

<p style="text-align: center;">Form 5500</p> <p style="font-size: small;">Department of the Treasury Internal Revenue Service</p> <hr/> <p style="font-size: small;">Department of Labor Employee Benefits Security Administration</p> <hr/> <p style="font-size: x-small;">Pension Benefit Guaranty Corporation</p>	<p>Annual Return/Report of Employee Benefit Plan</p> <p style="font-size: x-small;">This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).</p> <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	<p style="font-size: x-small;">OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: large; text-align: center;">2024</p> <hr/> <p style="text-align: center;">This Form is Open to Public Inspection</p>
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Part I Annual Report Identification Information
 For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A This return/report is for: a multiemployer plan a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)

a single-employer plan a DFE (specify) C

B This return/report is: the first return/report the final return/report

an amended return/report a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here.

D Check box if filing under: Form 5558 automatic extension the DFVC program

special extension (enter description)

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

Part II Basic Plan Information—enter all requested information

<p>1a Name of plan <u>YOURPATH PASSIVE 2030 MODERATE</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>209</u></p>
<p>2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>BENEFIT TRUST COMPANY</u></p> <p><u>5901 COLLEGE BLVD</u> <u>SUITE 100</u> <u>OVERLAND PARK, KS 66211</u></p>	<p>1c Effective date of plan</p> <hr/> <p>2b Employer Identification Number (EIN) <u>83-6725700</u></p> <p>2c Plan Sponsor's telephone number <u>913-319-0380</u></p> <p>2d Business code (see instructions)</p>

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

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

SIGN HERE			
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>08/25/2025</u>	<u>EMILY GOODALL</u>
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor BENEFIT TRUST COMPANY 5901 COLLEGE BLVD SUITE 100 OVERLAND PARK, KS 66211	3b Administrator's EIN 43-1971558 3c Administrator's telephone number 913-319-0380
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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
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5 Total number of participants at the beginning of the plan year	5	
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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	6a(1)
a(2) Total number of active participants at the end of the plan year	6a(2)
b Retired or separated participants receiving benefits.....	6b
c Other retired or separated participants entitled to future benefits	6c
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e
f Total. Add lines 6d and 6e	6f
g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	6g(1)
g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g(2)
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7
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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 <u> 0 </u> (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 0

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>YOURPATH PASSIVE 2030 MODERATE</u>	B Three-digit plan number (PN)	<u>209</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>BENEFIT TRUST COMPANY</u>	D Employer Identification Number (EIN) <u>83-6725700</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)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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d Entity code

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e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

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c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name ALLIANCE OF STATE RETAIL ASSOC 401(K) PL & TR - GOODMAN CLASSIC CONSTRUCTION	
b	Name of plan sponsor ASRA/ GOODMAN CLASSIC CONSTRUC	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOC 401(K) PL & TR - NORWELL KAPPYS INC 401(K) SAVINGS PLAN	
b	Name of plan sponsor ASRA/NORWELL KAPPYS INC 401(K)	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOC 401(K) PL&TR -MALDEN MAIN ST KAPPYS INC 401(K) SAVINGS PLAN	
b	Name of plan sponsor ASRA/MALDEN MAIN STREET KAPPYS	c EIN-PN 01-0165117-001
a	Plan name ALLIANCE OF STATE RETAIL ASSOC 401(K) PLAN & TRUST - RETAIL ASSOC OF MAINE	
b	Name of plan sponsor ASRA/RETAIL ASSOCIATION OF ME	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST - AFTERSHOCK VENTURES LLC	
b	Name of plan sponsor ASRA/AFTERSHOCK VENTURES LLC	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST - CORPORATE LOSS PREVENTION ASSOCIATES	
b	Name of plan sponsor ASRA/CORPORATE LOSS PREVENTION	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST - DANVERS KAPPYS INC 401K SAVINGS PLAN	
b	Name of plan sponsor ASRA/DANVERS KAPPYS INC 401K	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST - DENTAL SEARCH INC	
b	Name of plan sponsor ASRA/DENTAL SEARCH INC	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST - GROCERIES OF SOUTHERN ILLINOIS LLC	
b	Name of plan sponsor ASRA/GROCERIES OF SOUTHERN ILL	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST - MASS COMMERCIAL CLEANING INC	
b	Name of plan sponsor ASRA/MASS COMMERCIAL CLEANING	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST - METRO PT	
b	Name of plan sponsor ASRA/METRO PT	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST- MEXICAN RESTAURANT	
b	Name of plan sponsor ASRA/MEXICAN RESTAURANT	c EIN-PN 01-0165117-333

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 ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST - PEABODY KAPPYS INC 401K SAVINGS PLAN	
b	Name of plan sponsor ASRA/PEABODY KAPPYS INC 401K	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST AMERICAN SALE CORP	
b	Name of plan sponsor ASRA/AMERICAN SALE CORP	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST BEDFORD VILLAGE INN	
b	Name of plan sponsor ASRA/HOSPITALITY RESOURCES LLC	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST- FLIPPIN HOSPITALITY GROUP LLC	
b	Name of plan sponsor ASRA/FLIPPIN HOSPITALITY GROUP	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST- FRESH CITY RESTAURANT HOLDINGS	
b	Name of plan sponsor ASRA/FRESH CITY RESTAURANT HOL	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST- GREATWOODS LLC	
b	Name of plan sponsor ASRA/ GREATWOODS LLC	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST GWK ENTERPRISES INC	
b	Name of plan sponsor ASRA/GWK ENTERPRISES INC	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST INNOVATIVE DISTRIBUTION SERVICES	
b	Name of plan sponsor ASRA/INNOVATIVE DISTRIBUTION	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST- JROD INC	
b	Name of plan sponsor ASRA/JROD INC	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST- LOCAL GRINDS	
b	Name of plan sponsor ASRA/LOCAL GRINDS	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST- MAINE COMMUNITY HEALTH	
b	Name of plan sponsor ASRA/ MAINE COMMUNITY HEALTH O	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST PW PLUMMER & SONS INC	
b	Name of plan sponsor ASRA/PW PLUMMER & SONS INC	c EIN-PN 01-0165117-333

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 ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST- STANDARD PARTS CORPORATION PLAN	
b	Name of plan sponsor ASRA/STANDARD PARTS	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST -WASHINGTON RETAIL ASSOC	
b	Name of plan sponsor ASRA/WASHINGTON RETAIL ASSOC	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST WILCOXSON ENTERPRISES INC	
b	Name of plan sponsor ASRA/WILCOXSON ENTERPRISES INC	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-B&G BUILDING MATERIALS	
b	Name of plan sponsor ASRA/B&G BUILDING MATERIALS	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-BENSON AUTO CO INC	
b	Name of plan sponsor ASRA/BENSON AUTO CO INC	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-BLUE HILL MARKET INC	
b	Name of plan sponsor ASRA/BLUE HILL MARKET INC	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-DE FOODS LLC	
b	Name of plan sponsor ASRA/ DE FOODS LLC	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-FALMOUTH KAPPY'S INC 401K SAVINGS PLAN	
b	Name of plan sponsor ASRA/FALMOUTH KAPPYS	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-FIREHOUSE CENTER FOR THE ARTS	
b	Name of plan sponsor ASRA/FIREHOUSE CENTER FOR THE	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-HUTCHINSON OIL COMPANY LLC	
b	Name of plan sponsor ASRA/HUTCHINSON OIL COMPANY LL	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-HYANNIS KAPPY'S INC 401K SAVINGS PLAN	
b	Name of plan sponsor ASRA/HYANNIS KAPPYS INC	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-KAPPY'S RETIREMENT AND 401K SAVINGS PLAN	
b	Name of plan sponsor ASRA/KAPPYS RETIREMENT	c EIN-PN 01-0165117-333

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 ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-KOUNYADO INC DBA PETES PRODUCE PLAN	
b	Name of plan sponsor ASRA/ KOUNYADO INC DBA PETES	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-MALDEN ROUTE 1 KAPPY'S INC 401K SAVINGS PLAN	
b	Name of plan sponsor ASRA/MALDEN ROUTE 1 KAPPYS	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-ROWAN INC	
b	Name of plan sponsor ASRA/ROWAN INC	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-TOP FURNITURE INC	
b	Name of plan sponsor ASRA/ TOP FURNITURE INC	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-UPTOWN MANAGEMENT GROUP	
b	Name of plan sponsor ASRA/UPTOWN MANAGEMENT GROUP	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401K PLAN & TRUST-UNION FARM EQUIPMENT INC	
b	Name of plan sponsor ASRA/UNION FARM EQUIPMENT INC	c EIN-PN 01-0165117-333
a	Plan name ASSOCIATED GENERAL CONTRACTORS 401(K) PLAN AND TRUST	
b	Name of plan sponsor AGCM/AGC OF MAINE	c EIN-PN 01-0275734-333
a	Plan name ASSOCIATED GENERAL CONTRACTORS 401(K) PLAN AND TRUST	
b	Name of plan sponsor AGCM/BANCROFT CONTRACTING CORP	c EIN-PN 01-0275734-333
a	Plan name ASSOCIATED GENERAL CONTRACTORS 401K PLAN AND TRUST - THE PENOBSCOT COMPANY INC	
b	Name of plan sponsor AGCM/THE PENOBSCOT COMPANY INC	c EIN-PN 01-0275734-333
a	Plan name MAINE LAUNDRY CENTERS 401(K) PLAN	
b	Name of plan sponsor MAINE LAUNDRY CENTERS INC	c EIN-PN 01-0278548-001
a	Plan name MAINE COAST CONSTRUCTION CORP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MAINE COAST CONSTRUCTION CORP	c EIN-PN 01-0284822-001
a	Plan name YOUTH AND FAMILY OUTREACH 401(K) PLAN	
b	Name of plan sponsor CIACP/YOUTH AND FAMILY OUTREAC	c EIN-PN 01-0374579-001

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	GCA LOGGING INC 401K PLAN	
b	Name of plan sponsor	CIACP/GCA LOGGING INC 401K PL	c EIN-PN 01-0435334-001
a	Plan name	DESIGNHAUS INC 401(K) PLAN	
b	Name of plan sponsor	DESIGNHAUS INC	c EIN-PN 01-0558147-001
a	Plan name	BERGEN PLUMBING HEATING & COOLING INC 401(K) PLAN	
b	Name of plan sponsor	BERGEN PLUMBING INC	c EIN-PN 01-0789080-001
a	Plan name	MIDCOAST HUMANE 401K PLAN	
b	Name of plan sponsor	CIACP/MIDCOAST HUMANE 401K	c EIN-PN 01-6021200-002
a	Plan name	APR & R LLC 401(K) PLAN	
b	Name of plan sponsor	APR & R LLC DBA NEW ENGLAND	c EIN-PN 02-0324866-001
a	Plan name	SPACE METRICS INC 401(K) PLAN	
b	Name of plan sponsor	SPACE METRICS INC	c EIN-PN 02-0717122-001
a	Plan name	CITY TIRE COMPANY INC 401(K) PLAN	
b	Name of plan sponsor	CITY TIRE COMPANY INC	c EIN-PN 04-2019114-001
a	Plan name	401(K) PROFIT-SHARING PLAN FOR EMPLOYEES OF WORK OPPORTUNITY CENTER INC	
b	Name of plan sponsor	GWCCP/401(K) PROFIT-SHARING PL	c EIN-PN 04-2467188-001
a	Plan name	CHARLIES 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	CRAIP/CHARLIES 401(K) RETIREM	c EIN-PN 04-2535785-001
a	Plan name	HINGHAM ENDODONTICS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HINGHAM ENDODONTICS INC	c EIN-PN 04-2551029-002
a	Plan name	WALTER SMITH PLUMBING AND HEATING INC 401(K) PLAN	
b	Name of plan sponsor	WALTER SMITH PLUMBING	c EIN-PN 04-2704730-001
a	Plan name	ACE AUTO AND PLATE GLASS CO INC 401(K) PLAN	
b	Name of plan sponsor	AMRP/ACE AUTO AND PLATE GLASS	c EIN-PN 04-2774451-001

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 NOVA PSYCHIATRIC SERVICES 401(K) PLAN	
b	Name of plan sponsor SXPCP/NOVA PSYCHIATRIC SERVICE	c EIN-PN 04-3303141-001
a	Plan name SOLEX PAYROLL SYSTEMS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SXPCP/SOLEX PAYROLL SYSTEMS	c EIN-PN 04-3430103-001
a	Plan name ESCANDON FERNICOLA ANDERSON & COVELLI LLC 401(K) PLAN	
b	Name of plan sponsor ESCANDON FERNICOLA ANDERSON &	c EIN-PN 04-3681801-001
a	Plan name CHESAPEAKE BEHAVIORAL HEALTH CENTER LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor CHESAPEAKE BEHAVIORAL HEALTH	c EIN-PN 04-3807885-001
a	Plan name JD CEMENT 401(K) PLAN	
b	Name of plan sponsor JD CEMENT WORKS INC	c EIN-PN 05-0458292-001
a	Plan name SAFE HARBOR 401K FBO GREENDALE PHYSICAL THERAPY	
b	Name of plan sponsor GREENDALE PHYS THERAPY 401K PL	c EIN-PN 05-0524568-001
a	Plan name CI DINING SERVICES 401(K) PLAN	
b	Name of plan sponsor CORPORATE IMAGE DINING SERVICE	c EIN-PN 06-0774884-001
a	Plan name JACI CARROLL STAFFING 401(K) PLAN	
b	Name of plan sponsor JACI CARROLL STAFFING	c EIN-PN 06-1065435-001
a	Plan name SIMMONS QUALITY HOME IMPROVEMENT INC 401(K) PLAN	
b	Name of plan sponsor SIMMONS QUALITY HOME	c EIN-PN 06-1266307-001
a	Plan name SINCLAIR INSURANCE GROUP INC AND AFFILIATES 401(K) PLAN	
b	Name of plan sponsor SINCLAIR RISK & FINANCIAL MANA	c EIN-PN 06-1308894-001
a	Plan name CENTURY 21 ALLPOINTS REALTY 401(K) PLAN	
b	Name of plan sponsor ALLPOINTS REALTY INC	c EIN-PN 06-1350392-001
a	Plan name TEED & BROWN INC 401(K) PROFIT SHARING & TRUST PLAN	
b	Name of plan sponsor TEED & BROWN INC	c EIN-PN 06-1435176-001

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 EURO MOTOR CARS INC 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor EURO MOTOR CARS INC	c EIN-PN 06-1471374-001
a	Plan name EURO MOTORS INC CASH BALANCE PLAN	
b	Name of plan sponsor EURO MOTOR CARS INC	c EIN-PN 06-1471374-001
a	Plan name COLONIAL COOPERATIVE CARE INC EMPLOYEES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COLONIAL COOPERATIVE CARE INC	c EIN-PN 06-1498411-001
a	Plan name JAY SHAPIRO & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor JAY SHAPIRO & ASSOCIATES INC	c EIN-PN 06-1660950-001
a	Plan name N J REGIONAL EAR NOSE & THROAT CENTER LLC 401(K) PLAN	
b	Name of plan sponsor N J REGIONAL EAR NOSE & THROAT	c EIN-PN 06-1740573-002
a	Plan name INDEPENDENT METAL STRAP CO INC PROFIT SHARING PLAN	
b	Name of plan sponsor INDEPENDENT METAL STRAP CO INC	c EIN-PN 11-1950090-001
a	Plan name FB INTERNATIONAL INC 401(K) PLAN	
b	Name of plan sponsor BKCRP/FB INTERNATIONAL INC	c EIN-PN 11-2923684-001
a	Plan name COACH REAL ESTATE ASSOCIATES INC 401(K) PLAN	
b	Name of plan sponsor COACH HOLDCO LLC	c EIN-PN 11-2941473-001
a	Plan name GREG D ANGELO CONSTRUCTION INC 401K PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor GREG D ANGELO CONSTRUCTION INC	c EIN-PN 11-3042848-001
a	Plan name CNC CABINETRY 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor CNC CABINETRY	c EIN-PN 11-3086986-001
a	Plan name PDS KO 401(K) PLAN	
b	Name of plan sponsor PDS CONSULTANTS INC	c EIN-PN 11-3124680-001
a	Plan name XSB INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor XSB INC INTELLIGENT DATABASE	c EIN-PN 11-3424040-001

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	DOLAN FAMILY OFFICE LLC 401(K) PLAN	
b	Name of plan sponsor	DOLAN FAMILY OFFICE LLC	c EIN-PN 11-3580282-001
a	Plan name	THE MCNAMARA GROUP LLC 401(K) PLAN	
b	Name of plan sponsor	THE MCNAMARA GROUP LLC	c EIN-PN 11-3581772-001
a	Plan name	PATANIA CLEANERS INC 401(K) PLAN	
b	Name of plan sponsor	PATANIA CLEANERS INC	c EIN-PN 11-3665699-001
a	Plan name	ELECTRIC BATTERY COMPANY LLC 401(K) PLAN	
b	Name of plan sponsor	ELECTRIC BATTERY COMPANY LLC	c EIN-PN 11-3699785-001
a	Plan name	N B ROGERS INC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	N B ROGERS INC	c EIN-PN 11-3730178-001
a	Plan name	HILL MECHANICAL OF GA 401(K) PLAN	
b	Name of plan sponsor	PHCCP/HILL MECHANICAL OF GA 40	c EIN-PN 11-3806920-001
a	Plan name	TAKARA BELMONT USA INC 401(K) RETIREMENT PLAN 1	
b	Name of plan sponsor	TAKARA BELMONT USA INC	c EIN-PN 13-1843773-003
a	Plan name	TAKARA BELMONT USA INC 401K RETIREMENT PLAN 2	
b	Name of plan sponsor	TAKARA BELMONT USA INC	c EIN-PN 13-1843773-004
a	Plan name	UNITED CORPORATE SERVICES INC EMPLOYEES PROFIT SHARING PLAN	
b	Name of plan sponsor	UNITED CORPORATE SERVICES INC	c EIN-PN 13-2654615-001
a	Plan name	AMERICAN ZIONIST MOVEMENT 401(K) PLAN	
b	Name of plan sponsor	ADCP/ AMERICAN ZIONIST MOVEMEN	c EIN-PN 13-2679404-001
a	Plan name	GLOBAL COVERAGE INC PROFIT SHARING PLAN	
b	Name of plan sponsor	GLOBAL COVERAGE INC	c EIN-PN 13-2761645-001
a	Plan name	ROBERT MARTIN 401(K) PLAN	
b	Name of plan sponsor	ROBERT MARTIN COMPANY LLC	c EIN-PN 13-2849215-001

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	AUTO PRO COLLISION INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	AUTO PRO COLLISION INC	c EIN-PN 13-3791027-001
a	Plan name	FJA US INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FJA US INC	c EIN-PN 13-3804456-001
a	Plan name	SELERANT CORP 401(K) PLAN	
b	Name of plan sponsor	SELERANT CORP	c EIN-PN 13-4050596-001
a	Plan name	SIERRA CONSULTING GROUP INC 401(K) PLAN	
b	Name of plan sponsor	SIERRA CONSULTING GROUP INC	c EIN-PN 13-4165817-001
a	Plan name	COHEN & SIEGEL LLP PROFIT SHARING PLAN	
b	Name of plan sponsor	COHEN & SIEGEL LLP	c EIN-PN 13-4219947-001
a	Plan name	FRANKFORT TOYOTA SCION 401(K) PLAN	
b	Name of plan sponsor	TEWELL FAMILY LLC DBA	c EIN-PN 13-4232131-001
a	Plan name	JOSIE ACCESSORIES INC 401K PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	JOSIE ACCESSORIES INC	c EIN-PN 13-5551019-002
a	Plan name	LACORTE COMPANIES INC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	LACORTE COMPANIES INC	c EIN-PN 14-1634075-004
a	Plan name	NORTHSHORE FIRE PROTECTION DISTRICT CA 457(B) DEFERRED COMPENSATION PLAN	
b	Name of plan sponsor	NORTHSHORE FIRE PROTECTION	c EIN-PN 14-1983377-001
a	Plan name	THE PAPILLON CENTER & GAIA HOUSE 401(K) PLAN	
b	Name of plan sponsor	PAPILLON CENTER PC	c EIN-PN 14-1993241-001
a	Plan name	POLYFUSION ELECTRONICS INC 401(K) PLAN	
b	Name of plan sponsor	POLYFUSION ELECTRONICS INC	c EIN-PN 16-1056988-001
a	Plan name	ELECTRO-LINES INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	ELECTRO-LINES INC	c EIN-PN 16-1058558-001

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	CHARCOAL & BRIQUETTES DISTRIBUTORS 401(K) PLAN	
b	Name of plan sponsor	CHARCOAL & BRIQUETTES	c EIN-PN 16-1499812-001
a	Plan name	VISION ENGINEERING 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	VISION ENGINEERING LLC	c EIN-PN 20-0005215-001
a	Plan name	WISESTAFF LLC PROFIT SHARING PLAN	
b	Name of plan sponsor	WISESTAFF LLC	c EIN-PN 20-0049637-001
a	Plan name	EVOLO DESIGN LLC 401(K) PLAN	
b	Name of plan sponsor	MOCCP/EVOLO DESIGN LLC 401(K)	c EIN-PN 20-0097651-001
a	Plan name	GROWBYS RTO 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	SCCRP/ GROWBYS RTO 401(K) RETI	c EIN-PN 20-0148154-001
a	Plan name	WILDES BUILDERS LLC 401(K) TRUST	
b	Name of plan sponsor	WILDES BUILDERS LLC	c EIN-PN 20-0354763-001
a	Plan name	SMITHCORP INC 401K PLAN	
b	Name of plan sponsor	SMITHCORP INC	c EIN-PN 20-0474260-001
a	Plan name	LINDNER HAGEN 401(K) PLAN AND TRUST	
b	Name of plan sponsor	LINDNER HAGEN ENTERPRISES INC	c EIN-PN 20-0493466-001
a	Plan name	EVEREST MEDICAL CENTER PA 401(K) PLAN	
b	Name of plan sponsor	EVEREST MEDICAL CENTER PA	c EIN-PN 20-0510689-001
a	Plan name	HUB + WEBER ARCHITECTS PLC 401(K) PLAN	
b	Name of plan sponsor	HUB + WEBER ARCHITECTS PLC	c EIN-PN 20-0531445-001
a	Plan name	CBA WARWICK 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA WARWICK 401(K) PLAN	c EIN-PN 20-0655517-001
a	Plan name	LENEGAN PLUMBING & HEATING 401(K) PLAN	
b	Name of plan sponsor	LENEGAN PLUMBING & HEATING LLC	c EIN-PN 20-0815311-001

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	HARBOR SIDE DENTAL ASSOCIATES 401(K) PLAN
b	Name of plan sponsor	HARBORSIDE DENTAL ASSOCIATES
c	EIN-PN	20-0891967-001
a	Plan name	ST GEORGE THEATRE RESTORATION INC 401(K) PLAN
b	Name of plan sponsor	EZTRP/ST GEORGE THEATRE
c	EIN-PN	20-0985637-001
a	Plan name	MID-MO MARKETING 401(K) PLAN
b	Name of plan sponsor	ESCCP/MID-MO MARKETING LLC
c	EIN-PN	20-1102448-001
a	Plan name	INFOVILLE INC 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	INFOVILLE INC
c	EIN-PN	20-1170417-001
a	Plan name	LASCO FOODS 401(K) PLAN
b	Name of plan sponsor	LASCO FOODS
c	EIN-PN	20-1172252-001
a	Plan name	NORTHEAST PAIN MANAGEMENT EMPLOYEE STOCK OWNERSHIP 401(K) PLAN
b	Name of plan sponsor	BHFSP/NORTHEAST PAIN MANAGEMEN
c	EIN-PN	20-1295942-001
a	Plan name	DOLAN FUNERAL HOME 401(K) PLAN
b	Name of plan sponsor	LGAP/DOLAN FUNERAL HOME 401(K)
c	EIN-PN	20-1309803-001
a	Plan name	ARMOR HEALTH 401(K) PLAN
b	Name of plan sponsor	AMRP/ARMOR CORRECTIONAL HEALTH
c	EIN-PN	20-1422279-001
a	Plan name	BLUEGRASS HOSPITALITY GROUP 401(K) PLAN
b	Name of plan sponsor	MALONES HOLDINGS LLC
c	EIN-PN	20-1453313-001
a	Plan name	ALESSANDRO AND ASSOCIATES CPA PLLC RETIREMENT PLAN
b	Name of plan sponsor	ALESSANDRO AND ASSOCIATES CPA
c	EIN-PN	20-1536264-001
a	Plan name	CPM BUILDERS INC RETIREMENT PLAN
b	Name of plan sponsor	CPM BUILDERS INC
c	EIN-PN	20-1556172-001
a	Plan name	WHITE MARSH CORPORATE SERVICES INC 401(K) PLAN
b	Name of plan sponsor	LGPCP/WHITE MARSH CORPORATE
c	EIN-PN	20-1628368-001

