

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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

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

Part I Annual Report Identification Information

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

- A This return/report is for: a multiemployer plan, a multiple-employer plan, a single-employer plan, a DFE (specify) P, B This return/report is: the first return/report, the final return/report, an amended return/report, a short plan year return/report, C If the plan is a collectively-bargained plan, check here, D Check box if filing under: Form 5558, automatic extension, the DFVC program, special extension, E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here

Part II Basic Plan Information—enter all requested information

1a Name of plan: STATE STREET RUSSELL LARGE CAP VALUE INDEX RET ACCT
1b Three-digit plan number (PN): 171
1c Effective date of plan
2a Plan sponsor's name (employer, if for a single-employer plan): TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY
2b Employer Identification Number (EIN): 36-6071399
2c Plan Sponsor's telephone number: 319-355-6449
2d Business code (see instructions)

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

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

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

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

Form 5500 (2024) v. 240311

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

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

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

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

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

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

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

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

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

Receipt Confirmation Code _____

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

A Name of plan <u>STATE STREET RUSSELL LARGE CAP VALUE INDEX RET ACCT</u>	B Three-digit plan number (PN)	<u>171</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY</u>	D Employer Identification Number (EIN) <u>36-6071399</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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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	ARCHER SYSTEMS, LLC 401(K) PLAN
b	Name of plan sponsor	ARCHER SYSTEMS, LLC
c	EIN-PN	82-2145883-001
a	Plan name	ARMBRECHT & WIERENGA ORTHODONTICS PLC 401(K) PLAN
b	Name of plan sponsor	ARMBRECHT & WIERENGA ORTHODONTICS PLC
c	EIN-PN	38-2163006-001
a	Plan name	ARTEMIS CENTER FOR ALTERNATIVE TO DOMESTIC VIOLENCE 401(K) PLAN
b	Name of plan sponsor	ARTEMIS CENTER FOR ALTERNATIVE TO DOMESTIC VIOLENCE
c	EIN-PN	31-1120194-001
a	Plan name	BUFFALO VETERINARY PRACTICES 401(K) PLAN
b	Name of plan sponsor	PET DEGREE HOSPITAL PLLC
c	EIN-PN	81-2573552-001
a	Plan name	BUILDING INDUSTRY ASSOCIATION 401(K) PLAN
b	Name of plan sponsor	BUILDING INDUSTRY ASSOCIATION OF CLARK COUNTY
c	EIN-PN	91-0906923-001
a	Plan name	BUTLER, FITZGERALD & FIVESON, P.C. 401(K) PLAN
b	Name of plan sponsor	BUTLER, FITZGERALD & FIVESON, P.C.
c	EIN-PN	20-2841166-001
a	Plan name	CRAMERS' INC EMPLOYEE 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	CRAMERS' INC
c	EIN-PN	34-0671662-001
a	Plan name	CROWN CRAFTS, INC. 401(K) RETIREMENT SAVINGS PLAN
b	Name of plan sponsor	CROWN CRAFTS, INC.
c	EIN-PN	58-0678148-002
a	Plan name	CRSG CORPORATE PLAN
b	Name of plan sponsor	CONSTRUCTION AND REALTY SERVICES GROUP, INC.
c	EIN-PN	11-3552134-001
a	Plan name	ERS PLAN
b	Name of plan sponsor	UNIVERSAL SITE SERVICES
c	EIN-PN	94-1602345-001
a	Plan name	ERT DESIGN GROUP 401(K) PLAN
b	Name of plan sponsor	ERT DESIGN GROUP LLC
c	EIN-PN	46-2799256-001
a	Plan name	GLOBAL ASR CONSULTING, INC. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	GLOBAL ASR CONSULTING
c	EIN-PN	81-4948693-001

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 REPAIR GROUP, LLC PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	GLOBAL REPAIR GROUP, LLC	c EIN-PN 26-3998922-001
a	Plan name	GODLEY, GLAZER, & FUNK PLLC 401(K) PLAN	
b	Name of plan sponsor	GODLEY, GLAZER, & FUNK PLLC	c EIN-PN 84-4742362-001
a	Plan name	INTEGRATED SUPPORT SOLUTIONS 401(K) SAVINGS PLAN	
b	Name of plan sponsor	NASHEVE, INC.	c EIN-PN 20-8664693-001
a	Plan name	INTELLIPRO SERVICE MEP	
b	Name of plan sponsor	INTELLIPRO SERVICE INC.	c EIN-PN 83-3224197-001
a	Plan name	INTERNATIONAL PHOTOGRAPHY SERVICES INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	INTERNATIONAL PHOTOGRAPHY SERVICES INC.	c EIN-PN 13-4052934-001
a	Plan name	INTERTEK, LLC 401(K) PLAN	
b	Name of plan sponsor	INTERTEK, LLC	c EIN-PN 20-3491428-001
a	Plan name	LIVEWIRE ELECTRICAL SYSTEMS, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	LIVEWIRE ELECTRICAL SYSTEMS, INC.	c EIN-PN 46-1006222-001
a	Plan name	LONG ISLAND COMPREHENSIVE, PLLC CASH BALANCE PENSION PLAN	
b	Name of plan sponsor	LONG ISLAND COMPREHENSIVE MEDICAL CARE, PLLC	c EIN-PN 37-1654147-002
a	Plan name	NATIONAL AUTOMOTIVE ROADS FUEL ASSOCIATION MULTIPLE EMPLOYER PLAN	
b	Name of plan sponsor	NARFA	c EIN-PN 04-2279821-001
a	Plan name	NATIONAL WATER SERVICES 401(K) PLAN	
b	Name of plan sponsor	NATIONAL WATER SERVICES	c EIN-PN 35-2158046-222
a	Plan name	NCA RETIREMENT PLAN	
b	Name of plan sponsor	NEVADA CARDIOLOGY ASSOCIATES	c EIN-PN 88-0293130-001
a	Plan name	PETE & PETE CONTAINER SERVICE, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	PETE & PETE CONTAINER SERVICE, INC.	c EIN-PN 31-1548571-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name PETE & PETE CONTAINER SERVICE, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor PETE & PETE CONTAINER SERVICE, INC.	c EIN-PN 31-1548571-777
a	Plan name PFLUEGER, INC. SAVINGS & RETIREMENT PLAN	
b	Name of plan sponsor PFLUEGER, INC.	c EIN-PN 99-0219468-001
a	Plan name ROCKET COMPOSITES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ROCKET COMPOSITES, INC.	c EIN-PN 27-0395707-001
a	Plan name ROCKY MOUNTAIN BUSINESS SYSTEMS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ROCKY MOUNTAIN BUSINESS SYSTEMS, INC.	c EIN-PN 85-0330110-002
a	Plan name ROMAK IRON WORKS PROFIT SHARING PLAN	
b	Name of plan sponsor ROMAK IRON WORKS	c EIN-PN 94-1333435-001
a	Plan name ROY SAKUMA PRODUCTIONS, INC. 401(K) PLAN	
b	Name of plan sponsor ROY SAKUMA PRODUCTIONS, INC.	c EIN-PN 99-0173485-001
a	Plan name TAG GOALPATH SOLUTIONS 401(K) RETIREMENT PLAN EXCHANGE	
b	Name of plan sponsor ADMINISTRATIVE GROUP, LLC DBA TAG RESOURCES	c EIN-PN 62-1874768-001
a	Plan name TAKANO NAKAMURA LANDSCAPING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TAKANO NAKAMURA LANDSCAPING, INC.	c EIN-PN 99-0204144-001
a	Plan name TBC CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor TBC CONSTRUCTION INC	c EIN-PN 45-2195554-001
a	Plan name TURNER ENGINEERING CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TURNER ENGINEERING CORPORATION	c EIN-PN 20-3882870-002
a	Plan name A LA CARTE FOODS 401(K) PLAN	
b	Name of plan sponsor A LA CARTE	c EIN-PN 81-2972833-001
a	Plan name ASSISTANCE LEAGUE OF LOS ANGELES 401(K) PLAN	
b	Name of plan sponsor ASSISTANCE LEAGUE OF LOS ANGELES	c EIN-PN 95-1641960-001

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	BUX-MONT TRANSPORTATION 401(K) PLAN	
b	Name of plan sponsor	BUX-MONT TRANSPORTATION	c EIN-PN 23-1576223-001
a	Plan name	C & S DRAPERIES, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	C & S DRAPERIES, INC.	c EIN-PN 77-0072946-001
a	Plan name	CABRILLO HOLDINGS, LLC 401(K) PLAN	
b	Name of plan sponsor	CABRILLO HOLDINGS, LLC	c EIN-PN 35-2485780-001
a	Plan name	CADILLAC OF MAHWAH LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	CADILLAC OF MAHWAH LLC	c EIN-PN 01-0950579-001
a	Plan name	CADUCEUS HEALTHCARE 401(K) PLAN	
b	Name of plan sponsor	CADUCEUS HEALTHCARE	c EIN-PN 26-2585338-001
a	Plan name	CVR ASSOCIATES, INC. 401(K)	
b	Name of plan sponsor	CVR ASSOCIATES, INC.	c EIN-PN 04-3273457-777
a	Plan name	DALAD REALTY 401(K) PLAN	
b	Name of plan sponsor	DALAD REALTY COMPANY	c EIN-PN 34-1001816-001
a	Plan name	DANNIBLE & MCKEE, LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DANNIBLE & MCKEE, LLP	c EIN-PN 33-0996661-001
a	Plan name	EVERT & WEATHERSBY RETIREMENT PLAN	
b	Name of plan sponsor	EVERT & WEATHERSBY, LLC	c EIN-PN 58-1830721-001
a	Plan name	EXOTIC FASTENERS, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	EXOTIC FASTENERS, INC.	c EIN-PN 46-1551899-001
a	Plan name	GPA 401(K) PLAN	
b	Name of plan sponsor	GALVIN PRESERVATION ASSOCIATES, INC.	c EIN-PN 20-3998866-001
a	Plan name	GPDDC, LLC 401 (K) PLAN	
b	Name of plan sponsor	GRAMERCY PARK DIGESTIVE DISEASE CENTER, LLC	c EIN-PN 04-3769350-001

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	GRAPE EXPECTATIONS 401(K) PLAN	
b	Name of plan sponsor	GRAPE EXPECTATIONS	c EIN-PN 94-2423490-002
a	Plan name	GREAT MOUNTAIN PARTNERS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	GREAT MOUNTAIN PARTNERS LLC	c EIN-PN 84-3463093-001
a	Plan name	ISLAND PALM COMMUNITIES, LLC EMPLOYEES SAVINGS TRUST	
b	Name of plan sponsor	ISLAND PALM COMMUNITIES, LLC	c EIN-PN 20-1108750-001
a	Plan name	ISR OF LOUISIANA 401(K) PLAN	
b	Name of plan sponsor	ISR OF LOUISIANA	c EIN-PN 46-4028718-001
a	Plan name	LONSTEIN LAW OFFICE, P.C. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	LONSTEIN LAW OFFICE, P.C.	c EIN-PN 22-2788008-001
a	Plan name	LRP MANAGEMENT 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	LRP MANAGEMENT NY CORP	c EIN-PN 86-2827816-001
a	Plan name	LYMAN LAW FIRM 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LYMAN LAW FIRM	c EIN-PN 46-5291861-001
a	Plan name	MAGIC SLIDERS, LP INCENTIVE SAVINGS PLAN	
b	Name of plan sponsor	MAGIC SLIDERS, LP	c EIN-PN 13-3689453-001
a	Plan name	NELLA MEDIA GROUP, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	NELLA MEDIA GROUP, LLC	c EIN-PN 26-2724679-001
a	Plan name	NEW CLASSIC FURNITURE 401(K) PLAN	
b	Name of plan sponsor	NEW CLASSIC FURNITURE	c EIN-PN 33-0976223-001
a	Plan name	PLANNED RETIREMENT CONSULTANTS & ADMINISTRATORS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	PLANNED RETIREMENT CONSULTANTS & ADMINISTRATORS, LLC	c EIN-PN 22-2116608-002
a	Plan name	PLANSOURCE FINANCIAL SERVICES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	PLANSOURCE FINANCIAL SERVICES, INC.	c EIN-PN 59-3707284-001

