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor BENETRENDS, INC.	c EIN-PN 35-2519056-002
a	Plan name BENJAMIN DEL VENTO, P.A. PROFIT SHARING PLAN	
b	Name of plan sponsor BENJAMIN DEL VENTO, P.A.	c EIN-PN 22-1943968-001
a	Plan name 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 BIZLINK GROUP 401(K) PLAN	
b	Name of plan sponsor BIZLINK TECHNOLOGY, INC.	c EIN-PN 94-3355611-001
a	Plan name BLACK DOG SALVAGE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BDS HOLDINGS, INC.	c EIN-PN 54-1968963-001
a	Plan name BLACK LUMBER COMPANY, INC. SAVINGS PLAN	
b	Name of plan sponsor BLACK LUMBER COMPANY, INC.	c EIN-PN 35-0902347-001

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	BLACKBURN'S FABRICATION, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	BLACKBURN'S FABRICATION, INC.	c EIN-PN 31-1446789-001
a	Plan name	BROWBLEE EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor	BROWBLEE LUMBER COMPANY	c EIN-PN 25-1542521-001
a	Plan name	BRUCE S. HEATER 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BRUCE S. HEATER, DDS, LLC	c EIN-PN 86-1138955-002
a	Plan name	BRUCE THORNTON A/C, INC. 401(K) PLAN	
b	Name of plan sponsor	BRUCE THORNTON A/C, INC.	c EIN-PN 75-1636013-001
a	Plan name	BUCHHOLZ TRANSPORT 401(K) & PSP	
b	Name of plan sponsor	BUCHHOLZ TRANSPORT INC.	c EIN-PN 38-2497552-001
a	Plan name	CAHFC 401(K) PLAN	
b	Name of plan sponsor	CAPITAL AREA HOUSING FINANCE CORPORATION	c EIN-PN 42-1550637-001
a	Plan name	CALIBER SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor	PRIME ELECTRICAL WBE, L.L.C. DBA CALIBER SOLUTIONS	c EIN-PN 26-4751651-001
a	Plan name	CASTOR GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor	CASTOR GROUP, LLC	c EIN-PN 20-0785510-001
a	Plan name	CAVINS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CAVINS, INC.	c EIN-PN 27-3977682-001
a	Plan name	CENTRAL ARIZONA SUPPLY, INC. 401(K) PLAN	
b	Name of plan sponsor	CENTRAL ARIZONA SUPPLY, INC.	c EIN-PN 86-0215440-002
a	Plan name	CENTROSOLAR AMERICA, INC. 401(K) PLAN	
b	Name of plan sponsor	CENTROSOLAR AMERICA, INC.	c EIN-PN 20-8781598-001
a	Plan name	CLINT PHARMACEUTICALS 401(K) PLAN	
b	Name of plan sponsor	CLINT PHARMACEUTICALS, INC.	c EIN-PN 62-1322467-001

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	COLLEGIUM HOLDINGS, INC. 401(K) PLAN	
b	Name of plan sponsor	COLLEGIUM HOLDINGS, INC.	c EIN-PN 22-3221879-001
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	COLONIAL TIRE AND BRAKE CENTER, INC. 401(K) PLAN	
b	Name of plan sponsor	COLONIAL TIRE AND BRAKE CENTER, INC.	c EIN-PN 06-1204758-001
a	Plan name	CROY CONTRACTING, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	CROY CONTRACTING, INC.	c EIN-PN 54-1616963-001
a	Plan name	DB SALES & SERVICE 401(K) PLAN	
b	Name of plan sponsor	MERTZ ENTERPRISES, INC, DBA DB SALES & SERVICE	c EIN-PN 90-0627040-001
a	Plan name	DBM ENGINEERING, P.C. 401(K) PLAN	
b	Name of plan sponsor	DBM ENGINEERING, PC	c EIN-PN 20-2917025-001
a	Plan name	DEFINITIVE SOLUTIONS COMPANY, INC. RETIREMENT PLAN	
b	Name of plan sponsor	DEFINITIVE SOLUTIONS COMPANY, INC.	c EIN-PN 31-1490291-001
a	Plan name	DESIGN SPACE INPHARMATICS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PRODUCTLIFE GROUP US, LLC	c EIN-PN 36-4982515-001
a	Plan name	DUBOIS COUNTY BLOCK & BRICK, INC. 401(K) PLAN	
b	Name of plan sponsor	DUBOIS COUNTY BLOCK & BRICK, INC.	c EIN-PN 35-2083897-001
a	Plan name	EAST MAIN DENTAL CENTER, LLP 401(K) DEFERRED COMPENSATION PLAN	
b	Name of plan sponsor	EAST MAIN DENTAL CENTER, LLP	c EIN-PN 93-0679201-001
a	Plan name	EAST TENNESSEE NEPHROLOGY, P.C. 401(K) PLAN	
b	Name of plan sponsor	EAST TENNESSEE NEPHROLOGY, P.C.	c EIN-PN 62-1835816-001
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

