

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: AMERICAN FUNDS 2045 TARGET DATE RETIREMENT RET OPT
1b Three-digit plan number (PN): 694
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, Date, and Name. Rows include plan administrator, employer/plan sponsor, and DFE.

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

Form 5500 (2024) v. 240311

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

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

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

| | |
|--|--|
| 9a Plan funding arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor | 9b Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor |
|--|--|

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) |
|---|---|

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)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2024

This Form is Open to Public Inspection.

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

| | | |
|--|--|--|
| A Name of plan <u>AMERICAN FUNDS 2045 TARGET DATE RETIREMENT RET OPT</u> | | B Three-digit plan number (PN) ▶ <u>694</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)

| | | |
|---|----------------------|---|
| 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) |
| 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) |
| 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) |
| 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)

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)

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)

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)

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)

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)

| 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 | BALL AUTOMOTIVE GROUP 401(K) PLAN | |
| b | Name of plan sponsor | BALL AUTOMOTIVE GROUP | c EIN-PN 95-2571142-002 |
| a | Plan name | EATON DRILLING 401(K) PLAN | |
| b | Name of plan sponsor | EATON DRILLING CO., INC. | c EIN-PN 94-1207118-001 |
| a | Plan name | EDMOND MUSIC, INC. 401(K) PLAN | |
| b | Name of plan sponsor | EDMOND MUSIC, INC. | c EIN-PN 73-1499074-001 |
| a | Plan name | EDUCE PROSPERITY PLAN | |
| b | Name of plan sponsor | EDUCE SALON | c EIN-PN 45-5491594-001 |
| a | Plan name | KBKC DESIGN 401(K) PLAN | |
| b | Name of plan sponsor | KBKC DESIGN | c EIN-PN 99-3478083-001 |
| a | Plan name | PLAY IT SAFE PLAYGROUNDS AND PARK EQUIPMENT 401(K) PLAN | |
| b | Name of plan sponsor | PLAY IT SAFE PLAYGROUNDS AND PARK EQUIPMENT, INC. | c EIN-PN 46-0775994-001 |
| a | Plan name | PLUMBERS DEPOT, INC. 401(K) PLAN | |
| b | Name of plan sponsor | PLUMBERS DEPOT, INC. | c EIN-PN 03-0500254-001 |
| a | Plan name | PMN, LLC 401(K) PLAN | |
| b | Name of plan sponsor | PMN, LLC | c EIN-PN 82-2576321-001 |
| a | Plan name | POLLART MILLER, LLC 401(K) PLAN | |
| b | Name of plan sponsor | POLLART MILLER, LLC | c EIN-PN 20-0022305-001 |
| a | Plan name | THE BOYLAND GROUP 401(K) SAVINGS PLAN | |
| b | Name of plan sponsor | BOYLAND AUTO ORLANDO, LLC | c EIN-PN 05-0546979-777 |
| a | Plan name | THE BROWNING GROUP INTERNATIONAL, INC. PROFIT SHARING PLAN | |
| b | Name of plan sponsor | THE BROWNING GROUP INTERNATIONAL, INC. | c EIN-PN 99-9973995-001 |
| a | Plan name | THE CALIFORNIA CLUB 401(K) PLAN | |
| b | Name of plan sponsor | THE CALIFORNIA CLUB | c EIN-PN 95-0593940-003 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
|----------|--|--------------------------------|
| | (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | |
| a | Plan name ENVISION INTERACTIVE GROUP, LLC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor ENVISION INTERACTIVE GROUP, LLC | c EIN-PN 03-0449364-001 |
| a | Plan name ESPRESSO ITALIA & INFUSION 401(K) PLAN | |
| b | Name of plan sponsor ESPRESSO ITALIA LLC | c EIN-PN 86-0964677-001 |
| a | Plan name PROFESSIONAL AUTOMOTIVE SERVICE LLC 401(K) PLAN | |
| b | Name of plan sponsor PROFESSIONAL AUTOMOTIVE SERVICE LLC | c EIN-PN 85-3817843-001 |
| a | Plan name PROGRESS USA, INC. 401(K) PLAN | |
| b | Name of plan sponsor PROGRESS USA, INC. | c EIN-PN 01-0682657-001 |
| a | Plan name PROGRESSIVE AIR SYSTEMS 401(K) PLAN | |
| b | Name of plan sponsor PROGRESSIVE AIR SYSTEMS, INC. | c EIN-PN 59-3124591-001 |
| a | Plan name PROGRESSIVE COMMUNICATIONS 401(K) PLAN | |
| b | Name of plan sponsor PROGRESSIVE COMMUNICATIONS, INC. | c EIN-PN 58-2431088-001 |
| a | Plan name BETHANY LUTHERAN CHURCH RETIREMENT PLAN | |
| b | Name of plan sponsor BETHANY LUTHERAN CHURCH | c EIN-PN 84-0528677-001 |
| a | Plan name BETTER BOLTING, INC. 401(K) PLAN | |
| b | Name of plan sponsor BETTER BOLTING, INC | c EIN-PN 30-0048617-001 |
| a | Plan name BIG HORN WIRELINE 401(K) PLAN | |
| b | Name of plan sponsor BIG HORN WIRELINE, LLC | c EIN-PN 88-2234263-001 |
| a | Plan name KRC, INC. RETIREMENT PLAN | |
| b | Name of plan sponsor KRC, INC. | c EIN-PN 38-2721514-001 |
| a | Plan name KRIEGEL HOLDING COMPANY, INC. 401(K) PLAN | |
| b | Name of plan sponsor KRIEGEL HOLDING COMPANY, INC. | c EIN-PN 30-0227844-001 |
| a | Plan name THE TM GROUP, INC. RETIREMENT PLAN | |
| b | Name of plan sponsor THE TM GROUP, INC. | c EIN-PN 38-3156552-777 |

| 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 | THE WEBER RETIREMENT PLAN |
| b | Name of plan sponsor | WEBER ENTERPRISES, INC. |
| c | EIN-PN | 93-0594771-001 |
| a | Plan name | THE ZITA GROUP, LLC RETIREMENT PLAN |
| b | Name of plan sponsor | THE ZITA GROUP, LLC |
| c | EIN-PN | 20-8612123-001 |
| a | Plan name | FAIRMONT MEMORIAL PARK, INC. 401(K) PROFIT SHARING PLAN |
| b | Name of plan sponsor | FAIRMONT MEMORIAL PARK, INC. |
| c | EIN-PN | 94-1620020-001 |
| a | Plan name | FAIRWAY ELECTRIC INC. 401(K) PLAN |
| b | Name of plan sponsor | FAIRWAY ELECTRIC INC. |
| c | EIN-PN | 83-0658890-001 |
| a | Plan name | FALCON SALONS INC RETIREMENT PLAN |
| b | Name of plan sponsor | FALCON SALONS INC |
| c | EIN-PN | 47-4290261-001 |
| a | Plan name | FAMILY CARE HOME HEALTH & HOSPICE LLC 401(K) PLAN |
| b | Name of plan sponsor | FAMILY CARE HOME HEALTH & HOSPICE LLC |
| c | EIN-PN | 81-2802771-001 |
| a | Plan name | PUBLIC WATER SUPPLY DISTRICT #15 RETIREMENT PLAN |
| b | Name of plan sponsor | PUBLIC WATER SUPPLY DISTRICT #15 OF JACKSON COUNTY |
| c | EIN-PN | 43-1032078-001 |
| a | Plan name | PUNCTUAL ABSTRACT CO. INC. 401(K) PROFIT SHARING PLAN |
| b | Name of plan sponsor | PUNCTUAL ABSTRACT CO. INC. |
| c | EIN-PN | 72-1228652-001 |
| a | Plan name | LAUREL EYE CLINIC GROUP RETIREMENT PLAN AND TRUST AGREEMENT |
| b | Name of plan sponsor | LAUREL EYE CLINIC GROUP |
| c | EIN-PN | 25-1375158-002 |
| a | Plan name | LAUZEN ACCOUNTING 401(K) SAVINGS PLAN |
| b | Name of plan sponsor | JOSEPH D. LAUZEN, INC. DBA LAUZEN ACCOUNTING |
| c | EIN-PN | 26-1157436-001 |
| a | Plan name | LAVIN NATIONAL, LLC 401(K) PROFIT SHARING PLAN |
| b | Name of plan sponsor | LAVIN NATIONAL, LLC |
| c | EIN-PN | 72-1482691-001 |
| a | Plan name | LAW OFFICE OF KEVIN C. FERRY 401(K) PROFIT SHARING PLAN |
| b | Name of plan sponsor | LAW OFFICE OF KEVIN C. FERRY |
| c | EIN-PN | 20-0718611-001 |

| 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 | LAW OFFICES OF DANIEL A. PARMELE, P.C. 401(K) PLAN |
| b | Name of plan sponsor | LAW OFFICES OF DANIEL A. PARMELE, P.C. |
| c | EIN-PN | 43-1926792-001 |
| a | Plan name | TIMS TRUCK CAPITAL & AUTO SALES, INC. 401(K) PLAN |
| b | Name of plan sponsor | TIM'S TRUCK CAPITAL & AUTO SALES, INC. |
| c | EIN-PN | 02-0468466-001 |
| a | Plan name | TITLEMAX LLC 401(K) PLAN |
| b | Name of plan sponsor | TITLEMAXLLC |
| c | EIN-PN | 26-4661894-001 |
| a | Plan name | TOBROCO MACHINERY LLC 401(K) PLAN |
| b | Name of plan sponsor | TOBROCO MACHINERY LLC |
| c | EIN-PN | 30-0949003-001 |
| a | Plan name | REGULUS 401(K) |
| b | Name of plan sponsor | REGULUS GROUP, LLC |
| c | EIN-PN | 33-1009928-002 |
| a | Plan name | C. CARAMANICO & SONS, INC. 401(K) PLAN |
| b | Name of plan sponsor | C. CARAMANICO & SONS, INC. |
| c | EIN-PN | 23-2349249-001 |
| a | Plan name | M WILLETS FIRE PROTECTION/KW ENGINEERING 401(K) PLAN |
| b | Name of plan sponsor | WILLETS SPRINKLER DESIGN, INC. |
| c | EIN-PN | 46-3803230-001 |
| a | Plan name | MACADAMIA BEAUTY 401(K) PLAN |
| b | Name of plan sponsor | MACADAMIA BEAUTY, LLC |
| c | EIN-PN | 46-0560479-001 |
| a | Plan name | RETIREMENT LIVING MGMT LLC PROFIT SHARING PLAN |
| b | Name of plan sponsor | RETIREMENT LIVING MGMT., LLC |
| c | EIN-PN | 38-3470221-001 |
| a | Plan name | RETIREMENT SAVINGS PLAN AND TRUST OF RAO MANUFACTURING COMPANY |
| b | Name of plan sponsor | RAO MANUFACTURING COMPANY |
| c | EIN-PN | 41-0494610-002 |
| a | Plan name | RHEA COUNTY AMBULANCE SERVICE 401(K) PLAN |
| b | Name of plan sponsor | RHEA COUNTY AMBULANCE SERVICE INC. |
| c | EIN-PN | 62-1153440-001 |
| a | Plan name | UP WITH PEOPLE, INC. 401(K) PLAN |
| b | Name of plan sponsor | UP WITH PEOPLE, INC. |
| c | EIN-PN | 95-2563102-001 |

| 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 CANNON MEDICAL, INC. 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor CANNON MEDICAL, INC. | c EIN-PN 94-3251623-001 |
| a | Plan name CANTEX CONTINUING CARE NETWORK EMPLOYEES SAVINGS TRUST | |
| b | Name of plan sponsor CANTEX CONTINUING CARE NETWORK, LLC | c EIN-PN 26-1252206-222 |
| a | Plan name CANTOR BIOCONNECT, LLC 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor CANTOR BIOCONNECT, LLC | c EIN-PN 37-1837234-001 |
| a | Plan name CAPITAL SALES CO. EMPLOYEE RETIREMENT SAVINGS PLAN | |
| b | Name of plan sponsor CAPITAL SALES CO | c EIN-PN 34-1955230-001 |
| a | Plan name GEIGER CONSTRUCTION PRODUCTS, INC. 401(K) PROFIT SHARING RETIREMENT PLAN | |
| b | Name of plan sponsor GEIGER CONSTRUCTION PRODUCTS, INC. | c EIN-PN 31-0734619-001 |
| a | Plan name GENESIS ENVIRONMENTAL SOLUTIONS, INC. 401(K) PLAN | |
| b | Name of plan sponsor GENESIS ENVIRONMENTAL SOLUTIONS, INC. | c EIN-PN 20-1763158-001 |
| a | Plan name MARENGO THERAPEUTICS, INC. 401(K) PLAN | |
| b | Name of plan sponsor MARENGO THERAPEUTICS, INC. | c EIN-PN 47-5622851-001 |
| a | Plan name MEDALLION MANAGEMENT, INC. SAVINGS AND RETIREMENT PLAN | |
| b | Name of plan sponsor MEDALLION MANAGEMENT, INC. | c EIN-PN 38-2033680-001 |
| a | Plan name CHARLES MAUND 401(K) PLAN | |
| b | Name of plan sponsor MAUND AUTOMOTIVE GROUP, LP | c EIN-PN 74-2951630-002 |
| a | Plan name CHATHAM HABITAT FOR HUMANITY 401(K) PLAN | |
| b | Name of plan sponsor CHATHAM HABITAT FOR HUMANITY | c EIN-PN 56-1689599-001 |
| a | Plan name CHEROKEE 401(K) PLAN | |
| b | Name of plan sponsor CHEROKEE MANUFACTURING, LLC | c EIN-PN 45-2735316-001 |
| 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 |

| 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 | ROY'S CAR WASH & LUBE SHOP, INC. 401(K) PLAN | |
| b | Name of plan sponsor | ROY'S CAR WASH & LUBE SHOP, INC. | c EIN-PN 34-1478542-001 |
| a | Plan name | VIVILI HOSPITALITY 401(K) PLAN | |
| b | Name of plan sponsor | VIVILI HOSPITALITY LLC | c EIN-PN 83-2016187-001 |
| a | Plan name | CKW ADVISORS, LLC 401K PROFIT SHARING PLAN | |
| b | Name of plan sponsor | CKW ADVISORS, LLC | c EIN-PN 81-0584816-001 |
| 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 | CLEARLY SPEAKING 401(K) PLAN | |
| b | Name of plan sponsor | CLEARLY SPEAKING, L.L.C. | c EIN-PN 45-2988436-001 |
| a | Plan name | CLEAVES AMERICAN HEATING AND AIR CONDITIONING CO. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | CLEAVES AMERICAN HEATING AND AIR CONDITIONING CO. | c EIN-PN 26-3124411-001 |
| a | Plan name | GUNGOLL, JACKSON, BOX & DEVOLL, P.C. 401(K) PLAN | |
| b | Name of plan sponsor | GUNGOLL, JACKSON, BOX & DEVOLL, P.C. | c EIN-PN 73-1278416-001 |
| a | Plan name | GVM LAW, LLP 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | GVM LAW, LLP | c EIN-PN 47-3015704-001 |
| a | Plan name | GYESZLY PRANGNER, PLLC RETIREMENT PLAN | |
| b | Name of plan sponsor | GYESZLY PRANGNER, PLLC | c EIN-PN 92-0388771-001 |
| a | Plan name | H&S FIELD SERVICES 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | H & S FIELD SERVICES INC. | c EIN-PN 20-3401221-001 |
| a | Plan name | SAM L. MAJORS JEWELRY 401(K) PLAN | |
| b | Name of plan sponsor | MARCUS MAJORS LLC DBA SAM L. MAJORS JEWELRY | c EIN-PN 46-1106080-001 |
| a | Plan name | SANARA MEDTECH INC. 401(K) PLAN | |
| b | Name of plan sponsor | SANARA MEDTECH INC. | c EIN-PN 59-2219994-001 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| | (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | |
| a | Plan name WESTAIR GASES & EQUIPMENT, INC. PROFIT SHARING 401(K) PLAN | |
| b | Name of plan sponsor WESTAIR GASES & EQUIPMENT, INC. | c EIN-PN 95-2673204-001 |
| a | Plan name WESTERN EMULSIONS INC. 401(K) SAVINGS PLAN | |
| b | Name of plan sponsor WESTERN EMULSIONS INC. | c EIN-PN 86-0336082-001 |
| a | Plan name WESTWOODS FAMILY DENTAL 401(K) PLAN | |
| b | Name of plan sponsor WESTWOODS FAMILY DENTAL | c EIN-PN 92-3010717-001 |
| a | Plan name SHAFER COMPANIES 401(K) PLAN | |
| b | Name of plan sponsor SHAFER REDI-MIX, INC. | c EIN-PN 38-2412059-002 |
| a | Plan name ACCURATE REGRINDING 401(K) PLAN | |
| b | Name of plan sponsor VAN TUINEN COMPANY DBA ACCURATE REGRINDING SERVICE | c EIN-PN 38-2644484-001 |
| a | Plan name ACCUTROL COMPLETE HOME SERVICES 401(K) PLAN | |
| b | Name of plan sponsor ACCUTROL COMPLETE HOME SERVICES, LLC | c EIN-PN 86-3952569-001 |
| a | Plan name CONNOLLY ELECTRIC & MECHANICAL 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor CHRIS CONNOLLY INC. DBA CONNOLLY ELECTRIC & MECHANICAL | c EIN-PN 86-0892259-001 |
| a | Plan name CONSUMER ATTORNEYS 401(K) PLAN | |
| b | Name of plan sponsor CONSUMER ATTORNEYS PLC | c EIN-PN 86-3781893-001 |
| a | Plan name HEC SOFTWARE INC 401(K) PLAN | |
| b | Name of plan sponsor HEC SOFTWARE, INC. DBA READING HORIZONS | c EIN-PN 86-0495240-001 |
| a | Plan name HECO PROFIT SHARING AND RETIREMENT SAVINGS PLAN | |
| b | Name of plan sponsor HECO, INC. | c EIN-PN 38-1817538-001 |
| a | Plan name HERITAGE AUTO 401(K) PLAN | |
| b | Name of plan sponsor HERITAGE CHRYSLER DODGE JEEP RAM OF LOGAN | c EIN-PN 87-0306275-001 |
| a | Plan name HERITAGE FORD OF VERNAL 401K PLAN | |
| b | Name of plan sponsor HERITAGE FORD OF VERNAL | c EIN-PN 83-3589085-001 |