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 VICTORY COLLEGE PREP 401(K) PLAN	
b	Name of plan sponsor VICTORY COLLEGE PREP INC	c EIN-PN 20-1738905-001
a	Plan name JAY A HARRIS ORTHODONTICS PC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JAY A HARRIS ORTHODONTICS PC	c EIN-PN 20-1795945-001
a	Plan name FORBES BUSINESS INVESTMENTS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor FORBES BUSINESS INVESTMENTS	c EIN-PN 20-1837565-001
a	Plan name MAINE FIRE PROTECTION 401(K) PLAN	
b	Name of plan sponsor PD INDUSTRIES INC	c EIN-PN 20-1889286-001
a	Plan name KITCHEN CONCEPTS LLC 401(K) PLAN	
b	Name of plan sponsor KITCHEN CONCEPTS LLC	c EIN-PN 20-1892077-001
a	Plan name ASSOCIATES FOR DENTAL ARTS PLC 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor ASSOCIATES FOR DENTAL ARTS PLC	c EIN-PN 20-1986646-001
a	Plan name JOES BRIDGE & GRADING INC DAVIS BACON 401(K) PLAN	
b	Name of plan sponsor JOES BRIDGE & GRADING INC	c EIN-PN 20-1998434-001
a	Plan name CHICAGO PAINTING INC 401(K) PLAN	
b	Name of plan sponsor CHICAGO PAINTING INC	c EIN-PN 20-2014932-001
a	Plan name PENOBSCOT ISLAND AIR EMPLOYEE STOCK OWNERSHIP 401(K) PLAN	
b	Name of plan sponsor BHFSP/PENOBSCOT ISLAND AIR EMP	c EIN-PN 20-2017905-001
a	Plan name SUMMIT MANAGEMENT GROUP OF FLORIDA LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SUMMIT MANAGEMENT GROUP OF	c EIN-PN 20-2175532-001
a	Plan name BXOP/RM RIGGLE ENTERPRISES LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor BXOP/RM RIGGLE ENTERPRISES LLC	c EIN-PN 20-2257614-001
a	Plan name HOSPICE OF SOUTHWEST OHIO 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor MOCCP/HOSPICE OF SOUTHWEST OHI	c EIN-PN 20-2304600-001

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 YEE ADVANCED ORTHOPEDICS & SPORTS MEDICINE 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor YEE ADVANCED ORTHOPEDICS &	c EIN-PN 20-2523414-002
a	Plan name GEOLOG AMERICAS INC 401K PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor BKCRP/GEOLOG AMERICAS INC	c EIN-PN 20-2589263-001
a	Plan name ONE PAK INC 401(K) PLAN	
b	Name of plan sponsor CPSCP/ONE PAK INC 401(K) PLAN	c EIN-PN 20-2649978-001
a	Plan name ONE MEMBER RETIREMENT PLAN - ACE GROUP	
b	Name of plan sponsor OMRM/ ATLANTIC COAST ELECTRIC	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN AC SUPPLY INC	
b	Name of plan sponsor OMRM/AC SUPPLY INC	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN ANDERSONS INC	
b	Name of plan sponsor OMRM/ANDERSONS INC	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN APSCO INC	
b	Name of plan sponsor OMRM/APSCO INC	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN BADGER METALS INC	
b	Name of plan sponsor OMRM/BADGER METALS INC	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN CENTRAL A/C & REFRIGERATION SUPPLY INC	
b	Name of plan sponsor OMRM/CENTRAL A/C & REFRIGERATI	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN CLEVELAND HERMETIC & SUPPLY INC	
b	Name of plan sponsor OMRM/CLEVELAND HERMETIC & SUPP	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN COASTAL SUPPLY GROUP	
b	Name of plan sponsor OMRM/COASTAL SUPPLY GROUP	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN- ECONOMY PLUMBING & HEATING SUPPLY COMPANY	
b	Name of plan sponsor OMRM/ECONOMY PLUMBING & HEATIN	c EIN-PN 20-2905621-333

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 ONE MEMBER RETIREMENT PLAN FURNACE & DUCT SUPPLY COMPANY INC	
b	Name of plan sponsor OMRM/FURNACE & DUCT SUPPLY COM	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN HEATING & COOLING SUPPLY INC	
b	Name of plan sponsor OMRM/HEATING & COOLING SUPPLY	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN HVAC DISTRIBUTORS INC	
b	Name of plan sponsor OMRM/HVAC DISTRIBUTORS INC	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN- IMARK ELECTRICAL INC	
b	Name of plan sponsor OMRM/IMARK ELECTRICAL INC	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN IMARK PLUMBING	
b	Name of plan sponsor OMRM/IMARK PLUMBING	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN KRU KEL CO INC	
b	Name of plan sponsor OMRM/KRU KEL CO INC	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN- PHILLIPS SUPPLY COMPANY	
b	Name of plan sponsor OMRM/PHILLIPS SUPPLY COMPANY	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN PREMIER DISTRIBUTION COOPERATIVE	
b	Name of plan sponsor OMRM/PREMIER DISTRIBUTION	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN RSK CORPORATION DBA VICTOR DISTRIBUTING COMPANY	
b	Name of plan sponsor OMRM/RSK CORPORATION DBA VICTO	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN SUPERIOR EQUIPMENT SALES INC	
b	Name of plan sponsor OMRM/SUPERIOR EQUIPMENT SALES	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN TRANSTAR A/C SUPPLY INC	
b	Name of plan sponsor OMRM/TRANSTAR A/C SUPPLY INC	c EIN-PN 20-2905621-333
a	Plan name ONE MEMBER RETIREMENT PLAN WASHER & REFRIGERATION SUPPLY CO INC	
b	Name of plan sponsor OMRM/WASHER & REFRIGERATION SU	c EIN-PN 20-2905621-333

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	ONE MEMBER RETIREMENT PLAN- WEATHERTECH DISTRIBUTING CO INC	
b	Name of plan sponsor	OMRM/WEATHERTECH DISTRIBUTING	c EIN-PN 20-2905621-333
a	Plan name	ONE MEMBER RETIREMENT PLAN- WESTWATER SUPPLY CORP	
b	Name of plan sponsor	OMRM/WESTWATER SUPPLY CORP	c EIN-PN 20-2905621-333
a	Plan name	ONE MEMBER RETIREMENT PLAN WINSTEL CONTROLS	
b	Name of plan sponsor	OMRM/WINSTEL CONTROLS	c EIN-PN 20-2905621-333
a	Plan name	ONE MEMBER RETIREMENT PLAN-IHRIE SUPPLY	
b	Name of plan sponsor	OMRM/IHRIE SUPPLY	c EIN-PN 20-2905621-333
a	Plan name	REMOTE SECURITY SOLUTIONS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NCCPAP/REMOTE SECURITY SOLUTIO	c EIN-PN 20-2924061-001
a	Plan name	RAYMOND DESIGN ASSOCIATES INC RETIREMENT PLAN	
b	Name of plan sponsor	RAYMOND DESIGN ASSOC INC RET P	c EIN-PN 20-3030729-001
a	Plan name	SKYLINE TRISOURCE EXHIBITS 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	TERNION INC DBA SKYLINE	c EIN-PN 20-3216642-001
a	Plan name	J LANE PUTNAM DDS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	J LANE PUTNAM DDS DBA FAIRVIEW	c EIN-PN 20-3958446-001
a	Plan name	CAVE 401(K) PLAN	
b	Name of plan sponsor	CAVE ENTERPRISES OPERATIONS	c EIN-PN 20-4023518-001
a	Plan name	DIEBOLT LANDSCAPE CO INC 401(K) PLAN	
b	Name of plan sponsor	HABCMP/DIEBOLT LANDSCAPE CO	c EIN-PN 20-4065155-001
a	Plan name	RENOVATION STUDIO 401(K) PLAN	
b	Name of plan sponsor	RENOVATION STUDIO LLC	c EIN-PN 20-4502577-001
a	Plan name	POSITIVE BEHAVIOR SUPPORTS CORPORATION 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	POSITIVE BEHAVIOR SUPPORTS	c EIN-PN 20-5268843-001

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	KERR OFFICE GROUP INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HCCRP/KERR OFFICE GROUP INC.	c EIN-PN 20-5275325-001
a	Plan name	CBA SPACE CENTER 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA SPACE CENTER 401(K)	c EIN-PN 20-5462874-001
a	Plan name	DOYLE DICKERSON TERRAZZO INC 401(K) PLAN	
b	Name of plan sponsor	DOYLE DICKERSON TERRAZZO INC	c EIN-PN 20-5618183-001
a	Plan name	COLORADO PULMONARY INTENSIVISTS PC PROFIT-SHARING PLAN	
b	Name of plan sponsor	COLORADO PULMONARY	c EIN-PN 20-5787969-001
a	Plan name	SARASOTA WELLNESS & MEDICAL CENTER LLC RETIREMENT PLAN	
b	Name of plan sponsor	SGPAP/ SARASOTA WELLNESS & MED	c EIN-PN 20-5806234-001
a	Plan name	HYPERION BANK 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	LGAP/HYPERION BANK 401(K) RETI	c EIN-PN 20-5859525-001
a	Plan name	SEAWARD MARINE CORPORATION 401(K) PLAN	
b	Name of plan sponsor	SEAWARD MARINE CORPORATION	c EIN-PN 20-5950226-001
a	Plan name	A AFFORDABLE STRIPING & SEALING 401(K) PLAN	
b	Name of plan sponsor	A AFFORDABLE STRIPING &	c EIN-PN 20-8032842-001
a	Plan name	WELLSTON ASSOCIATES LAND SURVEYORS LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NCCPAP/WELLSTON ASSOCIATES	c EIN-PN 20-8081337-001
a	Plan name	TOTAL PERFORMANCE SOLUTIONS LLC 401(K) PLAN	
b	Name of plan sponsor	TOTAL PERFORMANCE SOLUTIONS	c EIN-PN 20-8174867-001
a	Plan name	YORK LABS LLC 401(K) PLAN	
b	Name of plan sponsor	MAYMP/YORK LABS LLC 401(K) PLA	c EIN-PN 20-8271595-001
a	Plan name	EAST COAST FABRICATION 401(K) P/S PLAN	
b	Name of plan sponsor	EAST COAST FABRICATION	c EIN-PN 20-8285921-001

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	NORTON TRANSPORT INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NCCPAP/NORTON TRANSPORT INC 40	c EIN-PN 20-8325025-001
a	Plan name	MUHLE REAL ESTATE INC DBA MUHLE MARKETING 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MUHLE REAL ESTATE INC DBA	c EIN-PN 20-8341803-002
a	Plan name	SHREWSBURY'S GRADUATE SUPPLIES LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NCCPAP/SHREWSBURYS GRADUATE	c EIN-PN 20-8371723-001
a	Plan name	SYSTEMS INTEGRATORS LLC 401(K) PLAN	
b	Name of plan sponsor	SYSTEMS INTEGRATORS LLC	c EIN-PN 20-8500816-001
a	Plan name	CANNON & AVENI CO LPA PROFIT SHARING PLAN	
b	Name of plan sponsor	CANNON & AVENI CO LPA	c EIN-PN 20-8503556-001
a	Plan name	CARROLL AND SUTTON ORTHODONTICS LLC RETIREMENT PLAN	
b	Name of plan sponsor	SGPAP/ CARROLL AND SUTTON ORTH	c EIN-PN 20-8640677-001
a	Plan name	OPENCAPE CORPORATION 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	CIACP/OPENCAPE CORPORATION 401	c EIN-PN 20-8670761-001
a	Plan name	CALLIBRITY SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor	LMRCP/ CALLIBRITY SOLUTIONS 40	c EIN-PN 20-8677704-001
a	Plan name	MITCHELL PROVISIONS RETIREMENT PLAN	
b	Name of plan sponsor	MITCHELL PROVISIONS INC	c EIN-PN 20-8725607-001
a	Plan name	HOOKE LABORATORIES INC 401K PLAN	
b	Name of plan sponsor	CPSCP/HOOKE LABORATORIES INC	c EIN-PN 20-8823140-001
a	Plan name	BANKFLORIDA 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	BANKFLORIDA	c EIN-PN 20-8982689-001
a	Plan name	MONMOUTH COUNTY ASSOCIATION OF REALTORS INC EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor	MONMOUTH COUNTY ASSOCIATION OF	c EIN-PN 21-0516901-001

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 SAMSON ELECTRIC EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor SAMSON ELECTRICAL SUPPLY CO	c EIN-PN 22-1461630-001
a	Plan name RUBBER & SILICONE PRODUCTS CO INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor RUBBER & SILICONE PRODUCTS CO	c EIN-PN 22-1576384-001
a	Plan name ARM-R-LITE 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor ARM-R-LITE DOOR MFG CO INC	c EIN-PN 22-1627220-001
a	Plan name J GATARZ & SONS INC 401K PLAN	
b	Name of plan sponsor J GATARZ & SONS INC	c EIN-PN 22-1725367-001
a	Plan name UNEX MANUFACTURING INC 401(K) SAVINGS PLAN	
b	Name of plan sponsor UNEX MANUFACTURING INC	c EIN-PN 22-1733032-001
a	Plan name SW ELECTRONICS AND MANUFACTURING CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SW ELECTRONICS AND	c EIN-PN 22-1766038-002
a	Plan name SW ELECTRONICS AND MANUFACTURING CORPORATION ADMIN 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SW ELECTRONICS AND	c EIN-PN 22-1766038-001
a	Plan name BIL-JIM CONSTRUCTION CO. INC & MAPLE LAKE INC PENSION PLAN	
b	Name of plan sponsor BIL-JIM CONSTRUCTION COMPANY	c EIN-PN 22-1772136-003
a	Plan name BIL-JIM CONSTRUCTION PROFIT SHARING PLAN	
b	Name of plan sponsor BIL-JIM CONSTRUCTION COMPANY	c EIN-PN 22-1772136-002
a	Plan name DECKER TAPE PRODUCTS INC PROFIT SHARING PLAN I	
b	Name of plan sponsor DECKER TAPE PRODUCTS INC	c EIN-PN 22-1866945-001
a	Plan name DECKER TAPE PRODUCTS INC PROFIT SHARING PLAN II	
b	Name of plan sponsor DECKER TAPE PRODUCTS INC	c EIN-PN 22-1866945-002
a	Plan name RAILROAD CONSTRUCTION CO OF SOUTH JERSEY INC 401(K) SAFE HARBOR PROFIT SHARING PLAN	
b	Name of plan sponsor RAILROAD CONSTRUCTION CO OF	c EIN-PN 22-1901120-002

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 CHAMLIN ULIANO & WALSH PROFIT SHARING & 401(K) PLAN	
b	Name of plan sponsor CHAMLIN ULIANO & WALSH	c EIN-PN 22-1970306-001
a	Plan name JACK DANIELS MOTORS INC 401(K) PLAN I	
b	Name of plan sponsor JACK DANIELS MOTORS INC	c EIN-PN 22-1974783-001
a	Plan name JACK DANIELS MOTORS INC 401(K) PLAN II	
b	Name of plan sponsor JACK DANIELS MOTORS INC	c EIN-PN 22-1974783-002
a	Plan name JACK DANIELS MOTORS INC 401(K) PLAN III	
b	Name of plan sponsor JACK DANIELS MOTORS INC	c EIN-PN 22-1974783-003
a	Plan name ELNORAH INC. T/A WARREN GLEN ACADEMY 401K PROFIT SHARING PLAN	
b	Name of plan sponsor ELNORAH INC T/A WARREN GLEN A	c EIN-PN 22-2218573-001
a	Plan name CENTRAL JERSEY TRUCKING & RIGGING INC EMPLOYEES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BKCRP/CENTRAL JERSEY	c EIN-PN 22-2282012-001
a	Plan name L & A TRANSPORT 401(K) PLAN	
b	Name of plan sponsor L & A TRANSPORT INC	c EIN-PN 22-2299057-001
a	Plan name ZONE STRIPING INC 401K PLAN	
b	Name of plan sponsor ZONE STRIPING INC	c EIN-PN 22-2332677-001
a	Plan name MARGARET RAVITS MD RETIREMENT PLAN	
b	Name of plan sponsor MARGARET RAVITS MD	c EIN-PN 22-2589665-001
a	Plan name OCEANS HARBOR HOUSE 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor OCEANS HARBOR HOUSE	c EIN-PN 22-2672209-001
a	Plan name ACTION SUPPLY INC 401(K) SAVINGS PLAN	
b	Name of plan sponsor ACTION SUPPLY INC	c EIN-PN 22-2752206-001
a	Plan name SOUTH PLAINFIELD PRIMARY CARE 401K PLAN	
b	Name of plan sponsor SOUTH PLAINFIELD PRIMARY CARE	c EIN-PN 22-2842501-001

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	CLARKS LANDING RETIREMENT PLAN	
b	Name of plan sponsor	CLARKS LANDING MARINA	c EIN-PN 22-2878366-001
a	Plan name	THE TITUSVILLE ACADEMY INC 401(K) PLAN	
b	Name of plan sponsor	THE TITUSVILLE ACADEMY INC	c EIN-PN 22-2896543-002
a	Plan name	WADE RAY & ASSOCIATES CONSTRUCTION INC 401(K) PLAN	
b	Name of plan sponsor	WADE RAY & ASSOCIATES	c EIN-PN 22-2907895-002
a	Plan name	ORTHOPAEDIC PHYSICIANS & SURGEONS P C 401(K) PLAN	
b	Name of plan sponsor	ORTHOPAEDIC PHYSICIANS &	c EIN-PN 22-2935880-002
a	Plan name	THE SPAULDING GROUP 401K PLAN	
b	Name of plan sponsor	THE SPAULDING GROUP INC	c EIN-PN 22-3058348-001
a	Plan name	CONCEPT III TEXTILE SALES INC 401(K) PLAN	
b	Name of plan sponsor	CONCEPT III TEXTILE SALES INC	c EIN-PN 22-3153687-003
a	Plan name	JERSEY ARCHITECTURAL DOOR & SUPPLY CO 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	JERSEY ARCHITECTURAL DOOR &	c EIN-PN 22-3180615-001
a	Plan name	B & L EXCAVATING 401(K) PLAN	
b	Name of plan sponsor	BKCRP/B & L EXCAVATING INC	c EIN-PN 22-3187024-001
a	Plan name	TRANSPORT PRODUCTS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TRANSPORT PRODUCTS INC	c EIN-PN 22-3194361-001
a	Plan name	ACTIVE ENVIRONMENTAL TECHNOLOGY INC 401(K) PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor	ACTIVE ENVIRONMENTAL	c EIN-PN 22-3219181-001
a	Plan name	MICROSEAL INDUSTRIES RETIREMENT PLAN	
b	Name of plan sponsor	MICROSEAL INDUSTRIES INC	c EIN-PN 22-3243111-001
a	Plan name	PRIMO REMODELING INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PRIMO REMODELING INC	c EIN-PN 22-3262979-001

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 LUTHE SHEET METAL INC PROFIT SHARING PLAN	
b	Name of plan sponsor SMCAP/LUTHE SHEET METAL INC PR	c EIN-PN 22-3262990-001
a	Plan name NEW WORLD CREATION INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NEW WORLD CREATION INC	c EIN-PN 22-3291053-002
a	Plan name BKC CPAS PC 401(K) PLAN	
b	Name of plan sponsor BKC CPAS PC	c EIN-PN 22-3299874-001
a	Plan name NETWORK TECHNOLOGY SOLUTIONS INC RETIREMENT PLAN	
b	Name of plan sponsor NETWORK TECHNOLOGY SOLUTIONS	c EIN-PN 22-3315144-001
a	Plan name PHOENIX INTERNATIONAL BUSINESS LOGISTICS INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor PHOENIX INTERNATIONAL BUSINESS	c EIN-PN 22-3379715-001
a	Plan name MONELLO LANDSCAPE INDUSTRIES 401(K) PLAN	
b	Name of plan sponsor MONELLO LANDSCAPE	c EIN-PN 22-3417378-002
a	Plan name DASTI MURPHY & MCGUCKIN PC 401(K) PLAN	
b	Name of plan sponsor DASTI MURPHY & MCGUCKIN	c EIN-PN 22-3450668-001
a	Plan name TRUYOU DENTAL FRANKLIN LAKES LLC SAFE HARBOR 401(K) P/S	
b	Name of plan sponsor TRUYOU DENTAL FRANKLIN LAKES	c EIN-PN 22-3470014-001
a	Plan name SSP ARCHITECTURAL GROUP INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SSP ARCHITECTURAL GROUP INC	c EIN-PN 22-3559243-001
a	Plan name 7 STAR HOSPITALITY RESOURCE LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor 7SHR/PREMIER SECURITY SERVICE	c EIN-PN 22-3564219-005
a	Plan name PRINT ART INC 401(K) PLAN	
b	Name of plan sponsor PRINT ART INC	c EIN-PN 22-3619381-002
a	Plan name ALL KIDS FIRST INC RETIREMENT PLAN	
b	Name of plan sponsor ALL KIDS FIRST INC	c EIN-PN 22-3667191-001

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	LOCKATONG ENGINEERING INC 401(K) PLAN
b	Name of plan sponsor	LOCKATONG ENGINEERING INC
c	EIN-PN	22-3794788-001
a	Plan name	IMPERIAL SYSTEMS INC 401(K) PLAN
b	Name of plan sponsor	IMPERIAL SYSTEMS INC 401(K) PL
c	EIN-PN	22-3835723-001
a	Plan name	SOUTH PLAINFIELD DENTAL ARTS LLP 401(K) PROFIT SHARING PLAN AND TRUST
b	Name of plan sponsor	SOUTH PLAINFIELD DENTAL ARTS
c	EIN-PN	22-3885595-001
a	Plan name	MANUFACTURERS ASSOCIATION OF SOUTH CENTRAL PENNSYLVANIA 401(K) PLAN
b	Name of plan sponsor	MAYMP/MANUFACTURERS ASSOC
c	EIN-PN	23-0837710-001
a	Plan name	RICHARD M CROSSAN INC 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	RICHARD M CROSSAN INC
c	EIN-PN	23-1649419-001
a	Plan name	WEST SIDE ELECTRICAL SERVICE INC PROFIT SHARING PLAN
b	Name of plan sponsor	WEST SIDE ELECTRICAL SERVICE
c	EIN-PN	23-1685357-002
a	Plan name	PDS 401(K) SAVINGS PLAN
b	Name of plan sponsor	PERSONNEL DATA SYSTEMS INC
c	EIN-PN	23-1925770-001
a	Plan name	EASTERN ANSWERING SERVICE INC PROFIT SHARING PLAN
b	Name of plan sponsor	EASTERN ANSWERING SERVICE INC
c	EIN-PN	23-2308856-001
a	Plan name	ACTION RENTAL CENTER INC 401(K) PLAN
b	Name of plan sponsor	ACTION RENTAL CENTER INC
c	EIN-PN	23-2387735-001
a	Plan name	ROOFING RESOURCES INC PROFIT SHARING PLAN
b	Name of plan sponsor	BKCRP/ROOFING RESOURCES INC
c	EIN-PN	23-2562373-001
a	Plan name	CM COUNSEL INC 401K PROFIT SHARING PLAN AND TRUST
b	Name of plan sponsor	CM COUNSEL INC
c	EIN-PN	23-2575416-001
a	Plan name	NORTH AMERICAN CABLE EQUIPMENT 401(K) PROFIT SHARING PLAN AND TRUST
b	Name of plan sponsor	NORTH AMERICAN CABLE EQUIPMENT
c	EIN-PN	23-2692118-001