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	F.H. DAILEY CHEVROLET 401(K) PLAN	
b	Name of plan sponsor	INFINITE VELOCITY AUTOMOTIVE, INC. DBA F.H. DAILEY CHEVROLET	c EIN-PN 45-3126103-001
a	Plan name	FAIRCOUNT INTERNATIONAL 401(K) PLAN	
b	Name of plan sponsor	FAIRCOUNT, LLC	c EIN-PN 59-3566721-001
a	Plan name	FIRST-LIGHT USA, LLC EMPLOYEE RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	FIRST-LIGHT USA, LLC	c EIN-PN 20-1665358-001
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
a	Plan name	FLO-LINE TECHNOLOGY 401(K) PLAN	
b	Name of plan sponsor	FLO-LINE TECHNOLOGY	c EIN-PN 20-4032669-001
a	Plan name	FOUNDATION LABORATORY 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	LATARA ENTERPRISE, INC. DBA FOUNDATION LABORATORY	c EIN-PN 95-4467199-001
a	Plan name	GH GROUP, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GH GROUP, INC.	c EIN-PN 68-1040851-001
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	GIBSON WINE COMPANY EMPLOYEE SAVINGS & RETIREMENT PLAN	
b	Name of plan sponsor	GIBSON WINE COMPANY	c EIN-PN 94-0840555-002
a	Plan name	GROVE HEALTH DENTAL 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GROVE HEALTH DENTAL	c EIN-PN 26-0281244-001
a	Plan name	GUIDE WEALTH PARTNERS, INC. 401(K) PLAN	
b	Name of plan sponsor	GUIDE WEALTH PARTNERS, INC.	c EIN-PN 42-1350912-001
a	Plan name	HARROD & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor	HARROD & ASSOCIATES, PSC	c EIN-PN 61-1291670-001

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 HARRY DAVIS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HARRY DAVIS, LLC	c EIN-PN 26-4098911-001
a	Plan name HILLSON CONTRACTORS, INC. 401(K) PROFIT SHARING	
b	Name of plan sponsor HILLSON CONTRACTORS, INC.	c EIN-PN 02-0503186-001
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 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 HORSHAM SQUARE PHARMACY, INC. 401K PLAN	
b	Name of plan sponsor HORSHAM SQUARE PHARMACY, INC.	c EIN-PN 23-2409251-002
a	Plan name INTELLISTREETS, INC. EMPLOYEES' PROFIT SHARING TRUST	
b	Name of plan sponsor INTELLISTREETS, INC.	c EIN-PN 38-2424013-002
a	Plan name INTERNAL MEDICINE ASSOCIATES OF FRANKFORT, P.S.C. 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor INTERNAL MEDICINE ASSOCIATES OF FRANKFORT, P.S.C.	c EIN-PN 61-1098789-001
a	Plan name JESSICA R. BENTOSKI, DDS 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor JESSICA R. BENTOSKI, DDS PLLC	c EIN-PN 46-4379759-001
a	Plan name JI IN KIM, D.D.S., PROFESSIONAL CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JI IN KIM, D.D.S., PROFESSIONAL CORPORATION	c EIN-PN 45-2050276-001
a	Plan name JODESIGN, LLC 401(K) PLAN	
b	Name of plan sponsor JODESIGN, LLC	c EIN-PN 68-0671125-001
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