| 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 | HERMA US INC. 401K PLAN | |
| b | Name of plan sponsor | HERMA US INC. | c EIN-PN 61-1780660-001 |
| a | Plan name | NANIA ENERGY 401(K) PLAN | |
| b | Name of plan sponsor | NANIA ENERGY | c EIN-PN 36-4273465-001 |
| 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 FOOTBALL SCOUTING, INC. 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor | NATIONAL FOOTBALL SCOUTING, INC. | c EIN-PN 43-1109464-002 |
| a | Plan name | NATURESCAPE 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor | NATURESCAPE | c EIN-PN 03-0448406-001 |
| a | Plan name | YAMATO FAMILY DENTAL 401(K) PLAN | |
| b | Name of plan sponsor | YAMATO FAMILY DENTAL | c EIN-PN 45-4182596-001 |
| a | Plan name | YAMIBUY 401(K) PLAN | |
| b | Name of plan sponsor | TRANSOCEAN RESOURCES MANAGEMENT INC. | c EIN-PN 46-1019646-001 |
| a | Plan name | YELLOW BRICK MANAGEMENT 401(K) PLAN | |
| b | Name of plan sponsor | YELLOW BRICK MANAGEMENT | c EIN-PN 45-3412408-001 |
| a | Plan name | SILVER BIRCH LIVING 401(K) SAVINGS PLAN | |
| b | Name of plan sponsor | SILVER BIRCH SERVICES, LLC | c EIN-PN 82-3479583-001 |
| a | Plan name | SIMPLIFYA 401(K) PLAN | |
| b | Name of plan sponsor | SIMPLIFYA HOLDINGS, INC. | c EIN-PN 87-1463596-001 |
| a | Plan name | HITCHCOCK SCRAP YARD, INC. 401(K) PLAN | |
| b | Name of plan sponsor | HITCHCOCK SCRAP YARD, INC. | c EIN-PN 37-1156962-001 |
| a | Plan name | HOLIDAY POOLS OF WEST FLORIDA 401(K) PLAN | |
| b | Name of plan sponsor | HOLIDAY POOLS OF WEST FLORIDA, INC. | c EIN-PN 65-0546905-001 |

| 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 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 ADVANTAGE FLOORING INC. 401(K) PLAN | |
| b | Name of plan sponsor ADVANTAGE FLOORING, INC. | c EIN-PN 52-2030808-001 |
| a | Plan name CORR FLIGHT S, INC. 401(K) PROFIT SHARING PLAN TRUST | |
| b | Name of plan sponsor CORR FLIGHT S INC. | c EIN-PN 47-2376307-777 |
| a | Plan name COUNTRY MORNING FARMS, INC. 401(K) PLAN | |
| b | Name of plan sponsor COUNTRY MORNING FARMS, INC. | c EIN-PN 91-2036632-001 |
| a | Plan name NEXT DOOR SAVINGS & RETIREMENT PLAN | |
| b | Name of plan sponsor NEXT DOOR FOUNDATION, INC. | c EIN-PN 39-1162969-002 |
| a | Plan name NEXT LEVEL DIRECT 401(K) PLAN | |
| b | Name of plan sponsor NEXT LEVEL DIRECT, LLC DBA NEXT LEVEL SIGNS | c EIN-PN 86-1034577-001 |
| a | Plan name ALTAONE FEDERAL CREDIT UNION 401(K) PLAN | |
| b | Name of plan sponsor ALTAONE FEDERAL CREDIT UNION | c EIN-PN 95-1658623-222 |
| a | Plan name ALTUNI, LLC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor ALTUNI, LLC | c EIN-PN 26-1212211-001 |
| a | Plan name AMBIOPHARM, INC. 401(K) PLAN | |
| b | Name of plan sponsor AMBIOPHARM, INC. | c EIN-PN 22-3940281-001 |
| a | Plan name AMBROSE SERVICES, LLC 401(K) PLAN | |
| b | Name of plan sponsor AMBROSE SERVICES, LLC | c EIN-PN 46-3081985-001 |
| a | Plan name INNOVA TECHNOLOGIES INC. 401(K) PROFIT SHARING PLAN AND TRUST | |
| b | Name of plan sponsor INNOVA TECHNOLOGIES INC. | c EIN-PN 56-2323193-001 |
| a | Plan name INSTRUMEDICAL TECHNOLOGIES INC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor INSTRUMEDICAL TECHNOLOGIES, INC. | c EIN-PN 35-1515768-001 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| | (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | |
| a | Plan name OMNI MANUFACTURING, INC. PROFIT SHARING AND 401(K) SAVINGS RETIREMENT PLAN AND TRUST | |
| b | Name of plan sponsor OMNI MANUFACTURING, INC. | c EIN-PN 34-1383211-001 |
| a | Plan name ON POINT INSTALLATIONS INC 401(K) PROFIT SHARING PLAN AND TRUST | |
| b | Name of plan sponsor ON POINT INSTALLATIONS, INC. | c EIN-PN 27-1738155-001 |
| a | Plan name SPINA & LAVELLE 401(K) PLAN | |
| b | Name of plan sponsor SPINA & LAVELLE, P.C. | c EIN-PN 45-2849454-001 |
| a | Plan name SPOLIDORO & SONS, INC. 401(K) PLAN | |
| b | Name of plan sponsor SPOLIDORO & SONS, INC. | c EIN-PN 04-2642418-001 |
| a | Plan name SPRING GROVE CEMETERY AND ARBORETUM 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor SPRING GROVE CEMETERY | c EIN-PN 31-0235950-003 |
| a | Plan name STEVENS CHILDREN'S HOME, INC. 401(K) EMPLOYEE SAVINGS PLAN | |
| b | Name of plan sponsor STEVENS CHILDREN'S HOME, INC. | c EIN-PN 04-2105950-002 |
| a | Plan name P & P SEPTIC SERVICE, INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor P & P SEPTIC SERVICE, INC. | c EIN-PN 03-0269006-001 |
| a | Plan name P & S CONSTRUCTION CO., INC. EMPLOYEES' RETIREMENT SAVINGS PLAN | |
| b | Name of plan sponsor P. & S. CONSTRUCTION CO., INC. | c EIN-PN 57-0721109-001 |
| a | Plan name P/A INDUSTRIES INC. 401(K) PLAN | |
| b | Name of plan sponsor P/A INDUSTRIES INC. | c EIN-PN 06-0862210-001 |
| a | Plan name PACBLU 401(K) PLAN | |
| b | Name of plan sponsor PACBLU | c EIN-PN 11-3691833-001 |
| a | Plan name ANCHORAGE CHRYSLER CENTER, INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor ANCHORAGE CHRYSLER CENTER, INC. | c EIN-PN 92-0037629-001 |
| a | Plan name ANDERSONS GROCERY 401(K) AND PROFIT SHARING PLAN | |
| b | Name of plan sponsor ANDERSON'S GROCERY | c EIN-PN 91-1807280-001 |

| 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 | DENVER HEALTH AND FITNESS 401(K) PLAN | |
| b | Name of plan sponsor | JVP FIT ENTERPRISES, LLC DBA DENVER HEALTH AND FITNESS | c EIN-PN 26-1885010-001 |
| a | Plan name | DESERT SHORES PEDIATRICS, P.C. 401(K) PLAN | |
| b | Name of plan sponsor | DESERT SHORES PEDIATRICS, P.C. | c EIN-PN 20-2851929-002 |
| a | Plan name | INVESTING TOGETHER IN YOUR FUTURE PLAN | |
| b | Name of plan sponsor | GREEN PEAK INDUSTRIES, LLC | c EIN-PN 81-4533921-001 |
| a | Plan name | IPA 401(K) PLAN | |
| b | Name of plan sponsor | INTEGRITY PHARMACEUTICAL ADVISORS, LLC | c EIN-PN 45-3047652-001 |
| a | Plan name | PDS 401(K) PLAN | |
| b | Name of plan sponsor | PREFERRED DRILLING SOLUTIONS, INC | c EIN-PN 59-3757298-001 |
| a | Plan name | PEACHTREE HILLS PLACE 401(K) PLAN | |
| b | Name of plan sponsor | PT HILLS PLACE CLUB, LLC | c EIN-PN 81-2011747-001 |
| a | Plan name | PEARSON LIVESTOCK EQUIPMENT 401(K) PLAN | |
| b | Name of plan sponsor | PEARSON LIVESTOCK EQUIPMENT, LLC | c EIN-PN 47-0533140-001 |
| a | Plan name | ASCENDANT COMMERCIAL INSURANCE 401K PLAN | |
| b | Name of plan sponsor | ASCENDANT COMMERCIAL INSURANCE, INC. | c EIN-PN 27-0835494-001 |
| a | Plan name | DRAGON LINE, LLC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | DRAGON LINE, LLC. | c EIN-PN 81-1828114-001 |
| a | Plan name | DREAM MM 401(K) PLAN | |
| b | Name of plan sponsor | DREAM MANAGEMENT, INC. | c EIN-PN 52-2223274-001 |
| a | Plan name | JENKINS PLUMBING 401(K) PLAN | |
| b | Name of plan sponsor | JENKINS PLUMBING COMPANY, LLC | c EIN-PN 58-2531468-001 |
| a | Plan name | JENNIFER WEAVER AND ASSOCIATES 401(K) PLAN | |
| b | Name of plan sponsor | JENNIFER WEAVER AND ASSOCIATES, PLLC | c EIN-PN 26-3123439-001 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| | (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | |
| a | Plan name JERRY CHIDESTER MD, PLLC 401(K) PLAN | |
| b | Name of plan sponsor JERRY CHIDESTER MD, PLLC | c EIN-PN 84-4004479-001 |
| a | Plan name JESSUP CELLARS HOLDING COMPANY, LLC 401(K) PLAN | |
| b | Name of plan sponsor JESSUP CELLARS HOLDING COMPANY, LLC | c EIN-PN 20-3071245-001 |
| a | Plan name TAMARA L. HIESTER, D.D.S. 401(K) PLAN | |
| b | Name of plan sponsor TAMARA L. HIESTER, D.D.S. | c EIN-PN 35-2051065-001 |
| a | Plan name TANIS CONCRETE, INC. 401(K) PLAN | |
| b | Name of plan sponsor TANIS CONCRETE, INC. | c EIN-PN 22-1567712-001 |
| a | Plan name TARGET ENTERPRISES, INC. 401(K) PROFIT SHARING PLAN AND TRUST | |
| b | Name of plan sponsor TARGET ENTERPRISES, INC. | c EIN-PN 06-1158272-001 |
| a | Plan name RENEWABLE MATERIALS 401(K) PLAN | |
| b | Name of plan sponsor RENEWABLE MATERIALS, INC | c EIN-PN 87-1892861-001 |
| a | Plan name REPI LLC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor REPI, LLC | c EIN-PN 54-2101581-001 |
| a | Plan name TYMARK RESTAURANT GROUP 401K PLAN | |
| b | Name of plan sponsor TYMARK, INC. | c EIN-PN 82-1824730-001 |
| a | Plan name TYNAN EQUIPMENT 401(K) PLAN | |
| b | Name of plan sponsor YALE INDUSTRIAL TRUCKS - TYNAN, INC. | c EIN-PN 35-1147878-001 |
| 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 UNI-GRIP, INC. EMPLOYEE SAVINGS AND RETIREMENT PLAN | |
| b | Name of plan sponsor UNI-GRIP, INC. | c EIN-PN 34-1108705-001 |
| a | Plan name C.G. WITVOET & SONS CO. 401(K) PLAN | |
| b | Name of plan sponsor C.G. WITVOET & SONS CO. | c EIN-PN 38-2327603-002 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| | (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | |
| a | Plan name CABLE MAN, INC. 401(K) PLAN | |
| b | Name of plan sponsor CABLE MAN, INC. | c EIN-PN 64-0576514-001 |
| a | Plan name FWH ARCHITECTS, INC. 401(K) PLAN | |
| b | Name of plan sponsor FWH ARCHITECTS, INC. | c EIN-PN 59-3608221-001 |
| a | Plan name GABOR DESIGN BUILD LLC 401(K) PLAN | |
| b | Name of plan sponsor GABOR DESIGN BUILD LLC | c EIN-PN 20-2803793-001 |
| a | Plan name GARDENER BRAD 401(K) PROFIT SHARING PLAN & TRUST | |
| b | Name of plan sponsor GARDENER BRAD INC. | c EIN-PN 68-0574403-001 |
| a | Plan name MADDEN ELEVATOR COMPANY RETIREMENT SAVINGS PLAN | |
| b | Name of plan sponsor MADDEN ELEVATOR COMPANY | c EIN-PN 27-4404800-001 |
| a | Plan name MAGELLAN MEDICAL 401(K) PLAN AND TRUST | |
| b | Name of plan sponsor MAGELLAN MEDICAL TECHNOLOGY CONSULTANTS, INC. | c EIN-PN 41-1817386-002 |
| a | Plan name MAJESTIC INDUSTRY HILLS, LLC 401(K) PLAN | |
| b | Name of plan sponsor MAJESTIC INDUSTRY HILLS, LLC | c EIN-PN 95-4795537-001 |
| a | Plan name RIOUX EYE CENTER, INC. RETIREMENT PLAN | |
| b | Name of plan sponsor RIOUX EYE CENTER, INC. | c EIN-PN 87-4253844-001 |
| a | Plan name RIPPON ASSOCIATES 401(K) PLAN | |
| b | Name of plan sponsor RIPPON ASSOCIATES, LLC | c EIN-PN 23-3065155-001 |
| a | Plan name GERRITY'S SUPERMARKET, INC. RETIREMENT PLAN | |
| b | Name of plan sponsor GERRITY'S SUPERMARKET, INC. | c EIN-PN 23-2150407-777 |
| a | Plan name MARTIN'S METAL FABRICATION & WELDING, INC. | |
| b | Name of plan sponsor MARTIN'S METAL FABRICATION & WELDING, INC. | c EIN-PN 68-0157908-001 |
| a | Plan name MASH 401(K) PLAN | |
| b | Name of plan sponsor MID-ATLANTIC ANIMAL SPECIALTY HOSPITAL, LLC | c EIN-PN 01-0714930-001 |

| 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 | UST SERVICES 401(K) |
| b | Name of plan sponsor | UST SERVICE CORPORATION |
| c | EIN-PN | 52-2237114-001 |
| a | Plan name | VAIL VACATION PROPERTIES LLC 401(K) PLAN |
| b | Name of plan sponsor | VAIL VACATION PROPERTIES LLC |
| c | EIN-PN | 45-2923184-001 |
| a | Plan name | VALLEY CENTRAL VETERINARY REFERRAL AND EMERGENCY CENTER 401(K) PROFIT SHARING PLAN |
| b | Name of plan sponsor | DR. CARLOS HODGES DVM PC DBA VALLEY CENTRAL VETERINARY REFERRAL AND |
| c | EIN-PN | 23-2874136-001 |
| a | Plan name | VALLEY WOOD, INC. 401(K) PROFIT SHARING PLAN |
| b | Name of plan sponsor | VALLEY WOOD, INC. |
| c | EIN-PN | 58-1869240-001 |
| a | Plan name | WALLA WALLA OMS, LLC 401(K) PROFIT SHARING PLAN |
| b | Name of plan sponsor | WALLA WALLA OMS, LLC |
| c | EIN-PN | 45-4061011-001 |
| a | Plan name | WALT EGER'S SERVICE CENTER RETIREMENT PLAN |
| b | Name of plan sponsor | BJ SPENCER, LLC DBA WALT EGER'S SERVICE CENTER |
| c | EIN-PN | 81-2985117-001 |
| a | Plan name | WARSHAUER WOODWARD ATKINS, LLC 401(K) PLAN |
| b | Name of plan sponsor | WARSHAUER WOODWARD ATKINS, LLC. |
| c | EIN-PN | 88-2972581-001 |
| a | Plan name | WASATCH DISTRIBUTING COMPANY, INC. PROFIT SHARING PLAN |
| b | Name of plan sponsor | WASATCH DISTRIBUTING COMPANY, INC. |
| c | EIN-PN | 87-0206345-001 |
| a | Plan name | RUNESTONE EVENTS LLC 401(K) PLAN |
| b | Name of plan sponsor | RUNESTONE EVENTS LLC |
| c | EIN-PN | 92-0355783-001 |
| 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 | MERAKI SOCIAL, LLC 401(K) PLAN |
| b | Name of plan sponsor | MERAKI SOCIAL, LLC |
| c | EIN-PN | 81-2114618-001 |
| a | Plan name | MERROW MANUFACTURING 401(K) PLAN |
| b | Name of plan sponsor | MERROW MANUFACTURING, LLC. |
| c | EIN-PN | 82-1734889-001 |

| 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 | SAV-MORE DRUG, LLC PHARMACISTS AND MANAGERS PLAN | |
| b | Name of plan sponsor | SAV-MORE DRUG, LLC | c EIN-PN 75-2047264-002 |
| a | Plan name | SBAC ANIMAL CLINIC, INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | SBAC ANIMAL CLINIC, INC | c EIN-PN 33-4162060-001 |
| a | Plan name | WILDCAT OIL TOOLS 401(K) PLAN | |
| b | Name of plan sponsor | WILDCAT OIL TOOLS, LLC | c EIN-PN 45-4421709-001 |
| a | Plan name | WILDLIFE 401(K) PLAN | |
| b | Name of plan sponsor | WILDLIFE DESIGN, INC. | c EIN-PN 46-3996728-001 |
| a | Plan name | WILKERSON ENTERPRISES 401(K) PLAN | |
| b | Name of plan sponsor | WILKERSON ENTERPRISES | c EIN-PN 32-0046340-001 |
| a | Plan name | 2-20 RECORDS MANAGEMENT LLC 401(K) PLAN | |
| b | Name of plan sponsor | 2-20 RECORDS MANAGEMENT LLC | c EIN-PN 27-3088670-001 |
| a | Plan name | 3X SPECIALTIES 401(K) PLAN | |
| b | Name of plan sponsor | 3X SPECIALTIES, LLC | c EIN-PN 20-3020194-001 |
| a | Plan name | CLEVELAND CITY FORGE AND EDWARD W. DANIEL 401(K) SAVINGS PLAN | |
| b | Name of plan sponsor | CLEVELAND CITY FORGE, INC. | c EIN-PN 34-1972972-001 |
| a | Plan name | CLEVELAND MARBLE MOSAIC 401(K) PLAN | |
| b | Name of plan sponsor | THE CLEVELAND MARBLE MOSAIC CO. | c EIN-PN 34-0151170-001 |
| a | Plan name | CLICK2BIND INSURANCE 401(K) PLAN | |
| b | Name of plan sponsor | CLICK2BIND INSURANCE SERVICES, INC. | c EIN-PN 81-3280949-001 |
| a | Plan name | CLINKSCALES PORTABLE TOILETS LLC SAFE HARBOR 401(K) PLAN | |
| b | Name of plan sponsor | CLINKSCALES PORTABLE TOILETS LLC | c EIN-PN 93-1086752-001 |
| a | Plan name | H2R CORP 401(K) PROFIT SHARING PLAN & TRUST | |
| b | Name of plan sponsor | H2R CORP | c EIN-PN 81-2654817-001 |

