

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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

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

Part I Annual Report Identification Information

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan YOURPATH PASSIVE 2065 MODERATE, 1b Three-digit plan number (PN) 216, 1c Effective date of plan, 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) BENEFIT TRUST COMPANY 5901 COLLEGE BLVD SUITE 100 OVERLAND PARK, KS 66211, 2b Employer Identification Number (EIN) 83-6725700, 2c Plan Sponsor's telephone number 913-319-0380, 2d Business code (see instructions)

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

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

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

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

Form 5500 (2024) v. 240311

3a Plan administrator's name and address <input 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.	OMB No. 1210-0110 <hr/> 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 2065 MODERATE</u>	B Three-digit plan number (PN)	<u>▶</u> <u>216</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)
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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)

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

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d Entity code

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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)

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 ASSOCIATIONS 401(K) PLAN & TRUST - PENNERS TIRE & AUTO INC	
b	Name of plan sponsor ASRA/ PENNERS TIRE & AUTO INC	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 - B&L AUTOMOTIVE	
b	Name of plan sponsor ASRA/B&L AUTOMOTIVE	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 - 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 - 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 - PEABODY KAPPYS INC 401K SAVINGS PLAN	
b	Name of plan sponsor ASRA/PEABODY KAPPYS INC 401K	c EIN-PN 01-0165117-333

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	ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST - YANKEE MATTRESS FACTORY INC	
b	Name of plan sponsor	ASRA/YANKEE MATTRESS FACTORY I	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- 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 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- LEMON BROOKE LLC	
b	Name of plan sponsor	ASRA/ LEMON BROOKE LLC	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- MEDFORD KAPPY'S INC 401K SAVINGS PLAN	
b	Name of plan sponsor	ASRA/MEDFORD KAPPYS INC	c EIN-PN 01-0165117-333
a	Plan name	ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST- NXT GEN PLUMBING	
b	Name of plan sponsor	ASRA/NXT GEN PLUMBING	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
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-ABENAKI DENTAL CARE PLLC	
b	Name of plan sponsor	ASRA/ABENAKI DENTAL CARE PLLC	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-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-DANGELO GRILLED SANDWICHES	
b	Name of plan sponsor ASRA/DANGELO GRILLED SANDWICHE	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-FALL RIVER KAPPY'S INC 401K SAVINGS PLAN	
b	Name of plan sponsor ASRA/FALL RIVER KAPPYS INC	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-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-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
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-POTASH BROS INC	
b	Name of plan sponsor ASRA/POTASH BROS INC	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

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-SALEM CYCLE INC	
b	Name of plan sponsor ASRA/SALEM CYCLE INC	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-SIOUX CENTER CHIROPRACTIC PA	
b	Name of plan sponsor ASRA/SIOUX CENTER CHIROPRACTIC	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-SIOUX VALLEY RENDERING	
b	Name of plan sponsor ASRA/SIOUX VALLEY RENDERING	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-SOUTHERN RESTAURANT MANAGEMENT	
b	Name of plan sponsor ASRA/SOUTHERN RESTAURANT MANAG	c EIN-PN 01-0165117-333
a	Plan name ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST-ZEUTENHORST FINANCIAL INC	
b	Name of plan sponsor ASRA/ZEUTENHORST FINANCIAL IN	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/BANCROFT CONTRACTING CORP	c EIN-PN 01-0275734-333
a	Plan name ASSOCIATED GENERAL CONTRACTORS OF MAINE 401(K) PROFIT SHARING PLAN & TRUST- PRASHAW CONSTRUCTION LLC	
b	Name of plan sponsor AGCM/PRASHAW CONSTRUCTION LLC	c EIN-PN 01-0275734-333
a	Plan name ASSOCIATED GENERAL CONTRACTORS OF MAINE 401(K) PROFIT SHARING PLAN & TRUST-PIKE PROPERTY MANAGEMENT	
b	Name of plan sponsor AGCM/PIKE PROPERTY MANAGEMENT	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 YOUTH AND FAMILY OUTREACH 401(K) PLAN	
b	Name of plan sponsor CIACP/YOUTH AND FAMILY OUTREAC	c EIN-PN 01-0374579-001
a	Plan name WINGS FOR CHILDREN 401(K) PLAN	
b	Name of plan sponsor CIACP/WINGS FOR CHILDREN	c EIN-PN 01-0498250-001