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 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 KAZI FOODS 401(K) PLAN	
b	Name of plan sponsor KAZI FOODS, INC.	c EIN-PN 98-4287911-001
a	Plan name KC SALLEY 401(K) PLAN	
b	Name of plan sponsor OLER RELO ONE LTD.	c EIN-PN 20-4736622-001
a	Plan name KORBER PHARMA PACKAGING MATERIALS LLC 401(K) PLAN	
b	Name of plan sponsor KORBER PHARMA PACKAGING MATERIALS LLC	c EIN-PN 47-5593447-001
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 LATITUDE 33 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor LATITUDE 33 PLANNING & ENGINEERING	c EIN-PN 33-0582561-001
a	Plan name MANAGED HEALTHCARE UNLIMITED, INC. 401(K) PLAN	
b	Name of plan sponsor MANAGED HEALTHCARE UNLIMITED, INC.	c EIN-PN 95-4587291-001
a	Plan name MANAGEMENT MATERIALS, INC. PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor MANAGEMENT MATERIALS INC.	c EIN-PN 38-2412976-001
a	Plan name MEDINA MEDIA INC. 401(K) PLAN	
b	Name of plan sponsor MEDINA MEDIA INC.	c EIN-PN 46-2582556-001
a	Plan name MEDINA MEDIA, INC. CASH BALANCE PLAN	
b	Name of plan sponsor MEDINA MEDIA INC.	c EIN-PN 46-2582556-002
a	Plan name MEL LANZER COMPANY PROFIT SHARING PLAN	
b	Name of plan sponsor MEL LANZER COMPANY	c EIN-PN 34-0965107-001
a	Plan name MINDSTAR AVIATION, LLC RETIREMENT PLAN	
b	Name of plan sponsor MINDSTAR AVIATION, LLC	c EIN-PN 45-4060758-001

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	MINING EQUIPMENT 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	MINING EQUIPMENT, LTD.
c	EIN-PN	16-1646623-222
a	Plan name	MODERN WOMEN'S CARE, INC. 401(K) RETIREMENT PLAN
b	Name of plan sponsor	MODERN WOMEN'S CARE
c	EIN-PN	27-1337010-001
a	Plan name	MOHS CONSTRUCTION COMPANY 401(K) PLAN AND TRUST
b	Name of plan sponsor	MOHS CONSTRUCTION COMPANY, INC.
c	EIN-PN	46-1727385-001
a	Plan name	NEUMANN MONSON, INC. PROFIT SHARING 401(K) PLAN
b	Name of plan sponsor	NEUMANN MONSON, INC.
c	EIN-PN	42-1242646-222
a	Plan name	NEUROMUSCULOSKELETAL REHABILITATION MEDICINE CONSULTANT 401(K) PLAN
b	Name of plan sponsor	NEUROMUSCULOSKELETAL REHABILITATION MEDICINE CONSULTAN
c	EIN-PN	20-3988984-001
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	NEW CLASSIC FURNITURE 401(K) PLAN
b	Name of plan sponsor	NEW CLASSIC FURNITURE
c	EIN-PN	33-0976223-222
a	Plan name	ONE BENEFIT SOURCE DBA OBS INSURANCE SERVICES RETIREMENT TRUST
b	Name of plan sponsor	ONE BENEFIT SOURCE DBA OBS INSURANCE SERVICES
c	EIN-PN	45-1500375-001
a	Plan name	ONE SEMICONDUCTOR 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	ONE SEMICONDUCTOR, LLC
c	EIN-PN	45-2992076-001
a	Plan name	PETROVAL, INC. 401(K) PLAN
b	Name of plan sponsor	PETROVAL, INC.
c	EIN-PN	72-1559851-001
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	PHARMACY ASSOCIATES OF SOUTHSIDE VIRGINIA, INC. 401(K) RETIREMENT PLAN
b	Name of plan sponsor	PHARMACY ASSOCIATES OF SOUTHSIDE VIRGINIA, INC.
c	EIN-PN	54-1850850-001