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 MCNEIL SALES & SERVICE INC 401(K) PLAN	
b	Name of plan sponsor MCNEIL SALES & SERVICE INC	c EIN-PN 23-2731092-002
a	Plan name GENERAL EXPOSITION SERVICES INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor GENERAL EXPOSITION SERVICES	c EIN-PN 23-2795109-001
a	Plan name BOYD/WILSON PROPERTY MANAGEMENT 401(K) PLAN	
b	Name of plan sponsor BOYD/WILSON PROPERTY	c EIN-PN 23-2812739-001
a	Plan name DIESELS HEATING AND AIR CONDITIONING INC PROFIT SHARING PLAN	
b	Name of plan sponsor DIESELS HEATING AND AIR	c EIN-PN 23-2874270-001
a	Plan name ALEXANDER CHANG MD PROFIT SHARING PLAN	
b	Name of plan sponsor ALEXANDER CHANG MD PC	c EIN-PN 23-2904038-001
a	Plan name GREENCASTLE ASSOCIATES LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor GREENCASTLE ASSOCIATES LLC	c EIN-PN 23-2917616-002
a	Plan name MONDRE ENERGY INC 401(K) PLAN	
b	Name of plan sponsor MONDRE ENERGY INC	c EIN-PN 23-2944611-001
a	Plan name REGENCY PLUS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor REGENCY PLUS INC	c EIN-PN 23-2962257-001
a	Plan name RETIREMENT PLANNING SPECIALISTS INC 401(K) PLAN	
b	Name of plan sponsor RETIREMENT PLANNING SPECIALIST	c EIN-PN 23-2972950-001
a	Plan name MARSHA ADLER GORDON DDS LLC PROFIT SHARING PLAN	
b	Name of plan sponsor MARSHA ADLER GORDON DDS LLC	c EIN-PN 23-2988051-001
a	Plan name RCS BUILDING SERVICES INC 401(K) PLAN	
b	Name of plan sponsor RCS BUILDING SERVICES INC	c EIN-PN 23-3060243-001
a	Plan name MONARCH STAFFING LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MONARCH STAFFING LLC	c EIN-PN 23-3081833-001

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	LAWTON INSURANCE AGENCY INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LAWTON INSURANCE AGENCY	c EIN-PN 23-3100283-001
a	Plan name	MICROBILT 401(K) PLAN	
b	Name of plan sponsor	MICROBILT CORPORATION	c EIN-PN 23-3737436-001
a	Plan name	UNION FUEL COMPANY 401(K) PLAN	
b	Name of plan sponsor	UNION FUEL CO	c EIN-PN 24-0830082-001
a	Plan name	PITTSBURGH BUILDERS EXCHANGE PROFIT SHARING PLAN	
b	Name of plan sponsor	PBXP/PITTSBURGH BUILDERS	c EIN-PN 25-0728430-002
a	Plan name	PITTSBURGH STAGE INC 401K PLAN	
b	Name of plan sponsor	PITTSBURGH STAGE INC	c EIN-PN 25-1180361-001
a	Plan name	CHRIST THE KING MANOR EMPLOYEE BENEFITS PLAN	
b	Name of plan sponsor	CHRIST THE KING MANOR	c EIN-PN 25-1358245-003
a	Plan name	KYNERS AUTO SALES INC EMPLOYEES 401(K) PLAN	
b	Name of plan sponsor	KYNERS AUTO SALES INC	c EIN-PN 25-1425722-001
a	Plan name	JOHN W CLEMENZA DMD MD ORAL & FACIAL SURGICAL CENTER LLC RETIREMENT PLAN	
b	Name of plan sponsor	JOHN W CLEMENZA DMD MD ORAL &	c EIN-PN 25-1892283-001
a	Plan name	ELIAS KALLAL & SCHAAF FUNERAL HOMES CREMATORY & CEMETERIES LTD INTEGRATED 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ELIAS KALLAL & SCHAAF FUNERAL	c EIN-PN 26-0458981-001
a	Plan name	DAMON VER MERRIS BOYKO & WITTE PLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	DAMON VER MERRIS BOYKO & WITTE	c EIN-PN 26-0804908-002
a	Plan name	FLUID TECH 401(K) PLAN	
b	Name of plan sponsor	H Q ENTERPRISES INC	c EIN-PN 26-1205949-001
a	Plan name	NECCS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NECCS INC	c EIN-PN 26-1283591-002

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 SW CORBIN ENTERPRISES 401(K) PLAN	
b	Name of plan sponsor SW CORBIN ENTERPRISES	c EIN-PN 26-1526845-001
a	Plan name VIGILANT GLOBAL TRADE SERVICES LLC 401(K) PLAN	
b	Name of plan sponsor VIGILANT GLOBAL TRADE	c EIN-PN 26-1664840-001
a	Plan name EASTERN FIRE & SAFETY LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor EASTERN FIRE & SAFETY LLC	c EIN-PN 26-2015274-001
a	Plan name JOE ANDRUZZI FOUNDATION INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor SXPCP/JOE ANDRUZZI FOUNDATION	c EIN-PN 26-2017043-001
a	Plan name CBA BARRY ROAD 401(K) PLAN	
b	Name of plan sponsor CBAFP/CBA BARRY ROAD 401(K) PL	c EIN-PN 26-2113067-001
a	Plan name GINGER BAY SALON & SPA LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor GINGER BAY SALON & SPA LLC	c EIN-PN 26-2263621-001
a	Plan name FRS TRANSPORTATION INC 401(K) PLAN	
b	Name of plan sponsor G52WMP/FRS TRANSPORTATION INC	c EIN-PN 26-2358970-001
a	Plan name RAFFLES VENTURES LLC 401(K) PLAN	
b	Name of plan sponsor UPSAP/RAFFLES VENTURES LLC 401	c EIN-PN 26-2827439-001
a	Plan name LIFELINE AMBULANCE LLC 401(K) PLAN	
b	Name of plan sponsor LIFELINE AMBULANCE LLC	c EIN-PN 26-2956975-001
a	Plan name AHLBORG CONSTRUCTION RETIREMENT PLAN	
b	Name of plan sponsor AHLBORG CONSTRUCTION	c EIN-PN 26-3024881-001
a	Plan name MILLER MEDICAL 401(K) PLAN	
b	Name of plan sponsor MILLER MEDICAL INC	c EIN-PN 26-3343851-001
a	Plan name PINNACLE DEVELOPMENT GROUP 401(K) PLAN	
b	Name of plan sponsor BKCRP/PINNACLE DEVELOPMENT	c EIN-PN 26-3427411-001

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	ALWAYS ADVANCING 401(K) PLAN	
b	Name of plan sponsor	ALWAYS ADVANCING PROMOTIONS	c EIN-PN 26-3830256-001
a	Plan name	WAKEFIELD BRUNSWICK INC 401(K) PLAN	
b	Name of plan sponsor	WAKEFIELD BRUNSWICK INC	c EIN-PN 26-4054165-001
a	Plan name	MAKOVICKA HARMS GROUP PC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MAKOVICKA HARMS GROUP PC	c EIN-PN 26-4283460-001
a	Plan name	MARTELLS TIKI BAR INC 401K PLAN	
b	Name of plan sponsor	MARTELLS TIKI BAR INC	c EIN-PN 26-4371578-001
a	Plan name	K&D PIPELINE SERVICES INC 401(K) PLAN	
b	Name of plan sponsor	HPIGP/K&D PIPELINE SERVICES	c EIN-PN 26-4377542-001
a	Plan name	CBA MAUMELLE 401K PLAN	
b	Name of plan sponsor	CBAFP/CBA MAUMELLE 401K PLAN	c EIN-PN 26-4411044-001
a	Plan name	RUGGIERO PLANTE 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	RUGGIERO PLANTE LAND DESIGN	c EIN-PN 26-4525702-001
a	Plan name	CBA BUDA 401(K) PLAN	
b	Name of plan sponsor	CBAFP/ CBA BUDA 401(K) PLAN	c EIN-PN 26-4578482-001
a	Plan name	MIKE SWANN MD LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MIKE SWANN MD LLC	c EIN-PN 26-4790522-001
a	Plan name	EASTPORT ANALYTICS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	EASTPORT ANALYTICS INC	c EIN-PN 27-0003590-001
a	Plan name	COPPERHEAD ENVIRONMENTAL CONSULTING 401(K) PLAN	
b	Name of plan sponsor	COPPERHEAD ENVIRONMENTAL	c EIN-PN 27-0083689-001
a	Plan name	UNIFIED TECHNOLOGIES LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	UNIFIED TECHNOLOGIES LLC	c EIN-PN 27-0240525-001

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	LIMESTONE TITLE & ESCROW LLC 401(K) PLAN	
b	Name of plan sponsor	LIMESTONE TITLE & ESCROW LLC	c EIN-PN 27-0308370-001
a	Plan name	CBA WEST GALLERIA 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA WEST GALLERIA 401(K)	c EIN-PN 27-0678563-002
a	Plan name	COAST TO COAST PERMITS LLC 401(K) PLAN	
b	Name of plan sponsor	BKCRP/COAST TO COAST PERMITS	c EIN-PN 27-0706201-001
a	Plan name	RIGHT FITNESS AND NUTRITION 401(K) PLAN	
b	Name of plan sponsor	MEBCP/RIGHT FITNESS AND NUTRIT	c EIN-PN 27-0737552-001
a	Plan name	3G WAREHOUSE INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	3G WAREHOUSE INC	c EIN-PN 27-0837338-001
a	Plan name	RN EXPRESS STAFFING REGISTRY LLC 401(K) PLAN	
b	Name of plan sponsor	AMCP/RN EXPRESS STAFFING REGIS	c EIN-PN 27-0865208-001
a	Plan name	CBA GRAND RAPIDS 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA GRAND RAPIDS 401(K)	c EIN-PN 27-0941696-002
a	Plan name	ROBERT K BONGIOVANNI CPA RETIREMENT PLAN	
b	Name of plan sponsor	ROBERT K BONGIOVANNI CPA	c EIN-PN 27-1214219-002
a	Plan name	CBA MURPHY 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA MURPHY 401(K) PLAN	c EIN-PN 27-1317099-001
a	Plan name	PREMIUM TRANSPORTATION GROUP INC 401(K) PLAN	
b	Name of plan sponsor	PREMIUM TRANSPORTATION GROUP	c EIN-PN 27-1474708-001
a	Plan name	MCDANIEL STEEL ERECTION LLC 401(K) PLAN	
b	Name of plan sponsor	MCDANIEL STEEL ERECTION LLC	c EIN-PN 27-1491313-001
a	Plan name	BACKLUND PLUMBING 401(K) PLAN	
b	Name of plan sponsor	PHCCP/BACKLUND PLUMBING 401(K)	c EIN-PN 27-1963813-001

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 DAHL & MACK DENTAL P C 401(K) PLAN	
b	Name of plan sponsor DAHL DENTISTRY	c EIN-PN 27-1982875-001
a	Plan name CBA NEW BRAUNFELS 401(K) PLAN	
b	Name of plan sponsor CBAFP/CBA NEW BRAUNFELS 401(K)	c EIN-PN 27-1984088-002
a	Plan name SOUTH COUNTY FOOT & ANKLE 401(K) PLAN	
b	Name of plan sponsor CPSCP/SOUTH COUNTY FOOT &	c EIN-PN 27-2261516-001
a	Plan name DANN INC 401(K) PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor DANN INC	c EIN-PN 27-2393706-001
a	Plan name NORTH GEORGIA TRUSS SYSTEMS LLC 401K PLAN	
b	Name of plan sponsor BOAMP/NORTH GEORGIA TRUSS SYST	c EIN-PN 27-2773670-001
a	Plan name GUARDIANSHIP & CARE MANAGEMENT SERVICES 401(K) PLAN	
b	Name of plan sponsor GUARDIANSHIP & CARE MANAGEMENT	c EIN-PN 27-2778307-001
a	Plan name GLOBAL CONTRACTING GROUP LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NCCPAP/GLOBAL CONTRACTING GROU	c EIN-PN 27-2790193-001
a	Plan name CRESCENT CITY SCHOOLS 401(K) PLAN	
b	Name of plan sponsor CRESCENT CITY SCHOOLS	c EIN-PN 27-2811737-001
a	Plan name TRUCRAFT 401K RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor TRUCRAFT ROOFING LLC	c EIN-PN 27-3250335-001
a	Plan name CBA SW FORT WORTH 401(K) PLAN	
b	Name of plan sponsor CBAFP/CBA SW FORT WORTH 401(K)	c EIN-PN 27-3258940-001
a	Plan name ORIGIN GROUP INTL INC 401K PLAN	
b	Name of plan sponsor ORIGIN GROUP INTL INC	c EIN-PN 27-3316912-001
a	Plan name HERDX INC 401K PLAN	
b	Name of plan sponsor ESCRP/HERDX INC 401K PLAN	c EIN-PN 27-3562134-001

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	CBA WOODWAY 401(K) PLAN	
b Name of plan sponsor	CBAFP/CBA WOODWAY 401(K) PLAN	c EIN-PN 27-3675895-002
a Plan name	TARTAGLIAS PIZZA 401(K) PLAN	
b Name of plan sponsor	ACGRP/ TARTAGLIAS PIZZA 401(K)	c EIN-PN 27-3772875-001
a Plan name	WELSH WALES & FRY PLC 401(K) PLAN	
b Name of plan sponsor	WELSH LAW GROUP	c EIN-PN 27-4335856-001
a Plan name	CBTF INC 401(K) PLAN	
b Name of plan sponsor	WTCCP/CBTF INC 401(K) PLAN	c EIN-PN 27-4481403-001
a Plan name	WHS HOMES INC 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	WHS HOMES INC	c EIN-PN 27-4606416-001
a Plan name	AMERICAN UNDERGROUND SUPPLY 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	AMERICAN UNDERGROUND SUPPLY	c EIN-PN 27-4689058-001
a Plan name	CABABEL 401(K) PLAN	
b Name of plan sponsor	CABABEL INC	c EIN-PN 27-5090591-001
a Plan name	EVERGREENE COMPANIES 401(K) PLAN (THE)	
b Name of plan sponsor	EVERGREENE COMPANIES LLC (THE)	c EIN-PN 27-5259813-001
a Plan name	LEXAR INC 401(K) PLAN	
b Name of plan sponsor	LEXAR INC	c EIN-PN 27-5360245-001
a Plan name	SECURITY USA INC 401(K) PLAN	
b Name of plan sponsor	ADCP/SECURITY USA INC 401(K) P	c EIN-PN 30-0000360-333
a Plan name	CARTERSVILLE SPRINKLER 401(K) PLAN	
b Name of plan sponsor	BOAMP/CARTERSVILLE SPRINKLER	c EIN-PN 30-0594366-001
a Plan name	GLENN A BOYLES DDS MS PLLC 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	GLENN A BOYLES DDS MS PLLC	c EIN-PN 30-0611165-001

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 YS PRECISION STAMPING 401(K) PLAN	
b	Name of plan sponsor KFGRP/YS PRECISION STAMPING	c EIN-PN 30-0765500-001
a	Plan name COMPLETE CONTRACTORS INC 401(K) PLAN	
b	Name of plan sponsor EFSP/COMPLETE CONTRACTORS INC	c EIN-PN 30-0913740-001
a	Plan name PEOPLES FIRST SAVINGS BANK 401(K) PLAN	
b	Name of plan sponsor MDCP/PEOPLES FIRST BANK	c EIN-PN 31-0404830-002
a	Plan name HOME BUILDERS ASSOCIATION OF GREATER CINCINNATI RETIREMENT PLAN	
b	Name of plan sponsor HAGCP/HOME BUILDERS ASSOCIATIO	c EIN-PN 31-0509078-001
a	Plan name FIEHRER MOTORS INC 401(K) PLAN	
b	Name of plan sponsor FIEHRER MOTORS INC	c EIN-PN 31-0520863-001
a	Plan name ALVIS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ALVIS INC	c EIN-PN 31-0743167-002
a	Plan name ARONOFF ROSEN & HUNT LPA PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor ARONOFF ROSEN & HUNT	c EIN-PN 31-0802669-001
a	Plan name THOMPSON EQUIPMENT & SUPPLY RETIREMENT PLAN	
b	Name of plan sponsor G52WMP/THOMPSON EQUIPMENT & SU	c EIN-PN 31-0802770-001
a	Plan name BEST ONE TIRE AND SERVICE OF MID AMERICA INC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor BEST ONE TIRE 401K	c EIN-PN 31-0892317-002
a	Plan name SENOUR-FLAHERTY 401(K) PLAN	
b	Name of plan sponsor MDCP/SENOUR-FLAHERTY 401(K)	c EIN-PN 31-0898073-001
a	Plan name MANOR HOUSE EVENT CENTER 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MDCP/MANOR HOUSE EVENT CENTER	c EIN-PN 31-0909968-001
a	Plan name WEGMAN COMPANY 401(K) RETIREMENT PLAN	
b	Name of plan sponsor WEGMAN COMPANY	c EIN-PN 31-0958751-001

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 FAMILY NURTURING CENTER 401(K) PLAN	
b	Name of plan sponsor EFSP/FAMILY NURTURING CENTER 4	c EIN-PN 31-1011326-002
a	Plan name EV BISHOFF COMPANY 401K PLAN	
b	Name of plan sponsor EV BISHOFF COMPANY	c EIN-PN 31-1174058-001
a	Plan name SCHROEDER MAUNDRELL BARBIERE & POWERS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SCHROEDER MAUNDRELL BARBIERE	c EIN-PN 31-1397342-001
a	Plan name EVOLUTION CREATIVE SOLUTIONS INC 401K PLAN	
b	Name of plan sponsor EVOLUTION CREATIVE SOLUTIONS	c EIN-PN 31-1408643-001
a	Plan name DERMATOLOGY & SURGERY OF SOUTHERN OHIO 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor DERMATOLOGY & SURGERY OF	c EIN-PN 31-1408884-001
a	Plan name CATHY R COOK ATTORNEY AT LAW 401(K) PLAN	
b	Name of plan sponsor CATHY R COOK ATTORNEY AT LAW	c EIN-PN 31-1432282-001
a	Plan name JK EXCAVATING & UTILITIES 401(K) RETIREMENT PLAN	
b	Name of plan sponsor PFSBP/JK EXCAVATING & UTILITIE	c EIN-PN 31-1459686-001
a	Plan name AVON DENTAL CARE 401(K) PLAN	
b	Name of plan sponsor AMCP/AVON DENTAL CARE 401(K) P	c EIN-PN 31-1529681-001
a	Plan name KERR BROTHERS FUNERAL HOME LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KERR BROTHERS FUNERAL HOME	c EIN-PN 31-1568595-001
a	Plan name GEOGRAPH INDUSTRIES INC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor GEOGRAPH INDUSTRIES INC	c EIN-PN 31-1579613-001
a	Plan name KELLY YOUTH SERVICES INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor KELLY YOUTH SERVICES INC	c EIN-PN 31-1609551-001
a	Plan name AJAZ UMERANI MD INC PROFIT SHARING PLAN	
b	Name of plan sponsor AJAZ UMERANI	c EIN-PN 31-1618591-002

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	REHAB RESOURCES INC 401(K) PLAN	
b	Name of plan sponsor	REHAB RESOURCES INC	c EIN-PN 31-1641942-001
a	Plan name	WYMARD AND ASSOCIATES INC AQUA 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	WYMARD AND ASSOCIATES INC DBA	c EIN-PN 31-1714504-001
a	Plan name	GRASSHOPPER INVESTMENTS LLC 401(K) PLAN	
b	Name of plan sponsor	LMRCP/GRASSHOPPER INVESTMENTS	c EIN-PN 31-1776586-001
a	Plan name	ARK REHAB PSC 401(K) PLAN	
b	Name of plan sponsor	ARK REHAB PSC	c EIN-PN 32-0025428-001
a	Plan name	SPRINGBORO SPIRITS 401(K) PLAN	
b	Name of plan sponsor	SD BHATARA INC	c EIN-PN 32-0074530-001
a	Plan name	KP COMPONENTS INC 401(K) PLAN	
b	Name of plan sponsor	KP COMPONENTS INC	c EIN-PN 32-0352330-001
a	Plan name	MURRAY'S CHEESE 401(K) PLAN	
b	Name of plan sponsor	MURRAY'S CHEESE LLC	c EIN-PN 32-0376453-001
a	Plan name	DELA SECURA INC 401(K) PLAN	
b	Name of plan sponsor	DELA SECURA INC	c EIN-PN 33-0100545-001
a	Plan name	CALIFORNIA ASSOCIATION OF COMMUNITY MANAGERS MEMBERS 401(K) PROGRAM	
b	Name of plan sponsor	CACMP/CALIFORNIA ASSOCIATION O	c EIN-PN 33-0484431-002
a	Plan name	SQUARE KING FOODS INC 401(K) PLAN	
b	Name of plan sponsor	SQUARE KING FOODS INC	c EIN-PN 33-0598669-001
a	Plan name	SPORTSHEETS INTERNATIONAL INC 401(K) SAVINGS PLAN	
b	Name of plan sponsor	INTORA INC	c EIN-PN 33-0770691-001
a	Plan name	SPECIALIZED SALES CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SPECIALIZED SALES CORPORATION	c EIN-PN 33-0866737-001

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	HURTT FAMILY HEALTH CLINIC RETIREMENT PLAN	
b	Name of plan sponsor	HURTT FAMILY HEALTH CLINIC INC	c EIN-PN 33-0906866-001
a	Plan name	BUILDERS EXCHANGE INC. 401(K) PLAN	
b	Name of plan sponsor	BXOP/THE BUILDERS EXCHANGE INC	c EIN-PN 34-0121870-001
a	Plan name	EVARTS TREMAINE 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	EVARTS TREMAINE	c EIN-PN 34-0210170-001
a	Plan name	AMAC ENTERPRISES INC 401(K) PLAN	
b	Name of plan sponsor	AMAC ENTERPRISES INC	c EIN-PN 34-0731589-002
a	Plan name	W M WILSON COMPANY 401(K) PLAN	
b	Name of plan sponsor	W M WILSON COMPANY INC	c EIN-PN 34-0799625-002
a	Plan name	BAKER & SONS EQUIPMENT COMPANY PROFIT SHARING PLAN	
b	Name of plan sponsor	BAKER & SONS EQUIPMENT COMPANY	c EIN-PN 34-1125133-001
a	Plan name	NEFF-PERKINS COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NEFF-PERKINS COMPANY	c EIN-PN 34-1296667-002
a	Plan name	MCMILLEN CHIROPRACTIC OFFICE INC 401(K) PLAN	
b	Name of plan sponsor	AMCP/MCMILLEN CHIROPRACTIC OFF	c EIN-PN 34-1557044-001
a	Plan name	HUFFMAN EQUIPMENT RENTAL INC 401(K) PLAN	
b	Name of plan sponsor	BXOP/HUFFMAN EQUIPMENT RENTAL	c EIN-PN 34-1665703-001
a	Plan name	MCKENZIE CONCRETE 401(K) PLAN	
b	Name of plan sponsor	BXOP/MCKENZIE CONCRETE 401(K)	c EIN-PN 34-1665861-001
a	Plan name	BRAMHALL ENGINEERING & SURVEYING CO 401(K) PLAN	
b	Name of plan sponsor	BRAMHALL ENGINEERING & SURVEYI	c EIN-PN 34-1822908-001
a	Plan name	PRUSA CONSTRUCTION LLC 401(K) PLAN & TRUST	
b	Name of plan sponsor	BXOP/PRUSA CONSTRUCTION LLC	c EIN-PN 34-1933277-001