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 RPA 401(K) PLAN	
b	Name of plan sponsor RADIOLOGICAL PHYSICS ASSOCIATES INC.	c EIN-PN 62-1442497-001
a	Plan name SACCO & FILLAS, LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SACCO & FILLAS, LLP	c EIN-PN 16-1706802-001
a	Plan name TBC CPAS P.C. PROFIT SHARING PLAN	
b	Name of plan sponsor TEAL, BECKER & CHIARAMONTE, CPAS P.C.	c EIN-PN 14-1624930-001
a	Plan name TECHNOFLO SYSTEMS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TECHNOFLO SYSTEMS	c EIN-PN 77-0557580-001
a	Plan name TEE BAR CORPORATION 401K PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor TEE BAR CORPORATION	c EIN-PN 14-1437138-001
a	Plan name TEKSECUTE TECHNOLOGY GROUP 401K PLAN	
b	Name of plan sponsor TEKSECUTE TECHNOLOGY GROUP, LLC	c EIN-PN 01-0548119-001
a	Plan name UNIVERSAL TANK & FABRICATION INC. 401(K) PLAN	
b	Name of plan sponsor UNIVERSAL TANK & FABRICATION INC.	c EIN-PN 94-4428204-001
a	Plan name UPSHIFT HR 401(K) PLAN	
b	Name of plan sponsor UPSHIFT HR	c EIN-PN 87-4055304-001
a	Plan name UPSTATE OB/GYN ASSOCIATES, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor UPSTATE OB/GYN ASSOCIATES, P.C.	c EIN-PN 14-1600870-001
a	Plan name URGENT CARE FOR KIDS 401(K) PLAN	
b	Name of plan sponsor URGENT CARE FOR KIDS, LLC	c EIN-PN 45-2438497-001
a	Plan name FLEET DRIVER SERVICE, INC. 401(K) PLAN	
b	Name of plan sponsor FLEET DRIVER SERVICE, INC.	c EIN-PN 45-3685803-333
a	Plan name FOREST HILLTOP CHIROPRACTIC ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor FOREST HILLTOP CHIROPRACTIC ASSOCIATES, INC.	c EIN-PN 25-1603610-001

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	FORM GRINDING TECH INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	FORM GRINDING TECH INC	c EIN-PN 38-3502129-001
a	Plan name	SLR SERVICE 401K PLAN	
b	Name of plan sponsor	SIGMA HEALTH REHAB LLC	c EIN-PN 30-0565417-001
a	Plan name	SOLIDUS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PRECISION EQUIPMENT SYSTEMS, LLC DBA SOLIDUS	c EIN-PN 46-5723146-001
a	Plan name	GREENWOOD MOTORS 401(K) RETIREMENT PLAN & TRUST	
b	Name of plan sponsor	GREENWOOD MOTORS	c EIN-PN 77-0560344-001
a	Plan name	GROWING GENERATIONS 401(K) PLAN	
b	Name of plan sponsor	GROWING GENERATIONS	c EIN-PN 95-4619204-001
a	Plan name	GUHROO 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	EXECUTIVE RESOURCE GROUP LLC DBA GUHROO	c EIN-PN 46-4868112-001
a	Plan name	HALLKEEN MANAGEMENT, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	HALLKEEN MANAGEMENT, INC.	c EIN-PN 04-3097814-001
a	Plan name	TERESI TRUCKING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TERESI TRUCKING, LLC	c EIN-PN 94-1712166-001
a	Plan name	TEXO MEMBERS 401(K) PLAN	
b	Name of plan sponsor	TEXO ABC/AGC, INC.	c EIN-PN 32-0274111-002
a	Plan name	THE BERRY MAN, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	THE BERRY MAN, INC.	c EIN-PN 77-0341777-001
a	Plan name	THE BOYLAND GROUP 401(K) SAVINGS PLAN	
b	Name of plan sponsor	BOYLAND AUTO ORLANDO, LLC	c EIN-PN 05-0546979-001
a	Plan name	THE CONGRESS LAKE COMPANY 401(K) PLAN	
b	Name of plan sponsor	THE CONGRESS LAKE COMPANY	c EIN-PN 34-0160950-001

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 HAWAII ONCOLOGY, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor HAWAII ONCOLOGY, INC.	c EIN-PN 81-2343960-001
a	Plan name HAWAII PACIFIC X-RAY CORPORATION 401(K) PLAN	
b	Name of plan sponsor HAWAII PACIFIC X-RAY CORPORATION	c EIN-PN 99-0250562-001
a	Plan name HDR REMODELING 401(K) PLAN & TRUST	
b	Name of plan sponsor HDR REMODELING	c EIN-PN 94-3204168-001
a	Plan name THE MOSSER GROUP EMPLOYEE SAVINGS PLAN & TRUST	
b	Name of plan sponsor WMOG, INC.	c EIN-PN 34-1133357-003
a	Plan name THE PRICE COMPANIES, INC. 401(K) PLAN	
b	Name of plan sponsor THE PRICE COMPANIES, INC.	c EIN-PN 71-0388495-001
a	Plan name THE PRISM GROUP, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE PRISM GROUP, LLC	c EIN-PN 80-0329401-001
a	Plan name ABC OF DELAWARE 401(K) PLAN	
b	Name of plan sponsor ASSOCIATED BUILDERS AND CONTRACTORS OF DELAWARE	c EIN-PN 51-0101352-333
a	Plan name JAY'S CUSTOM CABINETS 401(K) PLAN	
b	Name of plan sponsor JAY'S CUSTOM CABINETS, INC	c EIN-PN 26-1712172-001
a	Plan name JEFF'S PRESCRIPTION SHOP 401(K) PLAN	
b	Name of plan sponsor JEFF'S PRESCRIPTION SHOP	c EIN-PN 61-1051036-001
a	Plan name V & A INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor V & A INC.	c EIN-PN 26-3968624-001
a	Plan name ALABAMA GROCERS ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor ALABAMA GROCERS ASSOCIATION	c EIN-PN 63-1025911-333
a	Plan name ALCON ENTERTAINMENT, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ALCON ENTERTAINMENT	c EIN-PN 62-1674411-001

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	JR STRUCTURAL ENGINEERING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	JR STRUCTURAL ENGINEERING, INC.	c EIN-PN 94-3347891-001
a	Plan name	KAHUA 401(K) PLAN	
b	Name of plan sponsor	KAHUA INC.	c EIN-PN 27-0523308-001
a	Plan name	W.L. LOGAN TRUCKING CO. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	W.L. LOGAN TRUCKING CO.	c EIN-PN 34-1039888-001
a	Plan name	W.L. STATON PLUMBING, HEATING & COOLING, LLC 401(K) PLAN	
b	Name of plan sponsor	W.L. STATON PLUMBING, HEATING & COOLING, LLC	c EIN-PN 45-5074350-002
a	Plan name	W.M. GRACE CONSTRUCTION, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	W.M. GRACE CONSTRUCTION, INC.	c EIN-PN 43-0894463-002
a	Plan name	ATHERTON & ASSOCIATES LLP 401(K) PLAN	
b	Name of plan sponsor	ATHERTON & ASSOCIATES LLP	c EIN-PN 94-1239084-001
a	Plan name	MARIA SCHWARTZ, PC 401(K)	
b	Name of plan sponsor	MARIA SCHWARTZ, PC	c EIN-PN 82-1680509-001
a	Plan name	BEACON HOSPITAL MANAGEMENT, INC. 401(K) PLAN	
b	Name of plan sponsor	BEACON HOSPITAL MANAGEMENT, INC.	c EIN-PN 27-3174264-002
a	Plan name	MCPOWELL MANAGEMENT 401(K) PLAN	
b	Name of plan sponsor	MCPOWELL MANAGEMENT INC.	c EIN-PN 27-1410013-001
a	Plan name	MEDICAL SOCIETY OF DELAWARE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MEDICAL SOCIETY OF DELAWARE	c EIN-PN 51-0061011-333
a	Plan name	CALSOFT SYSTEMS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CALSOFT SYSTEMS	c EIN-PN 33-0593327-001
a	Plan name	CAMINO FEDERAL CREDIT UNION 401(K) PROFIT SHARING	
b	Name of plan sponsor	CAMINO FEDERAL CREDIT UNION	c EIN-PN 95-1676228-002

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	CAMPAIGN INBOX 401(K) PLAN	
b	Name of plan sponsor	CAMPAIGN INBOX LLC	c EIN-PN 82-0752905-001
a	Plan name	CAMRON PUBLIC RELATIONS U.S., LLC 401(K) PLAN	
b	Name of plan sponsor	CAMRON PUBLIC RELATIONS U.S., LLC	c EIN-PN 83-3466137-001
a	Plan name	CAPITAL AREA TITLE, LLC 401(K) PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor	CAPITAL AREA TITLE, LLC	c EIN-PN 20-4865361-001
a	Plan name	NEWBURY CONTRACTORS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NEWBURY CONTRACTORS, LLC	c EIN-PN 81-3308303-001
a	Plan name	OLE MEXICAN FOODS, INC. 401(K) PLAN	
b	Name of plan sponsor	OLE MEXICAN FOODS, INC.	c EIN-PN 58-1847060-001
a	Plan name	OM SHIV SAI GURU INC. PENSION PLAN	
b	Name of plan sponsor	OM SHIV SAI GURU INC.	c EIN-PN 26-2926035-777
a	Plan name	ONEPATH 401(K) GPS	
b	Name of plan sponsor	PLAN PROFESSIONALS, LLC D/B/A NPPG PLAN PROFESSIONALS	c EIN-PN 85-3213245-007
a	Plan name	PLATINUM DENTAL SPECIALTIES LLC 401(K) PLAN	
b	Name of plan sponsor	PLATINUM DENTAL SPECIALTIES LLC	c EIN-PN 27-1385150-001
a	Plan name	PLATINUM ELEPHANT, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PLATINUM ELEPHANT, INC.	c EIN-PN 27-3004527-001
a	Plan name	PLUTUS CAPITAL NY INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	PLUTUS CAPITAL NY INC.	c EIN-PN 82-2739089-001
a	Plan name	DAVIDSON BROTHERS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DAVIDSON BROTHERS, INC.	c EIN-PN 25-1488298-002
a	Plan name	DAYTON BEHAVIORAL CARE, LLC 401(K) PLAN	
b	Name of plan sponsor	DAYTON BEHAVIORAL CARE, LLC	c EIN-PN 20-0273590-001

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	DE MATTEI CONSTRUCTION INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	DE MATTEI CONSTRUCTION INC.	c EIN-PN 77-0210774-001
a Plan name	DEALERDNA	
b Name of plan sponsor	DEALERDNA, INC.	c EIN-PN 46-2762607-001
a Plan name	PURPLE USA INC. 401(K) SAVINGS PLAN	
b Name of plan sponsor	PURPLE USA, INC.	c EIN-PN 46-4128782-001
a Plan name	PWARE, LLC 401K PLAN	
b Name of plan sponsor	PWARE, LLC	c EIN-PN 83-4410439-001
a Plan name	DONIGER/BURROUGHS 401(K)	
b Name of plan sponsor	DONIGER/BURROUGHS	c EIN-PN 27-4329677-001
a Plan name	DRILLING SUPPLY & MANUFACTURING, INC. PROFIT SHARING PLAN	
b Name of plan sponsor	DRILLING SUPPLY & MANUFACTURING	c EIN-PN 74-1903853-001
a Plan name	DU PAGE SWIMMING CENTER 401(K) PLAN	
b Name of plan sponsor	DU PAGE SWIMMING CENTER, INC.	c EIN-PN 40-3733626-001
a Plan name	DYKE NELSON ARCHITECTURE LLC 401(K) PLAN	
b Name of plan sponsor	DYKE NELSON ARCHITECTURE LLC	c EIN-PN 45-4214031-001
a Plan name	SANDERS CANDY FACTORY, INC. 401(K) PLAN	
b Name of plan sponsor	SANDERS CANDY FACTORY, INC.	c EIN-PN 95-4248513-001
a Plan name	SANFORD'S SERVICE CENTER, INC. 401(K) RETIREMENT SAVINGS PLAN	
b Name of plan sponsor	SANFORD'S SERVICE CENTER, INC.	c EIN-PN 99-0209901-001
a Plan name	SCADA PRODUCTS, LLC 401(K) PLAN	
b Name of plan sponsor	SCADA PRODUCTS, LLC	c EIN-PN 61-1711852-001
a Plan name	FACTORY DIRECT SUPPLY WPB, LLC 401(K) PLAN	
b Name of plan sponsor	FACTORY DIRECT SUPPLY WPB LLC	c EIN-PN 46-2159293-001