| Part II | | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| <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 | HABITAT FOR HUMANITY INLAND VALLEY, INC. 401(K) PROFIT SHARING AND TRUST | |
| b | Name of plan sponsor | HABITAT FOR HUMANITY INLAND VALLEY, INC. | c EIN-PN 33-0461804-001 |
| a | Plan name | MITCHELL GRAPHICS, INC. 401(K) PLAN | |
| b | Name of plan sponsor | MITCHELL GRAPHICS, INC. | c EIN-PN 38-2084428-001 |
| a | Plan name | MMB 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor | MANAGEMENT SERVICES, INC. | c EIN-PN 73-1443852-001 |
| a | Plan name | MOBILE IMAGES ACQUISITION, LLC 401(K) PLAN | |
| b | Name of plan sponsor | MOBILE IMAGES ACQUISITION, LLC | c EIN-PN 62-1868089-001 |
| a | Plan name | MODERN DISPLAY SERVICES, INC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | MODERN DISPLAY SERVICES, INC. | c EIN-PN 87-0265937-001 |
| a | Plan name | HI-LITES GRAPHICS, INC. RETIREMENT SAVINGS PLAN | |
| b | Name of plan sponsor | HI-LITES GRAPHICS, INC. | c EIN-PN 38-2371667-001 |
| a | Plan name | CONTAINER STORAGE 401(K) PLAN | |
| b | Name of plan sponsor | CONTAINER STORAGE COMPANY OF HAWAII, LTD | c EIN-PN 99-0223980-001 |
| a | Plan name | CONTROLS & WEIGHING SYSTEMS 401(K) PLAN | |
| b | Name of plan sponsor | CONTROLS & WEIGHING SYSTEMS, INC. | c EIN-PN 59-1588191-001 |
| a | Plan name | ACE-AFSCME LOCAL 2250 NON-UNION 401(K) PLAN | |
| b | Name of plan sponsor | ACE AFSCME LOCAL 2250 - NON-UNION | c EIN-PN 52-0887253-002 |
| a | Plan name | ACOSTA, INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | ACOSTA GROUP | c EIN-PN 74-2183937-001 |
| a | Plan name | ACT LABORATORIES, INC. 401(K) PLAN | |
| b | Name of plan sponsor | ACT LABORATORIES, INC. | c EIN-PN 30-0857299-001 |
| a | Plan name | NEOPART TRANSIT, LLC EMPLOYEE PENSION & SAVINGS PLAN | |
| b | Name of plan sponsor | NEOPART TRANSIT, LLC | c EIN-PN 36-4830017-001 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | | |
| a | Plan name SHIRLEY'S COOKIE CO., INC. 401(K) PLAN | |
| b | Name of plan sponsor SHIRLEY'S COOKIES CO., INC. | c EIN-PN 25-1892923-001 |
| a | Plan name Z-BEST CONCRETE, INC. 401(K) PLAN | |
| b | Name of plan sponsor Z-BEST CONCRETE, INC. | c EIN-PN 33-0777383-001 |
| a | Plan name Z2 MARKETING, LTD 401(K) PLAN | |
| b | Name of plan sponsor Z2 MARKETING, LTD | c EIN-PN 20-0581373-001 |
| a | Plan name NOMAD GLOBAL COMMUNICATION SOLUTIONS 401(K) PLAN | |
| b | Name of plan sponsor NOMAD GLOBAL COMMUNICATION SOLUTIONS | c EIN-PN 35-2182794-777 |
| a | Plan name HOLOWICKI ENTERPRISES PROFIT SHARING PLAN | |
| b | Name of plan sponsor HOLOWICKI ENTERPRISES DBA MCDONALD'S | c EIN-PN 31-1177272-001 |
| a | Plan name HOME PARAMOUNT PEST CONTROL COMPANY EMPLOYEES RETIREMENT SAVINGS PLAN | |
| b | Name of plan sponsor HOME PARAMOUNT PEST CONTROL COMPANY | c EIN-PN 54-0762970-001 |
| a | Plan name AERO GROUP 401(K) PROFIT SHARING PLAN AND TRUST | |
| b | Name of plan sponsor AERO CHARTER, INC. | c EIN-PN 43-1133102-002 |
| a | Plan name AFFINITY IT GROUP 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor ISS OHIO, LLC DBA AFFINITY IT GROUP | c EIN-PN 46-1599792-001 |
| a | Plan name AFRESH DENTAL RETIREMENT PLAN | |
| b | Name of plan sponsor AFRESH DENTAL LLC | c EIN-PN 99-1618475-001 |
| a | Plan name COWART DRUGS 401(K) PLAN | |
| b | Name of plan sponsor COWART DRUG CO. INC. | c EIN-PN 63-1101235-001 |
| a | Plan name SK MANAGEMENT, INC 401(K) PLAN | |
| b | Name of plan sponsor SK MANAGEMENT, INC | c EIN-PN 02-0456712-001 |
| a | Plan name SKILLINGS & SONS, INC. 401(K) PLAN | |
| b | Name of plan sponsor SKILLINGS & SONS, INC. | c EIN-PN 04-2491037-001 |

| 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 | OOMA, INC. 401(K) PLAN |
| b | Name of plan sponsor | OOMA, INC. |
| c | EIN-PN | 06-1713274-001 |
| a | Plan name | OPEN UP RESOURCES 401(K) PLAN |
| b | Name of plan sponsor | OPEN UP RESOURCES |
| c | EIN-PN | 47-3240638-001 |
| a | Plan name | ORIGIN HEALTH 401(K) PLAN |
| b | Name of plan sponsor | ORIGIN HEALTH |
| c | EIN-PN | 84-3463861-001 |
| a | Plan name | DEJNO'S, INC. 401(K) PLAN |
| b | Name of plan sponsor | DEJNO'S, INC. |
| c | EIN-PN | 39-1335924-001 |
| a | Plan name | DELAWARE ELECTRICAL CONTRACTORS, INC. 401(K) PLAN |
| b | Name of plan sponsor | DELAWARE ELECTRICAL CONTRACTORS, INC. |
| c | EIN-PN | 23-2016945-001 |
| a | Plan name | DELBIAGGIO CONSTRUCTION, INC. 401K PLAN |
| b | Name of plan sponsor | DELBIAGGIO CONSTRUCTION, INC. |
| c | EIN-PN | 68-0257089-001 |
| a | Plan name | INTEGRATED LABORATORY PROVIDERS 401(K) PLAN |
| b | Name of plan sponsor | INTEGRATED LABORATORY PROVIDERS |
| c | EIN-PN | 82-1971376-001 |
| a | Plan name | INTEGRATED TAX ACCOUNTING INC. 401(K) PLAN |
| b | Name of plan sponsor | INTEGRATED TAX ACCOUNTING INC. |
| c | EIN-PN | 81-0699291-001 |
| a | Plan name | INTEGRIS SOLUTIONS 401(K) SAVINGS PLAN |
| b | Name of plan sponsor | INTEGRIS SOLUTIONS LLC |
| c | EIN-PN | 47-1620164-001 |
| a | Plan name | INTERFAITH NEIGHBORS, INC. RETIREMENT SAVINGS PLAN |
| b | Name of plan sponsor | INTERFAITH NEIGHBORS, INC. |
| c | EIN-PN | 22-2896129-001 |
| a | Plan name | STAFFING PLUS 401(K) RETIREMENT PLAN |
| b | Name of plan sponsor | STAFFING PLUS, INC. |
| c | EIN-PN | 36-4330850-222 |
| a | Plan name | ANGIE'S KINDER CARE 401(K) RETIREMENT PLAN |
| b | Name of plan sponsor | ANGIE'S KINDERCARE |
| c | EIN-PN | 90-0726397-001 |

| 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 | ANIMAL NUTRITION SYSTEMS 401(K) PLAN | |
| b | Name of plan sponsor | ANIMAL NUTRITION SYSTEMS, LLLP | c EIN-PN 86-0536485-001 |
| a | Plan name | APARTMENT HOUSE BUILDERS, INC. 401K PLAN | |
| b | Name of plan sponsor | APARTMENT HOUSE BUILDERS, INC. | c EIN-PN 71-0649991-001 |
| a | Plan name | APEX DENTAL LABORATORY, LLC 401(K) PLAN & TRUST | |
| b | Name of plan sponsor | APEX DENTAL LABORATORY, LLC | c EIN-PN 86-1408956-001 |
| a | Plan name | DICKINSON JEWELERS 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor | DICKINSON JEWELERS INC. | c EIN-PN 52-1789151-001 |
| a | Plan name | IRON EAGLE WELDING ACADEMY 401(K) PLAN | |
| b | Name of plan sponsor | IRON EAGLE WELDING ACADEMY | c EIN-PN 85-1505205-001 |
| a | Plan name | J & D SNYDER EXCAVATING, LLC 401(K) PLAN | |
| b | Name of plan sponsor | J & D SNYDER EXCAVATING, LLC | c EIN-PN 05-0565093-001 |
| a | Plan name | J AND J INDUSTRIAL CONTRACTING 401(K) PLAN | |
| b | Name of plan sponsor | J AND J INDUSTRIAL CONTRACTING | c EIN-PN 30-0867952-001 |
| a | Plan name | STREB CONSTRUCTION 401(K) PLAN | |
| b | Name of plan sponsor | STREB CONSTRUCTION CO., INC. | c EIN-PN 42-0892646-001 |
| a | Plan name | STURINO FUNERAL HOME 401(K) SAVINGS PLAN | |
| b | Name of plan sponsor | STURINO FUNERAL HOME | c EIN-PN 39-1251515-001 |
| a | Plan name | PEOPLE RESULTS RETIREMENT PLAN | |
| b | Name of plan sponsor | IRI CONSULTANTS, INC. | c EIN-PN 38-2349424-001 |
| a | Plan name | PEORIA BRICK COMPANY 401(K) PLAN | |
| b | Name of plan sponsor | PEORIA BRICK COMPANY | c EIN-PN 37-0459180-002 |
| a | Plan name | PERKINS MOTOR PLEX LLC SAFE HARBOR 401(K) PLAN | |
| b | Name of plan sponsor | PERKINS MOTOR PLEX LLC | c EIN-PN 26-4307208-001 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| | (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | |
| a | Plan name PERMIAN INTERNATIONAL ENERGY SERVICES 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor PERMIAN INTERNATIONAL ENERGY SERVICES LLC | c EIN-PN 82-1930351-001 |
| a | Plan name ATLAS DRILLING, LLC SAFE HARBOR 401(K) PLAN | |
| b | Name of plan sponsor ATLAS DRILLING, LLC | c EIN-PN 27-3701741-001 |
| a | Plan name DSI RETIREMENT PLAN | |
| b | Name of plan sponsor DESIGN & SOFTWARE INTERNATIONAL, INC. | c EIN-PN 31-1435015-001 |
| a | Plan name DUOTECH SERVICES LLC 401(K) PLAN | |
| b | Name of plan sponsor DUOTECH SERVICES LLC | c EIN-PN 59-2658665-001 |
| a | Plan name JET PROCESS CORPORATION 401(K) PROFIT SHARING PLAN AND TRUST | |
| b | Name of plan sponsor JET PROCESS CORPORATION | c EIN-PN 06-1317076-001 |
| a | Plan name JHA MANAGEMENT, INC. & AFFILIATES 401(K) PLAN | |
| b | Name of plan sponsor JHA MANAGEMENT, INC. | c EIN-PN 22-2378831-002 |
| a | Plan name JILL KRAPF MD LLC RETIREMENT PLAN | |
| b | Name of plan sponsor JILL KRAPF MD LLC | c EIN-PN 93-2300146-001 |
| a | Plan name TCB 401(K) PLAN | |
| b | Name of plan sponsor TYLER CORRUGATED BOX, INC. | c EIN-PN 75-1707434-001 |
| a | Plan name TDK CONSTRUCTION COMPANY, INC. 401(K) PLAN | |
| b | Name of plan sponsor TDK CONSTRUCTION CO., INC. | c EIN-PN 61-1025614-001 |
| a | Plan name POPE DISTRIBUTING CO., INC. 401(K) PLAN | |
| b | Name of plan sponsor POPE DISTRIBUTING CO., INC. | c EIN-PN 73-0672369-001 |
| a | Plan name PORTO'S BAKERY, INC. 401(K) PLAN | |
| b | Name of plan sponsor PORTO'S BAKERY, INC. | c EIN-PN 95-4610775-777 |
| a | Plan name BASS RIVER, INC. PROFIT SHARING PLAN | |
| b | Name of plan sponsor BASS RIVER, INC. | c EIN-PN 04-2512466-001 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| | (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | |
| a | Plan name BASSETT MIRROR COMPANY, INC. EMPLOYEE SAVINGS AND RETIREMENT PLAN | |
| b | Name of plan sponsor BASSETT MIRROR COMPANY, INC. | c EIN-PN 54-0478011-002 |
| a | Plan name EDWIN R. MUENZNER, CPA LLC, 401(K) PLAN | |
| b | Name of plan sponsor EDWIN R. MUENZNER, CPA, LLC | c EIN-PN 20-2068936-001 |
| a | Plan name EHS SUPPORT SERVICES 401(K) PLAN | |
| b | Name of plan sponsor EHS SUPPORT SERVICES, LLC | c EIN-PN 20-0915717-001 |
| a | Plan name EICHELBERGER FARMS, INC. 401(K) PLAN | |
| b | Name of plan sponsor EICHELBERGER FARMS, INC. | c EIN-PN 39-1870144-001 |
| a | Plan name KDJ SALES & SERVICE 401(K) PLAN | |
| b | Name of plan sponsor KDJ SALES & SERVICE, INC. | c EIN-PN 37-1131827-001 |
| a | Plan name KEAR CIVIL CORPORATION & SPECTRA 401(K) PLAN | |
| b | Name of plan sponsor KEAR CIVIL CORPORATION | c EIN-PN 20-8257122-001 |
| a | Plan name KEITH'S APPLIANCES 401(K) PLAN | |
| b | Name of plan sponsor KEITH'S APPLIANCES | c EIN-PN 06-0973305-001 |
| a | Plan name THE CENTRAL INDUSTRIAL SUPPLY 401(K) SAVINGS & RETIREMENT PLAN | |
| b | Name of plan sponsor CENTRAL INDUSTRIAL SUPPLY, INC. | c EIN-PN 63-0711103-001 |
| a | Plan name THE COLIBRI COLLECTIVE, LLC. 401(K) PLAN | |
| b | Name of plan sponsor THE COLIBRI COLLECTIVE, LLC | c EIN-PN 82-1629463-001 |
| a | Plan name THE COLUMBIA PROPERTY GROUP, INC. 401(K) PLAN | |
| b | Name of plan sponsor THE COLUMBIA PROPERTY GROUP, INC. | c EIN-PN 27-0013342-001 |
| a | Plan name BLACKS OUTSOURCING, INC 401(K) SAVINGS PLAN | |
| b | Name of plan sponsor BLACKS OUTSOURCING, INC. | c EIN-PN 20-0333314-001 |
| a | Plan name BLACKSBURG LAW, PC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor BLACKSBURG LAW, PC | c EIN-PN 26-4464445-001 |

| 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 | EUFORA INTERNATIONAL 401(K) PLAN | |
| b | Name of plan sponsor | EUFORA INTERNATIONAL | c EIN-PN 33-0617396-001 |
| a | Plan name | EVESHAM MORTGAGE 401(K) PLAN | |
| b | Name of plan sponsor | EVESHAM MORTGAGE, LLC | c EIN-PN 26-1234319-001 |
| a | Plan name | LAKE FOREST COUNTRY CLUB 401(K) PLAN | |
| b | Name of plan sponsor | LAKE FOREST COUNTRY CLUB, INC. | c EIN-PN 20-0283427-001 |
| a | Plan name | LAKE MANAGEMENT SERVICES RETIREMENT PLAN | |
| b | Name of plan sponsor | LAKE MANAGEMENT SERVICES, LP | c EIN-PN 20-5300112-001 |
| a | Plan name | THOMPSON VETERINARY CLINIC 401(K) PLAN | |
| b | Name of plan sponsor | THOMPSON VETERINARY CLINIC | c EIN-PN 38-3184834-001 |
| a | Plan name | THREAD 401(K) PLAN | |
| b | Name of plan sponsor | THREAD INTERNATIONAL PBC, INC. | c EIN-PN 32-0466406-001 |
| a | Plan name | PURSUIT CONSTRUCTION 401(K) PLAN | |
| b | Name of plan sponsor | PURSUIT CONSTRUCTION, LLC | c EIN-PN 61-1899294-001 |
| a | Plan name | QESSENTIAL MEDICAL MARKET RESEARCH, LLC 401(K) PLAN | |
| b | Name of plan sponsor | QESSENTIAL MEDICAL MARKET RESEARCH, LLC | c EIN-PN 87-3863389-001 |
| a | Plan name | QRM 401(K) PLAN | |
| b | Name of plan sponsor | QUALITY REHAB MANAGEMENT, LLC DBA QRM | c EIN-PN 83-1973171-001 |
| a | Plan name | BONNET SPRINGS PARK, INC. 401(K) PLAN | |
| b | Name of plan sponsor | BONNET SPRINGS PARK, INC. | c EIN-PN 81-1106879-001 |
| a | Plan name | BOYD & COMPANY LOGISTICS, LLC 401(K) PLAN | |
| b | Name of plan sponsor | BOYD AND COMPANY LOGISTICS, LLC | c EIN-PN 46-3400509-001 |
| a | Plan name | FAY FAMILY DENTAL CARE 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | FAY FAMILY DENTAL CARE | c EIN-PN 84-3543483-001 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| | (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | |
| a | Plan name FEDERAL DEFENDERS OF MONTANA, INC. PROFIT SHARING PLAN & TRUST | |
| b | Name of plan sponsor FEDERAL DEFENDERS OF MONTANA, INC. | c EIN-PN 81-0479512-001 |
| a | Plan name FEIGHNER INSURANCE, INC. 401(K) SALARY REDUCTION PLAN | |
| b | Name of plan sponsor FEIGHNER INSURANCE, INC. DBA INSURANCE MANAGEMENT GROUP | c EIN-PN 35-0943733-002 |
| a | Plan name FERNANDES & CHAREST, P.C. 401(K) & PROFIT SHARING PLAN | |
| b | Name of plan sponsor FERNANDES & CHAREST, P.C. | c EIN-PN 04-3099857-001 |
| a | Plan name LAW OFFICES OF VANCE A. FUNK PA 401(K) PLAN | |
| b | Name of plan sponsor LAW OFFICES OF VANCE A. FUNK PA | c EIN-PN 03-0380002-001 |
| a | Plan name LAWSON HUCK GONZALEZ, PLLC 401(K) PLAN | |
| b | Name of plan sponsor LAWSON HUCK GONZALEZ, PLLC | c EIN-PN 92-1760240-001 |
| a | Plan name LEBLANC NETTLES LAW GROUP 401(K) AND PROFIT SHARING PLAN | |
| b | Name of plan sponsor LEBLANC NETTLES LAW LLC | c EIN-PN 46-2658554-001 |
| a | Plan name TOLLEFSEN STEEL & FABRICATION, INC. RETIREMENT SAVINGS PLAN | |
| b | Name of plan sponsor TOLLEFSEN STEEL & FABRICATION, INC. | c EIN-PN 46-2263667-001 |
| a | Plan name LEGENDARY HOME SOLUTIONS 401(K) PLAN | |
| b | Name of plan sponsor LEGENDARY HOME SOLUTIONS LLC | c EIN-PN 83-3696034-001 |
| a | Plan name MANHATTAN MECHANICAL SERVICES 401(K) PLAN | |
| b | Name of plan sponsor MANHATTAN MECHANICAL SERVICES, INC. | c EIN-PN 27-3969132-001 |
| a | Plan name MARC DUTTON IRRIGATION, INC. PROFIT SHARING 401(K) PLAN | |
| b | Name of plan sponsor MARC DUTTON IRRIGATION, INC. | c EIN-PN 38-2152186-001 |
| a | Plan name MATERIALS TESTING, INC. 401(K) PLAN | |
| b | Name of plan sponsor MATERIALS TESTING, INC. | c EIN-PN 06-1321309-001 |
| a | Plan name MAUI PARADISE PROPERTIES 401(K) PLAN | |
| b | Name of plan sponsor MAUI PARADISE PROPERTIES | c EIN-PN 46-0867014-001 |