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	CRS METALWORX INC 401(K) PLAN	
b	Name of plan sponsor	BXOP/CRS METALWORX INC 401(K)	c EIN-PN 34-1960458-001
a	Plan name	MDG FLOORING AMERICA 401(K) PLAN	
b	Name of plan sponsor	AMCP/MDG FLOORING AMERICA 401	c EIN-PN 34-1962169-001
a	Plan name	INTERNET CREATIONS 2000 LLC 401(K) PLAN	
b	Name of plan sponsor	INTERNET CREATIONS 2000 LLC	c EIN-PN 34-2028870-001
a	Plan name	ARTS UNITED OF GREATER FORT WAYNE INC 401(K) PLAN	
b	Name of plan sponsor	RACFWP/ARTS UNITED OF GREATER	c EIN-PN 35-0992067-002
a	Plan name	AML RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	AML INC	c EIN-PN 35-1134293-002
a	Plan name	LANGDON MORTGAGE COMPANY INC 401(K) PLAN	
b	Name of plan sponsor	LANGDON MORTGAGE COMPANY INC	c EIN-PN 35-1923481-001
a	Plan name	RIGDON CONSTRUCTION INC 401(K) PLAN	
b	Name of plan sponsor	AICCP/RIDGON CONSTRUCTION INC	c EIN-PN 35-1942886-001
a	Plan name	KIRK VETERINARY SERVICE 401(K) PLAN	
b	Name of plan sponsor	SCCRP/KIRK VETERINARY SERVICE	c EIN-PN 35-2157833-001
a	Plan name	AIK 401(K) PLAN	
b	Name of plan sponsor	MSCCP/AIK 401(K) PLAN	c EIN-PN 35-2201214-001
a	Plan name	KEITH & ASSOCIATES LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KEITH & ASSOCIATES PLLC	c EIN-PN 35-2349774-001
a	Plan name	TOTAL REAL ESTATE OF NEVADA LLC 401(K) PLAN	
b	Name of plan sponsor	TOTAL REAL ESTATE OF NEVADA	c EIN-PN 35-2433009-001
a	Plan name	AMFUEL HOURLY EMPLOYEES 401(K) PLAN	
b	Name of plan sponsor	AMFUEL CELL & COATED	c EIN-PN 35-2580768-003

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	AMFUEL SALARIED EMPLOYEES RETIREMENT INCOME PLAN	
b	Name of plan sponsor	AMERICAN FUEL CELL AND	c EIN-PN 35-2580768-002
a	Plan name	RICHARDSON POULTRY LLC 401(K) PLAN	
b	Name of plan sponsor	GIOAP/RICHARDSON POULTRY LLC	c EIN-PN 35-2794012-001
a	Plan name	SECURITY LUMBER & SUPPLY COMPANY PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	SECURITY LUMBER & SUPPLY CO	c EIN-PN 36-2048227-001
a	Plan name	SANDSTROM PRODUCTS COMPANY 401(K) PLAN	
b	Name of plan sponsor	SANDSTROM PRODUCTS COMPANY	c EIN-PN 36-2251795-002
a	Plan name	G&M MANUFACTURING CORPORATION PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	G&M MANUFACTURING CORPORATION	c EIN-PN 36-2790345-003
a	Plan name	SEAN PATRICKS SALON AND SPA 401(K) PLAN	
b	Name of plan sponsor	SEAN PATRICKS SALON AND SPA	c EIN-PN 36-3834146-001
a	Plan name	COVENANT HEALTH NETWORK PROFIT SHARING PLAN	
b	Name of plan sponsor	COVENANT HEALTH	c EIN-PN 36-4133330-002
a	Plan name	ONCOLOGY OF NORTSHORE CLINIC INC 401(K) PLAN	
b	Name of plan sponsor	BASSAM F MATAR M D S C DBA	c EIN-PN 36-4282819-001
a	Plan name	WARMLYOURS 401(K) PLAN	
b	Name of plan sponsor	WARMLYOURS.COM INC	c EIN-PN 36-4293383-001
a	Plan name	NIAZ MEDICAL SERVICES PC 401(K) PLAN	
b	Name of plan sponsor	NIAZ MEDICAL SERVICES PC	c EIN-PN 36-4621725-001
a	Plan name	VICTORY LANE 401(K)PLAN	
b	Name of plan sponsor	VICTORY LANE FORD INC	c EIN-PN 37-1163551-001
a	Plan name	WATKINS EXPRESS FREIGHT INC 401(K) PLAN	
b	Name of plan sponsor	WATKINS EXPRESS FREIGHT INC	c EIN-PN 37-1439733-001

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	CBA NORTH PORT 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA NORTH PORT 401(K) PL	c EIN-PN 37-1909312-001
a	Plan name	PRESSURE COMPONENTS INC 401(K) PLAN	
b	Name of plan sponsor	PRESSURE COMPONENTS INC	c EIN-PN 38-2494114-001
a	Plan name	SCHAFFER CONSTRUCTION INC 401(K) PLAN	
b	Name of plan sponsor	ESCCP/SCHAFFER CONSTRUCTION INC	c EIN-PN 38-3356957-001
a	Plan name	STAT-MED INC 401(K) PLAN	
b	Name of plan sponsor	STAT-MED INC	c EIN-PN 38-3641703-001
a	Plan name	HNC AMUSEMENTS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HNC AMUSEMENTS INC	c EIN-PN 38-3661660-001
a	Plan name	LEGACY INTERNATIONAL 401(K) PLAN	
b	Name of plan sponsor	XL LEGACY INTERNATIONAL	c EIN-PN 38-3766243-001
a	Plan name	FARMERS & MERCHANTS BANK 401(K) PLAN	
b	Name of plan sponsor	FARMERS & MERCHANTS BANK	c EIN-PN 39-0273347-001
a	Plan name	SPEEDWAY SAND & GRAVEL INC PROFIT SHARING PLAN	
b	Name of plan sponsor	SPEEDWAY SAND & GRAVEL LLC	c EIN-PN 39-1101576-001
a	Plan name	ROE FARMS TRUCKING RETIREMENT PLAN	
b	Name of plan sponsor	MWCCP/ROE FARMS TRUCKING RETIR	c EIN-PN 39-1905770-001
a	Plan name	CHISOLM TRAIL RV LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	CHISOLM TRAIL RV LLC	c EIN-PN 39-2055235-001
a	Plan name	S M HENTGES & SONS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	S M HENTGES & SONS INC	c EIN-PN 41-1517673-001
a	Plan name	THE BAINEY GROUP INC 401(K) PLAN	
b	Name of plan sponsor	THE BAINEY GROUP	c EIN-PN 41-1786889-001

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	RYCHLEY TAX AND FINANCIAL SERVICES RETIREMENT PLAN	
b	Name of plan sponsor	FLCCP/RYCHLEY TAX AND FINANCIA	c EIN-PN 41-1825889-002
a	Plan name	LEIGHTON STATE BANK 401(K) PLAN	
b	Name of plan sponsor	LSBCP/ LEIGHTON STATE BANK 401	c EIN-PN 42-0246810-001
a	Plan name	DOWNING CONSTRUCTION INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DOWNING CONSTRUCTION INC	c EIN-PN 42-0925175-001
a	Plan name	CHRISTIAN OPPORTUNITY CENTER PROFIT SHARING PLAN	
b	Name of plan sponsor	CHRISTIAN OPPORTUNITY CENTER	c EIN-PN 42-0946676-001
a	Plan name	SHORE MOTOR COMPANY 401(K) PLAN	
b	Name of plan sponsor	SHORE MOTOR COMPANY	c EIN-PN 42-1047360-001
a	Plan name	MECHANICAL AIR SYSTEMS COMPANY 401(K) SALARY REDUCTION PLAN AND TRUST	
b	Name of plan sponsor	MECHANICAL AIR SYSTEMS COMPANY	c EIN-PN 42-1181621-002
a	Plan name	PYRAMID ROOFING COMPANY INC PROFIT SHARING PLAN	
b	Name of plan sponsor	PYRAMID ROOFING COMPANY INC	c EIN-PN 43-0733625-001
a	Plan name	PATRICK FURNITURE MART 401(K) PLAN	
b	Name of plan sponsor	PATRICK FURNITURE MART INC	c EIN-PN 43-0960268-001
a	Plan name	HILLSBORO FIRE PROTECTION DISTRICT 457(B) PLAN	
b	Name of plan sponsor	AMCP/HILLSBORO FIRE PROTECTION	c EIN-PN 43-1036073-001
a	Plan name	PRO ROLLER COMPANY INC PROFIT SHARING PLAN	
b	Name of plan sponsor	ESCRP/ PRO ROLLER COMPANY INC	c EIN-PN 43-1047187-001
a	Plan name	CUSTOM INSURANCE SERVICES INC RETIREMENT PLAN	
b	Name of plan sponsor	CUSTOM INSURANCE SERVICES INC	c EIN-PN 43-1128229-001
a	Plan name	ROSS A BENNETT DDS PC PROFIT SHARING PLAN	
b	Name of plan sponsor	ROSS A BENNETT DDS PC	c EIN-PN 43-1227099-002

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 NORTH AMERICAN MONTESSORI CHILD CARE INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NORTH AMERICAN MONTESSORI	c EIN-PN 43-1296220-001
a	Plan name DESIGN NINE INC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor AMRP/DESIGN NINE INC 401(K)	c EIN-PN 43-1404128-001
a	Plan name HITS SCANNING SOLUTIONS INC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor HITS SCANNING SOLUTIONS INC	c EIN-PN 43-1548486-002
a	Plan name UNLIMITED OPPORTUNITIES INC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor APDRP/ UNLIMITED OPPORTUNITIES	c EIN-PN 43-1578193-001
a	Plan name MISSOURI ASSOCIATION OF MANUFACTURERS 401(K) PLAN	
b	Name of plan sponsor MAMMP/MISSOURI ASSOCIATION OF	c EIN-PN 43-1655396-001
a	Plan name KEYSTONE 401(K) PLAN	
b	Name of plan sponsor KEYSTONE TEMPORARY ASSIGNMENT	c EIN-PN 43-1679155-001
a	Plan name DIAMOND CONTRACTORS INC 401(K) P/S PLAN	
b	Name of plan sponsor DIAMOND CONTRACTORS INC	c EIN-PN 43-1695494-001
a	Plan name SPRINGFIELD FAMILY MEDICAL WALK-IN CLINICS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SPRINGFIELD FAMILY MEDICAL	c EIN-PN 43-1782707-001
a	Plan name KORSMEYER FIRE PROTECTION LLC 401(K) PLAN	
b	Name of plan sponsor ESCRP/KORSMEYER FIRE PROTECTIO	c EIN-PN 43-1793481-001
a	Plan name ROHA USA 401(K) PLAN	
b	Name of plan sponsor ESCRP/ROHA USA LLC	c EIN-PN 43-1860576-001
a	Plan name HUNTINGTON ORTHOPEDIC SURGICAL MEDICAL GROUP 401(K) PLAN	
b	Name of plan sponsor HUNTINGTON ORTHOPEDIC SURGICAL	c EIN-PN 43-2013469-002
a	Plan name EARTHKIND LLC 401(K) PLAN	
b	Name of plan sponsor CATAP/EARTHKIND LLC	c EIN-PN 45-0456653-001

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 ROADS FOUNDATION 401K PLAN	
b	Name of plan sponsor	THE ROADS FOUNDATION INC	c EIN-PN 45-0572757-001
a	Plan name	DITCHARO SMILES RETIREMENT PLAN & TRUST	
b	Name of plan sponsor	DITCHARO SMILES PC	c EIN-PN 45-0781221-001
a	Plan name	MIKE CASSARA MASONRY INC 401(K) PLAN	
b	Name of plan sponsor	MIKE CASSARA MASONRY INC	c EIN-PN 45-1016486-001
a	Plan name	CITYSIDE HOMES LLC 401(K) PLAN	
b	Name of plan sponsor	CITYSIDE HOMES LLC	c EIN-PN 45-1340711-001
a	Plan name	CENTURION SHEILD PROTECTION SERVICES 401(K) PLAN	
b	Name of plan sponsor	CENTURION SHEILD PROTECTION	c EIN-PN 45-1420503-001
a	Plan name	OUR FAMILY DOCTOR PLLC 401(K) PLAN	
b	Name of plan sponsor	OUR FAMILY DOCTOR PLLC	c EIN-PN 45-1499684-001
a	Plan name	EMWN 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	SFCRP/EMWN 401(K) RETIREMENT	c EIN-PN 45-2252364-001
a	Plan name	CBA GRANBURY 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA GRANBURY 401(K) PLAN	c EIN-PN 45-2489514-002
a	Plan name	REN ACQUISITION INC 401(K) PLAN	
b	Name of plan sponsor	REN ACQUISITION INC	c EIN-PN 45-2541736-001
a	Plan name	GINGER BAY TOWN & COUNTRY LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	GINGER BAY TOWN & COUNTRY LLC	c EIN-PN 45-2668876-001
a	Plan name	BUG PATROL LLC 401(K) PLAN	
b	Name of plan sponsor	MEBCP/ BUG PATROL LLC 401(K)	c EIN-PN 45-2892882-001
a	Plan name	BOWEN TAX LAW 401(K) PLAN	
b	Name of plan sponsor	BOWEN TAX LAW	c EIN-PN 45-3057472-001

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 SIXTH BREWING 401(K) PLAN	
b	Name of plan sponsor	KFGRP/WEST SIXTH BREWING CO	c EIN-PN 45-3090289-001
a	Plan name	HOLLINGSWORTH-RIDDLEBERGER INSURANCE 401(K) PLAN	
b	Name of plan sponsor	HOLLINGSWORTH-RIDDLEBERGER	c EIN-PN 45-3169049-001
a	Plan name	ABSTRACT 401(K) PLAN	
b	Name of plan sponsor	ABSTRACT LLC DBA ART & SCIENCE	c EIN-PN 45-3567270-001
a	Plan name	CASECO LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	CASECO LLC	c EIN-PN 45-3658733-001
a	Plan name	MCKINNON MEDICAL GROUP PLLC 401(K) PLAN	
b	Name of plan sponsor	ACLVP/MCKINNON MEDICAL GROUP	c EIN-PN 45-3720025-001
a	Plan name	CINCINNATI UNITED CONTRACTORS LLC RETIREMENT PLAN	
b	Name of plan sponsor	CINCINNATI UNITED CONTRACTORS	c EIN-PN 45-3742388-001
a	Plan name	COASTAL CONSULTING MANAGEMENT GROUP 401(K) PLAN	
b	Name of plan sponsor	COASTAL CONSULTING MANAGEMENT	c EIN-PN 45-3787065-001
a	Plan name	LAFAYETTE DENTAL ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor	FDDSP/LAFAYETTE DENTAL ASSOCIA	c EIN-PN 45-3814943-001
a	Plan name	CODOS LLC 401(K) PLAN	
b	Name of plan sponsor	CODOS LLC	c EIN-PN 45-3955240-001
a	Plan name	ME BERKELEY HEIGHTS/ BRANCBURG 401(K) PLAN	
b	Name of plan sponsor	ASR PROPERTIES LLC DBA	c EIN-PN 45-4035039-001
a	Plan name	CHRISTIAN BROTHERS AUTOMOTIVE RAYFORD 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CHRISTIAN BROTHERS AUTO	c EIN-PN 45-4035743-001
a	Plan name	GOLDMAN & PETERSON PLLC 401(K) PLAN	
b	Name of plan sponsor	GOLDMAN & PETERSON PLLC	c EIN-PN 45-4043597-001

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	KERI POWELL THERAPY INC 401(K) PLAN
b	Name of plan sponsor	AMCP/KERI POWELL THERAPY INC
c	EIN-PN	45-4058427-001
a	Plan name	ECO LOGIC 401(K) PLAN
b	Name of plan sponsor	ECO LOGIC ENVIRONMENTAL
c	EIN-PN	45-4135572-001
a	Plan name	ANTHONY LANCASTER INSURANCE AGENCY 401K PLAN
b	Name of plan sponsor	TBAP/ANTHONY LANCASTER INSURAN
c	EIN-PN	45-4155125-001
a	Plan name	INDUSTRIAL PROJECT INNOVATION LLC 401K PLAN
b	Name of plan sponsor	IPIM/INDUSTRIAL PROJECT INNOVA
c	EIN-PN	45-4274955-001
a	Plan name	DENTAL ARTS OF DOWNINGTOWN 401K PLAN
b	Name of plan sponsor	DENTAL ARTS OF DOWNINGTOWN
c	EIN-PN	45-4553325-001
a	Plan name	SECURE BENEFITS LLC 401(K) PLAN
b	Name of plan sponsor	SECURE BENEFITS LLC DBA
c	EIN-PN	45-4613561-001
a	Plan name	PENNEBAKER LAW FIRM 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	FPORP/PENNEBAKER LAW FIRM 401
c	EIN-PN	45-4847911-001
a	Plan name	FENSON CONTRACTING 401(K) PLAN & TRUST
b	Name of plan sponsor	BXOP/FENSON CONTRACTING 401(K)
c	EIN-PN	45-5029577-001
a	Plan name	FRANCKES INC 401(K) PROFIT SHARING PLAN AND TRUST
b	Name of plan sponsor	AWAIP/FRANCKES INC 401(K) PROF
c	EIN-PN	45-5161100-001
a	Plan name	IRVING FARM HOLDING LLC 401(K) PLAN
b	Name of plan sponsor	IRVING FARM HOLDING LLC
c	EIN-PN	45-5269525-001
a	Plan name	BROCK ASSOCIATES LLC 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	PBXP/BROCK ASSOCIATES LLC 401
c	EIN-PN	45-5378798-001
a	Plan name	HK PANEL SYSTEMS 401(K) RETIREMENT PLAN
b	Name of plan sponsor	QNBCP/HK PANEL SYSTEMS 401(K)
c	EIN-PN	45-5392056-001

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 CBA BRANDON 401(K) PLAN	
b	Name of plan sponsor CBAFP/CBA BRANDON 401(K) PLAN	c EIN-PN 45-5419287-001
a	Plan name STORMWATER SOLUTIONS 401(K) PLAN AND PROFIT SHARE	
b	Name of plan sponsor STORMWATER SOLUTIONS	c EIN-PN 45-5492480-001
a	Plan name PLASTIC SURGERY ASSOCIATES OF SOUTH DAKOTA LTD PROFIT SHARING PLAN	
b	Name of plan sponsor PLASTIC SURGERY ASSOCIATES OF	c EIN-PN 46-0388494-001
a	Plan name SORLIEN ELECTRIC 401(K) PLAN	
b	Name of plan sponsor SORLIEN ELECTRIC INC	c EIN-PN 46-0448452-001
a	Plan name DEFFENBAUGH HOMES SAFE HARBOR MATCH RETIREMENT PLAN	
b	Name of plan sponsor DEFFENBAUGH CONSTRUCTION INC	c EIN-PN 46-0457062-001
a	Plan name CAROLINA FURNITURE CONCEPTS INC 401(K) PLAN	
b	Name of plan sponsor CAROLINA FURNITURE CONCEPTS	c EIN-PN 46-0490457-001
a	Plan name ENDODONTIC CARE NY PC 401(K) PLAN	
b	Name of plan sponsor ENDODONTIC CARE NY PC	c EIN-PN 46-0778454-001
a	Plan name PETTIS COUNTY AMBULANCE DISTRICT 457(B) PLAN	
b	Name of plan sponsor PETTIS COUNTY AMBULANCE	c EIN-PN 46-0786417-001
a	Plan name D&S PSYCHOLOGICAL SERVICES LLC PROFIT SHARING PLAN	
b	Name of plan sponsor D&S PSYCHOLOGICAL SERVICES LLC	c EIN-PN 46-1113421-001
a	Plan name BAYONNE SMILE CENTER LLC 401(K) PLAN	
b	Name of plan sponsor BAYONNE SMILE CENTER LLC	c EIN-PN 46-1227455-001
a	Plan name CBA OCOTILLO 401(K) PLAN	
b	Name of plan sponsor CBAFP/CBA OCOTILLO 401(K) PLAN	c EIN-PN 46-1479614-002
a	Plan name DEVER INC 401(K) PLAN	
b	Name of plan sponsor WCCRP/DEVER INC 401(K) PLAN	c EIN-PN 46-1520598-001

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	KWCC INC 401(K) PLAN	
b	Name of plan sponsor	KWCC INC	c EIN-PN 46-1602827-001
a	Plan name	CBA WESTERN WAKE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA WESTERN WAKE 401(K)	c EIN-PN 46-1739063-001
a	Plan name	7 STAR HOSPITALITY RESOURCE LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	7SHR/BAHRS RESTAURANT INC	c EIN-PN 46-1827643-001
a	Plan name	7SHR/7 STAR HOSPITALITY RESOURCE LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	7SHR/STATLER DALLAS F&B LLC	c EIN-PN 46-1827643-005
a	Plan name	7SHR/7 STAR HOSPITALITY RESOURCE LLC MULTIPLE EMPLOYER RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	7SHR/ARM MANAGEMENT LLC	c EIN-PN 46-1827643-005
a	Plan name	CBA CUMMING 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA CUMMING 401(K) PLAN	c EIN-PN 46-1847877-001
a	Plan name	BODY MECHANICS ORTHOPEDIC MASSAGE 401(K) PLAN	
b	Name of plan sponsor	ZEN BODY MECHANICS LLC	c EIN-PN 46-1863440-001
a	Plan name	LANDS END ABSTRACT SERVICES 401K PLAN	
b	Name of plan sponsor	LANDS END ABSTRACT SERVICES	c EIN-PN 46-2141210-001
a	Plan name	ZKXKZ LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	ZKXKZ LLC	c EIN-PN 46-2373667-001
a	Plan name	J RICH ROBINSON FAMILY DENTISTRY LLC 401(K) PLAN	
b	Name of plan sponsor	J RICH ROBINSON FAMILY	c EIN-PN 46-2577735-001
a	Plan name	FORWARD MORTGAGE 401(K) PLAN	
b	Name of plan sponsor	PFRPP/FORWARD MORTGAGE 401(K)	c EIN-PN 46-2646636-001
a	Plan name	MAXUS OPERATIONS LLC AND AFFILIATES 401(K) PLAN	
b	Name of plan sponsor	ECCRP/MAXUS OPERATIONS LLC AND	c EIN-PN 46-2715562-001

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	NEW YORK FAN COIL LLC 401K PLAN	
b	Name of plan sponsor	ADCP/NEW YORK FAN COIL LLC 401	c EIN-PN 46-2801989-001
a	Plan name	SOUTHERN PINES BREWING COMPANY 401(K) PLAN	
b	Name of plan sponsor	NCCBGP/SOUTHERN PINES BREWING	c EIN-PN 46-3097895-001
a	Plan name	MARTIN BAGWELL LUKE PC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MARTIN BAGWELL LUKE PC	c EIN-PN 46-3663316-001
a	Plan name	BOLTS & NUTS CORP PROFIT SHARING PLAN	
b	Name of plan sponsor	BOLTS & NUTS CORP	c EIN-PN 46-3951763-001
a	Plan name	MARKETPLACE PHL LLC 401(K) PLAN	
b	Name of plan sponsor	MARKETPLACE PHL LLC	c EIN-PN 46-4428763-001
a	Plan name	OOSTRA ENTERPRISES LLC 401(K) PLAN	
b	Name of plan sponsor	AMCP/OOSTRA ENTERPRISES LLC	c EIN-PN 46-4477725-001
a	Plan name	THE MONTESSORI IN SOHO 401(K) PLAN	
b	Name of plan sponsor	THE MONTESSORI IN SOHO LLC	c EIN-PN 46-4655196-001
a	Plan name	CBA LAWNBOYS 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA LAWNBOYS 401(K) PLAN	c EIN-PN 46-4942709-001
a	Plan name	SHARED USE MOBILITY CENTER 401(K) PLAN	
b	Name of plan sponsor	SHARED USE MOBILITY CENTER	c EIN-PN 46-4996721-001
a	Plan name	SHOWIT INC 401(K) PLAN	
b	Name of plan sponsor	SHOWIT INC	c EIN-PN 46-5013121-001
a	Plan name	SB III LLC 401(K) PLAN	
b	Name of plan sponsor	BXOP/SB III LLC 401(K) PLAN	c EIN-PN 46-5445847-001
a	Plan name	GRAPE TOO LLC 401(K) PLAN	
b	Name of plan sponsor	GRAPE TOO LLC	c EIN-PN 46-5589685-001