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	FALCON TRADING COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FALCON TRADING COMPANY, INC.	c EIN-PN 94-2863170-001
a	Plan name	ATTAWAY SERVICES CAROLINA, INC. 401(K) PLAN	
b	Name of plan sponsor	ATTAWAY SERVICE CAROLINA, INC.	c EIN-PN 82-2912532-001
a	Plan name	AUTISM SPECTRUM CONSULTANTS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	AUTISM SPECTRUM CONSULTANTS, INC.	c EIN-PN 20-0401114-001
a	Plan name	MARSHALL RADIO TELEMETRY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MARSHALL RADIO TELEMETRY INC.	c EIN-PN 84-1377195-001
a	Plan name	MASSUMI + CONSOLI LLP 401(K) RETIREMENT PLAN AND TRUST	
b	Name of plan sponsor	MASSUMI + CONSOLI LLP	c EIN-PN 47-3294527-001
a	Plan name	MASSUMI + CONSOLI LLP EQUITY PARTNERS RETIREMENT PLAN AND TRUST	
b	Name of plan sponsor	MASSUMI + CONSOLI LLP	c EIN-PN 47-3294527-002
a	Plan name	MASTER SHEET METAL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MASTER SHEET METAL, INC.	c EIN-PN 99-0144725-001
a	Plan name	MATCHSTICK VENTURES LLC 401(K) PLAN	
b	Name of plan sponsor	MATCHSTICK VENTURES LLC	c EIN-PN 47-2994395-001
a	Plan name	MEEHLEIS MODULAR BUILDINGS, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	MEEHLEIS MODULAR BUILDINGS, INC.	c EIN-PN 94-2971321-002
a	Plan name	MERRELL LLC EMPLOYEE 401(K) PLAN	
b	Name of plan sponsor	MERRELL LLC	c EIN-PN 81-2931810-001
a	Plan name	BEST CONTRACTING SERVICES, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	BEST CONTRACTING SERVICES, INC.	c EIN-PN 95-3781209-001
a	Plan name	BETTER NEWSPAPERS INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BETTER NEWSPAPERS, INC.	c EIN-PN 37-1300470-001

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	NORTHWEST 401(K) BENEFITS GROUP	
b	Name of plan sponsor	SOUND FORD, INC	c EIN-PN 91-0906207-001
a	Plan name	CAPITAL DISTRICT ADVANCED DENTAL ARTS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CAPITAL DISTRICT ADVANCED DENTAL ARTS	c EIN-PN 27-1404048-001
a	Plan name	CAPRICORN SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	CAPRICORN SYSTEMS, INC.	c EIN-PN 58-2514176-002
a	Plan name	CARAVEL 401(K) PLAN	
b	Name of plan sponsor	CARAVEL SOLUTIONS INC.	c EIN-PN 27-3222605-001
a	Plan name	CARSON & ACASIO DENTAL OFFICE 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	CARSON & ACASIO DENTAL PARTNERSHIP	c EIN-PN 87-3791350-001
a	Plan name	CATARACT STEEL INDUSTRIES 401(K) PLAN	
b	Name of plan sponsor	COSTANZO'S WELDING INC. DBA CATARACT STEEL INDUSTRIES	c EIN-PN 16-1095041-001
a	Plan name	OPTIMUM THERAPEUTICS PT & OT PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	OPTIMUM THERAPEUTICS PT & OT PLLC	c EIN-PN 45-2839564-001
a	Plan name	OUTBOARD MOTOR SHOP 401(K) PLAN	
b	Name of plan sponsor	OUTBOARD MOTOR SHOP	c EIN-PN 94-3159599-001
a	Plan name	CHRISTINE LYNCH, MA, LPC, INC. 401(K) PLAN	
b	Name of plan sponsor	CHRISTINE LYNCH, MA, LPC INC.	c EIN-PN 84-1905388-001
a	Plan name	CLAIMS RESOURCE SERVICES, INC 401(K) PLAN & TRUST	
b	Name of plan sponsor	CLAIMS RESOURCE SERVICES, INC.	c EIN-PN 94-3241983-001
a	Plan name	PRESIDIO EMPLOYEE CO LLC 401(K) PLAN	
b	Name of plan sponsor	PRESIDIO EMPLOYEE CO LLC	c EIN-PN 82-5116779-001
a	Plan name	PRINT AND GRAPHICS RETIREMENT PLAN	
b	Name of plan sponsor	PRINTING INDUSTRIES ALLIANCE	c EIN-PN 16-1037029-001

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	DELTA CONSTRUCTORS, LLC 401(K) PLAN	
b	Name of plan sponsor	DELTA CONSTRUCTORS, LLC	c EIN-PN 37-1552952-001
a	Plan name	DENK, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	DENK, INC.	c EIN-PN 20-3746033-001
a	Plan name	DYNAMIC RESEARCH, INC. RETIREMENT PLAN	
b	Name of plan sponsor	DYNAMIC RESEARCH	c EIN-PN 95-3385947-001
a	Plan name	EAR MEDICAL GROUP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	EAR MEDICAL GROUP, P.A.	c EIN-PN 74-2283401-001
a	Plan name	EASTCOAST ENTERTAINMENT, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	EASTCOAST ENTERTAINMENT, INC.	c EIN-PN 54-1024623-001
a	Plan name	R&R DIRECT MAIL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	R&R DIRECT MAIL, INC.	c EIN-PN 11-2467943-002
a	Plan name	RABIN & BERDO, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	RABIN & BERDO, P.C.	c EIN-PN 52-1763604-001
a	Plan name	RAIDER OUTBOARDS 401(K) PLAN	
b	Name of plan sponsor	RAIDER OUTBOARDS INC.	c EIN-PN 47-3627794-001
a	Plan name	SDS STORES & SLS BIG BOY 401K PLAN	
b	Name of plan sponsor	SDS STORES & SLS BIG BOY RESTAURANTS	c EIN-PN 20-1759333-001
a	Plan name	SECRET CHARM 401(K) PLAN	
b	Name of plan sponsor	SECRET CHARM	c EIN-PN 73-1678960-001
a	Plan name	SESSUMS LAW GROUP, PA 401(K) SAVINGS PLAN	
b	Name of plan sponsor	SESSUMS LAW GROUP, PA	c EIN-PN 26-2276482-001
a	Plan name	FASHION ANGELS ENTERPRISES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	M&G PARTNERS, LLP DBA FASHION ANGELS ENTERPRISES	c EIN-PN 39-1724800-001

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 FERREIRA CONSTRUCTION CO., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor FERREIRA CONSTRUCTION CO., INC.	c EIN-PN 22-3334957-001
a	Plan name FERREIRA POWER GROUP, LLC 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor FERREIRA POWER GROUP, LLC	c EIN-PN 81-4055817-001
a	Plan name FORRESTALL PLAN	
b	Name of plan sponsor JEFF FORRESTALL CPA PC	c EIN-PN 58-2514091-333
a	Plan name FOX MANAGEMENT REHABILITATION SERVICES LLC, 401(K) PLAN	
b	Name of plan sponsor FOX MANAGEMENT REHABILITATION SERVICES, LLC	c EIN-PN 22-3729445-001
a	Plan name SPALDING HOSIERY SHOPPE, INC. 401(K) PLAN	
b	Name of plan sponsor THE SOCK SHOPPE, SPALDING HOSIERY SHOPPE, INC.	c EIN-PN 58-0899136-001
a	Plan name SPOONER RISK CONTROL SERVICES, INC. MULTIPLE EMPLOYER 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SURETY HR, INC.	c EIN-PN 82-1825780-003
a	Plan name SRC 401(K) PLAN	
b	Name of plan sponsor SRC SERVICES, INC.	c EIN-PN 77-0713955-001
a	Plan name ST. JOHN MEDICAL ENDEAVORS, INC. 401(K) PLAN	
b	Name of plan sponsor ST. JOHN MEDICAL ENDEAVORS, INC.	c EIN-PN 45-2411775-001
a	Plan name HANKOOK & COMPANY ES AMERICA RETIREMENT PLAN	
b	Name of plan sponsor HANKOOK & COMPANY ES AMERICA CORP	c EIN-PN 36-4858427-001
a	Plan name HANSEN & ROSASCO, LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HANSEN & ROSASCO LLP	c EIN-PN 84-4715027-001
a	Plan name HARBOR POINT REALTY 401(K) PLAN	
b	Name of plan sponsor HARBOR POINT REALTY & INVESTMENTS, LLC	c EIN-PN 54-2064398-001
a	Plan name HARCOURTS PACIFIC 401(K) PLAN	
b	Name of plan sponsor HARCOURTS PACIFIC, LLC	c EIN-PN 27-2915078-001

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	HARD SAFARI CORP 401(K)	
b	Name of plan sponsor	HARD SAFARI CORP.	c EIN-PN 47-1919954-001
a	Plan name	HARDLINE EQUIPMENT LLC 401(K) PLAN	
b	Name of plan sponsor	HARDLINE EQUIPMENT LLC	c EIN-PN 27-2085949-001
a	Plan name	THE EMPLOYEE 401(K) PLAN	
b	Name of plan sponsor	CORPORATE SOLUTIONS, INC.	c EIN-PN 74-2817774-333
a	Plan name	THE ENDODONTIC GROUP, LLC RETIREMENT PLAN	
b	Name of plan sponsor	THE ENDODONTIC GROUP, LLC	c EIN-PN 35-2318768-001
a	Plan name	HICKAM COMMUNITIES, LLC EMPLOYEES SAVINGS TRUST	
b	Name of plan sponsor	HICKAM COMMUNITIES, LLC	c EIN-PN 45-0530100-001
a	Plan name	THE WILHELM GROUP RETIREMENT PLAN & TRUST	
b	Name of plan sponsor	THE WILHELM GROUP RETIREMENT PLAN & TRUST	c EIN-PN 81-5035218-001
a	Plan name	THE WORTHE REAL ESTATE GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	THE WORTHE REAL ESTATE GROUP, INC.	c EIN-PN 95-4521084-001
a	Plan name	THOMAS D. BLORE ARCHITECT PC 401(K) PLAN	
b	Name of plan sponsor	THOMAS D. BLORE ARCHITECT PC	c EIN-PN 20-8781670-001
a	Plan name	THOMPSON & HARVEY BAY AREA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	THOMPSON & HARVEY BAY AREA, LLC	c EIN-PN 27-1531650-001
a	Plan name	ACQUIS CONSULTING GROUP, LLC RETIREMENT PLAN	
b	Name of plan sponsor	ACQUIS CONSULTING GROUP, LLC	c EIN-PN 13-3990791-002
a	Plan name	ADC LTD NM 401(K) PLAN	
b	Name of plan sponsor	ADC LTD NM	c EIN-PN 85-0464911-001
a	Plan name	ADC LTD NM UNION 401(K) PLAN	
b	Name of plan sponsor	ADC LTD NM	c EIN-PN 85-0464911-003