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	HILTON GARDEN INN AUBURN RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	LCCR2P/HILTON GARDEN INN AUBUR	c EIN-PN 01-0538779-001
a	Plan name	BUCHANAN PE CONSULTING INC 401(K) PLAN	
b	Name of plan sponsor	BUCHANAN PE CONSULTING	c EIN-PN 01-0619010-001
a	Plan name	COMMERCIAL AIR SYSTEMS INC 401(K) PLAN	
b	Name of plan sponsor	COMMERCIAL AIR SYSTEMS INC	c EIN-PN 01-0690277-001
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	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	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	CBA LAKELAND 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA LAKELAND 401(K) PLAN	c EIN-PN 02-0767543-001
a	Plan name	MERIDEN ANIMAL HOSPITAL 401(K) PLAN	
b	Name of plan sponsor	MERIDEN ANIMAL HOSPITAL	c EIN-PN 02-0794304-001
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	NOVA PSYCHIATRIC SERVICES 401(K) PLAN	
b	Name of plan sponsor	SXPCP/NOVA PSYCHIATRIC SERVICE	c EIN-PN 04-3303141-001

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	J & L LIQUORS INC 401(K) PLAN	
b	Name of plan sponsor	J & L LIQUORS INC	c EIN-PN 04-3315210-001
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	CAPRIATI CONSTRUCTION CORPORATION RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	CAPRIATI CONSTRUCTION	c EIN-PN 05-0475007-011
a	Plan name	BLACK & WARNER CONSTRUCTION CO INC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	BLACK & WARNER CONSTRUCTION	c EIN-PN 06-0764873-001
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
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	JAY SHAPIRO & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor	JAY SHAPIRO & ASSOCIATES INC	c EIN-PN 06-1660950-001
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	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	THE ROYALTY NETWORK PROFIT SHARING PLAN	
b	Name of plan sponsor	THE ROYALTY NETWORK	c EIN-PN 11-3230735-001
a	Plan name	PATANIA CLEANERS INC 401(K) PLAN	
b	Name of plan sponsor	PATANIA CLEANERS INC	c EIN-PN 11-3665699-001

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 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 NGO & NGUYEN A PROFESSIONAL DENTAL CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NGO & NGUYEN A PROFESSIONAL	c EIN-PN 11-3718482-001
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 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 ROBERT MARTIN 401(K) PLAN	
b	Name of plan sponsor ROBERT MARTIN COMPANY LLC	c EIN-PN 13-2849215-001
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 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 CABINS FOR YOU 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor CABINS FOR YOU 401(K)	c EIN-PN 14-1916109-001

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	PROGRADE EXCAVATION & DEMOLITION LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BXOP/PROGRADE EXCAVATION & DEM	c EIN-PN 14-1962063-001
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	POLYFUSION ELECTRONICS INC 401(K) PLAN	
b	Name of plan sponsor	POLYFUSION ELECTRONICS INC	c EIN-PN 16-1056988-001
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	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	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	RICE REUTHER SULLIVAN & CARROLL LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	RICE REUTHER SULLIVAN &	c EIN-PN 20-0782189-001
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)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
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	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	EARLY ENVIRONMENTAL CONTRACTING 401(K) PLAN	
b	Name of plan sponsor	SCCRP/EARLY ENVIRONMENTAL CONT	c EIN-PN 20-1396433-001
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	ELECTRICAL WIZARDRY INC 401(K) PLAN	
b	Name of plan sponsor	EAPMP/ELECTRICAL WIZARDRY INC	c EIN-PN 20-1528699-001
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