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	LUEDER CONSTRUCTION COMPANY 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	LUEDER CONSTRUCTION COMPANY	c EIN-PN 47-0116980-001
a	Plan name	NAAE INC 401K PLAN	
b	Name of plan sponsor	NATIONAL ASSOCIATION OF AGRICU	c EIN-PN 47-0467139-001
a	Plan name	HANSEN INTERNATIONAL TRUCK INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HANSEN INTERNATIONAL TRUCK	c EIN-PN 47-0552429-001
a	Plan name	DAEDALUS CONSTRUCTION COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DAEDALUS CONSTRUCTION COMPANY	c EIN-PN 47-0602587-001
a	Plan name	FALLS CITY FAMILY PRACTICE P C PROFIT SHARING PLAN	
b	Name of plan sponsor	FALLS CITY FAMILY PRACTICE P C	c EIN-PN 47-0616719-002
a	Plan name	COLUMBUS FAMILY PRACTICE ASSOCIATES PC EMPLOYEES PROFIT SHARING AND 401(K) TRUST	
b	Name of plan sponsor	COLUMBUS FAMILY PRACTICE	c EIN-PN 47-0634907-002
a	Plan name	INTERIOR CONSTRUCTION INC 401(K) PLAN	
b	Name of plan sponsor	INTERIOR CONSTRUCTION INC	c EIN-PN 47-0679403-001
a	Plan name	ART F/X 401(K) PLAN	
b	Name of plan sponsor	ART WEARS LINCOLN INC DBA ART	c EIN-PN 47-0766601-001
a	Plan name	ENGINEERING TECHNOLOGIES INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ENGINEERING TECHNOLOGIES INC	c EIN-PN 47-0806856-001
a	Plan name	OHIO VALLEY PET CARE 401(K) PLAN	
b	Name of plan sponsor	EFSP/OHIO VALLEY PET CARE 401(c EIN-PN 47-1002785-001
a	Plan name	ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST - MAS INC	
b	Name of plan sponsor	ASRA/MAS INC	c EIN-PN 47-1134281-333
a	Plan name	NORTHWOODS REHABILITATION & NURSING CENTER 401(K) PLAN	
b	Name of plan sponsor	ABMMP/NORTHWOODS REHABILITATIO	c EIN-PN 47-1252551-001

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	MOSAIC IMPLANT 401(K) PLAN	
b	Name of plan sponsor	ESCCP/MOSAIC IMPLANT 401(K)	c EIN-PN 47-1258856-001
a	Plan name	UNIVERSAL TICKETS INC 401(K) PLAN	
b	Name of plan sponsor	UNIVERSAL TICKETS INC	c EIN-PN 47-1376880-001
a	Plan name	TAGGART TRANSPORTATION COMPANY 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	LGPCP/TAGGART TRANSPORTATION	c EIN-PN 47-1620973-001
a	Plan name	REDWALL LLC RETIREMENT PLAN	
b	Name of plan sponsor	GIOAP/REDWALL LLC RETIREMENT	c EIN-PN 47-1809905-001
a	Plan name	BULL ISLAND COMPANY LLC 401(K) PLAN	
b	Name of plan sponsor	GIOAP/BULL ISLAND COMPANY LLC	c EIN-PN 47-1814476-001
a	Plan name	PARIS MOUNTAIN HOSPITALITY LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GIOAP/PARIS MOUNTAIN HOSPITALI	c EIN-PN 47-1819250-001
a	Plan name	LAGNIAPPE FOOD SERVICES LLC 401K PLAN	
b	Name of plan sponsor	GIOAP/ LAGNIAPPE FOOD SERVICES	c EIN-PN 47-1886697-001
a	Plan name	CHICK-FIL-A AVALON 401(K) PLAN	
b	Name of plan sponsor	GIOAP/CHICK-FIL-A AVALON 401(K)	c EIN-PN 47-1916318-001
a	Plan name	SOUTHERN PIKE 401(K) PLAN	
b	Name of plan sponsor	GIOAP/SOUTHERN PIKE 401(K)	c EIN-PN 47-1950611-001
a	Plan name	JLDH VENTURES 401(K) PLAN	
b	Name of plan sponsor	GIOAP/JLDH VENTURES 401(K)	c EIN-PN 47-1965840-001
a	Plan name	EAST FORSYTH HOSPITALITY CFA 401(K) PLAN	
b	Name of plan sponsor	GIOAP/EAST FORSYTH HOSPITALITY	c EIN-PN 47-1971875-001
a	Plan name	INTEGRATED FINANCIAL CONCEPTS LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	INTEGRATED FINANCIAL CONCEPTS	c EIN-PN 47-2035435-001

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	CBA JACKSON 401K PLAN	
b	Name of plan sponsor	CBAFP/CBA JACKSON 401K PLAN	c EIN-PN 47-2499749-001
a	Plan name	OG SUPPLY 401(K) PLAN	
b	Name of plan sponsor	OG SUPPLY	c EIN-PN 47-2512600-001
a	Plan name	1000 GENERATIONS INC DBA SAFE FAMILIES FOR CHILDREN WI RETIREMENT PLAN	
b	Name of plan sponsor	AMCP/1000 GENERATIONS INC DBA	c EIN-PN 47-2646525-001
a	Plan name	LAROCCA HORNIK ROSEN GREENBERG & CRUPI LLC 401(K) PLAN	
b	Name of plan sponsor	LAROCCA HORNIK ROSEN	c EIN-PN 47-2664143-001
a	Plan name	CBA WEST WICHITA 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA WEST WICHITA 401(K)	c EIN-PN 47-2700248-001
a	Plan name	JMA SOLUTIONS LLC 401(K) PLAN	
b	Name of plan sponsor	JMA SOLUTIONS LLC	c EIN-PN 47-2815850-001
a	Plan name	CBA FRIENDSWOOD 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA FRIENDSWOOD 401(K)	c EIN-PN 47-2835725-001
a	Plan name	VANHOOK AGENCY RETIREMENT PLAN	
b	Name of plan sponsor	VANHOOK INSURANCE AGENCY	c EIN-PN 47-2925170-001
a	Plan name	BLAZE 401(K) PLAN	
b	Name of plan sponsor	MSCCP/BLAZE ENTERPRISES LLC	c EIN-PN 47-2966988-001
a	Plan name	CBA WOODMEN 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA WOODMEN 401(K) PLAN	c EIN-PN 47-3028125-001
a	Plan name	DIGITAL LABOR SOLUTIONS 401(K) PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor	DIGITAL LABOR SOLUTIONS INC	c EIN-PN 47-3057691-001
a	Plan name	CBA S WESTERN AVE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA S WESTERN AVE 401(K)	c EIN-PN 47-3108529-001

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	SOLUS ALTERNATIVE ASSET MANAGEMENT LP 401(K) PLAN	
b	Name of plan sponsor	SOLUS ALTERNATIVE ASSET	c EIN-PN 47-3360230-001
a	Plan name	SLK COMPANY LLC 401(K) PLAN	
b	Name of plan sponsor	SLK COMPANY LLC DBA VIBRANT	c EIN-PN 47-3445324-001
a	Plan name	MACANDREW K ROBISON DMD LLC RETIREMENT PLAN	
b	Name of plan sponsor	SGPAP/ MACANDREW K ROBISON DMD	c EIN-PN 47-4011868-001
a	Plan name	RIGGS COMPANIES 401K PLAN	
b	Name of plan sponsor	ACLVP/RIGGS COMPANIES 401K PLA	c EIN-PN 47-4068503-001
a	Plan name	CFA WESTFIELD RETIREMENT PLAN	
b	Name of plan sponsor	GIOAP/CFA WESTFIELD RETIREMENT	c EIN-PN 47-4108990-001
a	Plan name	INFINITY TODAY 401K PLAN	
b	Name of plan sponsor	INFINITY TODAY LLC	c EIN-PN 47-4129402-001
a	Plan name	MACDONALD & HICKS PA PROFIT SHARING & 401(K) PLAN	
b	Name of plan sponsor	MACDONALD & HICKS PA	c EIN-PN 47-4155634-001
a	Plan name	MONTGOMERY COUNTY ESD 9 457 PLAN	
b	Name of plan sponsor	MONTGOMERY COUNTY ESD 9	c EIN-PN 47-4184950-001
a	Plan name	CBA MANDEVILLE 401K PLAN	
b	Name of plan sponsor	CBAFP/CBA MANDEVILLE 401K PLAN	c EIN-PN 47-4230986-002
a	Plan name	LIFESONG INFLUENCES LLC 401(K) PLAN	
b	Name of plan sponsor	GIOAP/LIFESONG INFLUENCES LLC	c EIN-PN 47-4465553-001
a	Plan name	CONTIGO COMPOUNDING 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	RRNMP/CONTIGO COMPOUNDING 401	c EIN-PN 47-4708993-001
a	Plan name	CBA LONE TREE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/LONE TREE	c EIN-PN 47-4731906-001

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	SYNERGY COMPANIES RETIREMENT SAVINGS PLAN
b	Name of plan sponsor	SYNERGY NDS INC
c	EIN-PN	47-4848546-001
a	Plan name	LYNNWOOD BREWING CONCERN 401(K) PLAN
b	Name of plan sponsor	NCCBGP/LYNNWOOD BREWING CONCER
c	EIN-PN	47-4961244-001
a	Plan name	CITY OF WISNER 401(K) PLAN
b	Name of plan sponsor	CITY OF WISNER
c	EIN-PN	47-6006417-001
a	Plan name	MUTUAL FIRST FCU 401(K) PLAN
b	Name of plan sponsor	MUTUAL FIRST FEDERAL CREDIT
c	EIN-PN	47-6024482-002
a	Plan name	LARGO TANK & EQUIPMENT INC.401(K) PLAN
b	Name of plan sponsor	LARGO TANK & EQUIPMENT INC.
c	EIN-PN	48-0925917-001
a	Plan name	FOUR STATE MAINTENANCE SUPPLY INC 401(K) PLAN
b	Name of plan sponsor	ESCCP/FOUR STATE MNTNCE SPLY
c	EIN-PN	48-1001328-001
a	Plan name	KENDALL CONSTRUCTION INC 401(K) PLAN
b	Name of plan sponsor	KENDALL CONSTRUCTION INC
c	EIN-PN	48-1198261-001
a	Plan name	ALLIANCE MECHANICAL CONTRACTORS 401(K) PLAN
b	Name of plan sponsor	ESCCP/ALLIANCE MECHANICAL
c	EIN-PN	48-1231280-001
a	Plan name	FREEMAC INC 401(K) PROFIT SHARING PLAN AND TRUST
b	Name of plan sponsor	FREEMAC INC
c	EIN-PN	48-1294674-001
a	Plan name	DUKES LUMBER COMPANY INC PROFIT SHARING PLAN
b	Name of plan sponsor	DUKES LUMBER COMPANY INC
c	EIN-PN	51-0101216-001
a	Plan name	KRESTON LIQUOR MART 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	KRESTON LIQUOR MART
c	EIN-PN	51-0117309-001
a	Plan name	DUKES LUMBER & HOME CENTER INC PROFIT SHARING PLAN
b	Name of plan sponsor	DUKES LUMBER & HOME CENTER INC
c	EIN-PN	51-0119404-001

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	LUTHER CARE SERVICES 401(K) PLAN	
b	Name of plan sponsor	LUTHER CARE SERVICES	c EIN-PN 51-0204853-002
a	Plan name	SOUTHSIDE HOLDINGS INC DBA TECHNOLOGY PUBLISHING COMPANY 401(K) PLAN	
b	Name of plan sponsor	PBXP/SOUTHSIDE HOLDINGS INC	c EIN-PN 51-0401870-001
a	Plan name	THE H.J. POIST GAS COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	THE H.J. POIST GAS COMPANY	c EIN-PN 52-0617983-001
a	Plan name	NATIONAL UTILITY CONTRACTORS ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor	NUCAP/NATIONAL UTILITY CONTRAC	c EIN-PN 52-0813009-001
a	Plan name	COMMUNICATIONS WORKERS OF AMER 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	COMMUNICATIONS WORKERS OF	c EIN-PN 52-1244701-001
a	Plan name	TOROID CORPORATION 401(K) PLAN	
b	Name of plan sponsor	TOROID CORPORATION	c EIN-PN 52-1264266-001
a	Plan name	DMS 401(A) RETIREMENT PLAN	
b	Name of plan sponsor	DATA MANAGEMENT SERVICES INC	c EIN-PN 52-1888039-002
a	Plan name	BARANTEC 401(K) PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor	BARANTEC 401(K) PROFIT SHARING	c EIN-PN 52-1980362-001
a	Plan name	NORMAN J DOZIER MD PLLC PROFIT SHARING PLAN	
b	Name of plan sponsor	NORMAN J DOZIER MD PLLC	c EIN-PN 52-2339445-001
a	Plan name	ROCKY HEAD PIZZA CO LLC 401(K) PLAN	
b	Name of plan sponsor	ROCKY HEAD PIZZA CO LLC	c EIN-PN 52-2379077-001
a	Plan name	AUGUST BENEFITS INC RETIREMENT PLAN	
b	Name of plan sponsor	AUGUST BENEFITS INC	c EIN-PN 52-2380669-001
a	Plan name	ARLINGTON CHAMBER OF COMMERCE 401K PLAN	
b	Name of plan sponsor	ACCMP/ARLINGTON CHAMBER OF COM	c EIN-PN 54-0125427-002

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 ROBINS INSURANCE AGENCY INC 401(K) PLAN	
b	Name of plan sponsor RIACP/ROBINS INSURANCE AGENCY	c EIN-PN 54-0843691-002
a	Plan name PORTSMOUTH TRAILER AND SUPPLY COMPANY 401(K) PLAN	
b	Name of plan sponsor PORTSMOUTH TRAILER AND SUPPLY	c EIN-PN 54-0857400-001
a	Plan name C W BRINKLEY INC 401(K) COMPARABILITY PROFIT SHARING PLAN	
b	Name of plan sponsor C W BRINKLEY INC	c EIN-PN 54-0948765-001
a	Plan name JEFFERSON AREA BOARD FOR AGING 457 PLAN	
b	Name of plan sponsor JEFFERSON AREA BOARD FOR AGING	c EIN-PN 54-0990078-001
a	Plan name COMMONWEALTH HOME HEALTH INC 401K PLAN	
b	Name of plan sponsor TFGCP/COMMONWEALTH HOME HEALTH	c EIN-PN 54-1330736-001
a	Plan name LONG JEWELERS INC 401(K) PLAN	
b	Name of plan sponsor LONG JEWELERS INC	c EIN-PN 54-1370573-001
a	Plan name COMMONWEALTH INSURANCE CENTER GROUP RETIREMENT PLAN	
b	Name of plan sponsor COMMONWEALTH INSURANCE	c EIN-PN 54-1455884-001
a	Plan name DAVCON INC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor DAVCON INC	c EIN-PN 54-1647387-001
a	Plan name E & L DIAMOND ELECTRIC 401(K) PLAN	
b	Name of plan sponsor E & L DIAMOND ELECTRIC COOLING	c EIN-PN 54-1801700-001
a	Plan name STRUCTURAL DESIGN AND ANALYSIS INC 401(K) PLAN	
b	Name of plan sponsor STRUCTURAL DESIGN AND ANALYSIS	c EIN-PN 54-1898388-001
a	Plan name STRUCTURED CABLE 401(K) PLAN	
b	Name of plan sponsor TFGCP/STRUCTURED CABLE 401(K)	c EIN-PN 54-1945184-001
a	Plan name MHLI 401(K) PLAN	
b	Name of plan sponsor MILITARY HOUSING AND LODGING	c EIN-PN 54-1979030-001

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	BILLINGTON FAMILY DENTISTRY RETIREMENT PLAN	
b	Name of plan sponsor	BILLINGTON FAMILY DENTISTRY	c EIN-PN 54-2114248-001
a	Plan name	KATY FAMILY PHYSICIAN RETIREMENT PLAN	
b	Name of plan sponsor	SGPAP/ KATY FAMILY PHYSICIAN	c EIN-PN 54-2154902-001
a	Plan name	FAYETTE COUNTY NATIONAL BANK 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FAYETTE COUNTY NATIONAL BANK	c EIN-PN 55-0169036-002
a	Plan name	KALASKEY ORTHODONTICS LTD 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LAWRENCE J KALASKEY III DDS	c EIN-PN 55-0658091-002
a	Plan name	401(K) PROFIT SHARING PLAN FOR EMPLOYEES OF NORTH COUNTRY CONTRACTORS LLC	
b	Name of plan sponsor	NORTH COUNTRY CONTRACTORS LLC	c EIN-PN 55-0858326-010
a	Plan name	CATAP/CATAPULT EMPLOYERS ASSOCIATION 401K PLAN	
b	Name of plan sponsor	CATAP/CATAPULT EMPLOYERS	c EIN-PN 56-0670576-001
a	Plan name	DATA IMAGING & ASSOCIATES INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DATA IMAGING & ASSOCIATES INC	c EIN-PN 56-1043890-001
a	Plan name	HKB COSMETIC SURGERY PROFIT SHARING PLAN	
b	Name of plan sponsor	HKB COSMETIC SURGERY	c EIN-PN 56-1916799-001
a	Plan name	MCMILLAN & PSAROUDIS P A 401(K) PLAN	
b	Name of plan sponsor	MCMILLAN PSAROUDIS & MARKEY PA	c EIN-PN 56-1923596-001
a	Plan name	JACK FETNER ASSOCIATES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	JACK FETNER ASSOCIATES INC	c EIN-PN 56-2056360-001
a	Plan name	MAIL MANAGEMENT SERVICES LLC 401(K) PLAN	
b	Name of plan sponsor	MAIL MANAGEMENT SERVICES LLC	c EIN-PN 56-2075508-001
a	Plan name	ONE STOP HOME REPAIR EMPLOYEE STOCK OWNERSHIP 401(K) PLAN	
b	Name of plan sponsor	BHFSP/ ONE STOP HOME REPAIR EM	c EIN-PN 56-2301183-001

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 JONES FORD INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JONES FORD INC	c EIN-PN 57-0481772-001
a	Plan name ALLPHASE ELECTRICAL COMPANY LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ALLPHASE ELECTRICAL COMPANY	c EIN-PN 57-1126272-001
a	Plan name MURRAY LAW GROUP LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MURRAY LAW GROUP LLC	c EIN-PN 57-1128489-001
a	Plan name BERNSTEIN & KALOSIEH 401K PLAN	
b	Name of plan sponsor BERNSTEIN & KALOSIEH	c EIN-PN 57-1141653-001
a	Plan name THE THORNTON 401(K) EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor THORNTON CHEVROLET INC	c EIN-PN 58-0681967-001
a	Plan name THE THORNTON 401(K) EMPLOYEE SAVINGS PLAN II	
b	Name of plan sponsor THORNTON CHEVROLET INC	c EIN-PN 58-0681967-002
a	Plan name GLAZE SUPPLY COMPANY INC 401(K) PLAN	
b	Name of plan sponsor NCCPAP/GLAZE SUPPLY COMPANY IN	c EIN-PN 58-0684550-001
a	Plan name COLUMBUS CABINET COMPANY INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COLUMBUS CABINET	c EIN-PN 58-0810185-001
a	Plan name MEDICAL CENTER LLP 401(K) PLAN	
b	Name of plan sponsor NCCPAP/MEDICAL CENTER	c EIN-PN 58-0949770-003
a	Plan name GEORGIA MANUFACTURED HOUSING ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor GMHARP/GEORGIA MANUFACTURED	c EIN-PN 58-0965559-001
a	Plan name WALKER CADILLAC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WALKER CADILLAC BUICK GMC INC	c EIN-PN 58-1079373-001
a	Plan name CATAP/GREATER CHARLOTTE APARTMENT ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor CATAP/GREATER CHARLOTTE APART	c EIN-PN 58-1329178-333

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 NORTH HOUSTON INC 401(K) PLAN	
b	Name of plan sponsor NCCPAP/NORTH HOUSTON INC 401	c EIN-PN 58-1859256-001
a	Plan name KENNYS GREAT PIES LLC 401(K) PLAN	
b	Name of plan sponsor KENNYS GREAT PIES LLC	c EIN-PN 58-1929205-001
a	Plan name CHATTAHOOCHEE GROUP INC RETIREMENT PLAN	
b	Name of plan sponsor AMRP/CHATTAHOOCHEE GROUP INC	c EIN-PN 58-1994442-001
a	Plan name SOUTHEASTERN FILTRATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NCCPAP/SOUTHEASTERN FILTRATION	c EIN-PN 58-2099792-001
a	Plan name JDR CONSTRUCTION & DESIGN INC 401K PLAN	
b	Name of plan sponsor AZARP/JDR CONSTRUCTION & DESIG	c EIN-PN 58-2208896-001
a	Plan name STANLEY FUNERAL HOME INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NCCPAP/STANLEY FUNERAL HOME	c EIN-PN 58-2229375-001
a	Plan name FOOT AND ANKLE OF WEST GEORGIA 401K PROFIT SHARING PLAN	
b	Name of plan sponsor FOOT AND ANKLE OF WEST GEORGIA	c EIN-PN 58-2321871-001
a	Plan name NICHOLS CAULEY & ASSOCIATES LLC 401(K) PLAN	
b	Name of plan sponsor NCCPAP/NICHOLS CAULEY & ASSOCI	c EIN-PN 58-2475857-001
a	Plan name LAGRANGE PEDIATRICS 401(K) PLAN	
b	Name of plan sponsor CFSCP/LAGRANGE PEDIATRICS 401(c EIN-PN 58-2557935-001
a	Plan name GRAHAM RESTAURANTS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NCCPAP/GRAHAM RESTAURANTS INC	c EIN-PN 58-2574328-001
a	Plan name ACG SECURITY SOLUTIONS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NCCPAP/ACG SECURITY SOLUTIONS	c EIN-PN 58-2631256-001
a	Plan name CENTER FOR PAIN AND REHAB MEDICINE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CENTER FOR PAIN AND REHAB	c EIN-PN 58-2653862-001

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 BUILDING TRADE CONSULTANTS INC 401(K) PLAN	
b	Name of plan sponsor SGPAP/BUILDING TRADE CONSULTAN	c EIN-PN 59-1297597-001
a	Plan name THE WILSON COMPANY 401(K) SAVINGS PLAN	
b	Name of plan sponsor WILSON MANAGEMENT COMPANY DBA	c EIN-PN 59-2027272-001
a	Plan name DEEMS K&C LLC 401(K) PLAN	
b	Name of plan sponsor DSKGP/DEEMS K&C LLC 401(K) PL	c EIN-PN 59-2130576-001
a	Plan name LARRY LARSON'S TOP SOIL 401(K) PLAN	
b	Name of plan sponsor LARRY LARSON'S TOP SOIL INC	c EIN-PN 59-2236038-001
a	Plan name BEDROCK RESOURCES 401(K) PLAN	
b	Name of plan sponsor BEDROCK RESOURCES LLC	c EIN-PN 59-2484607-001
a	Plan name CAPITOL CARPET AND TILE 401(K) PLAN	
b	Name of plan sponsor CAPITOL CARPET INC DBA CAPITOL	c EIN-PN 59-2635820-001
a	Plan name T & G CONSTRUCTORS 401(K) PLAN	
b	Name of plan sponsor T & G CONSTRUCTORS	c EIN-PN 59-2806739-001
a	Plan name CURTS GAINES HALL JONES ARCHITECTS INC 401(K) PLAN	
b	Name of plan sponsor WTCCP/CURTS GAINES HALL JONES	c EIN-PN 59-2844944-001
a	Plan name LIG MARINE MANAGERS 401(K) PLAN	
b	Name of plan sponsor LIG MARINE MANAGERS INC	c EIN-PN 59-2948140-001
a	Plan name DECK SYSTEMS INC 401(K) PLAN	
b	Name of plan sponsor DECK SYSTEMS INC	c EIN-PN 59-3014164-001
a	Plan name MOSS HILL FOLIAGE INC 401(K) PLAN	
b	Name of plan sponsor MOSS HILL FOLIAGE INC	c EIN-PN 59-3017271-001
a	Plan name RICHARD A ASSING DDS PA 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor RICHARD A ASSING DDS PA	c EIN-PN 59-3097305-003