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 PREMIERE BUILDING MAINTENANCE CORPORATION 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor PREMIERE BUILDING MAINTENANCE CORPORATION	c EIN-PN 62-1643357-001
a	Plan name PRESTIGE RESIDENTIAL CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor PRESTIGE RESIDENTIAL CONSTRUCTION	c EIN-PN 91-1366230-001
a	Plan name PRESTIGE WOMEN'S HEALTH CARE 401(K) PLAN	
b	Name of plan sponsor PRESTIGE WOMEN'S HEALTH CARE	c EIN-PN 27-0665184-001
a	Plan name PRIEST AMISTADI PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor PRIEST AMISTADI	c EIN-PN 94-2507389-001
a	Plan name PROFUNDUS HOLDINGS, INC. DBA AUDLEY FARM RETIREMENT PLAN	
b	Name of plan sponsor PROFUNDUS HOLDINGS, INC. DBA AUDLEY FARM	c EIN-PN 13-3140621-001
a	Plan name PROJECT HOPE BOSTON, INC. RETIREMENT PLAN	
b	Name of plan sponsor PROJECT HOPE BOSTON, INC.	c EIN-PN 04-2748880-001
a	Plan name RAIL WORLD LLC 401(K) PLAN	
b	Name of plan sponsor RAIL WORLD LLC	c EIN-PN 52-2344008-001
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 ROONEY'S WELDING & FABRICATION, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor ROONEY'S WELDING & FABRICATION, INC.	c EIN-PN 02-0514973-001
a	Plan name ROPE CORP 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor ROPE CORP	c EIN-PN 59-3585714-001
a	Plan name ROSH INVESTMENTS, INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor ROSH INVESTMENTS, INC.	c EIN-PN 94-3347148-001
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

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 S.B.S. TRUST DEED NETWORK 401(K) PLAN	
b	Name of plan sponsor S.B.S. TRUST DEED NETWORK	c EIN-PN 95-3783564-002
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 SIERRA WEST CONSTRUCTION, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SIERRA WEST CONSTRUCTION, INC.	c EIN-PN 68-0153330-002
a	Plan name SOUTH BAY PLASTIC SURGEONS 401(K) PLAN	
b	Name of plan sponsor SOUTH BAY PLASTIC SURGEONS	c EIN-PN 47-1903749-001
a	Plan name SOUTH SHORE HEARING CENTER, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SOUTH SHORE HEARING CENTER, LLC	c EIN-PN 47-4480052-001
a	Plan name SOUTHEAST CHEROKEE CONSTRUCTION, INC. 401(K) PLAN	
b	Name of plan sponsor SOUTHEAST CHEROKEE CONSTRUCTION, INC.	c EIN-PN 63-0859575-001
a	Plan name STEELY & SMITH LLC EMPLOYEE PROFIT SHARING PLAN	
b	Name of plan sponsor STEELY & SMITH LLC	c EIN-PN 20-3383671-001
a	Plan name STELLAR VETERINARY SERVICES 401(K) PLAN	
b	Name of plan sponsor STELLAR VETERINARY SERVICES, LLC	c EIN-PN 47-2964550-001
a	Plan name STERLING BV, INC. 401(K) PLAN	
b	Name of plan sponsor STERLING BV, INC.	c EIN-PN 81-1791939-001
a	Plan name T K GROUP, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor T K GROUP, INC.	c EIN-PN 36-3489575-001
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 THE MOSTERT GROUP LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE MOSTERT GROUP, LLC	c EIN-PN 20-0349381-001