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	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	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	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 - ELITE PLUMBING SUPPLY CORPORATION	
b	Name of plan sponsor	ELITE PLUMBING SUPPLY CORP	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 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 CT SUPPLY INC	
b	Name of plan sponsor	OMRM/CT SUPPLY INC	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- ECONOMY PLUMBING & HEATING SUPPLY COMPANY	
b	Name of plan sponsor OMRM/ECONOMY PLUMBING & HEATIN	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 HVAC SUPPLY INC	
b	Name of plan sponsor OMRM/HVAC SUPPLY 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 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- 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 WYOMING MECHANICAL SUPPLY	
b	Name of plan sponsor OMRM/WYOMING MECHANICAL SUPPLY	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

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-THE PART WORKS	
b	Name of plan sponsor	OMRM/THE PART WORKS	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	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	GOODFELLAS PIZZERIA 401(K) PLAN	
b	Name of plan sponsor	BC INVESTORS INC	c EIN-PN 20-3435861-001
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	CHORUS INNOVATIONS 401(K) PLAN	
b	Name of plan sponsor	CHORUS INNOVATIONS INC	c EIN-PN 20-4409309-001
a	Plan name	ALLIANCE OF STATE RETAIL ASSOCIATIONS 401(K) PLAN & TRUST - LIGHTHOUSE ELECTRICAL CONTRACTORS INC	
b	Name of plan sponsor	ASRA/LIGHTHOUSE ELECTRICAL CON	c EIN-PN 20-4985667-333
a	Plan name	PEBBLE HILL CUSTOM BUILDERS INC 401(K) PLAN	
b	Name of plan sponsor	HBABMP/PEBBLE HILL CUSTOM BUIL	c EIN-PN 20-5000772-001
a	Plan name	COKER INSURANCE AGENCY LLC 401(K) PLAN	
b	Name of plan sponsor	COKER INSURANCE AGENCY LLC	c EIN-PN 20-5130687-001
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
a	Plan name	BARON CONTRACTING CORPORATION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	BARON CONTRACTING CORPORATION	c EIN-PN 20-5445899-001

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 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 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 NIKKEN FOODS USA INC 401(K) PLAN	
b	Name of plan sponsor NIKKEN FOODS USA INC	c EIN-PN 20-8131597-001
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
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 SHREWSBURY'S GRADUATE SUPPLIES LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NCCPAP/SHREWSBURYS GRADUATE	c EIN-PN 20-8371723-001

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	SYSTEMS INTEGRATORS LLC 401(K) PLAN	
b	Name of plan sponsor	SYSTEMS INTEGRATORS LLC	c EIN-PN 20-8500816-001
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	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
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	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

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	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	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	ZONE STRIPING INC 401K PLAN
b	Name of plan sponsor	ZONE STRIPING INC
c	EIN-PN	22-2332677-001
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	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	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	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	MIRCROSEAL INDUSTRIES RETIREMENT PLAN	
b	Name of plan sponsor	MIRCROSEAL INDUSTRIES INC	c EIN-PN 22-3243111-001
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	STEIDLE PENSION SOLUTIONS LLC 401K PLAN	
b	Name of plan sponsor	THE STEIDLE FINANCIAL GROUP	c EIN-PN 22-3431024-001
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	WILLIAM VANWINGERDEN PROFIT SHARING PLAN	
b	Name of plan sponsor	VANWINGERDEN GREENHOUSES LLC	c EIN-PN 22-3578315-001
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
a	Plan name	PETICOTE VETERINARY CLINIC LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PETICOTE VETERINARY	c EIN-PN 22-3832894-001

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	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	JANOFF AND KHATRI PEDIATRIC DENTISTRY RETIREMENT PLAN	
b	Name of plan sponsor	SGPAP/JANOFF AND KHATRI PEDIAT	c EIN-PN 22-3977446-001
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	ROXY AUTO BODY INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	ROXY AUTO BODY INC	c EIN-PN 23-1737439-001
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	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
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	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