| 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 | METAL CONSTRUCTION MATERIALS, LLC. PROFIT SHARING PLAN & TRUST | |
| b | Name of plan sponsor | METAL CONSTRUCTION MATERIALS, LLC. | c EIN-PN 74-2064793-001 |
| a | Plan name | METHODIST HOMES FOR THE AGING 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor | METHODIST HOMES FOR THE AGING | c EIN-PN 63-0376518-001 |
| a | Plan name | MEYERING INSURANCE AGENCY 401(K) PLAN | |
| b | Name of plan sponsor | MEYERING INSURANCE AGENCY | c EIN-PN 38-2217296-001 |
| a | Plan name | MOHAWK CONSTRUCTION AND SUPPLY CO. INC. 401(K) SAVINGS PLAN | |
| b | Name of plan sponsor | MOHAWK CONSTRUCTION AND SUPPLY CO., INC. | c EIN-PN 25-1382848-001 |
| a | Plan name | MOMENTUM BUILDERS 401(K) | |
| b | Name of plan sponsor | MOMENTUM BUILDERS | c EIN-PN 25-1413147-001 |
| a | Plan name | NORTH ATLANTA PEDIATRIC ASSOCIATES, P.C. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | NORTH ATLANTA PEDIATRIC ASSOCIATES, P.C. | c EIN-PN 58-1633173-777 |
| a | Plan name | NORTH ATLANTIC CONCRETE, INC. 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor | NORTH ATLANTIC CONCRETE, INC. | c EIN-PN 45-3077844-001 |
| a | Plan name | NORTH JACKSON PRIMARY CARE, LLC 401(K) PLAN | |
| b | Name of plan sponsor | NORTH JACKSON PRIMARY CARE, LLC | c EIN-PN 20-5560539-001 |
| a | Plan name | NORTHERN AIR PLUMBING & HEATING 401(K) PLAN | |
| b | Name of plan sponsor | NORTHERN AIR PLUMBING & HEATING OF GRAND RAPIDS, INC. | c EIN-PN 41-1879647-001 |
| a | Plan name | NORTHERN CROSSARM COMPANY, INC. PROFIT SHARING PLAN | |
| b | Name of plan sponsor | NORTHERN CROSSARM COMPANY, INC. | c EIN-PN 39-0987381-001 |
| a | Plan name | ORION PROTECTIVE SERVICES, INC. 401(K) PLAN | |
| b | Name of plan sponsor | ORION PROTECTIVE SERVICES, INC. | c EIN-PN 27-2623687-001 |
| a | Plan name | PARAMOUNT REHABILITATION SERVICES 401(K) PLAN | |
| b | Name of plan sponsor | PARAMOUNT REHABILITATION SERVICES | c EIN-PN 38-3378702-001 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| | (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | |
| a | Plan name PARANET CORPORATION SERVICES, INC. 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor PARANET CORPORATION SERVICES, INC. | c EIN-PN 58-2032457-001 |
| a | Plan name PERSPECTIVE PV 401(K) PLAN | |
| b | Name of plan sponsor PERSPECTIVE PV | c EIN-PN 81-5230196-002 |
| a | Plan name PETERS AGENCY CARE MANAGEMENT 401(K) PLAN | |
| b | Name of plan sponsor PETERS AGENCY CARE MANAGEMENT, LLC | c EIN-PN 83-0446469-001 |
| a | Plan name PETERSEN COMPANIES RETIREMENT PLAN | |
| b | Name of plan sponsor VALLEY DESIGN & CONSTRUCTION, INC. | c EIN-PN 87-0328548-001 |
| a | Plan name PETITBON ALARM COMPANY, INC. 401(K) PLAN | |
| b | Name of plan sponsor PETITBON ALARM COMPANY, INC. | c EIN-PN 52-1908898-001 |
| a | Plan name POWER HOLDINGS 401(K) PLAN | |
| b | Name of plan sponsor POWER HOLDINGS LLC | c EIN-PN 20-0711558-001 |
| a | Plan name PPT FLORIDA 401(K) PLAN | |
| b | Name of plan sponsor PRODUCTION & PROCESS TECHNOLOGIES FLORIDA, INC. | c EIN-PN 59-3428824-002 |
| a | Plan name PRECISE PERSONALIZED CARE HOSPICE 401(K) PLAN | |
| b | Name of plan sponsor PRECISE PERSONALIZED CARE HOSPICE | c EIN-PN 82-3190964-001 |
| a | Plan name PROTECTIVE PACKAGING SOLUTIONS 401(K) PLAN | |
| b | Name of plan sponsor FOAM FABRICATORS ACQUISITION, LLC | c EIN-PN 84-0814184-001 |
| a | Plan name PROTIRO, INC. 401(K) PLAN | |
| b | Name of plan sponsor PROTIRO, INC. | c EIN-PN 84-1441825-001 |
| a | Plan name QUALITY ENVIRONMENTAL SERVICES RETIREMENT PLAN | |
| b | Name of plan sponsor QUALITY ENVIRONMENTAL SERVICES | c EIN-PN 31-1372155-001 |
| a | Plan name RESOLVION 401(K) PLAN | |
| b | Name of plan sponsor RESOLVION, GP | c EIN-PN 47-5254939-001 |

| 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 | RESTORATION DENTAL 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | NAIOM DENTISTRY PLLC DBA RESTORATION DENTAL | c EIN-PN 85-0647872-001 |
| a | Plan name | RITTER MAHER ARCHITECTS, LLC 401(K) PLAN | |
| b | Name of plan sponsor | RITTER MAHER ARCHITECTS, LLC | c EIN-PN 03-0497336-001 |
| a | Plan name | RIVCRETE READY MIX LLC 401(K) PLAN | |
| b | Name of plan sponsor | RIVCRETE READY MIX LLC | c EIN-PN 81-3593378-001 |
| 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 | RYAN SMITH LANDSCAPING 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | RYAN SMITH LANDSCAPING, L.C.C. | c EIN-PN 02-0815221-001 |
| a | Plan name | S&S PACKAGING PRODUCTS, INC. 401(K) PLAN | |
| b | Name of plan sponsor | S&S PACKAGING PRODUCTS, INC. | c EIN-PN 23-2940069-001 |
| a | Plan name | SCHLOSSER ORTHODONTICS401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor | SCHLOSSER ORTHODONTICS, L.L.C. | c EIN-PN 85-1521677-001 |
| 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 | SCHOEN FAMILY DENTISTRY 401(K) PLAN | |
| b | Name of plan sponsor | SCHOEN FAMILY DENTISTRY | c EIN-PN 41-1940634-001 |
| a | Plan name | SCIENTIFIC CONSULTING GROUP, INC. PROFIT SHARING PLAN & TRUST | |
| b | Name of plan sponsor | THE SCIENTIFIC CONSULTING GROUP, INC. | c EIN-PN 52-1719423-001 |
| a | Plan name | SIGNATURE PAYMENTS 401(K) PLAN | |
| b | Name of plan sponsor | CKC HOLDINGS, INC. | c EIN-PN 61-2013413-001 |
| a | Plan name | SIGNS330, LLC 401(K) PLAN | |
| b | Name of plan sponsor | SIGNS330, LLC | c EIN-PN 84-3286309-001 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | | |
| a | Plan name SKYLINE ROOFING & SHEET METAL CO., INC. 401(K) PLAN | |
| b | Name of plan sponsor SKYLINE ROOFING & SHEET METAL CO., INC. | c EIN-PN 35-1897566-001 |
| a | Plan name SLIM CHICKENS 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor SLIM CHICKENS | c EIN-PN 45-3985800-001 |
| a | Plan name SLOANE DENTAL 401(K) PLAN | |
| b | Name of plan sponsor 12 SOUTH DENTAL PLLC | c EIN-PN 46-1289540-001 |
| a | Plan name STEIN LAW 401(K) PLAN | |
| b | Name of plan sponsor STEIN LAW PA. | c EIN-PN 46-3771978-001 |
| a | Plan name STEVE K. HONG ARCHITECT, INC. 401(K) PROFIT SHARING | |
| b | Name of plan sponsor STEVE K HONG ARCHITECT, INC. | c EIN-PN 87-4681192-001 |
| a | Plan name SUMMIT SITEWORKS LLC, LLC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor SUMMIT SITEWORKS LLC | c EIN-PN 47-0967899-001 |
| a | Plan name SUN COAST PAIN MANAGEMENT 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor SUN COAST PAIN MANAGEMENT, P.A. | c EIN-PN 64-0888705-001 |
| a | Plan name SUNLAND PARK RACETRACK AND CASINO 401(K) PLAN | |
| b | Name of plan sponsor MY WAY HOLDINGS, LLC | c EIN-PN 88-0475995-001 |
| a | Plan name THE DELTA PATHOLOGY GROUP, LLC 401(K) PLAN | |
| b | Name of plan sponsor THE DELTA PATHOLOGY GROUP, LLC | c EIN-PN 72-0933293-001 |
| a | Plan name THE DYNAMIC CONSTRUCTION, INC. PROFIT SHARING & 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor DYNAMIC CONSTRUCTION, INC. | c EIN-PN 31-1526251-001 |
| a | Plan name THE FARMERS BANK, NICHOLASVILLE EMPLOYEES SAVINGS PLAN | |
| b | Name of plan sponsor THE FARMERS BANK | c EIN-PN 61-0188940-001 |
| a | Plan name THE FLOAT LIFE 401(K) PLAN | |
| b | Name of plan sponsor FLOAT SUPPLY LLC | c EIN-PN 82-2395230-001 |

| 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 | THE GINGER TREE PRESCHOOL LLC 401(K) PROFIT SHARING PLAN AND TRUST | |
| b | Name of plan sponsor | THE GINGER TREE PRESCHOOL LLC | c EIN-PN 82-3508771-001 |
| a | Plan name | TIGER SANITATION, LLC 401(K) PLAN | |
| b | Name of plan sponsor | TIGER SANITATION, LLC | c EIN-PN 71-0885851-001 |
| 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 | TIMMEL ASSOCIATES 401(K) PLAN | |
| b | Name of plan sponsor | TIMMEL ASSOCIATES LLC | c EIN-PN 27-1928755-001 |
| a | Plan name | TORBOT GROUP, INC. 401(K) PLAN | |
| b | Name of plan sponsor | TORBOT GROUP, INC. | c EIN-PN 05-0390138-001 |
| a | Plan name | TOTAL MEDICAL COMPLIANCE 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | TMCC, INC DBA TOTAL MEDICAL COMPLIANCE | c EIN-PN 56-1970120-001 |
| a | Plan name | UNIQUE FABRICATIONS, INC. 401(K) PLAN | |
| b | Name of plan sponsor | UNIQUE FABRICATIONS | c EIN-PN 26-1649705-001 |
| a | Plan name | UNIVERSAL CREDIT SERVICES, INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | UNIVERSAL CREDIT SERVICES, INC. | c EIN-PN 38-3424306-001 |
| a | Plan name | VAN BUREN COMMUNITY MENTAL HEALTH PENSION PLAN | |
| b | Name of plan sponsor | VAN BUREN COMMUNITY MENTAL HEALTH AUTHORITY | c EIN-PN 38-1917556-001 |
| a | Plan name | VANGUARD CLINICAL INC. 401(K) PLAN | |
| b | Name of plan sponsor | VANGUARD CLINICAL INC. | c EIN-PN 81-2699127-001 |
| a | Plan name | VANS DELIVERY SERVICE, INC. EMPLOYEES RETIREMENT SAVINGS PLAN | |
| b | Name of plan sponsor | VANS DELIVERY SERVICE, INC. | c EIN-PN 38-2487912-001 |
| a | Plan name | WAYNE PREPARATORY ACADEMY 401(K) PLAN | |
| b | Name of plan sponsor | WAYNE PREPARATORY ACADEMY, LP | c EIN-PN 30-0826240-001 |

| 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 | WILL CLARK ELECTRIC 401(K) PLAN | |
| b | Name of plan sponsor | WILL CLARK ELECTRIC INC. | c EIN-PN 46-0382827-001 |
| a | Plan name | WILLIAM D. STINSON, M.D. 401(K) PLAN | |
| b | Name of plan sponsor | WILLIAM D. STINSON, M.D. | c EIN-PN 26-3333013-001 |
| a | Plan name | WILLIAM L. FARR DDS INC. DBA ROCKY RIVER DENTAL ASSOCIATES 401K PROFIT SHARING PLAN | |
| b | Name of plan sponsor | WILLIAM L FARR DDS INC. DBA ROCKY RIVER DENTAL ASSOCIATES | c EIN-PN 34-1760741-001 |
| a | Plan name | WINCO 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | BMS HOLDINGS, INC. | c EIN-PN 43-0634395-003 |
| a | Plan name | 429 ELECTRICAL CONTRACTORS LLC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | 429 ELECTRICAL CONTRACTORS LLC | c EIN-PN 81-4805405-001 |
| a | Plan name | ADELMAN MAINTENANCE CORP. OF MILWAUKEE PROFIT-SHARING PLAN | |
| b | Name of plan sponsor | ADELMAN MAINTENANCE CORP. OF MILWAUKEE | c EIN-PN 39-1471511-001 |
| a | Plan name | ADITYA CHHIBBER BDS LLC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | ADITYA CHHIBBER BDS LLC DBA AC ORTHODONTICS | c EIN-PN 81-1939042-002 |
| a | Plan name | AFTERMAN SOFTWARE, LLC 401(K) PLAN | |
| b | Name of plan sponsor | AFTERMAN SOFTWARE, LLC | c EIN-PN 81-2910848-001 |
| a | Plan name | AGX SITEWORX 401(K) PLAN | |
| b | Name of plan sponsor | EAC ENTERPRISES, LLC DBA AGX SITEWORX | c EIN-PN 47-2997502-001 |
| a | Plan name | AHB TOOLING & MACHINERY 401(K) PLAN & TRUST | |
| b | Name of plan sponsor | AHB TOOLING & MACHINERY, LLC | c EIN-PN 83-3280314-001 |
| a | Plan name | AMERICAN COATINGS CORP. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | AMERICAN COATINGS CORP. | c EIN-PN 31-1581806-001 |
| a | Plan name | AMERICAN NATION BANK SAVINGS AND RETIREMENT PLAN | |
| b | Name of plan sponsor | AMERICAN NATION BANK | c EIN-PN 73-1258880-001 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| | (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | |
| a | Plan name AMERICAN READING COMPANY 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor AMERICAN READING COMPANY DBA 100 BOOK CHALLENGE | c EIN-PN 23-2965253-001 |
| a | Plan name APEX TRAILER 401(K) PLAN | |
| b | Name of plan sponsor APEX TRAILER SALES AND RENTALS, INC. | c EIN-PN 61-1020316-001 |
| a | Plan name API RETIREMENT PLAN | |
| b | Name of plan sponsor ARCHITECTURAL PRECAST INNOVATIONS, INC. | c EIN-PN 47-3898467-001 |
| a | Plan name APOLLO HEALTHCARE, LLC PROFIT SHARING PLAN | |
| b | Name of plan sponsor APOLLO HEALTHCARE, LLC | c EIN-PN 27-3107108-002 |
| a | Plan name APOSTOLIC CHRISTIAN HOME 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor APOSTOLIC CHRISTIAN HOME | c EIN-PN 37-1366082-001 |
| a | Plan name APPLE ELECTRICAL CONTRACTORS, INC. 401(K) PLAN | |
| b | Name of plan sponsor APPLE ELECTRICAL CONTRACTORS, INC. | c EIN-PN 75-2529492-001 |
| a | Plan name AUTOELECTRIC OF AMERICA, INC. 401(K) PLAN | |
| b | Name of plan sponsor AUTOELECTRIC OF AMERICA, INC. | c EIN-PN 74-2964877-001 |
| 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 AUTOMOTIVE TRANSPORTATION 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor RCS TRANSPORTATION, LLC | c EIN-PN 20-2646999-001 |
| a | Plan name BAYSIDE AUTO GROUP 401(K) PROFIT SHARING PLAN AND TRUST | |
| b | Name of plan sponsor BAYSIDE AUTO GROUP | c EIN-PN 52-1664217-001 |
| a | Plan name BAYSIDE DREDGING, LLC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor BAYSIDE DREDGING LLC | c EIN-PN 88-2719169-001 |
| a | Plan name BLAGER CONCRETE COMPANY 401(K) PLAN | |
| b | Name of plan sponsor BLAGER CONCRETE COMPANY | c EIN-PN 20-0634151-001 |

| Part II Information on Participating Plans (to be completed by DFEs, other than DCGs) | | |
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| (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | | |
| a Plan name | BLAZE PIZZA 401(K) PLAN | |
| b Name of plan sponsor | DAMM FINE PIZZA DBA BLAZE PIZZA | c EIN-PN 47-1820665-001 |
| a Plan name | BOYS & GIRLS CLUB OF GREATER NEW HAVEN 401(K) PLAN | |
| b Name of plan sponsor | BOYS & GIRLS CLUBS OF GREATER NEW HAVEN | c EIN-PN 06-0646935-002 |
| a Plan name | BOYS & GIRLS CLUB OF HAWTHORNE 401(K) PROFIT SHARING PLAN AND TRUST | |
| b Name of plan sponsor | BOYS & GIRLS CLUB OF HAWTHORNE | c EIN-PN 23-7112349-001 |
| a Plan name | BRANDMINDED, LLC 401(K) PLAN | |
| b Name of plan sponsor | BRANDMINDED, LLC | c EIN-PN 80-2122970-001 |
| a Plan name | BRASSFIELD ESTATE WINERY 401(K) PLAN | |
| b Name of plan sponsor | BRASSFIELD ESTATE WINERY, LLC | c EIN-PN 41-2103926-001 |
| a Plan name | CALCIUM PRODUCTS, INC. RETIREMENT SAVINGS PLAN | |
| b Name of plan sponsor | CALCIUM PRODUCTS, INC. | c EIN-PN 42-1300275-001 |
| a Plan name | CAMRETT COMPANIES 401(K)/PROFIT SHARING PLAN | |
| b Name of plan sponsor | CAMRETT LOGISTICS, INC. | c EIN-PN 54-1747281-001 |
| a Plan name | CASSILL MOTORS, INC. 401(K) PROFIT SHARING PLAN | |
| b Name of plan sponsor | CASSILL MOTORS, INC. | c EIN-PN 42-1375775-001 |
| a Plan name | CHRISTIAN HEALTHCARE CENTERS 401(K) PLAN | |
| b Name of plan sponsor | CHRISTIAN HEALTHCARE CENTERS, INC. | c EIN-PN 47-4100326-001 |
| a Plan name | CHURCHLAND ANIMAL CLINIC, INC. EMPLOYEE 401(K) PROFIT SHARING PLAN | |
| b Name of plan sponsor | CHURCHLAND ANIMAL CLINIC, INC. | c EIN-PN 54-0941437-001 |
| a Plan name | CHUZE FITNESS 401(K) PLAN | |
| b Name of plan sponsor | RACHAS, INC. DBA CHUZE FITNESS | c EIN-PN 26-2396678-001 |
| a Plan name | COCHRANE SUPPLY ENGINEERING, INC. PROFIT SHARING RETIREMENT PLAN | |
| b Name of plan sponsor | COCHRANE SUPPLY ENGINEERING, INC. | c EIN-PN 38-1854848-001 |