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	JEFFREY A. WELLER, D.D.S., PC 401(K) PLAN	
b	Name of plan sponsor	JEFFREY A. WELLER, D.D.S., PC	c EIN-PN 36-4052634-777
a	Plan name	JENKINS WOODWORKING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	JENKINS WOODWORKING, INC.	c EIN-PN 05-0419446-001
a	Plan name	JERMAN FAMILY DENTISTRY, LTD 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	JERMAN FAMILY DENTISTRY, LTD	c EIN-PN 31-1731223-001
a	Plan name	JMK GROUP, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	JMK GROUP, INC. DBA THE AGENCY	c EIN-PN 95-4133869-001
a	Plan name	VALLE MAKOFF LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	VALLE MAKOFF LLP	c EIN-PN 27-1587480-001
a	Plan name	VANGUARD ENERGY PARTNERS 401(K) PLAN	
b	Name of plan sponsor	VANGUARD ENERGY PARTNERS, LLC	c EIN-PN 26-4685348-002
a	Plan name	ALLEGEANT LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ALLEGEANT LLC	c EIN-PN 64-0955384-001
a	Plan name	ALLPRO CORPORATION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	ALLPRO CORPORATION	c EIN-PN 59-3347302-001
a	Plan name	ALLRED METAL PRODUCTS INC PROFIT SHARING PLAN	
b	Name of plan sponsor	ALLRED METAL PRODUCTS	c EIN-PN 86-0648390-001
a	Plan name	KESTREL TELLEVATE LLC 401(K) SAVINGS PLAN	
b	Name of plan sponsor	KESTREL TELLEVATE LLC	c EIN-PN 45-2180090-001
a	Plan name	KETTMANN MACHINING INC. RETIREMENT AND SAVINGS PLAN	
b	Name of plan sponsor	KETTMANN MACHINING INC.	c EIN-PN 26-4023756-001
a	Plan name	WALSH MECHANICAL 401(K) PLAN	
b	Name of plan sponsor	LEBEL INC. DBA WALSH MECHANICAL	c EIN-PN 04-2997565-001

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	AIMSUN, INC. 401(K) PLAN	
b	Name of plan sponsor	AIMSUN INC.	c EIN-PN 46-0525028-001
a	Plan name	ALTHON MICRO, INC. 401(K) PLAN	
b	Name of plan sponsor	ALTHON MICRO INC.	c EIN-PN 95-4285664-001
a	Plan name	ALVIN ARELLANO O. D. INC. 401(K) PLAN	
b	Name of plan sponsor	ALVIN ARELLANO O. D. INC.	c EIN-PN 26-0037948-001
a	Plan name	AMERICAN CONCRETE EMPLOYEE'S RETIREMENT PLAN	
b	Name of plan sponsor	AMERICAN CONCRETE, INC.	c EIN-PN 58-2060679-001
a	Plan name	B&S ELECTRIC SUPPLY CO., INC. DC PROFIT SHARING PLAN	
b	Name of plan sponsor	B&S ELECTRIC SUPPLY CO., INC.	c EIN-PN 58-1278855-001
a	Plan name	BADGER TRUCK & AUTOMOTIVE GROUP 401(K) PLAN	
b	Name of plan sponsor	BADGER TRUCK & AUTOMOTIVE GROUP	c EIN-PN 39-1044839-002
a	Plan name	BIANCELLA ENTERPRISES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BIANCELLA ENTERPRISES, INC.	c EIN-PN 22-2716653-001
a	Plan name	BIOTAP MEDICAL 401K RETIREMENT PLAN	
b	Name of plan sponsor	VERRALAB JA, LLC	c EIN-PN 45-4430352-001
a	Plan name	BLACK OPTICAL LLC 401(K) PLAN	
b	Name of plan sponsor	BLACK OPTICAL LLC	c EIN-PN 86-3692802-001
a	Plan name	BLUE DARNER GROUP, LTD PROFIT SHARING PLAN	
b	Name of plan sponsor	BLUE DARNER GROUP, LTD	c EIN-PN 20-3008356-001
a	Plan name	BLUE OPS, LLC 401(K) PLAN	
b	Name of plan sponsor	BLUE OPS, LLC	c EIN-PN 82-5030716-001
a	Plan name	BLUE RUNNER FOODS, INC. 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	BLUE RUNNER FOODS, INC.	c EIN-PN 72-1238130-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	CENTRAL CALIFORNIA CHILD DEVELOPMENT SERVICES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	CENTRAL CALIFORNIA CHILD DEVELOPMENT SERVICES, INC.	c EIN-PN 68-0025437-001
a	Plan name	CLEAR CAR CONCEPTS 401(K) PLAN	
b	Name of plan sponsor	CLEAR CAR CONCEPTS, LLC	c EIN-PN 47-2483599-001
a	Plan name	COASTAL REALTY ADVISORS, LLC 401(K) PLAN	
b	Name of plan sponsor	COASTAL REALTY ADVISORS, LLC	c EIN-PN 86-1887280-001
a	Plan name	DIGESTIVE CARE MEDICAL CENTER, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DIGESTIVE CARE MEDICAL CENTER, INC.	c EIN-PN 75-3037371-003
a	Plan name	DIRECT A/V 401K PLAN	
b	Name of plan sponsor	DIRECT A/V	c EIN-PN 95-4735867-003
a	Plan name	DISCLOSURE LAW GROUP RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	DISCLOSURE LAW GROUP	c EIN-PN 81-1103971-001
a	Plan name	DISCOVERY KIDS LEARNING CENTER 401(K) PLAN	
b	Name of plan sponsor	DISCOVERY KIDS LEARNING CENTER, INC.	c EIN-PN 16-1551791-001
a	Plan name	DISTRIBUTION-PUBLICATIONS, INC. 401(K) PLAN	
b	Name of plan sponsor	DISTRIBUTION-PUBLICATIONS, INC.	c EIN-PN 68-0448262-001
a	Plan name	EDGAR R. BLECKER, M.D., P.A. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BLECKER M.D. LLC	c EIN-PN 88-1935646-001
a	Plan name	EGGSHELL LIGHTING COMPANY, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	EGGSHELL LIGHTING COMPANY, INC.	c EIN-PN 99-0284485-001
a	Plan name	FERREIRA POWER SOUTH, LLC 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	FERREIRA POWER SOUTH 401(K)	c EIN-PN 88-2909820-001
a	Plan name	FERREIRA POWER WEST, LLC 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	FERREIRA POWER WEST LLC	c EIN-PN 83-3211774-001

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	FETTE FORD 401(K) PLAN	
b	Name of plan sponsor	FETTE FORD, INC.	c EIN-PN 22-1528045-001
a	Plan name	FINANCE ONE INC. 401(K) PLAN	
b	Name of plan sponsor	FINANCE ONE INC.	c EIN-PN 95-4713873-001
a	Plan name	FISHERIES SUPPLY CO. 401(K) PLAN	
b	Name of plan sponsor	FISHERIES SUPPLY CO.	c EIN-PN 91-0222320-001
a	Plan name	FIT CITY KIDS, LLC 401(K) PLAN	
b	Name of plan sponsor	FIT CITY KIDS, LLC	c EIN-PN 83-1387832-001
a	Plan name	FPMA 401(K) MULTIPLE EMPLOYER PLAN	
b	Name of plan sponsor	FLORIDA PODIATRIC MEDICAL ASSOCIATION	c EIN-PN 59-3134492-333
a	Plan name	FRIST 401(K) PLAN	
b	Name of plan sponsor	WILLIAM H. FRIST, MD	c EIN-PN 62-1497827-001
a	Plan name	HARRY WARREN OF GEORGIA 401(K) PLAN	
b	Name of plan sponsor	MCLEOD-PHILLIPS, LLC DBA HARRY WARREN OF GEORGIA	c EIN-PN 65-1179808-001
a	Plan name	HARRY WARREN, INC. RETIREMENT & SAVINGS PLAN	
b	Name of plan sponsor	HARRY WARREN, INC.	c EIN-PN 59-1523664-001
a	Plan name	HATTERAS PRESS, INC. 401(K) RETIREMENT PLAN & TRUST	
b	Name of plan sponsor	HATTERAS PRESS, INC.	c EIN-PN 22-2491250-001
a	Plan name	HAWAII DIAGNOSTIC RADIOLOGY SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor	HAWAII DIAGNOSTIC RADIOLOGY SERVICES, LLC	c EIN-PN 99-0143112-001
a	Plan name	HINSHAW, MARSH, STILL & HINSHAW, LLP PROFIT SHARING AND TAX DEFERRED SAVINGS PLAN	
b	Name of plan sponsor	HINSHAW, MARSH, STILL & HINSHAW, LLP	c EIN-PN 35-2447620-001
a	Plan name	HONOLULU BEERWORKS 401(K) PLAN	
b	Name of plan sponsor	HONOLULU BEERWORKS LLC	c EIN-PN 46-0821421-001

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 HOTEL MANAGEMENT OF NEW ORLEANS 401(K) PLAN	
b	Name of plan sponsor HOTEL MANAGEMENT OF NEW ORLEANS, L.L.C.	c EIN-PN 72-0848974-001
a	Plan name JOHN E. FOX, INC. 401(K) PLAN	
b	Name of plan sponsor JOHN E. FOX, INC.	c EIN-PN 56-1094403-001
a	Plan name JOHN MULLEN & COMPANY, INC. 401(K) RETIREMENT SAVINGS PLAN - PLAN A	
b	Name of plan sponsor JOHN MULLEN & COMPANY, INC.	c EIN-PN 99-0109877-001
a	Plan name KINGDOM TITLE SOLUTIONS, INC. 401(K) PLAN	
b	Name of plan sponsor KINGDOM TITLE SOLUTIONS, INC.	c EIN-PN 20-8646472-001
a	Plan name KIVU CONSULTING, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor KIVU CONSULTING, INC.	c EIN-PN 27-1257543-001
a	Plan name KJM DESIGN 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor KJM DESIGN	c EIN-PN 82-4415458-001
a	Plan name KNEGO CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor DAN KNEGO CONSTRUCTION, INC.	c EIN-PN 27-4440861-001
a	Plan name KOSHIBA & PRICE, AAL, ALC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KOSHIBA & PRICE, AAL, ALC	c EIN-PN 99-0173346-001
a	Plan name MAUER CHEVROLET 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor MAUER CHEVROLET	c EIN-PN 26-4600875-777
a	Plan name MCALLISTER, DETAR, SHOWALTER & WALKER, LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor MCALLISTER, DETAR, SHOWALTER & WALKER, LLC	c EIN-PN 47-4609056-001
a	Plan name MEYBOHM REALTORS, LLC PROFIT SHARING PLAN	
b	Name of plan sponsor MEYBOHM REALTORS, LLC	c EIN-PN 58-2508705-002
a	Plan name MIA 401(K) PLAN	
b	Name of plan sponsor MALAIS INSURANCE AGENCY, INC.	c EIN-PN 90-0181266-001

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	MIDWAY TRAILERS, INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	MIDWAY TRAILERS, INC.	c EIN-PN 43-1204852-002
a Plan name	NYFTA INC. 401(K) PLAN	
b Name of plan sponsor	NYFTA INC.	c EIN-PN 81-4187517-001
a Plan name	OBERG FREIGHT 401(K) RETIREMENT PLAN	
b Name of plan sponsor	OBERG FREIGHT	c EIN-PN 42-1233437-001
a Plan name	ODENKIRK PROVISSIERO CONSOLIDATED, LLC 401(K) PLAN	
b Name of plan sponsor	ODENKIRK PROVISSIERO CONSOLIDATED, LLC	c EIN-PN 27-0674406-002
a Plan name	OKLAHOMA HOME BUILDERS MEP 401(K)	
b Name of plan sponsor	OKLAHOMA HOME BUILDERS ASSOCIATION	c EIN-PN 73-0683222-333
a Plan name	P & I 401(K) AND PENSION PLAN	
b Name of plan sponsor	PERLITER & INGALSBE	c EIN-PN 95-2124423-003
a Plan name	PACIFIC AGGREGATE 401(K) PLAN	
b Name of plan sponsor	SPHERE, LLC DBA PACIFIC AGGREGATE	c EIN-PN 91-1937495-001
a Plan name	PACIFIC TRANSPORTATION LINES 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	PACIFIC TRANSPORTATION LINES, INC.	c EIN-PN 99-0269857-001
a Plan name	PAKLAB 401(K) RETIREMENT PLAN	
b Name of plan sponsor	PAKLAB	c EIN-PN 95-4109799-001
a Plan name	PRODUCT DEVELOPMENT ASSOCIATES RETIREMENT SAVINGS PLAN	
b Name of plan sponsor	PRODUCT DEVELOPMENT ASSOCIATES, INC.	c EIN-PN 41-1791080-001
a Plan name	PROFESSIONAL EYE ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	PROFESSIONAL EYE ASSOCIATES, INC.	c EIN-PN 58-1148820-001
a Plan name	PROJECT C.U.R.E., INC. 401(K) PLAN	
b Name of plan sponsor	PROJECT C.U.R.E., INC.	c EIN-PN 31-0804358-001