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	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	MONARCH STAFFING LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MONARCH STAFFING LLC	c EIN-PN 23-3081833-001
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	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	FOSTER INSULATION AND PRODUCTS 401(K) PLAN	
b	Name of plan sponsor	ESCRP/FOSTER INSULATION AND	c EIN-PN 26-0133241-001
a	Plan name	DBDRIVEN.NET 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DBDRIVEN.NET LLC	c EIN-PN 26-0262585-001
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	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	SKIDADDLES INC 401(K) PLAN	
b	Name of plan sponsor	MDCP/SKIDADDLES INC 401(K) PLA	c EIN-PN 26-1858923-001
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

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	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	JAMALI FLORAL AND GARDEN SUPPLIES PROFIT SHARING PLAN	
b	Name of plan sponsor	JAMALI FLORAL AND GARDEN SUPPL	c EIN-PN 26-2304546-001
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	CATAP/CORRAL RIDING ACADEMY 401 K PLAN	
b	Name of plan sponsor	CATAP/CORRAL RIDING ACADEMY	c EIN-PN 26-3122904-001
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	SPY COAST FARM 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	SPY COAST FARM HOME LLC	c EIN-PN 26-3604083-002
a	Plan name	TWO BROTHERS BRICK PAVING LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BXOP/TWO BROTHERS BRICK PAVING	c EIN-PN 26-3761619-001

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 KRAUS GROUP INC 401(K) PLAN	
b	Name of plan sponsor THE KRAUS GROUP INC	c EIN-PN 26-3866954-001
a	Plan name WESTERN TRADES CONSTRUCTION INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor ACLVP/WESTERN TRADES CONSTRUCT	c EIN-PN 26-4119439-001
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 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 DECTERRA INC 401(K) PLAN	
b	Name of plan sponsor PBXP/ DECTERRA INC	c EIN-PN 26-4483071-001
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
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 CUMBERLAND PIPELINE LLC 401(K) PLAN	
b	Name of plan sponsor NUCAP/CUMBERLAND PIPELINE LLC	c EIN-PN 27-0493063-001

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	SCHAFFER EXCAVATING LLC 401(K) PLAN & TRUST	
b	Name of plan sponsor	BXOP/SCHAFFER EXCAVATING LLC	c EIN-PN 27-0531283-001
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	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	CELLERA LLC 401(K) PLAN	
b	Name of plan sponsor	G52WMP/CELLERA LLC 401(K) PLN	c EIN-PN 27-0927993-001
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	SK MECHANICAL 401(K) PLAN	
b	Name of plan sponsor	SK MECHANICAL LLC	c EIN-PN 27-1058776-002
a	Plan name	ALTRU CLINIC PHARMACY-FAMILY MEDICINE CENTER INC 401(K) PLAN	
b	Name of plan sponsor	ALTRU CLINIC PHARMACY-FAMILY	c EIN-PN 27-1076579-001
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	DANIELS MECHANICAL SERVICES LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DANIELS MECHANICAL	c EIN-PN 27-1406830-001
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	FOUR SEASONS PEST SOLUTIONS RETIREMENT PLAN
b	Name of plan sponsor	BRCRP/FOUR SEASONS PEST
c	EIN-PN	27-1964150-001
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	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	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	NEVADA FIRE PROTECTION INC 401(K) PLAN
b	Name of plan sponsor	ACLVP/NEVADA FIRE PROTECTION
c	EIN-PN	27-2964855-001
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 SHAWNEE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/ CBA SHAWNEE 401(K) PLAN	c EIN-PN 27-3596486-001
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	24E FITNESS 401(K) PLAN	
b	Name of plan sponsor	SIX8P/24E FITNESS 401(K) PLAN	c EIN-PN 27-4024884-001
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	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	CBA MISSION BEND 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA MISSION BEND 401(K)	c EIN-PN 27-4834629-001
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	AGILX LLC 401(K) PLAN	
b	Name of plan sponsor	AGILX LLC	c EIN-PN 27-5282149-001
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	CACICIOS HEATING INC 401K PLAN	
b	Name of plan sponsor	PFAAP/CACICIOS HEATING INC 401	c EIN-PN 30-0080017-001
a	Plan name	CARTERSVILLE SPRINKLER 401(K) PLAN	
b	Name of plan sponsor	BOAMP/CARTERSVILLE SPRINKLER	c EIN-PN 30-0594366-001