| 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 | COLONIAL GENERAL INSURANCE AGENCY 401(K) PLAN | |
| b | Name of plan sponsor | COLONIAL GENERAL INSURANCE AGENCY, INC. | c EIN-PN 31-1125848-001 |
| a | Plan name | COLORADO PHYSICIAN PARTNERS 401(K) PLAN | |
| b | Name of plan sponsor | COLORADO PHYSICIAN PARTNERS | c EIN-PN 90-0995056-001 |
| a | Plan name | COLUMBIA MARKING TOOLS, INC. EMPLOYEES PROFIT SHARING PLAN | |
| b | Name of plan sponsor | COLUMBIA MARKING TOOLS, INC. | c EIN-PN 38-1659935-001 |
| a | Plan name | CREEKSIDE ANIMAL HOSPITAL 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | JACKSON-POLEN ANIMAL HOSPITAL PC DBA CREEKSIDE ANIMAL HOSPITAL | c EIN-PN 26-2580271-001 |
| a | Plan name | CRIMSON CARE NETWORK 401(K) PLAN | |
| b | Name of plan sponsor | CRIMSON CARE NETWORK | c EIN-PN 82-2820387-002 |
| a | Plan name | CROFT COMPANIES RETIREMENT PLAN | |
| b | Name of plan sponsor | CROFT POWER EQUIPMENT, LLC | c EIN-PN 87-0620719-001 |
| a | Plan name | DEMOSS ELECTRIC, INC. 401(K) PLAN | |
| b | Name of plan sponsor | DEMOSS ELECTRIC, INC. | c EIN-PN 02-0677709-001 |
| a | Plan name | DENT DEFENSE GROUP 401(K) PLAN & TRUST | |
| b | Name of plan sponsor | DENT DEFENSE GROUP | c EIN-PN 68-0533537-001 |
| a | Plan name | DENTAL CARE 401(K) PLAN | |
| b | Name of plan sponsor | DR. DANIEL HWANG PLLC DBA BOTHELL FAMILY DENTAL CARE | c EIN-PN 82-2779947-001 |
| a | Plan name | DIEFFENBACH'S POTATO CHIPS 401(K) PLAN | |
| b | Name of plan sponsor | DIEFFENBACH'S POTATO CHIPS, INC. | c EIN-PN 23-3044270-001 |
| a | Plan name | DIGITAL TOOL & DIE, INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | DIGITAL TOOL & DIE, INC. | c EIN-PN 38-2852638-001 |
| a | Plan name | DVDC 401(K) PLAN | |
| b | Name of plan sponsor | DELAWARE VALLEY DEVELOPMENT COMPANY, LLC | c EIN-PN 52-2198963-001 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | | |
| a | Plan name ELDRIDGE LUMBER COMPANY 401(K) PLAN | |
| b | Name of plan sponsor ELDRIDGE LUMBER COMPANY | c EIN-PN 88-2366980-001 |
| a | Plan name ELECTRICAL WORKS, LLC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor ELECTRICAL WORKS, LLC | c EIN-PN 59-3666692-001 |
| a | Plan name EXECUTIVE PROPERTY MANAGEMENT 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor EXECUTIVE PROPERTY MANAGEMENT | c EIN-PN 22-2398215-001 |
| a | Plan name EXPOTEL HOSPITALITY SERVICES 401K PLAN | |
| b | Name of plan sponsor EXPOTEL HOSPITALITY SERVICES, INC. | c EIN-PN 72-1456101-001 |
| a | Plan name EYNCON 401(K) PLAN | |
| b | Name of plan sponsor EYNCON, LLC | c EIN-PN 47-2720798-001 |
| a | Plan name FG HOLDINGS COMPANY, LLC RETIREMENT PLAN | |
| b | Name of plan sponsor FG HOLDINGS, LLC | c EIN-PN 87-4171809-001 |
| a | Plan name FIELD FRESH FOODS 401(K) PLAN | |
| b | Name of plan sponsor FIELD FRESH FOODS | c EIN-PN 95-4489479-001 |
| a | Plan name GARZOR INSURANCE, LLC 401(K) PLAN | |
| b | Name of plan sponsor GARZOR INSURANCE, LLC | c EIN-PN 26-2951778-001 |
| a | Plan name GATEWAY TO PREVENTION AND RECOVERY, INC. 401(K) PLAN | |
| b | Name of plan sponsor GATEWAY TO PREVENTION AND RECOVERY, INC. | c EIN-PN 73-1215510-001 |
| a | Plan name GATTON & ASSOCIATES, P.C. 401(K) PLAN | |
| b | Name of plan sponsor GATTON & ASSOCIATES, P.C. | c EIN-PN 85-0471754-001 |
| a | Plan name GILLIE HYDE FORD LINCOLN, INC. 401(K) RETIREMENT SAVINGS PLAN | |
| b | Name of plan sponsor GILLIE HYDE FORD LINCOLN, INC. | c EIN-PN 61-0700786-002 |
| a | Plan name GILSTER-MARY LEE CORPORATION EMPLOYEES' 401(K) PLAN | |
| b | Name of plan sponsor GILSTER-MARY LEE | c EIN-PN 37-0951425-002 |

| 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 | GKBK 401(K) PLAN | |
| b | Name of plan sponsor | GAUNTT KOEN BINNEY & KIDD, LLP | c EIN-PN 76-0574603-001 |
| a | Plan name | GKC 401(K) PLAN | |
| b | Name of plan sponsor | GERDING, KORTE, & CHITWOOD PC | c EIN-PN 43-1260512-001 |
| a | Plan name | GREAT KIDS PEDIATRICS 401(K) SAVINGS PLAN | |
| b | Name of plan sponsor | ABEL PAREDES, M.D., P.A. DBA GREAT KIDS PEDIATRICS | c EIN-PN 74-2092637-002 |
| a | Plan name | GREAT OUTDOORS FOUNDATION 401(K) PLAN | |
| b | Name of plan sponsor | GREAT OUTDOORS FOUNDATION | c EIN-PN 42-1441098-001 |
| a | Plan name | GREAT SOUTHERN CAPITAL CORPORATION SALARY REDUCTION PLAN | |
| b | Name of plan sponsor | GREAT SOUTHERN CAPITAL CORPORATION | c EIN-PN 64-0604860-010 |
| a | Plan name | GREBE'S BAKERIES, INC. 401(K) PLAN | |
| b | Name of plan sponsor | GREBE'S BAKERIES, INC. | c EIN-PN 39-0770820-001 |
| a | Plan name | HANCOCK FEDERAL CREDIT UNION EMPLOYEES 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor | HANCOCK FEDERAL CREDIT UNION | c EIN-PN 34-4430151-002 |
| a | Plan name | HIGHROAD HUMAN SERVICES, INC. 401(K) AND PROFIT SHARING PLAN | |
| b | Name of plan sponsor | HIGHROAD HUMAN SERVICES, INC. | c EIN-PN 82-0524519-001 |
| a | Plan name | HIGHWAY INN, INC. 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor | HIGHWAY INN, INC. | c EIN-PN 99-0249967-222 |
| a | Plan name | HIGROUP 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor | THE HAWAII GROUP, INC. | c EIN-PN 27-3129236-001 |
| a | Plan name | HONDATA, INC. 401(K) PLAN | |
| b | Name of plan sponsor | HONDATA, INC. | c EIN-PN 95-4872707-001 |
| a | Plan name | INTERNATIONAL AEROSPACE COATINGS 401(K) PLAN | |
| b | Name of plan sponsor | INTERNATIONAL AEROSPACE COATINGS, INC. | c EIN-PN 91-1517966-002 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| | (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | |
| a | Plan name INTERSTATE COMMERCIAL GLASS & DOOR, INC. 401(K) SALARY REDUCTION PLAN AND TRUST | |
| b | Name of plan sponsor INTERSTATE COMMERCIAL GLASS & DOOR, INC. | c EIN-PN 38-2822716-001 |
| a | Plan name INTERVENTIONAL PAIN CONSULTANTS, LLC 401(K) PLAN | |
| b | Name of plan sponsor INTERVENTIONAL PAIN CONSULTANTS LLC | c EIN-PN 83-0901793-001 |
| a | Plan name J. L. RAYMAAKERS & SONS, INC. RETIREMENT PLAN | |
| b | Name of plan sponsor J.L. RAYMAAKERS & SONS, INC. | c EIN-PN 26-1632270-001 |
| a | Plan name JACK MILLIKIN INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor JACK MILLIKIN INC. | c EIN-PN 38-1852235-002 |
| a | Plan name JLD ENTERPRISES 401(K) PLAN | |
| b | Name of plan sponsor JLD ENTERPRISES LLC | c EIN-PN 26-1987304-001 |
| a | Plan name JOHN A. MITAMURA, M.D. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor JOHN A. MITAMURA, M.D. | c EIN-PN 13-3535026-001 |
| a | Plan name KERN RIVER GOLF COURSE 401(K) PLAN | |
| b | Name of plan sponsor KERN RIVER GOLF COURSE | c EIN-PN 95-3761837-001 |
| a | Plan name LANCE PAUL AUTOMOTIVE 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor LANCE PAUL AUTOMOTIVE LLC | c EIN-PN 27-2029875-001 |
| a | Plan name LAND LIFE COMPANY USA, PBC RETIREMENT PLAN | |
| b | Name of plan sponsor LAND LIFE COMPANY USA, PBC | c EIN-PN 83-1925466-001 |
| a | Plan name LANSING ICE AND FUEL COMPANY PROFIT SHARING PLAN | |
| b | Name of plan sponsor LANSING ICE AND FUEL | c EIN-PN 38-0745480-001 |
| a | Plan name A&G PIPING 401(K) PLAN | |
| b | Name of plan sponsor A&G PIPING, INC. | c EIN-PN 75-1972619-001 |
| a | Plan name A&N ASPHALT 401(K) PROFIT SHARING PLAN + TRUST | |
| b | Name of plan sponsor A&N ASPHALT INC. | c EIN-PN 38-3217709-001 |

| Part II | | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | | | |
| a | Plan name | A-1 SECURITY BARS, INC. 401(K) PLAN | |
| b | Name of plan sponsor | A-1 SECURITY BARS, INC. | c EIN-PN 52-2284626-001 |
| a | Plan name | A-OK 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | A-OK SANITARY & GARBAGE SERVICE, INC. | c EIN-PN 46-0416889-001 |
| a | Plan name | A.K.O. INC. 401(K) & PROFIT SHARING PLAN | |
| b | Name of plan sponsor | A.K.O. INC. | c EIN-PN 06-0249990-001 |
| a | Plan name | AIR COMPRESSOR SOLUTIONS, INC. EMPLOYEE 401(K) PLAN | |
| b | Name of plan sponsor | AIR COMPRESSOR SOLUTIONS, INC. | c EIN-PN 27-0017675-001 |
| a | Plan name | AIR GROUP, LLC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | AIR GROUP, LLC | c EIN-PN 22-3620908-001 |
| a | Plan name | AISTHETIKOS, INC. 401(K) PLAN | |
| b | Name of plan sponsor | AISTHETIKOS, INC. | c EIN-PN 26-4099842-001 |
| a | Plan name | ARCHITECTURE, INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | ARCHITECTURE, INC. | c EIN-PN 54-1371604-001 |
| a | Plan name | BCI, INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | BCI, INC. | c EIN-PN 06-1308260-002 |
| a | Plan name | CBD INDUSTRIES, LLC 401(K) PLAN | |
| b | Name of plan sponsor | CBD INDUSTRIES, LLC | c EIN-PN 83-2775806-001 |
| a | Plan name | CBG SURVEYING TEXAS 401(K) PLAN | |
| b | Name of plan sponsor | CBG SURVEYING TEXAS, LLC | c EIN-PN 30-0991600-001 |
| a | Plan name | CC POOL BUILDERS & SERVICE 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | CC POOL BUILDERS & SERVICE | c EIN-PN 27-4975870-001 |
| a | Plan name | COMMERCE DISTRIBUTION CENTER, INC. RETIREMENT PLAN | |
| b | Name of plan sponsor | COMMERCE DISTRIBUTION CENTER, INC. | c EIN-PN 38-2684078-001 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| | (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | |
| a | Plan name COMMERCIAL DOOR AND HARDWARE, INC. 401(K) PLAN | |
| b | Name of plan sponsor COMMERCIAL DOOR AND HARDWARE, INC. | c EIN-PN 61-1169293-001 |
| a | Plan name COMMERCIAL SEWING, INC. EMPLOYEE SAVINGS AND RETIREMENT PLAN | |
| b | Name of plan sponsor COMMERCIAL SEWING, INC. | c EIN-PN 06-0863890-001 |
| a | Plan name CROSSWINDS COUNSELING & WELLNESS 401(K) PLAN | |
| b | Name of plan sponsor MENTAL HEALTH CENTER OF EAST CENTRAL KANSAS DBA CROSSWINDS COUNSELIN | c EIN-PN 48-0666889-001 |
| a | Plan name CROWN HILL DENTISTRY RETIREMENT READINESS 401(K) PLAN | |
| b | Name of plan sponsor BRITTANY D. GOODING, D.D.S., P.C. | c EIN-PN 45-4069228-001 |
| a | Plan name CTCO BENEFIT SERVICES 401(K) PLAN | |
| b | Name of plan sponsor CTCO BENEFIT SERVICES, LLC | c EIN-PN 30-0515404-002 |
| a | Plan name DIVISION 7, INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor DIVISION 7, INC. | c EIN-PN 84-1573704-001 |
| a | Plan name DMA HOLDINGS 401(K) PLAN | |
| b | Name of plan sponsor DMA HOLDINGS, INC. | c EIN-PN 26-1547833-001 |
| a | Plan name DMT ELECTRIC LLC 401(K) PLAN | |
| b | Name of plan sponsor DMT ELECTRIC LLC | c EIN-PN 46-0774639-001 |
| a | Plan name ELMBROOK FAMILY DENTAL PARTNERS, S.C. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor ELMBROOK FAMILY DENTAL PARTNERS, S.C. | c EIN-PN 27-0556470-001 |
| 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 GLENNWOOD CUSTOM BUILDERS 401(K) PLAN | |
| b | Name of plan sponsor GLENNWOOD CUSTOM BUILDERS, INC | c EIN-PN 20-2045461-001 |
| a | Plan name GLESSNER & ASSOCIATES, PLLC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor GLESSNER & ASSOCIATES, PLLC | c EIN-PN 55-0761731-001 |

| 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 | GLOBAL K9 PROTECTION GROUP LLC 401(K) PROFIT SHARING PLAN & TRUST | |
| b | Name of plan sponsor | GLOBAL K9 PROTECTION GROUP LLC | c EIN-PN 82-4550904-001 |
| a | Plan name | GLOBAL MEDICAL FACILITATORS, INC. 401(K) PLAN | |
| b | Name of plan sponsor | GLOBAL MEDICAL FACILITATORS, INC. | c EIN-PN 83-3023644-001 |
| a | Plan name | GLOBAL WIDGET, LLC 401(K) PLAN | |
| b | Name of plan sponsor | GLOBAL WIDGET, LLC | c EIN-PN 81-2430361-001 |
| a | Plan name | HARKER HEATING & COOLING, INC. 401(K) PLAN | |
| b | Name of plan sponsor | HARKER HEATING & COOLING, INC. | c EIN-PN 39-1634801-001 |
| a | Plan name | HARMSSEN CONSTRUCTION, INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | HARMSSEN CONSTRUCTION, INC. | c EIN-PN 38-2720081-001 |
| a | Plan name | HARTSHORNE HEALTH SERVICES 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor | HARTSHORNE HEALTH SERVICES, LLC | c EIN-PN 20-1718450-001 |
| a | Plan name | HY-ROCK EXCAVATION, LLC 401(K) PLAN | |
| b | Name of plan sponsor | HY-ROCK EXCAVATION, LLC | c EIN-PN 20-3242534-001 |
| a | Plan name | JACKSON TIRE SERVICE, INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | JACKSON TIRE SERVICE, INC. | c EIN-PN 94-2295698-001 |
| a | Plan name | KEY DATA DASHBOARD, INC. DBA KEY DATA 401(K) PLAN | |
| b | Name of plan sponsor | KEY DATA DASHBOARD, INC. DBA KEY DATA | c EIN-PN 87-3648034-002 |
| a | Plan name | KIMBALL CREEK PARTNERS 401(K) PLAN | |
| b | Name of plan sponsor | SEVEN EIGHTY FOUR, LLC | c EIN-PN 46-3365198-001 |
| a | Plan name | KINA'OLE FAMILY OF COMPANIES 401(K) PLAN | |
| b | Name of plan sponsor | KINA'OLE FAMILY OF COMPANIES | c EIN-PN 27-0287605-001 |
| a | Plan name | KINETIC DESIGN, INC. 401(K) PLAN | |
| b | Name of plan sponsor | KINETIC DESIGN, INC. | c EIN-PN 82-2375904-001 |