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 RAWLINSON ELECTRIC 401(K) PLAN	
b	Name of plan sponsor RAWLINSON ELECTRICAL CONSULTANTS	c EIN-PN 45-5383717-001
a	Plan name RCI 401(K) PLAN	
b	Name of plan sponsor ROTOLO CONSULTANTS, INC.	c EIN-PN 72-1285520-777
a	Plan name RED SKY STUDIOS, LLC 401(K) PLAN	
b	Name of plan sponsor RED SKY STUDIOS, LLC	c EIN-PN 46-4530150-001
a	Plan name SIGNALS AUDIO VIDEO, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SIGNALS AUDIO VIDEO, INC.	c EIN-PN 95-4602729-001
a	Plan name SITE SUPPLY, INC. 401(K) PLAN	
b	Name of plan sponsor SITE SUPPLY, INC.	c EIN-PN 31-1350146-001
a	Plan name SKINPATH SOLUTIONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SKINPATH SOLUTIONS, INC.	c EIN-PN 27-2341992-001
a	Plan name STACK VETERINARY HOSPITAL PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor STACK VETERINARY HOSPITAL, PLLC	c EIN-PN 30-0773499-777
a	Plan name STAG INDUSTRIAL MANAGEMENT LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor STAG INDUSTRIAL MANAGEMENT LLC	c EIN-PN 27-3647617-001
a	Plan name STARR, DARCY, AND STARR 401(K) PLAN	
b	Name of plan sponsor STARR, DARCY, AND STARR, P.C, CPA'S	c EIN-PN 22-2775971-001
a	Plan name STERLING HEALTHCARE LOGISTICS, LLC 401(K) PLAN	
b	Name of plan sponsor STERLING HEALTHCARE LOGISTICS, LLC	c EIN-PN 46-1843222-001
a	Plan name STEUBER CORPORATION 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor STEUBER CORPORATION	c EIN-PN 33-0436736-001
a	Plan name THE HOYT ORGANIZATION, INC. 401(K) PLAN	
b	Name of plan sponsor THE HOYT ORGANIZATION, INC.	c EIN-PN 33-0414128-001

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 THE JOE N. GUY COMPANY, INCORPORATED SAFE HARBOR 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JOE N. GUY COMPANY, INCORPORATED	c EIN-PN 58-1048254-001
a	Plan name THE LITTLE PLUMBER RETIREMENT PLAN	
b	Name of plan sponsor REDLANDS PLUMBING, HEATING & AIR CONDITIONING	c EIN-PN 95-0828993-001
a	Plan name THE LOUDERMILK COMPANIES, LLC 401(K) PLAN	
b	Name of plan sponsor THE LOUDERMILK COMPANIES, LLC	c EIN-PN 45-4095096-001
a	Plan name THOMPSON BROS PLUMBING 401K PLAN	
b	Name of plan sponsor THOMPSON BROS PLUMBING	c EIN-PN 37-1458920-001
a	Plan name TITUS PRECISION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TITUS PRECISION COMPANY	c EIN-PN 87-3842552-222
a	Plan name VINTNERS DISTRIBUTORS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor VINTNERS DISTRIBUTORS, INC.	c EIN-PN 94-3023379-005
a	Plan name VIRDI EYE CLINIC, P.C. 401(K) SAVINGS PLAN	
b	Name of plan sponsor VIRDI EYE CLINIC, P.C.	c EIN-PN 36-3313791-002
a	Plan name VN HOME HEALTH CARE RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor VN HOME HEALTH CARE	c EIN-PN 47-0921521-001
a	Plan name VONMOD 401(K) PLAN	
b	Name of plan sponsor VONMOD LTD.	c EIN-PN 26-0808367-222
a	Plan name WATERHOUSE, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor WATERHOUSE, INC.	c EIN-PN 99-0078238-003
a	Plan name WEINSTEIN CARNEGIE PHILANTHROPIC GROUP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WEINSTEIN CARNEGIE PHILANTHROPIC GROUP LLC	c EIN-PN 47-2616650-001
a	Plan name WEST GEORGIA EYE CARE CENTER PROFIT SHARING PLAN	
b	Name of plan sponsor WEST GEORGIA EYE CARE CENTER	c EIN-PN 58-1075293-001

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 WEST VALLEY PLATING, INC. 401(K) PLAN	
b	Name of plan sponsor WEST VALLEY PLATING, INC.	c EIN-PN 95-4850881-001
a	Plan name WILD, CARTER AND TIPTON A PROFESSIONAL CORP 401(K) PLAN	
b	Name of plan sponsor WILD, CARTER AND TIPTON A PROFESSIONAL CORP	c EIN-PN 94-2589967-002
a	Plan name AMERICAN MARINE SERVICES GROUP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor AMERICAN WORKBOATS, INC.	c EIN-PN 99-0164323-001
a	Plan name AMERICAN PILE AND FOUNDATION, LLC 401(K) PLAN	
b	Name of plan sponsor AMERICAN PILE AND FOUNDATION, LLC	c EIN-PN 32-0400145-001
a	Plan name BLUEBERRY BLVD., LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BLUEBERRY BLVD., LLC	c EIN-PN 11-3559983-001
a	Plan name BLUSH MED SPA 401(K) PLAN	
b	Name of plan sponsor BLUSH CT, LLC	c EIN-PN 83-2891621-001
a	Plan name BMR PARTNERS, INC. 401(K) PLAN	
b	Name of plan sponsor BMR PARTNERS, INC.	c EIN-PN 47-3763181-222
a	Plan name COLLINSON LAW, A PROFESSIONAL CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COLLINSON LAW, A PROFESSIONAL CORPORATION	c EIN-PN 26-2250142-001
a	Plan name COLUMBUS PACIFIC DEVELOPMENT LLC 401(K) PLAN	
b	Name of plan sponsor COLUMBUS PACIFIC DEVELOPMENT LLC	c EIN-PN 81-3151427-001
a	Plan name COLUMBUS PACIFIC PROPERTIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COLUMBUS PACIFIC PROPERTIES, INC.	c EIN-PN 31-1480429-003
a	Plan name EISINGER LAW 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor EISINGER, BROWN, LEWIS, FRANKEL & CHAIET	c EIN-PN 65-0642390-001
a	Plan name ELEMENT DESIGN GROUP 401(K) PLAN	
b	Name of plan sponsor EDC, INC.	c EIN-PN 03-0546249-001

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 ELEVATED SOLAR PERFORMANCE, INC. 401K PLAN	
b	Name of plan sponsor ELEVATED SOLAR PERFORMANCE, INC.	c EIN-PN 81-3830390-001
a	Plan name ELITE SALES AND SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor ELITE SALES AND SOLUTIONS, INC.	c EIN-PN 46-2503930-001
a	Plan name FURMAN & HAUSWIRTH 401 (K) PLAN	
b	Name of plan sponsor FURMAN & HAUSWIRTH CPAS	c EIN-PN 11-3134883-001
a	Plan name GAHCC 401(K) PLAN	
b	Name of plan sponsor GREATER AUSTIN HISPANIC CHAMBER OF COMMERCE	c EIN-PN 74-0492475-001
a	Plan name GARTH FISHER M.D., A MEDICAL CORP. PROFIT SHARING PLAN	
b	Name of plan sponsor GARTH FISHER M.D., A MEDICAL CORP.	c EIN-PN 95-4440917-001
a	Plan name HR PARTNERS 401(K) PLAN	
b	Name of plan sponsor HR PARTNERS, INC.	c EIN-PN 58-2394083-333
a	Plan name HUDDLE HOUSE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HUDDLE HOUSE, INC.	c EIN-PN 58-0916623-003
a	Plan name HUDSON COMMUNITY ENTERPRISES, INC. 401(K) PLAN	
b	Name of plan sponsor HUDSON COMMUNITY ENTERPRISES, INC.	c EIN-PN 22-1629147-001
a	Plan name IAI AMERICA, INC. 401(K) SALARY REDUCTION PLAN	
b	Name of plan sponsor IAI AMERICA, INC.	c EIN-PN 33-0337859-001
a	Plan name KUHANA ASSOCIATES, LLC 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor KUHANA ASSOCIATES, LLC	c EIN-PN 99-0335219-001
a	Plan name KUPFERER BROTHERS ORNAMENTAL IRON WORKS INC. 401(K) PLAN	
b	Name of plan sponsor KUPFERER BROTHERS ORNAMENTAL IRON WORKS INC	c EIN-PN 43-0709304-001
a	Plan name KUSTOM 401(K) PLAN	
b	Name of plan sponsor KUSTOMSCAPES & POOLS, LLC	c EIN-PN 84-2103194-001

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	LA MADE CREATIVE 401(K) PLAN	
b	Name of plan sponsor	LA MADE CREATIVE, INC.	c EIN-PN 47-1699482-001
a	Plan name	LAKE COUNTRY EYE CARE 401(K) PLAN	
b	Name of plan sponsor	LAKE COUNTRY EYE CARE, LLC	c EIN-PN 47-2254444-001
a	Plan name	LAKE HILL DENTAL CARE 401(K) PLAN	
b	Name of plan sponsor	LAKE HILL DENTAL CARE P.C.	c EIN-PN 83-1908844-001
a	Plan name	MINDFUL CHILD & FAMILY THERAPY 401(K) PLAN & TRUST	
b	Name of plan sponsor	MINDFUL CHILD & FAMILY THERAPY	c EIN-PN 83-2946180-001
a	Plan name	MOJO RISING 401(K) PLAN	
b	Name of plan sponsor	MOJO RISING DE, LLC	c EIN-PN 36-4903386-001
a	Plan name	MOM & POP MUSIC CO. LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MOM & POP MUSIC CO. LLC	c EIN-PN 26-2920997-001
a	Plan name	MONARCH SALES 401(K) PLAN	
b	Name of plan sponsor	MONARCH SALES, LTD., INC.	c EIN-PN 65-0011355-001
a	Plan name	PARKSIDE EQUITIES, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PARKSIDE EQUITIES, LLC	c EIN-PN 81-2783964-001
a	Plan name	PASADENA CHAMBER OF COMMERCE MEMBER RETIREMENT PLAN	
b	Name of plan sponsor	CHAMBER OF COMMERCE AND CIVIC ASSOCIATION OF PASADENA	c EIN-PN 95-0616125-002
a	Plan name	PASCO SOLUTIONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PASCO SOLUTIONS, INC.	c EIN-PN 83-3733664-001
a	Plan name	REINTJES & HITER CO., INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	REINTJES & HITER CO., INC.	c EIN-PN 48-0762809-001
a	Plan name	RESA POWER, LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	RESA POWER, LLC	c EIN-PN 45-2810331-001