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	READING EDGE ACADEMY INC PROFIT SHARING PLAN AND TRUST
b	Name of plan sponsor	READING EDGE ACADEMY INC
c	EIN-PN	59-3455253-001
a	Plan name	SPORTS MEDICINE INSTITUTE RETIREMENT PLAN
b	Name of plan sponsor	SGPAP/ SPORTS MEDICINE INSTITU
c	EIN-PN	59-3464291-001
a	Plan name	HERITAGE PINES 401K PLAN
b	Name of plan sponsor	DSKGP/HERITAGE PINES 401K PLAN
c	EIN-PN	59-3495933-001
a	Plan name	AUTO ADVISORS 401(K) PLAN
b	Name of plan sponsor	AUTO ADVISOR SERVICES LLC
c	EIN-PN	59-3547715-002
a	Plan name	GRAYSTONE RESTORATION 401(K) PLAN
b	Name of plan sponsor	GRAYSTONE CONSTRUCTION
c	EIN-PN	59-3617849-002
a	Plan name	THE ROCK LAW GROUP PA 401(K) PROFIT SHARING PLAN AND TRUST
b	Name of plan sponsor	THE ROCK LAW GROUP PA
c	EIN-PN	59-3681203-001
a	Plan name	DOUGLAS A HUHN DMD PA PROFIT SHARING PLAN
b	Name of plan sponsor	DOUGLAS A HUHN DMD PA
c	EIN-PN	59-3694196-002
a	Plan name	HOPKINSVILLE MILLING COMPANY 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	HOPKINSVILLE MILLING COMPANY
c	EIN-PN	61-0229120-002
a	Plan name	DUTCHS RETIREMENT SAVINGS PLAN
b	Name of plan sponsor	MSCCP/DUTCHS RETIREMENT SAVIN
c	EIN-PN	61-0429309-002
a	Plan name	VENHOFF PLUMBING AND HEATING CO 401(K) PLAN
b	Name of plan sponsor	VENHOFF PLUMBING AND HEATING
c	EIN-PN	61-0522794-001
a	Plan name	CST CO INC 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	CSMP/CST CO INC
c	EIN-PN	61-0536722-001
a	Plan name	DORMAN PRESCHOOL CENTER 401(K) PLAN
b	Name of plan sponsor	SCCRP/DORMAN PRESCHOOL CENTER
c	EIN-PN	61-0620554-001

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	SENNS BODY & PAINT SHOP RETIREMENT PLAN	
b	Name of plan sponsor	SENNS BODY & PAINT SHOP INC	c EIN-PN 61-0701383-001
a	Plan name	MINERAL LABS INC 401K PLAN	
b	Name of plan sponsor	TBAP/ MINERAL LABS INC 401K	c EIN-PN 61-0874775-001
a	Plan name	HOME CAB COMPANY 401(K) PLAN	
b	Name of plan sponsor	MSCCP/HOME CAB COMPANY 401(K)	c EIN-PN 61-0928582-001
a	Plan name	BOSWELL CONTRACTING INC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	BOSWELL CONTRACTING INC	c EIN-PN 61-0976698-001
a	Plan name	MAJOR BRANDS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MSCCP/MAJOR BRANDS 401(K) PROF	c EIN-PN 61-0985897-002
a	Plan name	THE WEBB COMPANIES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	THE WEBB COMPANIES	c EIN-PN 61-0996628-001
a	Plan name	THE EYE CARE INSTITUTE 401(K) PLAN & TRUST	
b	Name of plan sponsor	RETINA ASSOCIATES PSC DBA THE	c EIN-PN 61-1061722-001
a	Plan name	E C MATTHEWS COMPANY INC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	E C MATTHEWS COMPANY INC	c EIN-PN 61-1110279-001
a	Plan name	CAMARGO TRANSMISSION REPAIR 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MSCCP/CAMARGO TRANSMISSION REP	c EIN-PN 61-1135647-001
a	Plan name	KEY SOLUTIONS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KEY SOLUTIONS INC	c EIN-PN 61-1171580-001
a	Plan name	MPI 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MURTY PHARMACEUTICALS INC	c EIN-PN 61-1276283-001
a	Plan name	MAC METAL RETIREMENT PLAN	
b	Name of plan sponsor	MAC METAL SALES INC	c EIN-PN 61-1283395-001

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	CITY SALVAGE & RECYCLING INC PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	CITY SALVAGE & RECYCLING INC	c EIN-PN 61-1284312-001
a	Plan name	HERRICK COMPANY INC 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	HERRICK COMPANY INC	c EIN-PN 61-1296034-001
a	Plan name	RL CAUDILL CONSTRUCTION INC 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	RL CAUDILL CONSTRUCTION	c EIN-PN 61-1315317-001
a	Plan name	C & R ASPHALT LLC 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	C & R ASPHALT LLC	c EIN-PN 61-1318910-001
a	Plan name	RAO VELAGA MD PSC 401(K) PLAN	
b	Name of plan sponsor	RAO VELAGA MD PSC	c EIN-PN 61-1335255-001
a	Plan name	CASA OF LEXINGTON 401(K) PLAN	
b	Name of plan sponsor	WCCRP/CASA OF LEXINGTON 401(K)	c EIN-PN 61-1339185-001
a	Plan name	MM USA 401(K) PLAN	
b	Name of plan sponsor	MURAKAMI MANUFACTURING USA INC	c EIN-PN 61-1373925-001
a	Plan name	WALTERS TRUCK & TRAILER REPAIR INC 401(K) PLAN	
b	Name of plan sponsor	VFGRP/WALTERS TRUCK & TRAILER	c EIN-PN 61-1378287-001
a	Plan name	RECTOR EXCAVATING 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	G52WMP/RECTOR EXCAVATING INC	c EIN-PN 61-1381616-001
a	Plan name	PAYROLL PARTNERS INC 401(K) PLAN	
b	Name of plan sponsor	PAYROLL PARTNERS INC	c EIN-PN 61-1394776-001
a	Plan name	OMEGA NATIONAL PRODUCTS LLC 401(K) PLAN	
b	Name of plan sponsor	OMEGA NATIONAL PRODUCTS LLC	c EIN-PN 61-1400542-001
a	Plan name	INTERSTATE TRANSMISSION RETIREMENT PLAN	
b	Name of plan sponsor	CRAIP/INTERSTATE TRANSMISSION	c EIN-PN 61-1452194-001

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	BUONA BEEF PROFIT SHARING & 401(K) PLAN AND TRUST	
b	Name of plan sponsor	BUONA BEEF LLC	c EIN-PN 61-1579621-001
a	Plan name	RESIDENTIAL PROPERTY INVESTMENT AND MANAGEMENT LLC 401(K) PLAN	
b	Name of plan sponsor	RESIDENTIAL PROPERTY	c EIN-PN 61-1603059-001
a	Plan name	DIXIE YARD WORKS 401(K) PLAN	
b	Name of plan sponsor	HCCRP/DIXIE YARD WORKS 401(K)	c EIN-PN 61-1692620-001
a	Plan name	KARBEC 401K PLAN	
b	Name of plan sponsor	HCCRP/KARBEC LLC	c EIN-PN 61-1760374-001
a	Plan name	INDEPENDENT COMMUNITY BANCORP INC RETIREMENT PLAN	
b	Name of plan sponsor	INDEPENDENT COMMUNITY	c EIN-PN 62-1306854-001
a	Plan name	THERMAL CORPORATION 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	PHRCP/THERMAL CORPORATION 401	c EIN-PN 63-0586074-001
a	Plan name	WILLIAMS DENTAL GROUP 401(K) PLAN	
b	Name of plan sponsor	BEN D. WILLIAMS DMD P.A.	c EIN-PN 63-0714566-004
a	Plan name	ALABAMA PATHOLOGY/BRIDGER LABS PROFIT SHARING PLAN	
b	Name of plan sponsor	CFSCP/ALABAMA PATHOLOGY/BRIDGE	c EIN-PN 63-1008587-001
a	Plan name	MATTSON ENTERPRISE INC PROFIT SHARING PENSION PLAN	
b	Name of plan sponsor	MATTSON ENTERPRISE INC	c EIN-PN 64-0954572-001
a	Plan name	DISCOVERY TANK TESTING INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	DISCOVERY TANK TESTING INC	c EIN-PN 65-0198831-001
a	Plan name	EYE CARE ASSOCIATES OF SARASOTA PA RETIREMENT PLAN	
b	Name of plan sponsor	SGPAP/ EYE CARE ASSOCIATES OF	c EIN-PN 65-0337497-001
a	Plan name	DSK GROUP INC 401(K) PLAN	
b	Name of plan sponsor	DSKGP/DSK GROUP INC 401(K) PLA	c EIN-PN 65-0389388-001

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	NAVALIMPIANTI USA INC 401(K) PLAN	
b	Name of plan sponsor	NAVALIMPIANTI USA INC	c EIN-PN 65-0452232-001
a	Plan name	STEPHEN J NELSON MD PA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	STEPHEN J NELSON MD PA	c EIN-PN 65-0571996-001
a	Plan name	EYE SITE OF CAPE CORAL PA RETIREMENT PLAN	
b	Name of plan sponsor	SGPAP/ EYE SITE OF CAPE CORAL	c EIN-PN 65-0622762-001
a	Plan name	KLOCKE OF AMERICA INC 401(K) PLAN	
b	Name of plan sponsor	KLOCKE OF AMERICA INC	c EIN-PN 65-0698838-001
a	Plan name	SPIRES & ASSOCIATES 401K PLAN & TRUST	
b	Name of plan sponsor	SGPAP/SPIRES & ASSOCIATES 401K	c EIN-PN 65-0865523-001
a	Plan name	SHINER LAW GROUP PA 401(K) PLAN	
b	Name of plan sponsor	SHINER LAW GROUP PA	c EIN-PN 65-1051051-001
a	Plan name	KIANOOSH KAVEH DO PA RETIREMENT PLAN	
b	Name of plan sponsor	SGPAP/KIANOOSH KAVEH DO PA	c EIN-PN 65-1117748-001
a	Plan name	SONOMA RSA INC DBA RSA+ 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SONOMA RSA INC DBA	c EIN-PN 68-0427410-001
a	Plan name	FOOTHILL VETERINARY SERVICES INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	FOOTHILL VETERINARY SERVICES	c EIN-PN 71-0928425-001
a	Plan name	ED SMITHS STENCIL WORKS LTD 401(K) PLAN	
b	Name of plan sponsor	ED SMITHS STENCIL WORKS LTD	c EIN-PN 72-0567335-001
a	Plan name	RIVER PARISH DISPOSAL INC EMPLOYEE SAVINGS TRUST	
b	Name of plan sponsor	RIVER PARISH DISPOSAL LLC	c EIN-PN 72-0976235-001
a	Plan name	JANI KING GULF COAST 401K PLAN	
b	Name of plan sponsor	ENMON ENTERPRISES LLC DBA JANI	c EIN-PN 72-1124143-001

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 MORAN GROUP OF BATON ROUGE INC 401(K) PLAN	
b	Name of plan sponsor	THE MORAN GROUP OF	c EIN-PN 72-1133364-001
a	Plan name	AMERI TEK 401(K) PLAN	
b	Name of plan sponsor	PHRCP/AMERI TEK 401(K) PLAN	c EIN-PN 72-1348587-001
a	Plan name	METROPOLITAN CRIME COMMISSION OF NEW ORLEANS INC PROFIT SHARING PLAN	
b	Name of plan sponsor	METROPOLITAN CRIME COMMISSION	c EIN-PN 72-6009984-001
a	Plan name	OTTO CONSTRUCTION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	OTTO CONSTRUCTION INC	c EIN-PN 73-1674473-001
a	Plan name	DIAMOND MEDICAL GROUP 401(K) PLAN	
b	Name of plan sponsor	DIAMOND MEDICAL GROUP	c EIN-PN 73-1676883-001
a	Plan name	JIM GODBOUT PLUMBING & HEATING 401(K) PLAN	
b	Name of plan sponsor	CIACP/JIM GODBOUT PLUMBING & H	c EIN-PN 73-1682394-001
a	Plan name	FAZZONE CONSTRUCTION CO INC 401(K) PLAN	
b	Name of plan sponsor	FAZZONE CONSTRUCTION CO INC	c EIN-PN 74-1905180-001
a	Plan name	SUNN CARPETS 401(K) PLAN	
b	Name of plan sponsor	R E W ENTERPRISES INC DBA SUNN	c EIN-PN 74-2208294-001
a	Plan name	ASSISTEX INC EMPLOYEES 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	AMCP/ASSISTEX INC EMPLOYEES 40	c EIN-PN 74-2305090-001
a	Plan name	WITTING & MILLER INC EMPLOYEES 401K PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	WITTING & MILLER INC	c EIN-PN 74-2317129-001
a	Plan name	NOAH TECHNOLOGIES CORPORATION PROFIT SHARING PLAN	
b	Name of plan sponsor	NOAH TECHNOLOGIES CORPORATION	c EIN-PN 74-2465294-001
a	Plan name	WP&H LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WP&H LLC	c EIN-PN 74-3042082-001

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	ROJO ARCHITECTURE LLC 401(K) PLAN	
b	Name of plan sponsor	WTCCP/ROJO ARCHITECTURE LLC 40	c EIN-PN 74-3093631-001
a	Plan name	LUBBOCK CHAMBER OF COMMERCE 401(K) PLAN	
b	Name of plan sponsor	LTXCP/LUBBOCK CHAMBER OF COMME	c EIN-PN 75-0403180-003
a	Plan name	CENTER FOR CHRISTIAN GROWTH INC 401(K) PLAN	
b	Name of plan sponsor	CENTER FOR CHRISTIAN	c EIN-PN 75-1671920-002
a	Plan name	LAS COLINAS DERMATOLOGY P.A. 401(K) PLAN	
b	Name of plan sponsor	LAS COLINAS DERMATOLOGY P.A.	c EIN-PN 75-2596533-001
a	Plan name	ENVIROMATIC SYSTEMS OF FORT WORTH INC 401(K) PLAN AND TRUST	
b	Name of plan sponsor	ENVIROMATIC SYSTEMS OF FORT	c EIN-PN 75-2751770-001
a	Plan name	CHAMPION TRUCK AND TRAILER RETIREMENT PLAN	
b	Name of plan sponsor	CHAMPION TRUCK AND TRAILER INC	c EIN-PN 75-2831251-001
a	Plan name	MORGAN ENGINEERING LLC 401(K) PLAN	
b	Name of plan sponsor	MORGAN ENGINEERING LLC	c EIN-PN 75-3047762-001
a	Plan name	ACT & WHELCO COMPANIES 401(K) PLAN	
b	Name of plan sponsor	AUTOMATION & CONTROL TECH	c EIN-PN 75-3216340-001
a	Plan name	OGH SERVICE COMPANY PROFIT SHARING PLAN & TRUST PLAN	
b	Name of plan sponsor	OGH SERVICE COMPANY	c EIN-PN 76-0243691-001
a	Plan name	BARROW CORPORATION PROFIT SHARING PLAN	
b	Name of plan sponsor	BARROW CORPORATION DBA	c EIN-PN 76-0292251-002
a	Plan name	ALLIANCE PAYROLL SERVICES INC RETIREMENT TRUST	
b	Name of plan sponsor	APCGP/ALLIANCE PAYROLL SERVICE	c EIN-PN 76-0400279-001
a	Plan name	KAT EXCAVATION & CONSTRUCTION INC 401(K) PLAN	
b	Name of plan sponsor	SLCP/KAT EXCAVATION & CONSTRUC	c EIN-PN 76-0625155-001

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	JBC QUALITY PAINTING 401(K) PLAN	
b Name of plan sponsor	JBC QUALITY PAINTING	c EIN-PN 77-0039777-001
a Plan name	ABSOLUTE TURNKEY SERVICES INC 401(K) PLAN	
b Name of plan sponsor	ABSOLUTE TURNKEY	c EIN-PN 77-0433577-001
a Plan name	NAVOSHA RETIREMENT PLAN	
b Name of plan sponsor	NAVOSHA INC	c EIN-PN 77-0580138-001
a Plan name	ROSCH COMPANY LLC SAFE HARBOR 401(K) PLAN	
b Name of plan sponsor	ROSCH COMPANY LLC	c EIN-PN 77-0588217-001
a Plan name	AIM SERVICES INC 401(K) PLAN	
b Name of plan sponsor	AIM SERVICES INC	c EIN-PN 77-0602860-001
a Plan name	LIFETIME SMILES 401(K) PLAN	
b Name of plan sponsor	PDRSP/LIFETIME SMILES 401(K) P	c EIN-PN 80-0427436-001
a Plan name	TURNINGPOINTE LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b Name of plan sponsor	TURNINGPOINTE LLC	c EIN-PN 80-0447285-001
a Plan name	THE AHLERS GROUP 401(K) PLAN	
b Name of plan sponsor	MGACP/THE AHLERS GROUP 401(K)	c EIN-PN 80-0890632-001
a Plan name	UNDERGROUND PRODUCTS OF TEXAS LP 401(K) PLAN	
b Name of plan sponsor	NUCAP/UNDERGROUND PRODUCTS OF	c EIN-PN 80-6064373-001
a Plan name	CITY ABSTRACT LLC 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	CITY ABSTRACT LLC	c EIN-PN 81-0984322-001
a Plan name	THE TA COMMERCIAL SERVICE INC 401(K) SAVINGS PLAN	
b Name of plan sponsor	TA COMMERCIAL SERVICE INC	c EIN-PN 81-2602426-001
a Plan name	DALTON BUILDING ENCLOSURES 401(K) PLAN	
b Name of plan sponsor	DALTON BUILDING ENCLOSURES 401	c EIN-PN 81-2751386-001

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	CBA FAIRFIELD 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA FAIRFIELD 401(K) PL	c EIN-PN 81-2775549-001
a	Plan name	DHVAJ 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	DHVAJ INC	c EIN-PN 81-2859686-001
a	Plan name	LAW OFFICE OF RAYMOND M RAVIS 401(K) PLAN	
b	Name of plan sponsor	LAW OFFICE OF RAYMOND M RAVIS	c EIN-PN 81-2889931-001
a	Plan name	CBA SOUTHAVEN 401(K) PLAN	
b	Name of plan sponsor	CBAFP/ CBA SOUTHAVEN 401(K) PL	c EIN-PN 81-2998066-001
a	Plan name	G2 CONSULTING ENGINEERS INC 401(K) PLAN	
b	Name of plan sponsor	G2 CONSULTING ENGINEERS INC	c EIN-PN 81-3671644-001
a	Plan name	FOUR POINTS MANAGEMENT COMPANY LLC 401(K) PLAN	
b	Name of plan sponsor	WCCRP/FOUR POINTS MANAGEMENT	c EIN-PN 81-3748699-001
a	Plan name	CBA YUKON 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA YUKON 401(K) PLAN	c EIN-PN 81-3798006-001
a	Plan name	PRECISION LOGISTICS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	PRECISION LOGISTICS LLC	c EIN-PN 81-3982185-001
a	Plan name	FIREBALL TRANSPORT LLC 401(K) PLAN	
b	Name of plan sponsor	PFAAP/FIREBALL TRANSPORT LLC 4	c EIN-PN 81-4156277-001
a	Plan name	CINCINNATI CONSULTING SERVICES 401(K) PLAN	
b	Name of plan sponsor	EFSP/CINCINNATI CONSULTING	c EIN-PN 81-4209000-001
a	Plan name	NEW RIVER BREWING LLC 401(K) PLAN	
b	Name of plan sponsor	NCCBGP/NEW RIVER BREWING LLC	c EIN-PN 81-4575158-001
a	Plan name	RECONCILED SOLUTIONS RETIREMENT PLAN	
b	Name of plan sponsor	NORITA COMPANY DBA RECONCILED	c EIN-PN 81-4702966-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	ADVANCED CONCRETE SYSTEMS LLC 401(K) PLAN	
b	Name of plan sponsor	ACS NORTH LLC	c EIN-PN 81-4750749-001
a	Plan name	RUEWORKS LLC 401(K) PLAN	
b	Name of plan sponsor	RUEWORKS LLC	c EIN-PN 81-4980515-001
a	Plan name	PINELAND FARMS DAIRY 401(K) PLAN	
b	Name of plan sponsor	CIACP/PINELAND FARMS DAIRY 401	c EIN-PN 81-5133455-001
a	Plan name	FRANKLIN ARMORY INC 401(K) PLAN	
b	Name of plan sponsor	ACLVP/FRANKLIN ARMORY INC 401(c EIN-PN 81-5165223-001
a	Plan name	H & H LAND CLEARING LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	BXOP/H & H LAND CLEARING LLC	c EIN-PN 81-5298750-001
a	Plan name	CBA LAKEVILLE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/ CBA LAKEVILLE 401(K)	c EIN-PN 81-5353603-001
a	Plan name	CBA GEORGETOWN 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA GEORGETOWN 401(K)	c EIN-PN 81-5395633-001
a	Plan name	CBA GILBERT-BASELINE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/ CBA GILBERT-BASELINE	c EIN-PN 82-0651344-001
a	Plan name	CBA ANKENY 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA ANKENY 401(K) PLAN	c EIN-PN 82-0735705-001
a	Plan name	CBA EDMOND 401(K) PLAN	
b	Name of plan sponsor	CBAFP/ CBA EDMOND 401(K) PLAN	c EIN-PN 82-0780559-001
a	Plan name	NEST EGG 401(K) PLAN	
b	Name of plan sponsor	CBAFP/NEST EGG 401(K) PLAN	c EIN-PN 82-0820787-001
a	Plan name	ELITE AUTOMATION LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	ELITE AUTOMATION LLC	c EIN-PN 82-0949082-001

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	MESSAGE ENVY JMSRX INC 401(K) PLAN	
b	Name of plan sponsor	MESSAGE JMSRX INC	c EIN-PN 82-1103147-001
a	Plan name	STEFANO RICCI DC USA CORP 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	STEFANO RICCI DC USA CORP	c EIN-PN 82-1472711-001
a	Plan name	CBA FALL CREEK 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA FALL CREEK 401(K) PL	c EIN-PN 82-1820714-001
a	Plan name	CBA PEORIA-THUNDERBIRD 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA PEORIA-THUNDERBIRD 4	c EIN-PN 82-1873488-001
a	Plan name	FRRP PLAN	
b	Name of plan sponsor	FRMRP/FRRP	c EIN-PN 82-2154262-001
a	Plan name	PETTY FARMS LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BXOP/PETTY FARMS LLC 401(K) PR	c EIN-PN 82-2365422-001
a	Plan name	YPX INC 401(K) PLAN	
b	Name of plan sponsor	YPX INC	c EIN-PN 82-2386700-001
a	Plan name	HARTZ SEARCH 401(K) PLAN	
b	Name of plan sponsor	TREETOP TALENT ADVISORS LLC	c EIN-PN 82-2428770-001
a	Plan name	CBA CRESTWOOD 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA CRESTWOOD 401(K) PL	c EIN-PN 82-2440489-001
a	Plan name	DOTTA MOTORS 401(K) PLAN	
b	Name of plan sponsor	DOTTA MOTORS LLC DBA DOTTA	c EIN-PN 82-2497693-001
a	Plan name	LEGACY DENTAL OF PA 401(K) PLAN	
b	Name of plan sponsor	LEGACY DENTAL OF PA	c EIN-PN 82-2501909-001
a	Plan name	CBA VIRGINIA BEACH 401(K) PLAN	
b	Name of plan sponsor	CBAFP/ CBA VIRGINIA BEACH 401	c EIN-PN 82-2594666-001