| 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 | LEO TECH, LLC RETIREMENT PLAN | |
| b | Name of plan sponsor | LEO TECH, LLC | c EIN-PN 47-4538892-001 |
| a | Plan name | LEVIN LEGAL GROUP, P.C. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | LEVIN LEGAL GROUP, P.C. | c EIN-PN 23-2830283-001 |
| a | Plan name | LIBERTY BUSINESS ASSOCIATES, LLC 401(K) PLAN | |
| b | Name of plan sponsor | LIBERTY BUSINESS ASSOCIATES, LLC | c EIN-PN 30-0079001-001 |
| a | Plan name | MAYFAIR PLASTICS, INC. PROFIT SHARING 401(K) PLAN | |
| b | Name of plan sponsor | MAYFAIR PLASTICS, INC. | c EIN-PN 38-2704694-001 |
| a | Plan name | MAYHEW STEEL/DEERFIELD PACKAGING RETIREMENT BENEFIT PLAN | |
| b | Name of plan sponsor | MAYHEW STEEL PRODUCTS, INC. | c EIN-PN 04-1595240-777 |
| a | Plan name | MAYOR'S YOUTH EMPOWERMENT PROGRAM 401(K) PLAN | |
| b | Name of plan sponsor | MAYOR'S YOUTH EMPOWERMENT PROGRAM | c EIN-PN 42-1444335-001 |
| a | Plan name | MAYVILLE STATE BANK PROFIT SHARING AND RETIREMENT TRUST PLAN | |
| b | Name of plan sponsor | MAYVILLE STATE BANK | c EIN-PN 38-0803180-001 |
| a | Plan name | NORTHGATE 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | NORTHGATE | c EIN-PN 38-2503040-001 |
| a | Plan name | NORTHPOINT CONSTRUCTION MANAGEMENT, LLC 401(K) & PROFIT SHARING PLAN | |
| b | Name of plan sponsor | NORTHPOINT CONSTRUCTION MANAGEMENT, LLC | c EIN-PN 20-2902599-001 |
| a | Plan name | NORTHWEST CHRISTIAN SCHOOL 401(K) PLAN | |
| b | Name of plan sponsor | NORTHWEST CHRISTIAN SCHOOL | c EIN-PN 86-0445016-001 |
| a | Plan name | PARIS MOUNTAIN HOSPITALITY, LLC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | PARIS MOUNTAIN HOSPITALITY, LLC | c EIN-PN 47-1819250-001 |
| a | Plan name | PARK SIDE FINANCIAL CREDIT UNION 401(K) PLAN & TRUST | |
| b | Name of plan sponsor | PARK SIDE FINANCIAL CREDIT UNION | c EIN-PN 23-7155544-001 |

| 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 PARK SPRINGS 401(K) PLAN | |
| b | Name of plan sponsor PARK SPRINGS, LLC | c EIN-PN 58-2452928-001 |
| a | Plan name PRECISION CABLE ASSEMBLIES, LLC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor PRECISION CABLE ASSEMBLIES, INC. | c EIN-PN 39-1787647-002 |
| a | Plan name PRECISION THREADED PRODUCTS INC. PROFIT SHARING PLAN | |
| b | Name of plan sponsor THOMPSON AEROSPACE, LLC | c EIN-PN 46-5032055-001 |
| a | Plan name PREFERRED CLIMATE SOLUTIONS, LLC 401(K) PLAN | |
| b | Name of plan sponsor PREFERRED CLIMATE SOLUTIONS, LLC | c EIN-PN 82-1816954-001 |
| a | Plan name R&L SUBS, INC. 401(K) PLAN | |
| b | Name of plan sponsor R&L SUBS, INC. | c EIN-PN 56-1894090-001 |
| a | Plan name R&R BROADBAND, LLC SAFE HARBOR 401(K) PLAN & PSP | |
| b | Name of plan sponsor R&R BROADBAND, LLC | c EIN-PN 20-5537023-001 |
| a | Plan name R.C. FINE FOODS, INC. 401(K) SAVINGS PLAN | |
| b | Name of plan sponsor R.C. FINE FOODS, INC. | c EIN-PN 22-2136686-002 |
| a | Plan name RJ NOLAN & ASSOCIATES, INC. 401(K) PLAN | |
| b | Name of plan sponsor RJ NOLAN & ASSOCIATES, INC. | c EIN-PN 39-1090667-001 |
| a | Plan name ROADRUNNER GLASS COMPANY, INC. 401(K) PLAN | |
| b | Name of plan sponsor ROADRUNNER GLASS COMPANY, INC. | c EIN-PN 86-0713467-001 |
| a | Plan name SCOGGIN DICKEY CHEVROLET 401K PROFIT SHARING PLAN | |
| b | Name of plan sponsor SCOGGIN DICKEY CHEVROLET BUICK, INC. | c EIN-PN 75-0744374-001 |
| a | Plan name SEAQUIST ORCHARDS, LLC 401(K) PLAN | |
| b | Name of plan sponsor SEAQUIST ORCHARDS, LLC | c EIN-PN 39-1431035-002 |
| a | Plan name SECON 401(K) PLAN | |
| b | Name of plan sponsor SPECIFIED ELECTRICAL CONTRACTORS, INC. | c EIN-PN 86-0839690-002 |

| 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 | SUPERIOR PAINT SUPPLY, INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | SUPERIOR PAINT SUPPLY, INC. | c EIN-PN 87-0241620-001 |
| a | Plan name | THE IMMIGRATION LAW OFFICE OF DAVID N. SIMMONS 401(K) PROFIT SHARING PLAN & TRUST | |
| b | Name of plan sponsor | THE IMMIGRATION LAW OFFICE OF DAVID N. SIMMONS, LLC | c EIN-PN 84-1484411-001 |
| a | Plan name | TOYS FOR TRUCKS, INC. 401(K) PLAN | |
| b | Name of plan sponsor | TOYS FOR TRUCKS, INC. | c EIN-PN 39-1646646-001 |
| a | Plan name | VAUGHN WATER COMPANY 401(K) PLAN | |
| b | Name of plan sponsor | VAUGHN WATER COMPANY | c EIN-PN 95-1600230-002 |
| a | Plan name | VELOCITY COMMERCIAL CAPITAL 401(K) PLAN | |
| b | Name of plan sponsor | VELOCITY COMMERCIAL CAPITAL, LLC | c EIN-PN 20-1193192-001 |
| a | Plan name | VENTURE 401(K) PLAN | |
| b | Name of plan sponsor | VM SERVICES, INC. | c EIN-PN 77-0459829-222 |
| a | Plan name | WINDOW TO RECOVERY 401(K) PLAN | |
| b | Name of plan sponsor | WINDOW TO RECOVERY | c EIN-PN 82-3124954-001 |
| a | Plan name | WINTERS, LLP. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | WINTERS, LLP | c EIN-PN 37-1366508-001 |
| a | Plan name | HASSAYAMPA INN 401(K) PLAN | |
| b | Name of plan sponsor | HASSAYAMPA INN, LLC | c EIN-PN 86-1012069-001 |
| 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 | IBEW LOCAL UNION NO. 444 PENSION PLAN | |
| b | Name of plan sponsor | INTERNATIONAL BROTHERHOOD OF ELECTRICAL UNION WORKERS LOCAL UNION 44 | c EIN-PN 73-6153191-001 |
| a | Plan name | ICONERGY LTD 401(K) PROFIT SHARING PLAN AND TRUST | |
| b | Name of plan sponsor | ICONERGY LTD | c EIN-PN 27-2414344-001 |

| 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 | IDAHO ASPHALT SUPPLY, INC. 401(K) RETIREMENT SAVINGS PLAN | |
| b | Name of plan sponsor | IDAHO ASPHALT SUPPLY, INC. | c EIN-PN 82-0325664-001 |
| a | Plan name | JAMES L. GRAVES CONSTRUCTION 401(K) PLAN | |
| b | Name of plan sponsor | JAMES L. GRAVES CONSTRUCTION | c EIN-PN 26-4072884-001 |
| a | Plan name | JANITORS SUPPLY CO., INC. EMPLOYEES' SAVINGS AND RETIREMENT 401(K) PLAN | |
| b | Name of plan sponsor | THE JANITORS SUPPLY CO., INC. | c EIN-PN 35-0981768-001 |
| a | Plan name | KINGS COMMUNITY ACTION ORGANIZATION, INC. 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor | KINGS COMMUNITY ACTION ORGANIZATION, INC. | c EIN-PN 94-1604455-001 |
| a | Plan name | KLAR, IZSAK, & STENGER LLC 401(K) PLAN | |
| b | Name of plan sponsor | KLAR, IZSAK, & STENGER LLC | c EIN-PN 43-1844222-001 |
| a | Plan name | KMW 401(K) PLAN | |
| b | Name of plan sponsor | KELLER, MELCHIORRE AND WALSH, PLLC | c EIN-PN 83-2864534-001 |
| a | Plan name | LINDAR 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | LINDAR CORPORATION | c EIN-PN 41-1752658-001 |
| 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 |
| a | Plan name | MCCOURT EQUIPMENT, INC. SAFE HARBOR 401(K) PLAN | |
| b | Name of plan sponsor | MCCOURT EQUIPMENT, INC. | c EIN-PN 74-2913583-001 |
| a | Plan name | MTS/SFH 401(K) P/S PLAN | |
| b | Name of plan sponsor | MULTIPLICITY THERAPEUTIC SERVICES, INC. | c EIN-PN 51-0619590-001 |
| a | Plan name | NOTTINGHAM RETIREMENT PLAN | |
| b | Name of plan sponsor | NOTTINGHAM STUDIOS | c EIN-PN 47-4225120-001 |
| a | Plan name | NUHORIZON PROPERTIES, LLC PROFIT SHARING PLAN & TRUST | |
| b | Name of plan sponsor | NUHORIZON PROPERTIES, LLC | c EIN-PN 38-3521185-001 |

| 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 PREMIER PHYSICAL THERAPY AND SPORTS MEDICINE INC. 401(K) PLAN | |
| b | Name of plan sponsor PREMIER PHYSICAL THERAPY AND SPORTS MEDICINE INC. | c EIN-PN 65-1147823-001 |
| a | Plan name PRINCIPLE CHOICE SOLUTIONS, LLC 401(K) PLAN | |
| b | Name of plan sponsor PRINCIPLE CHOICE SOLUTIONS LLC | c EIN-PN 47-2275889-001 |
| a | Plan name R.W. MEAD & SONS, INC. PROFIT SHARING PLAN | |
| b | Name of plan sponsor R.W. MEAD & SONS, INC. | c EIN-PN 38-3388367-001 |
| a | Plan name RABB WATER SYSTEMS, INC. 401(K) PLAN | |
| b | Name of plan sponsor RABB WATER SYSTEMS, INC. | c EIN-PN 35-1750694-001 |
| a | Plan name RAJIPO HOLDINGS, INC. 401(K) PLAN | |
| b | Name of plan sponsor RAJIPO HOLDINGS, INC. | c EIN-PN 87-4010536-001 |
| a | Plan name SENIOR ADULT ACTIVITIES CENTER OF MONTGOMERY COUNTY 401(K) PLAN | |
| b | Name of plan sponsor SENIOR ADULT ACTIVITIES CENTER OF MONTGOMERY COUNTY | c EIN-PN 23-1659451-002 |
| a | Plan name SYDAPTIC, INC. 401(K) PLAN | |
| b | Name of plan sponsor SYDAPTIC, INC. | c EIN-PN 74-2898394-001 |
| a | Plan name SYMONS ADVANCED VALUED EMPLOYEE RETIREMENT PLAN | |
| b | Name of plan sponsor SYMONS FIRE PROTECTION, INC. | c EIN-PN 03-0378557-001 |
| a | Plan name T & D DESIGN 401(K) PLAN | |
| b | Name of plan sponsor TOOL & DIE DESIGN | c EIN-PN 38-3384452-001 |
| a | Plan name TRANSITIONAL LIVING CENTERS, INC EMPLOYEES PROFIT SHARING PLAN | |
| b | Name of plan sponsor TRANSITIONAL LIVING CENTERS, INC. | c EIN-PN 34-1752737-001 |
| a | Plan name TRANSYSTEMS RETIREMENT PLAN | |
| b | Name of plan sponsor TRANSPORT LEASING COMPANY, LLP DBA TRANSYSTEMS SERVICES | c EIN-PN 81-0359563-001 |
| a | Plan name TRAVERTINE INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor TRAVERTINE, INC. | c EIN-PN 73-1616445-001 |

| 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 | WOODLANDS HEART AND VASCULAR INSTITUTE 401(K) PLAN |
| b | Name of plan sponsor | WOODLANDS HEART AND VASCULAR INSTITUTE PLLC |
| c | EIN-PN | 27-0733049-001 |
| a | Plan name | WOOF BEACH, INC. 401(K) PROFIT SHARING PLAN |
| b | Name of plan sponsor | WOOF BEACH, INC. |
| c | EIN-PN | 45-5627642-001 |
| a | Plan name | A.W. OAKES & SON, INC. 401(K) PROFIT SHARING PLAN |
| b | Name of plan sponsor | A.W. OAKES & SON, INC. |
| c | EIN-PN | 39-0967026-003 |
| a | Plan name | AL TERRY PLUMBING & HEATING, INC. 401(K) PROFIT SHARING PLAN |
| b | Name of plan sponsor | AL TERRY PLUMBING & HEATING, INC. |
| c | EIN-PN | 02-0344810-002 |
| a | Plan name | ALABAMA COLON & RECTAL INSTITUTE, PC 401(K) PROFIT SHARING PLAN |
| b | Name of plan sponsor | ALABAMA COLON & RECTAL INSTITUTE, PC |
| c | EIN-PN | 63-0795136-001 |
| a | Plan name | ALBERTY GROUP, LLC 401(K) PROFIT SHARING PLAN |
| b | Name of plan sponsor | ALBERTY GROUP, LLC |
| c | EIN-PN | 83-4525061-001 |
| a | Plan name | ARGO MANAGEMENT 401(K)/PROFIT SHARING PLAN |
| b | Name of plan sponsor | ARGO MANAGEMENT INC. |
| c | EIN-PN | 65-1046532-001 |
| a | Plan name | ARKA PROFESSIONAL SERVICES, INC. 401(K) PLAN |
| b | Name of plan sponsor | ARKA PROFESSIONAL SERVICES, INC. |
| c | EIN-PN | 27-5451604-001 |
| a | Plan name | ARMSTRONG CARPET & LINOLEUM CO. 401(K) PLAN |
| b | Name of plan sponsor | ARMSTRONG CARPET & LINOLEUM COMPANY |
| c | EIN-PN | 94-1509072-001 |
| a | Plan name | BEFR LLC RETIREMENT PLAN |
| b | Name of plan sponsor | BEFR LLC |
| c | EIN-PN | 83-3528023-001 |
| a | Plan name | BELAIR DENTAL ASSOCIATES, LLC 401(K) PROFIT SHARING PLAN |
| b | Name of plan sponsor | BELAIR DENTAL ASSOCIATES LLC |
| c | EIN-PN | 58-2381161-001 |
| a | Plan name | BROADMOOR DRUG CENTER RETIREMENT PLAN |
| b | Name of plan sponsor | BROADMOOR DRUG CENTER, INC. |
| c | EIN-PN | 72-0754023-001 |

| 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 | CEDARWOOD LANDSCAPING INC. 401(K) PROFIT SHARING PLAN |
| b | Name of plan sponsor | CEDARWOOD LANDSCAPING, INC. |
| c | EIN-PN | 22-3659554-001 |
| a | Plan name | CELINA ANIMAL HOSPITAL, INC. PROFIT SHARING PLAN |
| b | Name of plan sponsor | CELINA ANIMAL HOSPITAL, INC. |
| c | EIN-PN | 34-1339371-001 |
| a | Plan name | CENTERA BIOSCIENCE 401(K) PLAN |
| b | Name of plan sponsor | CENTERA BIOSCIENCE INC. |
| c | EIN-PN | 46-3097866-001 |
| a | Plan name | CENTERPOINT FELLOWSHIP CHURCH 401(K) PLAN |
| b | Name of plan sponsor | CENTERPOINT FELLOWSHIP CHURCH |
| c | EIN-PN | 27-1489622-001 |
| a | Plan name | CENTRA SOTA COOPERATIVE 401(K) PLAN |
| b | Name of plan sponsor | CENTRA SOTA COOPERATIVE |
| c | EIN-PN | 41-0488480-001 |
| a | Plan name | CENTRAL DISTRIBUTING RETIREMENT PLAN |
| b | Name of plan sponsor | NORTHERN CENTRAL DISTRIBUTING, INC. DBA CENTRAL DISTRIBUTING |
| c | EIN-PN | 77-0135542-001 |
| a | Plan name | COMMUNITY STAR CREDIT UNION 401(K) PLAN |
| b | Name of plan sponsor | COMMUNITY STAR CREDIT UNION |
| c | EIN-PN | 34-0728231-002 |
| a | Plan name | COMMUNITY WHOLESALE TIRE 401(K) PLAN |
| b | Name of plan sponsor | COMMUNITY WHOLESALE TIRE DISTRIBUTING, INC. |
| c | EIN-PN | 43-0799202-001 |
| a | Plan name | COMPASS COMMERCIAL CONSTRUCTION GROUP 401(K) PLAN |
| b | Name of plan sponsor | COMPASS COMMERCIAL CONSTRUCTION GROUP |
| c | EIN-PN | 27-3042323-777 |
| a | Plan name | COMPASS RETIREMENT CONSULTING GROUP, INC. 401(K) PROFIT SHARING PLAN |
| b | Name of plan sponsor | COMPASS RETIREMENT CONSULTING GROUP, INC. |
| c | EIN-PN | 20-4795685-001 |
| a | Plan name | COMPASS STUDIO 401(K) PLAN |
| b | Name of plan sponsor | JP COMPASS CONSULTING AND CONSTRUCTION, INC. DBA COMPASS STUDIO |
| c | EIN-PN | 20-5387398-001 |
| a | Plan name | COMPASS WEALTH MANAGEMENT LLC 401(K) PROFIT SHARING PLAN |
| b | Name of plan sponsor | COMPASS WEALTH MANAGEMENT LLC |
| c | EIN-PN | 93-2719191-001 |

| 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 | COMPLETE AGRI SERVICES, INC. 401(K) PLAN | |
| b | Name of plan sponsor | COMPLETE AGRI SERVICES | c EIN-PN 46-2836066-001 |
| a | Plan name | DOORWAY HOME LOANS 401(K) PLAN | |
| b | Name of plan sponsor | INTERNATIONAL CITY MORTGAGE, INC. | c EIN-PN 33-0231744-001 |
| a | Plan name | DORIGNAC'S FOOD CENTER, LLC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | DORIGNAC'S FOOD CENTER, LLC | c EIN-PN 72-0575457-001 |
| a | Plan name | EMPLOYEE BENEFIT PLAN OF ARC OF DENVER, INC. | |
| b | Name of plan sponsor | ARC OF DENVER, INC. | c EIN-PN 84-0614525-001 |
| a | Plan name | FIRST CUT 401(K) PROFIT SHARING PLAN AND TRUST | |
| b | Name of plan sponsor | FIRST CUT SAWING AND BREAKING, INC. | c EIN-PN 86-0881313-333 |
| a | Plan name | FIRST ILLINOIS BANCORP., INC. PROFIT SHARING 401(K) PLAN AND TRUST | |
| b | Name of plan sponsor | FIRST ILLINOIS BANCORP., INC. | c EIN-PN 37-1057402-001 |
| a | Plan name | FIRST STATE BANK, CLUTE EMPLOYEE SAVINGS PLAN | |
| b | Name of plan sponsor | FIRST STATE BANK, CLUTE | c EIN-PN 74-1131733-001 |
| a | Plan name | FISHMAN PEDIATRIC DENTISTRY 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | ROSS H. FISHMAN, D.M.D., M.S., P.A. | c EIN-PN 45-5429730-001 |
| a | Plan name | GLOBALPUNDITS INC 401(K) PROFIT SHARING PLAN & TRUST | |
| b | Name of plan sponsor | GLOBALPUNDITS TECHNOLOGY CONSULTANCY, INC. | c EIN-PN 57-1093357-001 |
| a | Plan name | GMS MINE REPAIR & MAINTENANCE, INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | GMS MINE REPAIR & MAINTENANCE, INC. | c EIN-PN 52-1908118-001 |
| a | Plan name | NADIA YAKOOB & ASSOCIATES 401(K) PLAN & TRUST | |
| b | Name of plan sponsor | NADIA YAKOOB & ASSOCIATES | c EIN-PN 47-3377120-001 |
| a | Plan name | NUTRITION WELLNESS CENTER, LLC 401(K) PLAN | |
| b | Name of plan sponsor | NUTRITION WELLNESS CENTER, LLC | c EIN-PN 20-4979886-001 |