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	STORMS DWORAK LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	STORMS DWORAK, LLC	c EIN-PN 46-2104644-001
a	Plan name	STRUCTURE VENTURES 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	STRUCTURE VENTURES LLC	c EIN-PN 47-2665838-001
a	Plan name	SUMMERTOWN METALS 401(K) PLAN	
b	Name of plan sponsor	SUMMERTOWN METALS, LLC.	c EIN-PN 84-1705951-001
a	Plan name	TOP HAT UNIFORM 401(K) PLAN	
b	Name of plan sponsor	TOP HAT UNIFORM, INC.	c EIN-PN 11-1979505-001
a	Plan name	TOSA PEDIATRICS, S.C. EMPLOYEES' RETIREMENT PLAN	
b	Name of plan sponsor	TOSA PEDIATRICS, S.C.	c EIN-PN 39-1387768-001
a	Plan name	TOTAL RETIREMENT SOLUTIONS POOLED EMPLOYER PLAN	
b	Name of plan sponsor	PLAN PROFESSIONALS, LLC D/B/A NPPG PLAN PROFESSIONALS	c EIN-PN 85-3213245-315
a	Plan name	BOS ENTERTAINMENT, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BOS ENTERTAINMENT, INC. DBA THE EXCHANGE	c EIN-PN 45-1962530-001
a	Plan name	BOSS COMMUNICATION TECHNOLOGIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BOSS COMMUNICATION TECHNOLOGIES, INC.	c EIN-PN 99-0259632-001
a	Plan name	BRADFORD INDEPENDENT INSURANCE AGENCIES, INC. 401(K) PLAN	
b	Name of plan sponsor	BRADFORD INDEPENDENT INSURANCE AGENCIES, INC.	c EIN-PN 11-2817906-001
a	Plan name	BRBC I, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	BRBC I, LLC	c EIN-PN 13-4246539-001
a	Plan name	CONSOLIDATED EMPLOYER SERVICES 401(K) PLAN	
b	Name of plan sponsor	CONSOLIDATED EMPLOYER SERVICES, INC.	c EIN-PN 47-2468992-001
a	Plan name	ELK GROVE RANCH, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ELK GROVE RANCH, LLC	c EIN-PN 95-2733525-001

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	ELM MANAGEMENT SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor	ELM MANAGEMENT SERVICES, LLC	c EIN-PN 82-2104879-001
a	Plan name	GASKINS LECRAW 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SOVEREIGNS ENGINEERING & SURVEYING HOLDINGS INC DBA GASKINS LECRAW	c EIN-PN 58-1500550-002
a	Plan name	IAMIC MEMBERSHIP RETIREMENT OPTION	
b	Name of plan sponsor	ILLINOIS ASSOCIATION OF MUTUAL INSURANCE COMPANIES	c EIN-PN 36-1252847-002
a	Plan name	ICON SIGN COMPANY 401(K)	
b	Name of plan sponsor	ICON ACQUISTIONS, LLC DBA ICON SIGN COMPANY	c EIN-PN 82-1771476-001
a	Plan name	LANDIVAR 401(K) PLAN	
b	Name of plan sponsor	LANDIVAR & ASSOCIATES, LLC	c EIN-PN 75-3088910-001
a	Plan name	LAW OFFICES OF FRED C COHEN PA 401(K) PLAN	
b	Name of plan sponsor	LAW OFFICES OF FRED C. COHEN P.A.	c EIN-PN 65-0219025-001
a	Plan name	MOONDANCE ADVENTURES, INC. 401(K) PLAN	
b	Name of plan sponsor	MOONDANCE ADVENTURES, INC.	c EIN-PN 58-2208578-001
a	Plan name	PAUL ANDERSON 401(K) PLAN	
b	Name of plan sponsor	PAUL ANDERSON YOUTH HOME, INC.	c EIN-PN 58-6041868-001
a	Plan name	PBS ASO, LLC RETIREMENT PLAN	
b	Name of plan sponsor	PBS ASO, LLC	c EIN-PN 85-0768284-001
a	Plan name	PBS PEO SERVICES, LLC RETIREMENT PLAN	
b	Name of plan sponsor	PBS PEO SERVICES	c EIN-PN 81-4175750-999
a	Plan name	RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	TAG RESOURCES, LLC	c EIN-PN 62-1874774-013
a	Plan name	RFC RETIREMENT PLAN	
b	Name of plan sponsor	ROMANOFF FLOOR COVERING, INC.	c EIN-PN 58-1349072-001

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 SUPERIOR STEEL PRODUCTS, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor SUPERIOR STEEL PRODUCTS, INC.	c EIN-PN 82-0484250-001
a	Plan name SURGICAL ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SURGICAL ASSOCIATES, INC.	c EIN-PN 99-0287995-002
a	Plan name TOURON LAW 401(K) PLAN	
b	Name of plan sponsor FRANCISCO TOURON III, LLC DBA TOURON LAW	c EIN-PN 26-3442183-001
a	Plan name WISE AUTO GROUP 401(K) MULTIPLE EMPLOYER PLAN	
b	Name of plan sponsor LLOYD A WISE MOTOR INC	c EIN-PN 26-2658328-001
a	Plan name WORKCENTRIC RETIREMENT SAVINGS PROGRAM	
b	Name of plan sponsor WORKCENTRIC, LLC	c EIN-PN 84-3894931-333
a	Plan name MPRM, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MPRM, LLC	c EIN-PN 95-4676804-001
a	Plan name MRC CREATIONS, LLC 401(K)	
b	Name of plan sponsor MRC CREATIONS, LLC	c EIN-PN 46-4236344-002
a	Plan name PDCA PROFIT SHARING PLAN	
b	Name of plan sponsor PERITONEAL DIALYSIS CENTER OF AMERICA	c EIN-PN 95-4430908-001
a	Plan name PELICAN CHAPTER - ASSOCIATED BUILDERS AND CONTRACTORS, INC 401(K) PLAN	
b	Name of plan sponsor ASSOCIATED BUILDERS & CONTRACTORS, INC. PELICAN CHAPTER	c EIN-PN 72-0885035-001
a	Plan name RIDGEMONT EQUITY PARTNERS 401(K) PLAN	
b	Name of plan sponsor RIDGEMONT EQUITY PARTNERS	c EIN-PN 27-2566095-001
a	Plan name RJL RESOURCES, INC. INCENTIVE SAVINGS PLAN	
b	Name of plan sponsor RJL RESOURCES, INC.	c EIN-PN 13-4199316-001
a	Plan name SYSTEMS, LLC RETIREMENT PLAN	
b	Name of plan sponsor C SYSTEMS, LLC	c EIN-PN 20-1820942-002

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	T & D MACHINE HANDLING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	T & D MACHINE HANDLING, INC.	c EIN-PN 58-1630426-001
a	Plan name	TAG GOALPATH SOLUTIONS 1 401(K) RETIREMENT PLAN EXCHANGE	
b	Name of plan sponsor	TAG RESOURCES, LLC	c EIN-PN 62-1874767-001
a	Plan name	TRUE NORTH CUSTOM PUBLISHING, LLC 401(K) PLAN	
b	Name of plan sponsor	TRUE NORTH CUSTOM PUBLISHING, LLC.	c EIN-PN 62-1764489-001
a	Plan name	TURN-KEY TUNNELING, INC 401(K) PLAN	
b	Name of plan sponsor	TURN-KEY TUNNELING, INC.	c EIN-PN 05-0620667-002
a	Plan name	ANTEZANA & ANTEZANA LLC PROFIT SHARING PLAN	
b	Name of plan sponsor	ANTEZANA & ANTEZANA LLC	c EIN-PN 52-2318393-001
a	Plan name	ANTIOCHIAN ORTHODOX CHRISTIAN ARCHDIOCESE 401(K) PLAN	
b	Name of plan sponsor	ANTIOCHIAN ORTHODOX ARCHDIOCESE	c EIN-PN 11-6007930-001
a	Plan name	BRIAN S. KUBO, DDS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BRIAN S. KUBO, DDS, INC.	c EIN-PN 99-0333085-001
a	Plan name	BROADWAY SMILES 401(K) PLAN	
b	Name of plan sponsor	BROADWAY SMILES	c EIN-PN 84-1525882-777
a	Plan name	BRYAN CHEVROLET, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BRYAN CHEVROLET LLC	c EIN-PN 72-0477660-001
a	Plan name	BUDGET HEATING, COOLING & PLUMBING, LLC 401(K) PLAN	
b	Name of plan sponsor	BUDGET AIR CONDITIONING, HEATING AND PLUMBING, LLC	c EIN-PN 26-4617777-001
a	Plan name	BUFFALO RIVER HEALTH CARE, LLC 401(K) PLAN	
b	Name of plan sponsor	BUFFALO RIVER HEALTH CARE, LLC	c EIN-PN 47-0896423-001
a	Plan name	COXSACKIE PHYSICAL THERAPY 401(K) PLAN	
b	Name of plan sponsor	COXSACKIE PHYSICAL THERAPY	c EIN-PN 05-0588304-001

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	EMPLOYER FLEXIBLE 401(K) PLAN	
b	Name of plan sponsor	EMPLOYER FLEXIBLE HR, LLC	c EIN-PN 27-4406361-333
a	Plan name	EMPOWER HR RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	EMPOWER HR	c EIN-PN 36-4115383-333
a	Plan name	GATEWAY DEMO/CIVIL CORP. 401(K) PLAN	
b	Name of plan sponsor	GATEWAY DEMO/CIVIL CORP.	c EIN-PN 13-2873389-001
a	Plan name	GEAUGA MECHANICAL COMPANY, INC. 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	GEAUGA MECHANICAL COMPANY, INC.	c EIN-PN 34-1296480-001
a	Plan name	INSPIRING HEALTHCARE RESOURCES 401(K) PLAN	
b	Name of plan sponsor	INSPIRING HEALTHCARE RESOURCES, LLC	c EIN-PN 45-0663989-001
a	Plan name	INSURANCE PROFESSIONALS OF TENNESSEE, LLC 401(K) PLAN	
b	Name of plan sponsor	INSURANCE PROFESSIONALS OF TENNESSEE, LLC	c EIN-PN 20-1340121-001
a	Plan name	INTEGRATED CONTROL SYSTEMS 401(K) PLAN	
b	Name of plan sponsor	INTEGRATED CONTROL SYSTEMS	c EIN-PN 62-1538849-002
a	Plan name	INTEGRATED EMPLOYER SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor	INTEGRATED EMPLOYER SOLUTIONS, INC.	c EIN-PN 87-0653068-333
a	Plan name	LEGON FODIMAN & SUDDUTH, P.A. PROFIT SHARING PLAN	
b	Name of plan sponsor	LEGON FODIMAN & SUDDUTH, P.A.	c EIN-PN 65-0520887-001
a	Plan name	LIBERTY RETIREMENT PLAN EXCHANGE	
b	Name of plan sponsor	PLAN PROFESSIONALS, LLC D/B/A NPPG PLAN PROFESSIONALS	c EIN-PN 85-3213245-777
a	Plan name	AOW CONSTRUCTION LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	AOW CONSTRUCTION LLC	c EIN-PN 83-2875089-001
a	Plan name	APPLIANCE CENTER OF TOLEDO, INC. RETIREMENT PLAN	
b	Name of plan sponsor	APPLIANCE CENTER OF TOLEDO, INC.	c EIN-PN 34-0924335-777

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	CHARLES E. THOMAS COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CHARLES E. THOMAS COMPANY, INC.	c EIN-PN 95-2280159-001
a	Plan name	EDISON MEDIA RESEARCH, INC. 401(K) PSP	
b	Name of plan sponsor	EDISON MEDIA RESEARCH, INC.	c EIN-PN 22-3305873-001
a	Plan name	JOE TANNER & ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	JOE TANNER & ASSOCIATES, INC.	c EIN-PN 58-2339665-001
a	Plan name	MONTIEL BROTHERS INC. 401(K) PLAN	
b	Name of plan sponsor	MONTIEL BROTHERS INC. D/B/A PALO VERDE HOMES	c EIN-PN 57-1238851-001
a	Plan name	SHAFERS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	COONEY, PARRIS & RIEKE CORPORATION	c EIN-PN 91-1862618-001
a	Plan name	SHANGRI-LA HOTELS INTERNATIONAL, INC. U.S. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	SHANGRI-LA INTERNATIONAL HOTELS, INC.	c EIN-PN 95-3876666-001
a	Plan name	TIME STRIPING, INC. 401K	
b	Name of plan sponsor	TIME STRIPING, INC.	c EIN-PN 71-0669392-333
a	Plan name	ZAUDERER ASSOCIATES, INC. 401(K) PLAN	
b	Name of plan sponsor	ZAUDERER ASSOCIATES, INC.	c EIN-PN 13-1820511-001
a	Plan name	ABC OF IOWA RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ABC OF IOWA	c EIN-PN 42-1029016-001
a	Plan name	ABILITIES FIRST, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	ABILITIES FIRST, INC.	c EIN-PN 14-1467427-002
a	Plan name	ABILITIES FIRST, INC. UNION 401(K) P/S PLAN	
b	Name of plan sponsor	ABILITIES FIRST, INC.	c EIN-PN 14-1467427-004
a	Plan name	MURPHY & HARTELIUS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MURPHY & HARTELIUS UNIFORMS	c EIN-PN 94-1712886-002