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	RED RIVER MANUFACTURING LLC 401(K) PLAN	
b	Name of plan sponsor	LGPCP/RED RIVER MANUFACTURING	c EIN-PN 82-2689559-001
a	Plan name	FHC WEALTH ADVISORS 401K PLAN	
b	Name of plan sponsor	FHC WEALTH ADVISORS LLC	c EIN-PN 82-2903595-001
a	Plan name	CBA MIDLOTHIAN-HUGUENOT PARK 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA MIDLOTHIAN-HUGUENOT	c EIN-PN 82-2968009-001
a	Plan name	MERCER CENTER FOR IMPLANTS AND PERIODONTICS 401(K) PLAN	
b	Name of plan sponsor	MERCER CENTER FOR IMPLANTS AND	c EIN-PN 82-3369832-001
a	Plan name	CBA MIRAMESA 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA MIRAMESA 401(K) PLAN	c EIN-PN 82-3462970-001
a	Plan name	CBA WEST HAPPY VALLEY 401K PLAN	
b	Name of plan sponsor	CBAFP/CBA WEST HAPPY VALLEY 40	c EIN-PN 82-3501292-001
a	Plan name	MONTGOMERY COUNTY ESD 1 457(B) DEFERRED COMPENSATION PLAN	
b	Name of plan sponsor	MONTGOMERY COUNTY ESD 1	c EIN-PN 82-3656276-001
a	Plan name	CENTURY HOTEL GROUP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	EFSP/CENTURY HOTEL GROUP	c EIN-PN 82-3822298-001
a	Plan name	SCHROEDER DENTISTRY 401(K) PLAN	
b	Name of plan sponsor	SFCRP/SCHROEDER DENTISTRY 401	c EIN-PN 82-3926213-001
a	Plan name	HOPE LAW FIRM & ASSOCIATES PC 401(K) PLAN	
b	Name of plan sponsor	HOPE LAW FIRM & ASSOCIATES PC	c EIN-PN 82-4090199-001
a	Plan name	CBA WEALTHQUEST 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA WEALTHQUEST 401(K)	c EIN-PN 82-4227935-001
a	Plan name	DEVINE TIMONEY LAW GROUP 401(K) PLAN	
b	Name of plan sponsor	DEVINE TIMONEY LAW GROUP LLC	c EIN-PN 82-4509635-002

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 LAULEA HEALTH CENTER LLC 401(K) PLAN	
b	Name of plan sponsor HMAP/LAULEA HEALTH CENTER	c EIN-PN 82-4532282-001
a	Plan name COMPLETE DENTAL PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COMPLETE DENTAL PLLC	c EIN-PN 82-4757571-001
a	Plan name CBA COPPERFIELD 401(K) PLAN	
b	Name of plan sponsor CBAFP/CBA COPPERFIELD 401(K)	c EIN-PN 82-5349975-001
a	Plan name SOUTH BIG HORN COUNTY HOSPITAL DISTRICT 401(K) RETIREMENT PLAN	
b	Name of plan sponsor SOUTH BIG HORN COUNTY HOSPITAL	c EIN-PN 83-0181409-001
a	Plan name ATLAS REPRODUCTION 401(K) PLAN	
b	Name of plan sponsor ATLAS REPRODUCTION INC	c EIN-PN 83-0259252-001
a	Plan name TETON ORTHOPAEDICS 401(K) PLAN	
b	Name of plan sponsor ORTHOPAEDICS OF JACKSON HOLE P	c EIN-PN 83-0322741-001
a	Plan name CASPER MOUNTAIN MOTORSPORTS 401(K) PLAN	
b	Name of plan sponsor CWCP/CASPER MOUNTAIN MOTORSPOR	c EIN-PN 83-0337153-001
a	Plan name AMCHECK NEVADA 401(K) PLAN	
b	Name of plan sponsor ACLVP/AMCHECK NEVADA 401(K) PL	c EIN-PN 83-0486625-001
a	Plan name MANCUSO CAREY LLC PROFIT SHARING PLAN	
b	Name of plan sponsor MANCUSO CAREY LLC	c EIN-PN 83-0717363-001
a	Plan name CBA MOORESVILLE 401K PLAN	
b	Name of plan sponsor CBAFP/CBA MOORESVILLE 401K PL	c EIN-PN 83-0800741-001
a	Plan name CBA BOLINGBROOK 401(K) PLAN	
b	Name of plan sponsor CBAFP/CBA BOLINGBROOK 401(K)	c EIN-PN 83-1312022-001
a	Plan name VP VETERINARY ASSOCIATES 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor VP VETERINARY ASSOCIATES	c EIN-PN 83-1589075-001

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	CBA ROCKRIMMON 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA ROCKRIMMON 401(K) PL	c EIN-PN 83-1921480-001
a	Plan name	ASSOCIATED PEDIATRIC DENTISTRY LLC PROFIT SHARING PLAN	
b	Name of plan sponsor	ASSOCIATED PEDIATRIC	c EIN-PN 83-2180371-002
a	Plan name	UPPER KEYS MARINE CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor	LGPCP/UPPER KEYS MARINE	c EIN-PN 83-2241335-001
a	Plan name	CBA FLOWER MOUND 401(K) PLAN	
b	Name of plan sponsor	CBAFP/ CBA FLOWER MOUND 401(K)	c EIN-PN 83-2328018-001
a	Plan name	VB OPCO LLC 401(K) PLAN	
b	Name of plan sponsor	VB OPCO LLC	c EIN-PN 83-2680038-001
a	Plan name	CBA NORCROSS PLAN	
b	Name of plan sponsor	CBAFP/CBA NORCROSS	c EIN-PN 83-3142560-001
a	Plan name	SCHUETZE MCGAHA TURNER & FERRIS PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SCHUETZE MCGAHA TURNER &	c EIN-PN 83-3387080-001
a	Plan name	DOMINGOS HOLDINGS LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	DOMINGOS HOLDINGS LLC	c EIN-PN 83-3484411-002
a	Plan name	ECOM GROUP INC 401(K) PS PLAN	
b	Name of plan sponsor	ECOM GROUP INC	c EIN-PN 83-4107103-001
a	Plan name	LAW OFFICE OF MICHELLE SIEGEL PLLC 401(K) PLAN	
b	Name of plan sponsor	ADCP/LAW OFF MICHELLE SIEGEL	c EIN-PN 83-4204985-001
a	Plan name	RABBIT TRUCKING INC 401(K) PLAN	
b	Name of plan sponsor	LGPCP / RABBIT TRUCKING INC 40	c EIN-PN 83-4439652-001
a	Plan name	BOULDER CHAMBER 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BDCRP/BOULDER CHAMBER 401(K)	c EIN-PN 84-0152700-001

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 EMPLOYEE PROFIT SHARING PLAN OF FRONTIER METAL STAMPING INC PLAN	
b	Name of plan sponsor FRONTIER METAL STAMPING INC	c EIN-PN 84-0576078-001
a	Plan name RTA INC 401(K) P/S PLAN	
b	Name of plan sponsor RTA INC	c EIN-PN 84-0773499-001
a	Plan name RESTORATION LOGISTICS INC PROFIT SHARING PLAN	
b	Name of plan sponsor RESTORATION LOGISTICS INC	c EIN-PN 84-1105219-002
a	Plan name DONALDSON LAW 401(K) PLAN	
b	Name of plan sponsor LAW OFFICE OF JENNIFER	c EIN-PN 84-1261215-001
a	Plan name RJ MANN & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor RJ MANN & ASSOCIATES	c EIN-PN 84-1284380-001
a	Plan name ARAPAHOE PARK PEDIATRICS PC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor ARAPAHOE PARK PEDIATRICS P C	c EIN-PN 84-1454285-001
a	Plan name HCL ENGINEERING & SURVEYING LLC 401(K) PLAN	
b	Name of plan sponsor HCL ENGINEERING & SURVEYING	c EIN-PN 84-1488145-001
a	Plan name MOUNTAIN VISTA DENTAL PC PROFIT SHARING PLAN	
b	Name of plan sponsor LEY & CARLSON DDS PC DBA	c EIN-PN 84-1610515-001
a	Plan name CBA WAXAHACHIE 401(K) PLAN	
b	Name of plan sponsor CBAFP/ CBA WAXAHACHIE 401(K) P	c EIN-PN 84-1956088-001
a	Plan name CBA NORTH SCOTTSDALE 401(K) PLAN	
b	Name of plan sponsor CBAFP/CBA NORTH SCOTTSDALE 401	c EIN-PN 84-1968415-001
a	Plan name THE KEANE GROUP 401(K) PLAN	
b	Name of plan sponsor ABSRP/THE KEANE GROUP	c EIN-PN 84-1997329-001
a	Plan name NALF2 401(K) PLAN	
b	Name of plan sponsor NORTHERN APPALACHIAN LOGGING	c EIN-PN 84-2188071-001

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	CLOUDSMART INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	CLOUDSMART INC	c EIN-PN 84-2230398-001
a	Plan name	CBA MT JULIET 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA MT JULIET 401(K)	c EIN-PN 84-2387941-001
a	Plan name	IMPACT WINDOWS GROUP LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	LGPCP/IMPACT WINDOWS GROUP LLC	c EIN-PN 84-2454851-001
a	Plan name	ALLERGY & ASTHMA SPECIALTY PHYSICIANS PLLC 401(K) PLAN	
b	Name of plan sponsor	ALLERGY & ASTHMA SPECIALTY	c EIN-PN 84-2591655-001
a	Plan name	BLUE MOUNTAIN CHIMNEY SWEEP 401K PLAN	
b	Name of plan sponsor	BLUE MOUNTAIN CHIMNEY SWEEP	c EIN-PN 84-2617433-001
a	Plan name	MGLCII LLC 401(K) PLAN	
b	Name of plan sponsor	MGLCII LLC	c EIN-PN 84-2706081-001
a	Plan name	MARK 923 CBA ARAPAHOE LLC DBA CBA ARAPAHOE	
b	Name of plan sponsor	CBAFP/MARK 923 CBA ARAPAHOE	c EIN-PN 84-2804781-001
a	Plan name	HORIZON HEALTHCARE ADVISORS LLC 401(K) PLAN	
b	Name of plan sponsor	NUCAP/HORIZON HEALTHCARE ADVIS	c EIN-PN 84-3535332-001
a	Plan name	THE WALKER COMPANY 401(K) PLAN	
b	Name of plan sponsor	MSCCP/W PRINCIPLES LLC DBA	c EIN-PN 84-3590572-001
a	Plan name	POMONA AUTO WORKS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	POMONA AUTO WORKS INC	c EIN-PN 84-3756066-001
a	Plan name	C & M MANAGEMENT 401(K) PLAN	
b	Name of plan sponsor	EFSP/C & M MANAGEMENT 401(K) P	c EIN-PN 84-3924366-001
a	Plan name	HEALTH LYNKS LLC 401(K) RETIREMENT SAVINGS PLAN I	
b	Name of plan sponsor	HEALTH LYNKS LLC	c EIN-PN 84-3969006-001

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	CBA LAFAYETTE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA LAFAYETTE 401(K)	c EIN-PN 84-4099348-001
a	Plan name	HOLIFIELD PEST MANAGEMENT INC 401(K) PLAN	
b	Name of plan sponsor	HOLIFIELD PEST MANAGEMENT INC	c EIN-PN 84-4264762-001
a	Plan name	IXRF INC 401(K) PLAN	
b	Name of plan sponsor	FPORP/IXRF INC	c EIN-PN 84-4374973-001
a	Plan name	E&M ENTERPRISES LLC 401(K) PLAN	
b	Name of plan sponsor	MSCCP/E&M ENTERPRISES LLC	c EIN-PN 84-5006663-001
a	Plan name	CBE CONSULTANTS INC 401(K) PLAN	
b	Name of plan sponsor	CBE CONSULTANTS INC	c EIN-PN 84-5090708-001
a	Plan name	JMT INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	JMT INC	c EIN-PN 85-0262880-001
a	Plan name	SOUTHWEST WOMENS ONCOLOGY INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SOUTHWEST WOMENS ONCOLOGY	c EIN-PN 85-0405838-001
a	Plan name	CBA SPRING HILL 401(K) PLAN	
b	Name of plan sponsor	CBAFP/ CBA SPRING HILL 401(K)	c EIN-PN 85-0991396-001
a	Plan name	CBA WOODSTOCK 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA WOODSTOCK 401(K) PL	c EIN-PN 85-1310659-001
a	Plan name	YAVAPAI EMERGENCY ANIMAL HOSPITAL LLC 401(K) PLAN	
b	Name of plan sponsor	YAVAPAI EMERGENCY ANIMAL	c EIN-PN 85-1363308-001
a	Plan name	LILICOL LLC 401(K) PLAN	
b	Name of plan sponsor	GIOAP/LILICOL LLC	c EIN-PN 85-1575800-001
a	Plan name	MARIYA MEDLENOV DDS LLC 401(K) PLAN	
b	Name of plan sponsor	PFRPP/MARIYA MEDLENOV DDS LLC	c EIN-PN 85-2260149-001

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	CHEVROLET OF TROY INC 401(K) PLAN	
b	Name of plan sponsor	LMRCP/CHEVROLET OF TROY INC	c EIN-PN 85-2291549-001
a	Plan name	RSJ DMD 401(K) PLAN	
b	Name of plan sponsor	AMRP/RSJ DMD 401(K) PLAN	c EIN-PN 85-2719139-001
a	Plan name	CGI MERCHANT GROUP OPCO LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	CGI MERCHANT GROUP OPCO LLC	c EIN-PN 85-2939693-001
a	Plan name	LPE/ ALL-STATE INTERNATIONAL INC DBA ALL-STATE LEGAL PLAN	
b	Name of plan sponsor	LPEP/ALL-STATE INTERNATIONAL I	c EIN-PN 85-3213245-301
a	Plan name	LPE/ BLUE MOUNTAIN QUALITY RESOURCES LLC PLAN	
b	Name of plan sponsor	LPEP/BLUE MOUNTAIN QUALITY RES	c EIN-PN 85-3213245-301
a	Plan name	LPE/ CELSIUS HOLDINGS INC PLAN	
b	Name of plan sponsor	LPEP/CELSIUS HOLDINGS INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/ CM3 INC PLAN	
b	Name of plan sponsor	LPEP/CM3 INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/ D&E LLC PLAN	
b	Name of plan sponsor	LPEP/D&E LLC	c EIN-PN 85-3213245-301
a	Plan name	LPE/ EL TORO AUTO GROUP PLAN	
b	Name of plan sponsor	LPEP/EL TORO AUTO GROUP	c EIN-PN 85-3213245-301
a	Plan name	LPE/ FABIAN OIL INC PLAN	
b	Name of plan sponsor	LPEP/FABIAN OIL INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/ HIMMEL HOSPITALITY GROUP LLC	
b	Name of plan sponsor	LPEP/HIMMEL HOSPITALITY GROUP	c EIN-PN 85-3213245-301
a	Plan name	LPE/ KFH INDUSTRIES INC	
b	Name of plan sponsor	LPEP/KFH INDUSTRIES INC	c EIN-PN 85-3213245-301

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	LPE/ SOLERAS ADVANCED COATINGS PLAN	
b	Name of plan sponsor	LPEP/ SOLERAS ADVANCED COATING	c EIN-PN 85-3213245-301
a	Plan name	LPE/ T ENTERPRISES INCORPORATED PLAN	
b	Name of plan sponsor	LPEP/T ENTERPRISES INCORPORATE	c EIN-PN 85-3213245-301
a	Plan name	LPE/ VISITING REHAB AND NURSING SERVICES PLAN	
b	Name of plan sponsor	LPEP/VISITING REHAB AND NURSIN	c EIN-PN 85-3213245-301
a	Plan name	LPE/ WONDER MEATS INC PLAN	
b	Name of plan sponsor	LPEP/WONDER MEATS INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/A RAY HOSPITALITY LLC	
b	Name of plan sponsor	LPEP/A RAY HOSPITALITY LLC	c EIN-PN 85-3213245-301
a	Plan name	LPE/ACTION STAFFING GROUP LLC PLAN	
b	Name of plan sponsor	LPEP/ACTION STAFFING GROUP LLC	c EIN-PN 85-3213245-301
a	Plan name	LPE/ADKISON TOWING INC & FCRR LLC 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	LPEP/LPE ADKISON TOWING INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/ALL NATURAL STONE PLAN	
b	Name of plan sponsor	LPEP/ ALL NATURAL STONE	c EIN-PN 85-3213245-301
a	Plan name	LPE/ASSISTANCE PLUS 401(K) PLAN	
b	Name of plan sponsor	LPEP/ASSISTANCE PLUS 401(K) PL	c EIN-PN 85-3213245-301
a	Plan name	LPE/BANNEKER SUPPLY CHAIN SOLUTIONS INC PLAN	
b	Name of plan sponsor	LPEP/BANNEKER SUPPLY CHAIN SOL	c EIN-PN 85-3213245-301
a	Plan name	LPE/BEST SANITIZERS INC 401(K) PLAN	
b	Name of plan sponsor	LPEP/LPE BEST SANITIZERS INC 4	c EIN-PN 85-3213245-301
a	Plan name	LPE/BII SERVICES CORP PLAN	
b	Name of plan sponsor	LPEP/BII SERVICES CORP	c EIN-PN 85-3213245-301

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	LPE/BOONE SUPPORTED LIVING LLC	
b	Name of plan sponsor	LPE/BOONE SUPPORTED LIVING	c EIN-PN 85-3213245-301
a	Plan name	LPE/CADOGAN TATE NEW YORK LIMITED PLAN	
b	Name of plan sponsor	LPE/CADOGAN TATE NEW YORK	c EIN-PN 85-3213245-301
a	Plan name	LPE/CAPOZZA TILE CO INC PLAN	
b	Name of plan sponsor	LPE/CAPOZZA TILE CO INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/CAPTAIN D'S LLC PLAN	
b	Name of plan sponsor	LPE/CAPTAIN DS LLC	c EIN-PN 85-3213245-301
a	Plan name	LPE/CENTER FOR POLICING EQUITY PLAN	
b	Name of plan sponsor	LPE/ LPE CENTER FOR POLICING	c EIN-PN 85-3213245-301
a	Plan name	LPE/CENTRAL TEXTILES INC PLAN	
b	Name of plan sponsor	LPE/ CENTRAL TEXTILES INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/CERTIFIED HEALTH MANAGEMENT INC	
b	Name of plan sponsor	LPE/CERTIFIED HEALTH	c EIN-PN 85-3213245-301
a	Plan name	LPE/CHARLES CITY TIMBER AND MAT PLAN	
b	Name of plan sponsor	LPE/CHARLES CITY TIMBER AND M	c EIN-PN 85-3213245-301
a	Plan name	LPE/CHECK MATE INDUSTRIES INC PLAN	
b	Name of plan sponsor	LPE/CHECK MATE INDUSTRIES INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/CONTOUR FINE TOOLING INC PLAN	
b	Name of plan sponsor	LPE/CONTOUR FINE TOOLING INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/DESIGN TO PRINT INC PLAN	
b	Name of plan sponsor	LPE/DESIGN TO PRINT INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/EAST HILLS AUTO GROUP PLAN	
b	Name of plan sponsor	LPE/EAST HILLS AUTO GROUP	c EIN-PN 85-3213245-301

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	LPE/ELDREDGE LUMBER & HARDWARE INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LPE/ELDREDGE LUMBER & HARDWAR	c EIN-PN 85-3213245-301
a	Plan name	LPE/ELITE STAFFING INC PLAN	
b	Name of plan sponsor	LPE/ELITE STAFFING INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/ENDEAVOUR PARTNERS LLC	
b	Name of plan sponsor	LPE/ENDEAVOUR PARTNERS LLC	c EIN-PN 85-3213245-301
a	Plan name	LPE/EXTENDED CARE CONSULTING LLC PLAN	
b	Name of plan sponsor	LPE/EXTENDED CARE CONSULTING	c EIN-PN 85-3213245-301
a	Plan name	LPE/FAMILY MEDICAL CENTERS 401(K) PLAN	
b	Name of plan sponsor	LPE/FAMILY MEDICAL CENTERS	c EIN-PN 85-3213245-301
a	Plan name	LPE/GARLYN O SHELTON INC PLAN	
b	Name of plan sponsor	LPE/GARLYN O SHELTON INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/GEN FOUR HOLDING GROUP LLC PLAN	
b	Name of plan sponsor	LPE/GEN FOUR HOLDING GROUP	c EIN-PN 85-3213245-301
a	Plan name	LPE/GOLD MOUNTAIN COMMUNICATIONS LLC 401(K) PLAN	
b	Name of plan sponsor	LPE/GOLD MOUNTAIN COMMUNICATI	c EIN-PN 85-3213245-301
a	Plan name	LPE/HANSEN PROPERTIES INC PLAN	
b	Name of plan sponsor	LPE/HANSEN PROPERTIES INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/HEART TO HEART HEALTHCARE SERVICES LLC PLAN	
b	Name of plan sponsor	LPE/HEART TO HEART HEALTHCARE	c EIN-PN 85-3213245-301
a	Plan name	LPE/HELENS RESTAURANT OF MACHIAS PLAN	
b	Name of plan sponsor	LPE/HELENS RESTAURANT OF MAC	c EIN-PN 85-3213245-301
a	Plan name	LPE/IMMERSION LEARNING CENTERS LLC PLAN	
b	Name of plan sponsor	LPE/IMMERSION LEARNING CENTER	c EIN-PN 85-3213245-301

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 LPE/KEMISTRE 8 LLC PLAN	
b	Name of plan sponsor LPEP/KEMISTRE 8 LLC	c EIN-PN 85-3213245-301
a	Plan name LPE/LANDMARK GRADING COMPANY INC PLAN	
b	Name of plan sponsor LPEP/LANDMARK GRADING COMPANY	c EIN-PN 85-3213245-301
a	Plan name LPE/LEN STOLER INC PLAN	
b	Name of plan sponsor LPEP/LEN STOLER INC	c EIN-PN 85-3213245-301
a	Plan name LPE/LOGIC SYSTEMS PRODUCTION LLC 401(K) PLAN	
b	Name of plan sponsor LPEP/LOGIC SYSTEMS PRODUCTION	c EIN-PN 85-3213245-301
a	Plan name LPE/LOUVER SHOP HOLDINGS LLC 401(K) PLAN	
b	Name of plan sponsor LPEP/LOUVER SHOP HOLDINGS LLC	c EIN-PN 85-3213245-301
a	Plan name LPE/LYNCO INC PLAN	
b	Name of plan sponsor LPEP/ LYNCO INC	c EIN-PN 85-3213245-301
a	Plan name LPE/MCBURR ENTERPRISES INC	
b	Name of plan sponsor LPEP/MCBURR ENTERPRISES INC	c EIN-PN 85-3213245-301
a	Plan name LPE/MURPHY ELECTRIC - NEXT GEN PLAN	
b	Name of plan sponsor LPEP/MURPHY ELECTRIC - NEXT GE	c EIN-PN 85-3213245-301
a	Plan name LPE/NASSAU OPERATING COMPANY LLC PLAN	
b	Name of plan sponsor LPEP/NASSAU OPERATING COMPANY	c EIN-PN 85-3213245-301
a	Plan name LPE/NC SPORTS CUTS LLC PLAN	
b	Name of plan sponsor LPEP/NC SPORTS CUTS LLC	c EIN-PN 85-3213245-301
a	Plan name LPE/NEUROGENE INC PLAN	
b	Name of plan sponsor LPEP/NEUROGENE INC	c EIN-PN 85-3213245-301
a	Plan name LPE/NEW YORK BOILER INC PLAN	
b	Name of plan sponsor LPEP/NEW YORK BOILER INC	c EIN-PN 85-3213245-301