| 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 | NWGE 401(K) PLAN |
| b | Name of plan sponsor | NORTHWEST GENERAL ENGINEERING |
| c | EIN-PN | 68-0454297-001 |
| a | Plan name | O'CONNELL LANDSCAPE MAINTENANCE 401(K) PROFIT SHARING PLAN |
| b | Name of plan sponsor | O'CONNELL LANDSCAPE MAINTENANCE INC. |
| c | EIN-PN | 95-3141443-002 |
| a | Plan name | PAV 401(K) |
| b | Name of plan sponsor | PERFORMANCE AUDIO VIDEO, INC. |
| c | EIN-PN | 43-1988352-001 |
| a | Plan name | RANGER DIE, INC. 401(K) PLAN |
| b | Name of plan sponsor | RANGER DIE, INC. |
| c | EIN-PN | 38-1858884-001 |
| a | Plan name | RAPID TRUCK LINES, INC. 401(K) PLAN & TRUST |
| b | Name of plan sponsor | RAPID TRUCK LINES, INC. |
| c | EIN-PN | 90-0658441-001 |
| a | Plan name | ROCKY MOUNTAIN SCIENTIFIC LABORATORY 401(K) PLAN |
| b | Name of plan sponsor | ROCKY MOUNTAIN SCIENTIFIC LABORATORY |
| c | EIN-PN | 27-0395718-001 |
| a | Plan name | ROGERS TEAM LLC 401(K) PLAN |
| b | Name of plan sponsor | ROGERS TEAM LLC |
| c | EIN-PN | 45-3971423-001 |
| a | Plan name | ROME ENTERPRISES 401(K) PLAN |
| b | Name of plan sponsor | ROME ENTERPRISES, INC. D/B/A/ ROME BATH REMODELING |
| c | EIN-PN | 23-2651135-001 |
| a | Plan name | SES ENVIRONMENTAL 401(K) PLAN |
| b | Name of plan sponsor | SES ENVIRONMENTAL |
| c | EIN-PN | 62-1378603-002 |
| a | Plan name | SGI 401(K) PLAN |
| b | Name of plan sponsor | SGI |
| c | EIN-PN | 93-4216744-001 |
| a | Plan name | SOUND EFFECTS ENTERTAINMENT 401(K) RETIREMENT PLAN |
| b | Name of plan sponsor | SOUND EFFECTS, LLC DBA SOUND EFFECTS ENTERTAINMENT |
| c | EIN-PN | 20-8018181-001 |
| a | Plan name | SOUTHEASTERN MACHINE WORKS, INC. 401(K) PLAN |
| b | Name of plan sponsor | SOUTHEASTERN MACHINE WORKS, INC. |
| c | EIN-PN | 65-0940872-001 |

| 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 | T K CONCRETE, INC. 401(K) PLAN | |
| b | Name of plan sponsor | T K CONCRETE, INC. | c EIN-PN 39-1898532-001 |
| a | Plan name | T. AARON BUICE, M.D., P.C. 401(K) PLAN | |
| b | Name of plan sponsor | T. AARON BUICE, M.D., P.C. | c EIN-PN 20-0717378-001 |
| a | Plan name | TAG MANUFACTURING, INC. 401(K) PLAN | |
| b | Name of plan sponsor | TAG MANUFACTURING, INC. | c EIN-PN 72-1578630-001 |
| a | Plan name | TREASURE FIRE EQUIPMENT 401(K) PLAN | |
| b | Name of plan sponsor | TREASURE FIRE EQUIPMENT, INC. | c EIN-PN 87-0656861-001 |
| a | Plan name | TRESTLEWOOD 401(K) PLAN | |
| b | Name of plan sponsor | CANNON STRUCTURES, INC. DBA TRESTLEWOOD | c EIN-PN 34-1112308-001 |
| a | Plan name | TRI CONSTRUCTION CO., INC. 401(K) PLAN | |
| b | Name of plan sponsor | TRI CONSTRUCTION CO., INC. | c EIN-PN 04-2786413-001 |
| a | Plan name | TRI-RIVERS HEALTHCARE, PLLC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | TRI-RIVERS HEALTHCARE, PLLC | c EIN-PN 61-1357247-001 |
| a | Plan name | VISIT NEWPORT BEACH, INC. 401(K) PLAN | |
| b | Name of plan sponsor | VISIT NEWPORT BEACH, INC. | c EIN-PN 51-0225353-001 |
| a | Plan name | VISKOTEPAK 401(K) PLAN | |
| b | Name of plan sponsor | VISKOTEPAK, LLC | c EIN-PN 20-1267287-001 |
| a | Plan name | VISUAL WORKPLACE INC 401(K) PROFIT SHARING PLAN AND TRUST | |
| b | Name of plan sponsor | VISUAL WORKPLACE | c EIN-PN 26-4045453-001 |
| a | Plan name | WSA USA 401(K) PLAN | |
| b | Name of plan sponsor | WSA USA | c EIN-PN 27-4503720-001 |
| a | Plan name | ABOVE ALL CAULKING 401(K) PLAN | |
| b | Name of plan sponsor | ABOVE ALL CAULKING & WATERPROOFING, INC. | c EIN-PN 59-3790848-001 |

| 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 | ABSOLUTE QUALITY CARE FAMILY DENTISTRY 401(K) PLAN | |
| b | Name of plan sponsor | ABSOLUTE QUALITY CARE FAMILY DENTISTRY | c EIN-PN 72-1498951-001 |
| a | Plan name | ACADEMY MANAGEMENT COMPANY 401(K) PLAN | |
| b | Name of plan sponsor | ACADEMY MANAGEMENT COMPANY | c EIN-PN 45-2344235-001 |
| a | Plan name | ALISON M. SCAVUZZO, DMD, LLC 401(K) PLAN | |
| b | Name of plan sponsor | ALISON M. SCAVUZZO, DMD, LLC | c EIN-PN 20-2349756-001 |
| a | Plan name | ALL ENVIRONMENTAL, INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | ALL ENVIRONMENTAL, INC. | c EIN-PN 68-0288965-001 |
| a | Plan name | ASCEND DENTAL SERVICES, LLC 401(K) PLAN | |
| b | Name of plan sponsor | ASCEND DENTAL SERVICES, LLC | c EIN-PN 83-2589578-001 |
| a | Plan name | BEST CLEANERS, INC. RETIREMENT PLAN | |
| b | Name of plan sponsor | BEST CLEANERS, INC. | c EIN-PN 06-1333413-001 |
| a | Plan name | CFS PRODUCTS, INC. 401(K) PLAN | |
| b | Name of plan sponsor | CFS PRODUCTS, INC. | c EIN-PN 20-0692929-001 |
| a | Plan name | CHADE FASHIONS, INC. 401(K) PLAN | |
| b | Name of plan sponsor | CHADE FASHIONS, INC. | c EIN-PN 36-3203528-001 |
| a | Plan name | CONCRETE POLISHING & RESTORATION ACQUISITION, LLC 401(K) PLAN | |
| b | Name of plan sponsor | CONCRETE POLISHING & RESTORATION ACQUISITION, LLC | c EIN-PN 82-1776313-001 |
| a | Plan name | CYPRESS RISK MANAGEMENT 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | CYPRESS RISK MANAGEMENT | c EIN-PN 45-3934402-001 |
| a | Plan name | DOUGLAS MACHINES CORP 401(K) PROFIT SHARING PLAN AND TRUST | |
| b | Name of plan sponsor | DOUGLAS MACHINES CORP | c EIN-PN 59-1906520-001 |
| a | Plan name | DOUGLAS TELECOMMUNICATIONS, INC. 401(K) PLAN | |
| b | Name of plan sponsor | DOUGLAS TELECOMMUNICATIONS, INC. | c EIN-PN 94-3215975-001 |

| 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 DOUGLASS INDUSTRIES, INC. 401(K) PLAN | |
| b | Name of plan sponsor DOUGLASS INDUSTRIES | c EIN-PN 22-1912538-002 |
| a | Plan name DOWNEY AND COMPANY 401(K) PLAN | |
| b | Name of plan sponsor ROGER N. DOWNEY AGENCY, INC. DBA DOWNEY AND COMPANY | c EIN-PN 85-0274443-002 |
| a | Plan name ENGELHARDT DAIRY OF WISCONSIN, LLC 401(K) PLAN | |
| b | Name of plan sponsor ENGELHARDT DAIRY OF WISCONSIN, LLC | c EIN-PN 45-2174947-001 |
| a | Plan name ENVIRONMENTAL PROJECTS, INC. 401(K) SHARING PLAN | |
| b | Name of plan sponsor ENVIRONMENTAL PROJECTS, INC. | c EIN-PN 01-0525847-001 |
| a | Plan name FLOORGUARD, INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor FLOORGUARD, INC. | c EIN-PN 36-4027503-001 |
| a | Plan name GOFFWILSON, P.A. 401(K) PROFIT SHARING PLAN & TRUST | |
| b | Name of plan sponsor GOFFWILSON, P.A. | c EIN-PN 02-0372294-001 |
| a | Plan name GOOD FOUNDATIONS ACADEMY 401(K) AND PROFIT SHARING PLAN | |
| b | Name of plan sponsor GOOD FOUNDATIONS ACADEMY | c EIN-PN 36-4664197-001 |
| a | Plan name HEARING SOLUTIONS OF INDIANA 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor INNOVATIVE HEARING SOLUTIONS OF INDIANA, INC. | c EIN-PN 83-2099523-001 |
| a | Plan name HEARTLAND FOOD PRODUCTS GROUP, LLC 401(K) PLAN | |
| b | Name of plan sponsor TC HEARTLAND, LLC DBA HEARTLAND FOOD PRODUCTS GROUP | c EIN-PN 20-1938376-001 |
| a | Plan name IKP 401(K) PLAN | |
| b | Name of plan sponsor IKP FAMILY MEDICINE, P.A. | c EIN-PN 20-2412782-001 |
| a | Plan name ILLUMINATI LABS LLC 401(K) PLAN | |
| b | Name of plan sponsor ILLUMINATI LABS, LLC | c EIN-PN 46-5236544-001 |
| a | Plan name IMPERIAL ELECTRIC 401(K) PLAN & TRUST | |
| b | Name of plan sponsor IMPERIAL ELECTRIC CO, LLC | c EIN-PN 84-1793288-001 |

| 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 | JAY HODGE AUTO 401(K) PLAN | |
| b | Name of plan sponsor | JAY HODGE CHEVROLET, INC. | c EIN-PN 75-2466263-001 |
| a | Plan name | JD DOGGY, INC. 401(K) PLAN | |
| b | Name of plan sponsor | JD DOGGY, INC. | c EIN-PN 47-3843337-001 |
| a | Plan name | JDS PUMPING 401(K) PLAN | |
| b | Name of plan sponsor | JD'S PUMPING | c EIN-PN 20-3983639-001 |
| a | Plan name | JEANS' EXTRUSIONS 401(K) PLAN | |
| b | Name of plan sponsor | JEANS' EXTRUSIONS, INC. | c EIN-PN 35-1540242-001 |
| a | Plan name | JEFF COLEMAN INSURANCE AGENCY 401(K) PLAN | |
| b | Name of plan sponsor | JEFF COLEMAN INSURANCE AGENCY INC. | c EIN-PN 74-2992077-001 |
| a | Plan name | KNOTTS BUILDERS OF NC 401(K) PLAN | |
| b | Name of plan sponsor | KNOTTS BUILDERS OF NC, INC. | c EIN-PN 82-4670440-001 |
| a | Plan name | KNOX CONCRETE 401(K) PLAN | |
| b | Name of plan sponsor | KNOX CONCRETE, INC. | c EIN-PN 20-8658855-001 |
| a | Plan name | KOEHLER FARRY & COMPANY 401(K) PLAN | |
| b | Name of plan sponsor | KOEHLER FARRY & COMPANY, CPA, PA | c EIN-PN 59-3379212-001 |
| a | Plan name | LIVING INDEPENDENT IS FOR EVERYONE, INC. 401(K) PLAN AND TRUST | |
| b | Name of plan sponsor | LIVING INDEPENDENT IS FOR EVERYONE, INC. | c EIN-PN 27-4619816-001 |
| a | Plan name | LJP ARCHITECTS PC 401(K) PLAN | |
| b | Name of plan sponsor | LJP ARCHITECTS PC | c EIN-PN 87-2346679-001 |
| a | Plan name | LKN CAPITAL MORTGAGE 401(K) PLAN | |
| b | Name of plan sponsor | LKN MORTGAGE, INC. | c EIN-PN 85-1308374-001 |
| a | Plan name | LOH TAX GROUP 401(K) PLAN | |
| b | Name of plan sponsor | LOH TAX GROUP | c EIN-PN 26-2679374-001 |

| 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 MCLEOD LAND SERVICES 401(K) PLAN 1 | |
| b | Name of plan sponsor MCLEOD LAND & EQUIPMENT, INC. | c EIN-PN 65-0810917-001 |
| a | Plan name ME N ED'S PIZZA PARLOR 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor GENOVA MANAGEMENT GROUP, LLC | c EIN-PN 48-1253330-001 |
| a | Plan name ME N ED'S PIZZERIA 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor MILANO RESTAURANTS INTERNATIONAL CORPORATION | c EIN-PN 77-0426714-001 |
| a | Plan name MECHANICAL SPECIALTIES, LLC 401(K) PLAN | |
| b | Name of plan sponsor MECHANICAL SPECIALTIES, LLC | c EIN-PN 37-1489883-001 |
| a | Plan name ALLEGHENY MILLWORK 401(K) PLAN | |
| b | Name of plan sponsor ALLEGHENY MILLWORK | c EIN-PN 25-1369567-002 |
| a | Plan name ALLERGY & ASTHMA SPECIALISTS OF NORTH FLORIDA, P.A. 401(K) PROFIT SHARING PLAN AND TRUST | |
| b | Name of plan sponsor ALLERGY & ASTHMA SPECIALISTS OF NORTH FLORIDA, P.A. | c EIN-PN 20-3722480-001 |
| a | Plan name ALLIANCE CASTINGS COMPANY, LLC 401(K) SAVINGS & RETIREMENT PLAN | |
| b | Name of plan sponsor ALLIANCE CASTINGS COMPANY, LLC | c EIN-PN 20-0254788-001 |
| a | Plan name AVANTECH 401(K) PLAN | |
| b | Name of plan sponsor SELF GROUP USA, LLC | c EIN-PN 92-3663081-001 |
| a | Plan name AVANTS OPERATIONS, LLC 401(K) PLAN | |
| b | Name of plan sponsor AVANTS OPERATIONS, LLC | c EIN-PN 81-4997570-001 |
| a | Plan name AVERA & SMITH LLP 401K PROFIT SHARING PLAN | |
| b | Name of plan sponsor AVERA & SMITH LLP | c EIN-PN 54-2118084-001 |
| a | Plan name AZH MANAGEMENT LLC 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor AZH MANAGEMENT, LLC | c EIN-PN 87-1039988-001 |
| a | Plan name B & B EXTERMINATING COMPANY, INC. 401(K) PLAN | |
| b | Name of plan sponsor B & B EXTERMINATING CO., INC. | c EIN-PN 59-3485789-001 |