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	ADM WELDING & FABRICATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ADM WELDING & FABRICATION	c EIN-PN 25-1514853-001
a	Plan name	THE VMC GROUP 401(K) PLAN	
b	Name of plan sponsor	THE VMC GROUP	c EIN-PN 20-2305737-002
a	Plan name	THE WOOD GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor	THE WOOD GROUP, LLC	c EIN-PN 31-1504201-001
a	Plan name	AEROSPACE & MARINE INTERNATIONAL CORPORATION 401(K) PLAN	
b	Name of plan sponsor	AEROSPACE & MARINE INTERNATIONAL CORPORATION	c EIN-PN 77-0280581-001
a	Plan name	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	TRB + ASSOCIATES, INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor	TRB + ASSOCIATES, INC.	c EIN-PN 20-5865052-001
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	AMERICAN GALVANO, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	AMERICAN GALVANO, INC.	c EIN-PN 20-0161792-001
a	Plan name	AON RISK SOLUTIONS OF PUERTO RICO, INC. 1081.01(D) PLAN	
b	Name of plan sponsor	AON RISK SOLUTIONS OF PUERTO RICO, INC.	c EIN-PN 66-0274215-002
a	Plan name	APARTMENT HOUSE BUILDERS, INC. 401K PLAN	
b	Name of plan sponsor	APARTMENT HOUSE BUILDERS, INC.	c EIN-PN 71-0649991-001

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	APEX ENDODONTICS 401(K) PLAN	c	EIN-PN	
b	Name of plan sponsor	SANG YUN RO, DDS, PC	c	EIN-PN	05-0577077-001
a	Plan name	VERMILION ENERGY, USA RETIREMENT SAVINGS PLAN	c	EIN-PN	
b	Name of plan sponsor	VERMILION ENERGY USA INC.	c	EIN-PN	47-1769898-001
a	Plan name	VERSA TOOL & DIE MACHINING & ENGINEERING, INC. 401(K) PLAN	c	EIN-PN	
b	Name of plan sponsor	VERSA TOOL & DIE MACHINING & ENGINEERING, INC.	c	EIN-PN	39-1085074-002
a	Plan name	VMA COMMUNICATIONS, INC. 401(K) PLAN	c	EIN-PN	
b	Name of plan sponsor	VMA COMMUNICATIONS, INC.	c	EIN-PN	47-0901842-001
a	Plan name	VOLAC, INC. 401(K) PLAN	c	EIN-PN	
b	Name of plan sponsor	VOLAC, INC.	c	EIN-PN	51-0375769-001
a	Plan name	VORTEX AIR TECHNOLOGY, INC. 401(K) PROFIT SHARING PLAN	c	EIN-PN	
b	Name of plan sponsor	VORTEX AIR TECHNOLOGY, INC.	c	EIN-PN	27-1402284-001
a	Plan name	VOSS BELTING & SPECIALTY CO., INC. 401(K) PLAN	c	EIN-PN	
b	Name of plan sponsor	VOSS BELTING & SPECIALTY CO., INC.	c	EIN-PN	36-2109945-001
a	Plan name		c	EIN-PN	
b	Name of plan sponsor		c	EIN-PN	
a	Plan name		c	EIN-PN	
b	Name of plan sponsor		c	EIN-PN	
a	Plan name		c	EIN-PN	
b	Name of plan sponsor		c	EIN-PN	
a	Plan name		c	EIN-PN	
b	Name of plan sponsor		c	EIN-PN	
a	Plan name		c	EIN-PN	
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 TEMPLETON GLOBAL BOND RET OPT	B Three-digit plan number (PN) ▶ 313
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.

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	
(2) U.S. Government securities	1c(2)	
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B)	
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(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)	19230121
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	16234199
(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	19230121	16234199
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k		
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	19230121	16234199

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)	937125	
(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)	-3164112	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		-2226987

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)	61121	
(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)		61121
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		61121

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-2288108
l Transfers of assets:			
(1) To this plan.....	2l(1)		3327373
(2) From this plan	2l(2)		4035187

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 _____.