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	MY HR PROS 401(K) PLAN	
b	Name of plan sponsor	MY HR PROS	c EIN-PN 71-0772119-333
a	Plan name	NEW YORK ACCESSORY GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	NEW YORK ACCESSORY GROUP, INC.	c EIN-PN 13-4175959-002
a	Plan name	NEWCASTLE SHIPYARDS LLC 401(K) PLAN	
b	Name of plan sponsor	NEWCASTLE SHIPYARDS LLC	c EIN-PN 20-5267643-001
a	Plan name	ASSISTANCE LEAGUE OF LOS ANGELES 401(K) PLAN	
b	Name of plan sponsor	ASSISTANCE LEAGUE OF LOS ANGELES	c EIN-PN 95-1641960-001
a	Plan name	ASSOCIATIONS OF TEXAS MEP	
b	Name of plan sponsor	OMNIFY RETIREMENT LLC	c EIN-PN 74-1018556-002
a	Plan name	PERSONAL HEALTHCARE MANAGEMENT, LLC 401(K) PLAN	
b	Name of plan sponsor	PERSONAL HEALTHCARE MANAGEMENT, LLC 401(K) PLAN	c EIN-PN 27-3841580-001
a	Plan name	PETROLEUM MARKETING EQUIPMENT 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ACT EQUIPMENT SALES, INC. DBA PETROLEUM MARKETING EQUIPMENT	c EIN-PN 95-4442409-001
a	Plan name	RICHLINE GROUP, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	RICHLINE GROUP, INC.	c EIN-PN 26-0232774-001
a	Plan name	RIVIERA FINANCE, LLC 401(K) PLAN	
b	Name of plan sponsor	RIVIERA FINANCE, LLC	c EIN-PN 95-4572313-001
a	Plan name	BRIGHTON ESCROW, INC. 401(K) PLAN	
b	Name of plan sponsor	BRIGHTON ESCROW, INC.	c EIN-PN 95-2886413-001
a	Plan name	SHEATS & BAILEY, PLLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	SHEATS & BAILEY, PLLC	c EIN-PN 90-0781687-001
a	Plan name	SHOWALTER CONSTRUCTION COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SHOWALTER CONSTRUCTION COMPANY, INC.	c EIN-PN 56-1525236-001

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 CORE TECHNOLOGY SOLUTIONS, INC. 401(K) PLAN	
b	Name of plan sponsor CORE TECHNOLOGY SOLUTIONS, INC.	c EIN-PN 57-0918602-001
a	Plan name SPURLIN & SPURLIN, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SPURLIN & SPURLIN, LLC	c EIN-PN 58-2666339-001
a	Plan name SQUARE ENIX, INC. 401(K) PLAN	
b	Name of plan sponsor SQUARE ENIX, INC.	c EIN-PN 91-1442488-001
a	Plan name ELLENOS 401(K) PLAN	
b	Name of plan sponsor REAL GREEK LLC	c EIN-PN 45-5592934-001
a	Plan name EMPLOY SOURCE, INC. 401(K) PLAN	
b	Name of plan sponsor EMPLOY SOURCE, INC.	c EIN-PN 27-0477134-333
a	Plan name TOPCO SALES 401(K) PLAN	
b	Name of plan sponsor TOPCO SALES	c EIN-PN 45-5582989-001
a	Plan name TOWER HEMATOLOGY ONCOLOGY MEDICAL GROUP 401(K) PLAN	
b	Name of plan sponsor TOWER HEMATOLOGY ONCOLOGY MEDICAL GROUP	c EIN-PN 95-4363145-001
a	Plan name TRUE NORTH CUSTOM PUBLISHING, LLC 401(K) PLAN	
b	Name of plan sponsor TRUE NORTH CUSTOM PUBLISHING, LLC.	c EIN-PN 62-1764489-001
a	Plan name VALLEY HUNT CLUB FUTURE BENEFIT PLAN	
b	Name of plan sponsor VALLEY HUNT CLUB	c EIN-PN 95-1325050-002
a	Plan name HUTCHINSON AUTOMOTIVE, INC. 401(K) PLAN	
b	Name of plan sponsor HUTCHINSON AUTOMOTIVE, INC.	c EIN-PN 20-5463282-001
a	Plan name INFORMATION TECHNOLOGY PARTNERS 401(K) PLAN	
b	Name of plan sponsor INFORMATION TECHNOLOGY PARTNERS	c EIN-PN 39-1737556-001
a	Plan name KELLIHER/SAMETS, LTD. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KELLIHER/SAMETS, LTD.	c EIN-PN 03-0270393-001

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	GPDDC, LLC 401 (K) PLAN	
b	Name of plan sponsor	GRAMERCY PARK DIGESTIVE DISEASE CENTER, LLC	c EIN-PN 04-3769350-001
a	Plan name	GROUP MANAGEMENT SERVICES, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	GROUP MANAGEMENT SERVICES, INC.	c EIN-PN 34-1707723-001
a	Plan name	ISHR 401(K) PLAN	
b	Name of plan sponsor	ISHR, LLC.	c EIN-PN 26-1160348-333
a	Plan name	LIVING CARE LIFESTYLES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MILLENNIUM ADVISORS, INC. DBA LIVING CARE LIFESTYLES	c EIN-PN 91-1644545-001
a	Plan name	LOFTIN DENTAL 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TODD A. LOFTIN DDS A DENTAL CORPORATION, INC.	c EIN-PN 45-5257377-001
a	Plan name	LONG, TUMINELLO, BESSO, SELIGMAN, WERNER & SULLIVAN 401(K) PLAN	
b	Name of plan sponsor	LONG, TUMINELLO, BESSO, SELIGMAN, WERNER & SULLIVAN, LLP	c EIN-PN 11-2476602-001
a	Plan name	LONSTEIN LAW OFFICE, P.C. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	LONSTEIN LAW OFFICE, P.C.	c EIN-PN 22-2788008-001
a	Plan name	N.V. MORAN PLUMBING SUPPLY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	N.V. MORAN PLUMBING SUPPLY, INC.	c EIN-PN 94-2641538-001
a	Plan name	NARTKER, GRUNEWALD & CO 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NARTKER, GRUNEWALD, ESCHLEMAN AND COOPER, LLC	c EIN-PN 31-0872466-001
a	Plan name	ALTHON MICRO, INC. 401(K) PLAN	
b	Name of plan sponsor	ALTHON MICRO INC.	c EIN-PN 95-4285664-001
a	Plan name	NMS PROPERTY SERVICES CORP. 401(K)/PROFIT SHARING PLAN	
b	Name of plan sponsor	NMS PROPERTY SERVICES CORPORATION	c EIN-PN 95-4848549-001
a	Plan name	NOTTHOFF ENGINEERING L.A., INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	NOTTHOFF ENGINEERING L.A., INC.	c EIN-PN 26-4530407-001

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 EMPLOYEE SERVICES, LLC 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor PINNACLE EMPLOYEE SERVICES, LLC	c EIN-PN 47-1368882-333
a	Plan name PLANSOURCE FINANCIAL SERVICES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor PLANSOURCE FINANCIAL SERVICES, INC.	c EIN-PN 59-3707284-001
a	Plan name BUILDING INDUSTRY ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor BUILDING INDUSTRY ASSOCIATION OF CLARK COUNTY	c EIN-PN 91-0906923-001
a	Plan name BYRON PRODUCTS 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor BYRON PRODUCTS	c EIN-PN 31-1192208-001
a	Plan name CADUCEUS HEALTHCARE 401(K) PLAN	
b	Name of plan sponsor CADUCEUS HEALTHCARE	c EIN-PN 26-2585338-001
a	Plan name SK USA, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor SK AMERICAS, INC.	c EIN-PN 13-4187356-777
a	Plan name SMALL BUSINESS RETIREMENT PLAN EXCHANGE	
b	Name of plan sponsor SMALL BUSINESS RETIREMENT PLAN EXCHANGE	c EIN-PN 45-4813650-001
a	Plan name CROWN CRAFTS, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor CROWN CRAFTS, INC.	c EIN-PN 58-0678148-002
a	Plan name CRUICKSHANK, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CRUICKSHANK, INC.	c EIN-PN 58-1409679-001
a	Plan name SUCCESS ADVERTISING, INC. 401 (K) PROFIT SHARING PLAN	
b	Name of plan sponsor SUCCESS ADVERTISING, INC.	c EIN-PN 22-1919260-001
a	Plan name U.S. SMALL BUSINESS EXCHANGE 401(K) PLAN	
b	Name of plan sponsor OMNIFY RETIREMENT LLC	c EIN-PN 82-2083836-333
a	Plan name U.S. TECHNICAL CERAMICS, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor U.S. TECHNICAL CERAMICS, INC.	c EIN-PN 77-0333972-001

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 U3 ADVISORS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor U3 ADVISORS, INC.	c EIN-PN 46-4252021-001
a	Plan name VISIONARY PAYROLL SOLUTIONS, LLC 401(K) PLAN	
b	Name of plan sponsor VISIONARY PAYROLL SOLUTIONS, LLC	c EIN-PN 45-4077661-001
a	Plan name W. BRUCE CLARK M.D. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor W. BRUCE CLARK, M.D., P.C.	c EIN-PN 14-1659231-002
a	Plan name W.A. HAMMOND DRIERITE COMPANY 401(K) RETIREMENT PLAN	
b	Name of plan sponsor W.A. HAMMOND DRIERITE COMPANY, L.T.D.	c EIN-PN 31-1140535-002
a	Plan name FIGLIOZZI & COMPANY PC PROFIT SHARING PLAN	
b	Name of plan sponsor FIGLIOZZI & COMPANY, PC	c EIN-PN 11-2924109-001
a	Plan name FINALLY RESTAURANTS 401(K) PLAN	
b	Name of plan sponsor FINALLY, INC.	c EIN-PN 81-0541002-001
a	Plan name FIRST FREIGHT TRANSPORT, INC. 401(K) PLAN	
b	Name of plan sponsor FIRST FREIGHT TRANSPORT, INC.	c EIN-PN 16-1227272-001
a	Plan name FISCHER INSURANCE AGENCY 401(K) PLAN	
b	Name of plan sponsor PERPETUATION PARTNERS INC. DBA FISCHER INSURANCE AGENCY	c EIN-PN 81-2008716-001
a	Plan name AGC SELECT 401(K)	
b	Name of plan sponsor AGC SELECT 401(K)	c EIN-PN 74-0490820-002
a	Plan name AMERICAN HYDROPONICS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SUN CIRCLE, INC. DBA AMERICAN HYDROPONICS	c EIN-PN 68-0013191-001
a	Plan name AMIEE LYNN, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor AMIEE LYNN, INC.	c EIN-PN 65-1160566-001
a	Plan name BALDWINVILLE VILLAGE HARDWARE INC. 401(K) PLAN	
b	Name of plan sponsor BALDWINVILLE VILLAGE HARDWARE INC.	c EIN-PN 16-1185092-001