| 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 | BSB RETIREMENT READINESS 401(K) PLAN | |
| b | Name of plan sponsor | THE BIPPUS STATE BANK | c EIN-PN 35-0180140-001 |
| a | Plan name | CIRCLE COMPUTER RESOURCES, INC. 401(K) PLAN | |
| b | Name of plan sponsor | CIRCLE COMPUTER RESOURCES, INC. | c EIN-PN 42-1404024-001 |
| a | Plan name | DAIRY-MIX, INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | DAIRY-MIX, INC. | c EIN-PN 59-0659640-001 |
| a | Plan name | DAKINE SERVICES 401(K) PLAN | |
| b | Name of plan sponsor | DAKINE SERVICES, INC. | c EIN-PN 81-1390019-001 |
| a | Plan name | DAMM FINE CHICKEN LLC DBA DAVE'S HOT CHICKEN 401(K) PLAN | |
| b | Name of plan sponsor | DAMM FINE CHICKEN LLC DBA DAVE'S HOT CHICKEN | c EIN-PN 86-1240965-002 |
| a | Plan name | E&F PAVING CO, LLC 401(K) PLAN | |
| b | Name of plan sponsor | E&F PAVING CO, LLC | c EIN-PN 20-8741401-001 |
| a | Plan name | E-T-M ENTERPRISES I, INC. 401(K) PLAN & TRUST | |
| b | Name of plan sponsor | E-T-M ENTERPRISES I, INC. | c EIN-PN 38-3457372-001 |
| a | Plan name | E.M.B., INC. 401(K) PLAN | |
| b | Name of plan sponsor | LANDSCAPER'S DEPOT, INC. | c EIN-PN 02-0419465-001 |
| a | Plan name | E.R.F. ELECTRIC 401(K) PLAN | |
| b | Name of plan sponsor | E.R.F. ELECTRIC LLC DBA E.R.F. ELECTRIC | c EIN-PN 87-3746711-001 |
| a | Plan name | FLORIDA SPINE 401(K) PLAN | |
| b | Name of plan sponsor | FLORIDA SPINE ASSOCIATES, LLC | c EIN-PN 82-0835183-001 |
| a | Plan name | FLOW-LINE CONSTRUCTION, INC. 401(K) PLAN | |
| b | Name of plan sponsor | FLOW-LINE CONSTRUCTION | c EIN-PN 46-0730116-001 |
| a | Plan name | FONTENELLE & GOODREAU INSURANCE, LLC RETIREMENT PLAN | |
| b | Name of plan sponsor | FONTENELLE & GOODREAU INSURANCE, LLC | c EIN-PN 20-5889299-001 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| | (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | |
| a | Plan name FOOTHILL ENTERPRISES LP 401(K) PLAN | |
| b | Name of plan sponsor FOOTHILL ENTERPRISES LIMITED PARTNERSHIP | c EIN-PN 95-4836232-001 |
| a | Plan name GREENEYE TECHNOLOGIES, INC RETIREMENT PLAN | |
| b | Name of plan sponsor GREENEYE TECHNOLOGIES, INC | c EIN-PN 37-2004925-001 |
| a | Plan name GREENFIELD DYNAMICS, LLC RETIREMENT PLAN | |
| b | Name of plan sponsor GREENFIELD DYNAMICS, LLC | c EIN-PN 26-0597299-001 |
| a | Plan name GREENS OPERATIONS, INC. 401(K) PLAN | |
| b | Name of plan sponsor GREENS OPERATIONS, INC | c EIN-PN 47-3688571-001 |
| a | Plan name GREENVANS 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor GREENVANS, LLC | c EIN-PN 26-2343063-001 |
| a | Plan name IMPERIUM UTILITY SERVICES 401(K) PLAN | |
| b | Name of plan sponsor IMPERIUM UTILITY SERVICES, LLC | c EIN-PN 82-3004992-001 |
| a | Plan name INCAB AMERICA, LLC 401(K) PLAN | |
| b | Name of plan sponsor INCAB AMERICA, LLC | c EIN-PN 82-0671947-001 |
| a | Plan name JOHN P. FRANGIE, M.D., P.C. RETIREMENT PLAN | |
| b | Name of plan sponsor JOHN P. FRANGIE, M.D., P.C. | c EIN-PN 46-0538578-001 |
| a | Plan name JONESVILLE TOOL AND MANUFACTURING 401(K) PROFIT SHARING PLAN & TRUST | |
| b | Name of plan sponsor JONESVILLE TOOL AND MANUFACTURING, INC. | c EIN-PN 84-2214379-001 |
| a | Plan name LONZO LAW 401(K) PLAN | |
| b | Name of plan sponsor LONZO LAW, PLLC | c EIN-PN 83-3308962-001 |
| a | Plan name LOOMIS INTERNATIONAL, LTD. 401(K) PLAN | |
| b | Name of plan sponsor LOOMIS INTERNATIONAL, LTD | c EIN-PN 36-3361456-001 |
| a | Plan name LOVEHAIR RETIREMENT PLAN | |
| b | Name of plan sponsor LOVEHAIR COLOR & DESIGN INC. | c EIN-PN 45-1997295-001 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | | |
| a | Plan name MICHIGAN FENCE CO., INC. 401(K) PLAN | |
| b | Name of plan sponsor MICHIGAN FENCE CO., INC. | c EIN-PN 38-2266859-001 |
| a | Plan name MID-CITIES MOTOR FREIGHT, INC. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor MID-CITIES MOTOR FREIGHT, INC. | c EIN-PN 43-1119604-001 |
| a | Plan name OCEANWIDE PLAZA LLC 401(K) PLAN | |
| b | Name of plan sponsor OCEANWIDE PLAZA LLC | c EIN-PN 68-0683629-001 |
| a | Plan name OCEANWIDE RESORT HI LLC 401(K) PLAN | |
| b | Name of plan sponsor OCEANWIDE RESORT HI LLC | c EIN-PN 81-2988222-001 |
| a | Plan name OHANA NUI MANAGEMENT, INC. 401(K) PLAN | |
| b | Name of plan sponsor OHANA NUI MANAGEMENT, INC. | c EIN-PN 33-1091808-001 |
| a | Plan name PGS 401(K) PLAN | |
| b | Name of plan sponsor PRECISION GLOBAL SYSTEMS, INC. | c EIN-PN 38-2504223-001 |
| a | Plan name PIEDMONT CLASSICAL HIGH SCHOOL 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor PIEDMONT CLASSICAL HIGH SCHOOL | c EIN-PN 46-4228515-001 |
| a | Plan name PIENTA ENTERPRISES, INC. EMPLOYEES SAVINGS TRUST | |
| b | Name of plan sponsor PIENTA ENTERPRISES, INC. | c EIN-PN 38-2434419-001 |
| a | Plan name PIERCE CONSTRUCTION & DEVELOPMENT INC. RETIREMENT SAVINGS PLAN | |
| b | Name of plan sponsor PIERCE CONSTRUCTION & DEVELOPMENT, INC. | c EIN-PN 95-4504099-001 |
| a | Plan name RAZOR, USA, LLC EMPLOYEES' 401(K) PLAN | |
| b | Name of plan sponsor RAZOR, USA, LLC | c EIN-PN 95-4807765-001 |
| a | Plan name RC FURNITURE, INC. 401(K) PLAN | |
| b | Name of plan sponsor RC FURNITURE, INC. | c EIN-PN 95-4033862-001 |
| a | Plan name RCI 401(K) PLAN | |
| b | Name of plan sponsor ROTOLO CONSULTANTS, INC. | c EIN-PN 72-1285520-001 |

| Part II | Information on Participating Plans (to be completed by DFEs, other than DCGs) | |
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| | (Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.) | |
| a | Plan name SABOT TECHNOLOGIES, INC. 401(K) PLAN & TRUST | |
| b | Name of plan sponsor SABOT TECHNOLOGIES, INC. | c EIN-PN 68-0462138-001 |
| a | Plan name SAFE HARBOR 401(K) PROFIT SHARING PLAN FOR EMPLOYEES OF THE GUIDANCE CENTER, INC. | |
| b | Name of plan sponsor THE GUIDANCE CENTER, INC. | c EIN-PN 86-0223720-001 |
| a | Plan name SOUTHERN PACKAGING LLC 401(K) PROFIT SHARING PLAN AND TRUST | |
| b | Name of plan sponsor SOUTHERN PACKAGING LLC | c EIN-PN 72-1233979-001 |
| a | Plan name SOUTHERN PAINT & SUPPLY COMPANY 401(K) PLAN | |
| b | Name of plan sponsor SOUTHERN PAINT & SUPPLY COMPANY | c EIN-PN 59-0719579-001 |
| a | Plan name SOUTHWEST BUILDING RESOURCE 401(K) PLAN | |
| b | Name of plan sponsor SOUTHWEST BUILDING RESOURCE, LLC | c EIN-PN 47-3852420-001 |
| a | Plan name TELETRONICS SERVICES, INC. 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor TELETRONIC SERVICES, INC. | c EIN-PN 34-1317163-001 |
| a | Plan name TERRA-ACE INTERMEDIATE HOLDINGS, LLC DBA ACE FLUID SOLUTIONS 401(K) PLAN | |
| b | Name of plan sponsor TERRA-ACE INTERMEDIATE HOLDINGS, LLC DBA ACE FLUID SOLUTIONS | c EIN-PN 85-3687743-237 |
| a | Plan name TERRAGREEN, LLC 401(K) PLAN | |
| b | Name of plan sponsor TERRAGREEN LLC | c EIN-PN 26-4401221-001 |
| a | Plan name TEXARKANA OUTDOOR POWER EQUIPMENT 401(K) PLAN | |
| b | Name of plan sponsor TEXARKANA OUTDOOR POWER EQUIPMENT, LLC | c EIN-PN 47-3065907-001 |
| a | Plan name TRICIA VORDERSTRASSE MD PC 401(K) PROFIT SHARING PLAN AND TRUST | |
| b | Name of plan sponsor TRICIA VORDERSTRASSE MD PC | c EIN-PN 61-1521548-001 |
| a | Plan name TRINITY TELECOM LLC 401(K) PLAN | |
| b | Name of plan sponsor TRINITY TELECOM LLC | c EIN-PN 46-1635666-001 |
| a | Plan name WELL GO USA, INC. 401(K) PLAN | |
| b | Name of plan sponsor WELL GO USA, INC. | c EIN-PN 75-2542366-001 |

| 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 | ALLSAINTS USA LIMITED 401(K) PLAN | |
| b | Name of plan sponsor | ALLSAINTS USA LIMITED | c EIN-PN 98-0621566-001 |
| a | Plan name | ALPHA ENGINEERING, INC. 401(K) PLAN | |
| b | Name of plan sponsor | ALPHA ENGINEERING OF INDIANA, INC. DBA ALPHA ENGINEERING, INC. | c EIN-PN 35-1463178-001 |
| a | Plan name | B & B TRUCKING, INC. 401(K) PLAN | |
| b | Name of plan sponsor | B & B TRUCKING, INC. | c EIN-PN 38-2003867-002 |
| a | Plan name | B2B RETIREMENT 401(K) PLAN & TRUST | |
| b | Name of plan sponsor | B2B STAFFING SERVICES, INC. | c EIN-PN 20-4404038-001 |
| a | Plan name | BUDGET DRY WATERPROOFING INC. 401(K) PLAN | |
| b | Name of plan sponsor | BUDGET DRY WATERPROOFING, INC. | c EIN-PN 20-8805605-001 |
| a | Plan name | BULLINGTON ASSOCIATES INC 401K PROFIT SHARING PLAN | |
| b | Name of plan sponsor | BULLINGTON ASSOCIATES, INC. | c EIN-PN 62-0880010-001 |
| a | Plan name | BULTYNCK & CO. 401(K) PLAN | |
| b | Name of plan sponsor | BULTYNCK & CO., P.L.L.C. | c EIN-PN 20-3920878-777 |
| a | Plan name | CITY CLUB APARTMENTS, LLC RETIREMENT PLAN | |
| b | Name of plan sponsor | CITY CLUB APARTMENTS, LLC | c EIN-PN 81-1284363-001 |
| a | Plan name | CITYWIDE HOME HEALTH SERVICES, INC. 401(K) PLAN | |
| b | Name of plan sponsor | CITYWIDE HOME HEALTH SERVICES, INC. | c EIN-PN 26-1920951-001 |
| a | Plan name | DANSCO ENGINEERING LLC 401(K) PLAN | |
| b | Name of plan sponsor | DANSCO ENGINEERING LLC | c EIN-PN 04-3788074-001 |
| a | Plan name | DARWIN RESEARCH GROUP 401(K) PLAN | |
| b | Name of plan sponsor | DARWIN ADVISORY PARTNERS, LLC DBA DARWIN RESEARCH | c EIN-PN 27-3461316-001 |
| a | Plan name | EAP RETIREMENT SAVINGS PLAN | |
| b | Name of plan sponsor | ELEGANT ALUMINUM PRODUCTS USA LLC | c EIN-PN 46-3034570-001 |

| 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 | EAST VALLEY UROLOGY CENTER 401(K) PLAN | |
| b | Name of plan sponsor | EAST VALLEY UROLOGY CENTER, PLC | c EIN-PN 81-3825715-001 |
| a | Plan name | GRIMES HAWKINS GLADFELTER & GALVANO, P.L. 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | GRIMES HAWKINS GLADFELTER & GALVANO, P.L. | c EIN-PN 92-0185518-001 |
| a | Plan name | GUERRA GUTIERREZ MORTUARY, INC. 401(K) PLAN | |
| b | Name of plan sponsor | GUERRA GUTIERREZ MORTUARY, INC. | c EIN-PN 95-2748697-001 |
| a | Plan name | INDEPENDENT WORX, LLC 401(K) PLAN | |
| b | Name of plan sponsor | INDEPENDENT WORX, LLC | c EIN-PN 46-0946563-001 |
| a | Plan name | JOURNEYS INC. 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor | JOURNEYS INC. | c EIN-PN 46-3936603-001 |
| a | Plan name | LUBOVICH EXCAVATING, INC. RETIREMENT READINESS 401(K) PLAN | |
| b | Name of plan sponsor | LUBOVICH EXCAVATING, INC. | c EIN-PN 35-1972657-001 |
| a | Plan name | LUHRSEN GOLDBERG, LLC 401(K) PLAN | |
| b | Name of plan sponsor | LUHRSEN GOLDBERG, LLC | c EIN-PN 81-2579736-001 |
| a | Plan name | LUMBRA HARDWOODS INC. PROFIT SHARING PLAN | |
| b | Name of plan sponsor | LUMBRA HARDWOODS INC. | c EIN-PN 01-0284202-001 |
| a | Plan name | LUNA HOME CARE 401(K) PLAN | |
| b | Name of plan sponsor | LUNA HOME CARE LLC | c EIN-PN 83-1685194-001 |
| a | Plan name | MIDWEST EAR, NOSE & THROAT, HEAD & NECK SURGERY OF OWENSBORO, P.S.C. 401(K) PLAN | |
| b | Name of plan sponsor | MIDWEST EAR, NOSE & THROAT, HEAD & NECK SURGERY OF OWENSBORO, PSC | c EIN-PN 20-4753970-001 |
| a | Plan name | MILK SOURCE COMPANIES RETIREMENT PLAN | |
| b | Name of plan sponsor | MILK SOURCE, LLC | c EIN-PN 39-1954636-001 |
| a | Plan name | PIMMEX CONTRACTING RETIREMENT PLAN | |
| b | Name of plan sponsor | PIMMEX CONTRACTING CORPORATION | c EIN-PN 26-4017964-001 |

| 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 | PINNACLE BEHAVIORAL HEALTH 401(K) PLAN | |
| b | Name of plan sponsor | PINNACLE BEHAVIORAL HEALTH | c EIN-PN 20-3036602-001 |
| a | Plan name | PIPE CRAFT SAVINGS PLAN | |
| b | Name of plan sponsor | PIPE CRAFT, INC. | c EIN-PN 83-2329549-001 |
| a | Plan name | PITMAN, KALKHOFF & SICULA, S.C. 401(K) PLAN | |
| b | Name of plan sponsor | PITMAN, KALKHOFF & SICULA, S.C. | c EIN-PN 39-1475000-001 |
| a | Plan name | PIVOTAL HOUSING PARTNERS LLC 401(K) RETIREMENT SAVINGS PLAN | |
| b | Name of plan sponsor | PIVOTAL HOUSING PARTNERS LLC | c EIN-PN 81-4615424-001 |
| a | Plan name | REA & ASSOCIATES 401(K)/PROFIT SHARING PLAN | |
| b | Name of plan sponsor | REA & ASSOCIATES LLP | c EIN-PN 77-0164868-001 |
| a | Plan name | REALEFLOW, LLC 401(K) RETIREMENT PLAN | |
| b | Name of plan sponsor | REALEFLOW, LLC | c EIN-PN 20-8679477-001 |
| a | Plan name | REALEYES MEDIA, LLC 401(K) P/S PLAN | |
| b | Name of plan sponsor | REALEYES MEDIA, LLC | c EIN-PN 51-0491459-001 |
| a | Plan name | REASON CONSULTING CORPORATION 401(K) PLAN | |
| b | Name of plan sponsor | REASON CONSULTING CORPORATION | c EIN-PN 87-3746346-001 |
| a | Plan name | SAINT JOE DISTRIBUTING 401(K) PLAN | |
| b | Name of plan sponsor | ST. JOSEPH TOBACCO CO., LLC DBA SAINT JOE DISTRIBUTING | c EIN-PN 44-0565944-001 |
| a | Plan name | SALTER HEALY, LLC 401(K) PLAN | |
| b | Name of plan sponsor | SALTER HEALY, LLC | c EIN-PN 26-1337937-001 |
| a | Plan name | SPECTRUM LOGISTICS INC. 401(K) PLAN | |
| b | Name of plan sponsor | SPECTRUM LOGISTICS INC. | c EIN-PN 81-5106145-001 |
| a | Plan name | SPIEGEL & SPIEGEL PA MONEY PURCHASE PENSION PLAN & 401(K) PROFIT SHARING PLAN | |
| b | Name of plan sponsor | SAMCO PROPERTIES, INC. | c EIN-PN 59-2396906-001 |

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 | TEXAS STREET SHELL SERVICES INC. 401(K) PROFIT SHARING PLAN | c | EIN-PN | 33-0063098-001 |
| b | Name of plan sponsor | TEXAS STREET SHELL SERVICES INC | c | EIN-PN | 33-0063098-001 |
| a | Plan name | TFC MANUFACTURING, INC. RETIREMENT PLAN TRUST | c | EIN-PN | 91-1951857-001 |
| b | Name of plan sponsor | TFC MANUFACTURING, INC. | c | EIN-PN | 91-1951857-001 |
| a | Plan name | THA ARCHITECTS ENGINEERS 401(K) PLAN | c | EIN-PN | 38-1561901-002 |
| b | Name of plan sponsor | TOMBLINSON, HARBURN ASSOCIATES ARCHITECTS & PLANNERS, INC. | c | EIN-PN | 38-1561901-002 |
| a | Plan name | THE 401(K) PLAN | c | EIN-PN | 62-1714892-001 |
| b | Name of plan sponsor | E.B.T., INC. | c | EIN-PN | 62-1714892-001 |
| a | Plan name | TUCKER, ALBIN & ASSOCIATES 401(K) PLAN | c | EIN-PN | 32-0386771-001 |
| b | Name of plan sponsor | TUCKER, ALBIN & ASSOCIATES | c | EIN-PN | 32-0386771-001 |
| a | Plan name | TUFFALOY PRODUCTS 401(K) PLAN | c | EIN-PN | 38-1710357-002 |
| b | Name of plan sponsor | TUFFALOY PRODUCTS, INC. | c | EIN-PN | 38-1710357-002 |
| a | Plan name | WELSH FABRICATION & DESIGN, INC. 401(K) PROFIT SHARING PLAN | c | EIN-PN | 26-3962562-001 |
| b | Name of plan sponsor | WELSH FABRICATION & DESIGN, INC. | c | EIN-PN | 26-3962562-001 |
| 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 |
|--|--|--|

| | |
|---|--|
| For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024 | |
| A Name of plan AMERICAN FUNDS 2045 TARGET DATE RETIREMENT RET OPT | B Three-digit plan number (PN) 694 |
| 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 |
|---------------|--------------------------------------|

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

| | | (a) Beginning of Year | (b) End of Year |
|---|-----------------|-----------------------|-----------------|
| 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) | 131163558 | 158633990 |
| (14) Value of funds held in insurance company general account (unallocated contracts)..... | 1c(14) | | |
| (15) Other..... | 1c(15) | | |

| 1d Employer-related investments: | | (a) Beginning of Year | (b) End of Year |
|--|--------------|------------------------------|------------------------|
| (1) Employer securities..... | 1d(1) | | |
| (2) Employer real property..... | 1d(2) | | |
| e Buildings and other property used in plan operation..... | 1e | | |
| f Total assets (add all amounts in lines 1a through 1e)..... | 1f | 131163558 | 158633990 |
| 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 | 131163558 | 158633990 |

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) | | |
| (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) | 21183857 | |
| (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 | | 21183857 |

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) | 352581 | |
| (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) | | 352581 |
| j Total expenses. Add all expense amounts in column (b) and enter total | 2j | | 352581 |

Net Income and Reconciliation

| | | | |
|---|--------------|--|----------|
| k Net income (loss). Subtract line 2j from line 2d | 2k | | 20831276 |
| l Transfers of assets: | | | |
| (1) To this plan | 2l(1) | | 44449947 |
| (2) From this plan | 2l(2) | | 37810791 |

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 _____.