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	LPE/NIEDERMAN STANZEL & LINDSEY PLLC PLAN	
b	Name of plan sponsor	LPEP/NIEDERMAN STANZEL & LINDS	c EIN-PN 85-3213245-301
a	Plan name	LPE/NOTHUM MANUFACTURING CO INC 401(K) PLAN	
b	Name of plan sponsor	LPEP/NOTHUM MANUFACTURING CO	c EIN-PN 85-3213245-301
a	Plan name	LPE/ORLANDO FREIGHTLINER 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	LPEP/ORLANDO FREIGHTLINER	c EIN-PN 85-3213245-301
a	Plan name	LPE/OVED APPAREL CORP PLAN	
b	Name of plan sponsor	LPEP/OVED APPAREL CORP	c EIN-PN 85-3213245-301
a	Plan name	LPE/PATES HARDWARE 401(K) PLAN	
b	Name of plan sponsor	LPEP/PATES HARDWARE INC 401	c EIN-PN 85-3213245-301
a	Plan name	LPE/PEABODY FUNERAL HOMES INC 401(K) PLAN	
b	Name of plan sponsor	LPEP/PEABODY FUNERAL HOMES INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/PEAK OPERATIONS INC	
b	Name of plan sponsor	LPEP/PEAK OPERATIONS INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/PERFECT PASTA INC PLAN	
b	Name of plan sponsor	LPEP/PERFECT PASTA INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/PORVEN LTD PLAN	
b	Name of plan sponsor	LPEP/PORVEN LTD	c EIN-PN 85-3213245-301
a	Plan name	LPE/RKJ AND SONS LLC PLAN	
b	Name of plan sponsor	LPEP/RKJ AND SONS LLC	c EIN-PN 85-3213245-301
a	Plan name	LPE/ROBERT W SULLIVAN INC PLAN	
b	Name of plan sponsor	LPEP/ROBERT W SULLIVAN INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/RSM LIGHTING LLC DBA SALT LIGHT & ELECTRIC PLAN	
b	Name of plan sponsor	LPEP/RSM LIGHTING LLC DBA SALT	c EIN-PN 85-3213245-301

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	LPE/SEALEVEL CONSTRUCTION INC 401(K) PLAN	
b	Name of plan sponsor	LPE/SEALEVEL CONSTRUCTION INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/SOFTSCRIPT INC PLAN	
b	Name of plan sponsor	LPE/SOFTSCRIPT INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/SOUTHWEST MATERIAL HANDLING INC PLAN	
b	Name of plan sponsor	LPE/SOUTHWEST MATERIAL HANDLI	c EIN-PN 85-3213245-301
a	Plan name	LPE/STRAINRITE 401K PLAN	
b	Name of plan sponsor	LPE/STRAINRITE 401K PLAN	c EIN-PN 85-3213245-301
a	Plan name	LPE/THROGS NECK EXTENDED CARE LLC PLAN	
b	Name of plan sponsor	LPE/THROGS NECK EXTENDED CARE	c EIN-PN 85-3213245-301
a	Plan name	LPE/THROGS NECK EXTENDED CARE LLC UNION 1199 PLAN	
b	Name of plan sponsor	LPE/THROGS NECK EXTENDED CARE	c EIN-PN 85-3213245-301
a	Plan name	LPE/TOS FARMS INC PROFIT SHARING PLAN	
b	Name of plan sponsor	LPE/LPE TOS FARMS INC PROFIT	c EIN-PN 85-3213245-301
a	Plan name	LPE/WEIL WRECKER SERVICES INC PLAN	
b	Name of plan sponsor	LPE/LPE WEIL WRECKER SERVICES	c EIN-PN 85-3213245-301
a	Plan name	LPE/WESTLAND MANUFACTURING INC DBA DAKOTALAND MANUFACTURING	
b	Name of plan sponsor	LPE/DAKOTALAND MANUFACTURING	c EIN-PN 85-3213245-301
a	Plan name	LPE/WINDSOR VETERINARY CLINIC LLC	
b	Name of plan sponsor	LPE/WINDSOR VETERINARY CLINIC	c EIN-PN 85-3213245-301
a	Plan name	LPE/WORKFORCE OUTSOURCE SERVICES PLAN	
b	Name of plan sponsor	LPE/WORKFORCE OUTSOURCE SERVI	c EIN-PN 85-3213245-301
a	Plan name	LPE/WORLDWIDE COMPUTER SOLUTIONS INC PLAN	
b	Name of plan sponsor	LPE/WORLDWIDE COMPUTER	c EIN-PN 85-3213245-301

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	LPE/YELLOWSTONE SURGERY CENTER	
b	Name of plan sponsor	LPEP/YELLOWSTONE SURGERY CENTE	c EIN-PN 85-3213245-301
a	Plan name	LPEP/GREAT WESTERN DINING SERVICE INC 401(K) PLAN	
b	Name of plan sponsor	LPEP/GREAT WESTERN DINING SERV	c EIN-PN 85-3213245-301
a	Plan name	BIOSPHERE MEDICAL GROUP 401(K) PLAN	
b	Name of plan sponsor	BIOSPHERE MEDICAL GROUP	c EIN-PN 85-3341172-001
a	Plan name	CBA SMYRNA 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA SMYRNA 401(K) PLAN	c EIN-PN 85-3426036-001
a	Plan name	CBA GRAPEVINE 401K PLAN	
b	Name of plan sponsor	CBAFP/CBA GRAPEVINE 401K PLAN	c EIN-PN 85-3449839-001
a	Plan name	CBA BURLESON 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA BURLESON 401(K) PLAN	c EIN-PN 85-3566073-001
a	Plan name	CBA NO DALLAS 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA NORTH DALLAS	c EIN-PN 85-3629738-001
a	Plan name	CBA MELBOURNE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA MELBOURNE 401(K) PLA	c EIN-PN 85-3805128-001
a	Plan name	MIPE/CAMPBELL ENTERPRISES OF ILLINOIS 401(K) PLAN	
b	Name of plan sponsor	MIPE/CAMPBELL ENTERPRISES OF I	c EIN-PN 85-4166502-002
a	Plan name	MIPE/GO GREEN WOOD PRODUCTS 401(K) PLAN	
b	Name of plan sponsor	MIPE/GO GREEN WOOD PRODUCTS	c EIN-PN 85-4166502-001
a	Plan name	MIPE/PILOT CONSTRUCTION INC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MIPE/PILOT CONSTRUCTION INC 40	c EIN-PN 85-4166502-002
a	Plan name	MIPE/TIMBERWOLF LOGGING 401(K) PLAN	
b	Name of plan sponsor	MIPE/TIMBERWOLF LOGGING 401(K)	c EIN-PN 85-4166502-001

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	MIPE/WESTLAND MANUFACTURING INC DBA DAKOTALAND MANUFACTURING 401K PLAN	
b	Name of plan sponsor	MIPE/DAKOTALAND MANUFACTURING	c EIN-PN 85-4166502-002
a	Plan name	THB COLORADO PROFIT SHARING PLAN	
b	Name of plan sponsor	THB COLORADO LLC	c EIN-PN 85-4252980-001
a	Plan name	TOTAL SEAL INC 401(K) PLAN	
b	Name of plan sponsor	TOTAL SEAL INC	c EIN-PN 86-0269249-001
a	Plan name	TEMPE VETERINARY PROFIT SHARING PLAN	
b	Name of plan sponsor	TEMPE VETERINARY HOSPITAL	c EIN-PN 86-0386473-002
a	Plan name	DESERT DE ORO FOODS INC 401(K) PLAN	
b	Name of plan sponsor	PBM/DESERT DE ORO FOODS INC	c EIN-PN 86-0418856-001
a	Plan name	INSEARCH CORP 401(K) PLAN	
b	Name of plan sponsor	INSEARCH CORP	c EIN-PN 86-0648715-001
a	Plan name	MICHAEL ALAN FURNISHINGS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MICHAEL ALAN FURNISHINGS INC	c EIN-PN 86-0720296-001
a	Plan name	ALJO ENTERPRISES RETIREMENT PLAN	
b	Name of plan sponsor	ALJO ENTERPRISES INC	c EIN-PN 86-0773684-001
a	Plan name	PREFERRED BILLING SERVICES LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PREFERRED BILLING SERVICES LLC	c EIN-PN 86-0804352-001
a	Plan name	CRYSTAL CREEK BUILDERS INC 401(K) PLAN	
b	Name of plan sponsor	PACCP/CRYSTAL CREEK BUILDERS I	c EIN-PN 86-0994158-001
a	Plan name	CBA LITTLETON 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA LITTLETON 401(K) PL	c EIN-PN 86-1264959-001
a	Plan name	CHARLES A DIBBLE DDS PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CHARLES A DIBBLE DDS PLLC	c EIN-PN 86-1448106-001

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	TMB EAST SAFE HARBOR PLAN	
b	Name of plan sponsor	TMB EAST SAFE HARBOR PLAN	c EIN-PN 86-1517006-001
a	Plan name	IMER GROUP 401(K) PLAN	
b	Name of plan sponsor	LGAP/IMER GROUP 401(K) PLAN	c EIN-PN 86-1585844-001
a	Plan name	CHRISTIAN BROTHERS AUTOMOTIVE SOUTH AURORA 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CHRISTIAN BROTHERS AUTOM	c EIN-PN 86-1790277-001
a	Plan name	CBA WHEAT RIDGE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA WHEAT RIDGE 401(K) P	c EIN-PN 86-1934361-001
a	Plan name	SMH WEST 401(K) PLAN	
b	Name of plan sponsor	SMH WEST LLC	c EIN-PN 86-2474495-001
a	Plan name	CBA WEST MURFREESBORO 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA WEST MURFREESBORO	c EIN-PN 86-2567892-001
a	Plan name	CBA TRANSITION HOLDINGS LLC 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA TRANSITION HOLDINGS	c EIN-PN 86-2679611-001
a	Plan name	CBA SOUTH SARASOTA 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA SOUTH SARASOTA	c EIN-PN 86-3161189-001
a	Plan name	CBA HAMILTON MILL 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA HAMILTON MILL 401(K)	c EIN-PN 86-3357113-001
a	Plan name	CBA CHANHASSEN 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA CHANHASSEN	c EIN-PN 86-3951167-001
a	Plan name	TANNER GLASS & HARDWARE 401(K) PLAN	
b	Name of plan sponsor	TANNER GLASS & HARDWARE LLC	c EIN-PN 87-0649387-001
a	Plan name	BVB GENERAL CONTRACTORS LLC 401(K) PLAN	
b	Name of plan sponsor	BVB GENERAL CONTRACTORS LLC	c EIN-PN 87-0708723-001

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	CORTECH SOLUTIONS GROUP 401K PLAN	
b	Name of plan sponsor	ESCRP/CORTECH SOLUTIONS GROUP	c EIN-PN 87-1068105-001
a	Plan name	GREEN GRASS OPCO 401(K) PLAN	
b	Name of plan sponsor	GREEN GRASS OPCO LLC	c EIN-PN 87-1107457-001
a	Plan name	KING CONSULTING GROUP CM INC EMPLOYEE STOCK OWNERSHIP 401(K) PLAN	
b	Name of plan sponsor	BHFSP/KING CONSULTING GROUP CM	c EIN-PN 87-1159781-001
a	Plan name	CBA COVINGTON LLC 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA COVINGTON LLC	c EIN-PN 87-1876777-001
a	Plan name	TEXAS CRIMINAL DEFENSE GROUP 401(K) PLAN	
b	Name of plan sponsor	LTXCP/TEXAS CRIMINAL DEFENSE	c EIN-PN 87-2309507-001
a	Plan name	INCSD LLC 401(K) PLAN	
b	Name of plan sponsor	ESCCP/INCSD LLC 401(K) PLAN	c EIN-PN 87-2372639-001
a	Plan name	ABUNDANCE MINDSET 401(K) PLAN	
b	Name of plan sponsor	GIOAP/ABUNDANCE MINDSET 401(K)	c EIN-PN 87-2557232-001
a	Plan name	CBA BERTHOUD 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA BERTHOUD 401(K) PLAN	c EIN-PN 87-2758627-001
a	Plan name	CBA KEN CARYL 401K PLAN	
b	Name of plan sponsor	CBAFP/CBA KEN CARYL 401K PLAN	c EIN-PN 87-3362493-001
a	Plan name	PMG EMPLOYMENT SERVICES LLC 401K PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	PMG EMPLOYMENT SERVICES LLC	c EIN-PN 87-3797037-001
a	Plan name	CBA SANDY SPRINGS 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA SANDY SPRINGS 401(K)	c EIN-PN 87-3890521-001
a	Plan name	SCOTTS POWER MANAGEMENT INC 401(K) PLAN	
b	Name of plan sponsor	AMRP/ SCOTTS POWER MANAGEMENT	c EIN-PN 87-4157633-001

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	CBA TRUSSVILLE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA TRUSSVILLE 401(K) PL	c EIN-PN 87-4649648-001
a	Plan name	CBA N FORT WORTH LLC	
b	Name of plan sponsor	CBAFP/CBA NORTH FORT WORTH 401	c EIN-PN 87-4831501-001
a	Plan name	DELTA ELECTRIC COMPANY INC 401(K) P/S PLAN	
b	Name of plan sponsor	DELTA ELECTRIC COMPANY INC	c EIN-PN 88-0151054-001
a	Plan name	NEV-CAL INVESTORS INC DBA FAST TRAC ELECTRIC PROFIT SHARING PLAN	
b	Name of plan sponsor	NEV-CAL INVESTORS INC DBA FAST	c EIN-PN 88-0205385-001
a	Plan name	TRC FRAMING RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	TRC FRAMING	c EIN-PN 88-0242012-011
a	Plan name	ROBCO ELECTRIC 401(K) PLAN	
b	Name of plan sponsor	ROBCO ELECTRIC	c EIN-PN 88-0372551-001
a	Plan name	FEEL GOOD BRANDS LLC PLAN	
b	Name of plan sponsor	ACLVP/FEEL GOOD BRANDS LLC PLA	c EIN-PN 88-0376565-001
a	Plan name	DELICATE DENTAL RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ACLVP/DELICATE DENTAL RETIREME	c EIN-PN 88-0379647-001
a	Plan name	CROVETTI ORTHOPEDICS & SPORTS MEDICINE RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ACLVP/CROVETTI ORTHOPEDICS & S	c EIN-PN 88-0454760-101
a	Plan name	GIRISGEN & KOPOLOW OD PC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ACLVP/GIRISGEN & KOPOLOW OD PC	c EIN-PN 88-0484278-002
a	Plan name	L&M MANAGEMENT INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	L&M MANAGEMENT INC	c EIN-PN 88-0488854-001
a	Plan name	CBA BUCKEYE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA BUCKEYE 401(K) PLAN	c EIN-PN 88-0693413-001

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	SOURCING IQ 401(K) PLAN	
b	Name of plan sponsor	SOURCING IQ LLC	c EIN-PN 88-1540567-001
a	Plan name	COMPANY 401(K) PLAN	
b	Name of plan sponsor	BAKERS CREEK MANAGEMENT LLC	c EIN-PN 88-1959956-001
a	Plan name	CBA MONTGOMERY 401(K) PLAN	
b	Name of plan sponsor	CBAFP/ CBA MONTGOMERY 401(K) P	c EIN-PN 88-2081729-001
a	Plan name	GRAY BROTHERS SEPTIC SERVICES RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	HARVEY ENVIRONMENTAL INC DBA	c EIN-PN 88-2381933-001
a	Plan name	R&M DISTRIBUTION RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	R&M DISTRIBUTION	c EIN-PN 88-2820083-001
a	Plan name	BL RIZER LLC DBA CHRISTIAN BROTHERS AUTOMOTIVE - BRANNON CROSSING	
b	Name of plan sponsor	CBAFP/CBA BL RIZER LLC DBA CHR	c EIN-PN 88-2973577-001
a	Plan name	TRINITY TUGS 401(K) PLAN	
b	Name of plan sponsor	TRINITY TUGS LLC	c EIN-PN 88-3346660-001
a	Plan name	HEALTHSPANMD 401(K) PLAN	
b	Name of plan sponsor	TPC/HEALTHSPANMD 401(K) PLAN	c EIN-PN 88-3795564-001
a	Plan name	CBA HIXSON 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA HIXSON 401(K) PLAN	c EIN-PN 88-3800041-001
a	Plan name	DSK FINANCIAL SERVICES 401(K) PLAN	
b	Name of plan sponsor	DSK FINANCIAL SERVICES INC	c EIN-PN 88-4395436-001
a	Plan name	VANTAGE CONSTRUCTION CORPORATION 401K PLAN	
b	Name of plan sponsor	VANTAGE CONSTRUCTION	c EIN-PN 90-0142414-001
a	Plan name	OCEAN PEDIATRIC DENTAL ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor	OCEAN PEDIATRIC DENTAL ASSOC	c EIN-PN 90-0175255-001

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	GENERATIONS NEUROSURGERY PC 401(K) PLAN & TRUST	
b Name of plan sponsor	ADCP/GENERATIONS NEUROSURGERY	c EIN-PN 90-0194533-333
a Plan name	ABGI USA INC 401(K) PLAN	
b Name of plan sponsor	ABGI USA INC	c EIN-PN 90-0298034-001
a Plan name	KENNEDY PAINTING LLC 401(K) PLAN	
b Name of plan sponsor	ESCCP/ KENNEDY PAINTING LLC	c EIN-PN 90-0435389-001
a Plan name	DEFENSE SYSTEMS & SERVICES 401K PLAN	
b Name of plan sponsor	DEFENSE SYSTEMS & SERVICES LLC	c EIN-PN 90-0594942-001
a Plan name	CBA MIDLAND 401(K) PLAN	
b Name of plan sponsor	CBAFP/CBA MIDLAND 401(K) PLAN	c EIN-PN 90-0740927-001
a Plan name	RM TECHNOLOGIES INC 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	RM TECHNOLOGIES INC	c EIN-PN 90-0755428-001
a Plan name	EK HOLDINGS GROUP INC 401(K) PLAN	
b Name of plan sponsor	SEMCP/EK HOLDINGS GROUP INC	c EIN-PN 92-1086621-001
a Plan name	NE MARK-IT SERVICES 401(K) PLAN	
b Name of plan sponsor	NE MARK-IT SERVICES	c EIN-PN 92-1292970-001
a Plan name	THRIVE STAFFING RETIREMENT PLAN	
b Name of plan sponsor	BRCRP/THRIVE STAFFING RETIRE	c EIN-PN 92-1983489-001
a Plan name	ROBBINS FINANCIAL GROUP LLC 401(K) PLAN	
b Name of plan sponsor	ESCCP/ROBBINS FINANCIAL GROUP	c EIN-PN 92-2862363-001
a Plan name	SAVVY MANAGEMENT 401(K) RETIREMENT PLAN	
b Name of plan sponsor	EEPRP/SAVVY MANAGEMENT LLC	c EIN-PN 92-2932885-001
a Plan name	LOUIE'S SERVICE CENTER 401(K) P/S PLAN	
b Name of plan sponsor	ESCCP/BALL & SON LLC DBA	c EIN-PN 92-3059274-001

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 DIRECT ADVANTAGE MAIL LLC 401(K) PLAN	
b	Name of plan sponsor DIRECT ADVANTAGE MAIL LLC	c EIN-PN 93-2706621-001
a	Plan name BRISTOL GROUP LLC RETIREMENT PLAN	
b	Name of plan sponsor THE BRISTOL GROUP LLC	c EIN-PN 93-3598257-001
a	Plan name FABIAN OIL EMPLOYEE STOCK OWNERSHIP 401(K) PLAN	
b	Name of plan sponsor FABIAN OIL INC	c EIN-PN 93-6722326-002
a	Plan name CALIFORNIA VETERINARY MEDICAL ASSOCIATION 401K PLAN	
b	Name of plan sponsor CVMARP/CALIFORNIA VETERINARY M	c EIN-PN 94-1141035-001
a	Plan name THE LAGUNA PLAYHOUSE SAVINGS PLAN	
b	Name of plan sponsor LAGUNA PLAYHOUSE (THE)	c EIN-PN 95-1509841-002
a	Plan name JOHNSON FINCH & MCCLURE CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor SEGP/JOHNSON FINCH & MCCLURE C	c EIN-PN 95-3206100-001
a	Plan name LAW OFFICES OF JUSTIN J SHRENGER APC 401K SAFE HARBOR MATCH PLAN	
b	Name of plan sponsor LAW OFFICES OF JUSTIN J SHRENG	c EIN-PN 95-4461252-001
a	Plan name THE FRISCHER MEDICAL GROUP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE FRISCHER MEDICAL GROUP	c EIN-PN 95-4613456-001
a	Plan name IMPRES TECHNOLOGY SOLUTIONS INC 401(K) PLAN	
b	Name of plan sponsor IMPRES TECHNOLOGY SOLUTIONS	c EIN-PN 95-4862840-002
a	Plan name DR TERRY Q YEE & DR PEGGY M LIAO 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HMAP/TERRY Q C YEE MD	c EIN-PN 99-0332100-001
a	Plan name PITZER BUILT CONSTRUCTION LLC 401(K) PLAN	
b	Name of plan sponsor PITZER BUILT CONSTRUCTION LLC	c EIN-PN 99-0344822-001
a	Plan name TRADEWORX LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor PBXP/TRADEWORX LLC	c EIN-PN 99-0726012-001

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	ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST - ADMIRAL PARKWAY INC	
b	Name of plan sponsor	ASRA/ADMIRAL PARKWAY INC	c EIN-PN 01-0165117-333
a	Plan name	ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST - EAST BOSTON KAPPYS INC 401K SAVINGS PLAN	
b	Name of plan sponsor	ASRA/EAST BOSTON KAPPYS INC	c EIN-PN 01-0165117-333
a	Plan name	ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST - WATSON & LINDBERGH HOTEL LLC PLAN	
b	Name of plan sponsor	ASRA/WATSON & LINDBERGH HOTEL	c EIN-PN 01-0165117-333
a	Plan name	ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST- GSM	
b	Name of plan sponsor	ASRA/GOOD SPORTSMAN MARKETING	c EIN-PN 01-0165117-333
a	Plan name	ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST LOUIS J PARADIS INC	
b	Name of plan sponsor	ASRA/LOUIS J PARADIS INC	c EIN-PN 01-0165117-333
a	Plan name	ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-FITCHBURG KAPPY'S INC 401K SAVINGS PLAN	
b	Name of plan sponsor	ASRA/FITCHBURG KAPPYS INC	c EIN-PN 01-0165117-333
a	Plan name	ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-SOUTHERN ILLINOIS HARDWARE INC	
b	Name of plan sponsor	ASRA/SOUTHERN ILLINOIS	c EIN-PN 01-0165117-001
a	Plan name	ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-SOUTHERN ILLINOIS PIZZA LLC	
b	Name of plan sponsor	ASRA/SOUTHERN ILLINOIS PIZZA	c EIN-PN 01-0165117-001
a	Plan name	MALONE DIRUBBO & COMPANY PC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MALONE DIRUBBO & COMPANY PC	c EIN-PN 02-0436087-001
a	Plan name	CAPRIATI CONSTRUCTION CORPORATION RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	CAPRIATI CONSTRUCTION	c EIN-PN 05-0475007-011
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.	<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 YOURPATH PASSIVE 2030 MODERATE	B Three-digit plan number (PN) ▶ 209
C Plan sponsor's name as shown on line 2a of Form 5500 BENEFIT TRUST COMPANY	D Employer Identification Number (EIN) 83-6725700

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

		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	1
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	141166	224811
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)	188069206	220629031
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	33184288	42368838
(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	221394660	263222681
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	12808	15957
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	12808	15957
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	221381852	263206724

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)		0
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)	869966	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		869966
(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)	6870196	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		6870196
(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)		
(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)		16498255
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		24238417

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)		0
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)	2561	
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)	150461	
(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)		153022
j Total expenses. Add all expense amounts in column (b) and enter total	2j		153022

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		24085395
l Transfers of assets:			
(1) To this plan	2l(1)		61581176
(2) From this plan	2l(2)		43841699

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 _____.