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 BASELINE THEATRICAL LLC 401(K) PLAN	
b	Name of plan sponsor BASELINE THEATRICAL LLC	c EIN-PN 46-4079204-001
a	Plan name COMMERCIAL SPECIALTY TRUCK HOLDINGS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COMMERCIAL SPECIALTY TRUCK HOLDINGS, LLC	c EIN-PN 46-5167460-001
a	Plan name COMSTOCK, CROSSER & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor COMSTOCK, CROSSER & ASSOCIATES DEVELOPMENT COMPANY, LLC	c EIN-PN 95-4665584-001
a	Plan name CONNICO, LLC 401(K) PLAN	
b	Name of plan sponsor CONNICO, LLC	c EIN-PN 87-4308617-001
a	Plan name DAY SECKLER LLP 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor DAY SECKLER LLP	c EIN-PN 26-2310586-001
a	Plan name EVENTS.COM 401(K) PLAN	
b	Name of plan sponsor EVENTS.COM	c EIN-PN 80-0488603-001
a	Plan name EXAKTIME INNOVATIONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor EXAKTIME INNOVATIONS, INC.	c EIN-PN 01-0552589-001
a	Plan name FLASH RAISE FUNDING 401(K) PLAN	
b	Name of plan sponsor FLASH RAISE FUNDING, LLC	c EIN-PN 87-2600294-001
a	Plan name FLOW-FX PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor ORTHOPEDIC GENERATIONS, LLC DBA FLOW-FX, LLC	c EIN-PN 37-1650185-001
a	Plan name HAIGHT LAW GROUP, PC 401(K) PLAN	
b	Name of plan sponsor HAIGHT LAW GROUP, PC	c EIN-PN 20-8962303-001
a	Plan name HAITONG INTERNATIONAL SECURITIES (USA) INC. 401(K) PLAN	
b	Name of plan sponsor HAITONG INTERNATIONAL SECURITIES (USA) INC.	c EIN-PN 20-1250173-001
a	Plan name LA MADE CREATIVE 401(K) PLAN	
b	Name of plan sponsor LA MADE CREATIVE, INC.	c EIN-PN 47-1699482-001

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 LAKHANI & JORDAN PC 401(K) PLAN	
b	Name of plan sponsor LAKHANI & JORDAN ENGINEERS, P.C.	c EIN-PN 13-3695218-003
a	Plan name LUMINUS DIAGNOSTICS, LLC 401(K) PLAN	
b	Name of plan sponsor LUMINUS DIAGNOSTICS, LLC	c EIN-PN 45-4133635-001
a	Plan name LYMAN LAW FIRM 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor LYMAN LAW FIRM	c EIN-PN 46-5291861-001
a	Plan name M&W DISTRIBUTION SERVICES, INC. TAX-FAVORED SAVINGS TRUST	
b	Name of plan sponsor M&W DISTRIBUTION SERVICES, INC.	c EIN-PN 58-1164068-001
a	Plan name NATIONAL RETIREMENT PLAN EXCHANGE	
b	Name of plan sponsor NATIONAL RETIREMENT PLAN EXCHANGE	c EIN-PN 45-4813651-001
a	Plan name OCEAN ELECTRIC CORPORATION 401(K) PLAN	
b	Name of plan sponsor OCEAN ELECTRIC CORPORATION	c EIN-PN 11-3172942-001
a	Plan name OHIO CONTRACTORS ASSOCIATION 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor OHIO CONTRACTORS ASSOCIATION	c EIN-PN 31-4269300-002
a	Plan name PNB REMITTANCE CENTERS INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PNB REMITTANCE CENTERS INC.	c EIN-PN 94-3136317-001
a	Plan name POLSINELLO FUELS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor POLSINELLO FUELS, INC.	c EIN-PN 14-1495096-002
a	Plan name SPECIALIZED ENGINEERING, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SPECIALIZED ENGINEERING, LLC.	c EIN-PN 68-0454280-001
a	Plan name SPECTRUM GROUP, LLC RETIREMENT PLAN	
b	Name of plan sponsor SPECTRUM GROUP MANAGEMENT, LLC	c EIN-PN 13-4060810-001
a	Plan name SPEECH & VOICE SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor SPEECH & VOICE SOLUTIONS	c EIN-PN 20-8174445-001

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 TECH TRADING PROFIT SHARING PLAN	
b	Name of plan sponsor TECH TRADING OF NEW YORK, INC.	c EIN-PN 14-1734227-001
a	Plan name UPSTATE OB/GYN ASSOCIATES, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor UPSTATE OB/GYN ASSOCIATES, P.C.	c EIN-PN 14-1600870-001
a	Plan name US POLYCHEMICAL CORPORATION SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor US POLYCHEMICAL CORPORATION	c EIN-PN 14-1424538-001
a	Plan name WESTERN INTEGRATED 401(K) PLAN	
b	Name of plan sponsor WESTERN INTEGRATED MATERIALS	c EIN-PN 26-0852608-003
a	Plan name ANN M. HASHITATE, D.D.S., INC 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor ANN HASHITATE, D.D.S. INC.	c EIN-PN 20-3665963-001
a	Plan name CH INSURANCE BROKERAGE SERVICES CO., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CH INSURANCE BROKERAGE SERVICES CO., INC.	c EIN-PN 16-1363572-001
a	Plan name DINO PUBLISHING 401(K) PLAN	
b	Name of plan sponsor DINO PUBLISHING	c EIN-PN 36-4353767-001
a	Plan name DIXON A.C. & R. CORPORATION 401(K) PLAN	
b	Name of plan sponsor DIXON A.C. & R. CORPORATION	c EIN-PN 24-0830389-001
a	Plan name FORTUNA ACE HARDWARE & GARDEN, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor FORTUNA ACE HARDWARE & GARDEN, INC.	c EIN-PN 20-2925828-001
a	Plan name JEFF WILSON POOL SERVICE, INC. 401(K) PLAN	
b	Name of plan sponsor JEFF WILSON POOL SERVICE, INC.	c EIN-PN 59-2596150-001
a	Plan name JETSON TV & APPLIANCE CENTERS, INC. 401(K) PLAN	
b	Name of plan sponsor JETSON TV & APPLIANCE CENTERS, INC.	c EIN-PN 59-1508381-001
a	Plan name MCCLAIN LABORATORIES, LLC 401(K) PLAN	
b	Name of plan sponsor MCCLAIN LABORATORIES, LLC	c EIN-PN 42-1600554-001

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 OVERTON, RUSSELL, DOERR AND DONOVAN, LLP 401(K) PLAN	
b	Name of plan sponsor OVERTON, RUSSELL, DOERR AND DONOVAN, LLP	c EIN-PN 14-1625607-001
a	Plan name PALADIN REALTY PARTNERS, LLC 401(K) PLAN	
b	Name of plan sponsor PALADIN REALTY PARTNERS, LLC	c EIN-PN 13-4303956-001
a	Plan name THE BROWNSTONE AGENCY 401(K) PLAN	
b	Name of plan sponsor BROWNSTONE AGENCY, INC.	c EIN-PN 13-2766983-001
a	Plan name THE GEHR GROUP, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE GEHR GROUP, INC.	c EIN-PN 80-0822974-001
a	Plan name WOMENS OB/GYN PC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WOMEN'S OB/GYN PC	c EIN-PN 81-0802359-001
a	Plan name BENEFITS AND PAYROLL, INC. MULTIPLE EMPLOYER 401(K) PLAN	
b	Name of plan sponsor BENEFITS AND PAYROLL, INC.	c EIN-PN 45-4965806-001
a	Plan name BEVERLY HILLS SPORTS COUNCIL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BEVERLY HILLS SPORTS COUNCIL, INC	c EIN-PN 95-4282114-001
a	Plan name DELAWARE ENGINEERING, D.P.C. 401(K) PLAN AND TRUST	
b	Name of plan sponsor DELAWARE ENGINEERING, D.P.C.	c EIN-PN 16-1370126-001
a	Plan name DELTA ZETA SORORITY SAVINGS INCENTIVE PLAN	
b	Name of plan sponsor DELTA ZETA SORORITY	c EIN-PN 35-0267676-001
a	Plan name DEM GROUP, LLC MULTIPLE EMPLOYER 401(K) PLAN	
b	Name of plan sponsor DEM GROUP, LLC	c EIN-PN 36-4625473-333
a	Plan name DEVELOPMENT COUNSELLORS INTERNATIONAL 401(K) SAVINGS PLAN	
b	Name of plan sponsor DEVELOPMENT COUNSELLORS INTERNATIONAL	c EIN-PN 13-1945303-005
a	Plan name HARRY WARREN, INC. RETIREMENT & SAVINGS PLAN	
b	Name of plan sponsor HARRY WARREN, INC.	c EIN-PN 59-1523664-001

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	HELPSIDE INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	HELPSIDE INC.	c EIN-PN 87-0476353-333
a	Plan name	MADISON AVENUE PHYSICIANS, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MADISON AVENUE PHYSICIANS, P.C.	c EIN-PN 13-4177864-001
a	Plan name	THE PEDIATRIC OFFICE, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	THE PEDIATRIC OFFICE, LLC	c EIN-PN 58-2646129-001
a	Plan name	THE POWER DOOR & EDWARDS EMPLOYEES' RETIREMENT PLAN	
b	Name of plan sponsor	POWER DOOR PRODUCTS, INC.	c EIN-PN 13-2746069-001
a	Plan name	DUKE MANUFACTURING 401(K) PLAN	
b	Name of plan sponsor	LS INVESTMENT GROUP LLC DBA DUKE MANUFACTURING	c EIN-PN 20-5110012-002
a	Plan name	HERITAGE PROPERTIES 401(K) PLAN	
b	Name of plan sponsor	NEW ENGLAND'S HERITAGE PROPERTIES, INC.	c EIN-PN 04-3585188-001
a	Plan name	HIGHROADS, LLC 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	SONGY HIGHROADS, LLC	c EIN-PN 45-4485594-001
a	Plan name	BLUSTEIN, SHAPIRO, FRANK & BARONE, LLP 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	BLUSTEIN, SHAPIRO, FRANK & BARONE, LLP	c EIN-PN 13-4065219-001
a	Plan name	HS1 MEDICAL MANAGEMENT, INC. 401(K) PLAN	
b	Name of plan sponsor	HS1 MEDICAL MANAGEMENT, INC.	c EIN-PN 65-0622851-001
a	Plan name	MINIMAL ACCESS SURGERY, INC. 401(K) PLAN	
b	Name of plan sponsor	MINIMAL ACCESS SURGERY, INC.	c EIN-PN 45-0521250-001
a	Plan name	MMR RESEARCH WORLD WIDE INC. 401(K) PLAN	
b	Name of plan sponsor	MMR RESEARCH WORLD WIDE INC.	c EIN-PN 01-0788273-001
a	Plan name	RICHFORD HEALTH CENTER, INC. 401(K) PLAN	
b	Name of plan sponsor	RICHFORD HEALTH CENTER, INC.	c EIN-PN 03-0215982-001

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	THE ROYSTER GROUP, INC. 401(K) PLAN	
b Name of plan sponsor	THE ROYSTER GROUP, INC.	c EIN-PN 58-2639075-001

a Plan name	THERMAL REFRIGERATION, INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	THERMAL REFRIGERATION, INC.	c EIN-PN 43-1598558-001

a Plan name	THOMAS LAVIN, INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	THOMAS LAVIN, INC.	c EIN-PN 95-4789663-001

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

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a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan STATE STREET RUSSELL LARGE CAP VALUE INDEX RET ACCT	B Three-digit plan number (PN) ▶ 171
C Plan sponsor's name as shown on line 2a of Form 5500 TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	D Employer Identification Number (EIN) 36-6071399

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

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	
(2) U.S. Government securities	1c(2)	
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B)	
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	
(10) Value of interest in pooled separate accounts	1c(10)	
(11) Value of interest in master trust investment accounts	1c(11)	
(12) Value of interest in 103-12 investment entities	1c(12)	
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	110097800
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	119630175
(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	110097800	119630175
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	110097800	119630175

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)	14987083	
(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		14987083

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

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		14987083
l Transfers of assets:			
(1) To this plan	2l(1)		16958553
(2) From this plan	2l(2)		22413261

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 _____.