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	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
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	FIEHRER MOTORS INC 401(K) PLAN	
b	Name of plan sponsor	FIEHRER MOTORS INC	c EIN-PN 31-0520863-001
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	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	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
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	BOB WOLFNER PLUMBING 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PHCCP/BOB WOLFNER PLUMBING 401	c EIN-PN 31-1019356-001
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	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

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 GEOGRAPH INDUSTRIES INC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor GEOGRAPH INDUSTRIES INC	c EIN-PN 31-1579613-001
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 CFASP 401(K) PLAN	
b	Name of plan sponsor GIOAP/CFASP 401(K) PLAN	c EIN-PN 31-1740321-001
a	Plan name CUSTOM LAWN CARE & LANDSCAPING 401(K) PLAN	
b	Name of plan sponsor CUSTOM LAWN CARE	c EIN-PN 31-1747937-001
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 MEDICAL PRACTICE PLAN	
b	Name of plan sponsor PEDIATRIC ASSOCIATES OF	c EIN-PN 32-0054987-001
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 MURRAYS 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 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 WHITES PHARMACY OF DALTON LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor NCCPAP/WHITES PHARMACY OF DAL	c EIN-PN 33-1006589-001

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	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	BRAMHALL ENGINEERING & SURVEYING CO 401(K) PLAN	
b	Name of plan sponsor	BRAMHALL ENGINEERING & SURVEYI	c EIN-PN 34-1822908-001
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	FORT WAYNE MUSEUM OF ART INC 401(K) PLAN	
b	Name of plan sponsor	RACFWP/FORT WAYNE MUSEUM OF AR	c EIN-PN 35-0953440-002
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	WILLIAM J CIRIELLO PLUMBING CO 401(K) PLAN	
b	Name of plan sponsor	PHCCP/WILLIAM J CIRIELLO PLUMB	c EIN-PN 35-2001652-001

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 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 AMFUEL HOURLY EMPLOYEES 401(K) PLAN	
b	Name of plan sponsor AMFUEL CELL & COATED	c EIN-PN 35-2580768-003
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 SANDSTROM PRODUCTS COMPANY 401(K) PLAN	
b	Name of plan sponsor SANDSTROM PRODUCTS COMPANY	c EIN-PN 36-2251795-002
a	Plan name LEVIN & BREND P C 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor LEVIN & BREND P C	c EIN-PN 36-2857822-001
a	Plan name INTERNATIONAL PRODUCT SUPPLY COMPANY 401(K) PLAN	
b	Name of plan sponsor LRWP/INTERNATIONAL PRODUCT SUP	c EIN-PN 36-4044303-001
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 PCD 401(K) PLAN	
b	Name of plan sponsor AMCP/PCD 401(K) PLAN	c EIN-PN 37-1427044-001

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 WATKINS EXPRESS FREIGHT INC 401(K) PLAN	
b	Name of plan sponsor WATKINS EXPRESS FREIGHT INC	c EIN-PN 37-1439733-001
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 CATAP/ZEAL CONCEPT INC 401(K) PLAN	
b	Name of plan sponsor CATAP/ZEAL CONCEPT INC 401(K)	c EIN-PN 38-4097858-001
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 ULTIMATE PEST CONTROL 401(K) PLAN	
b	Name of plan sponsor AZARP/ULTIMATE PEST CONTROL LL	c EIN-PN 40-0020287-001
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

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 BAINEY GROUP INC 401(K) PLAN	
b	Name of plan sponsor THE BAINEY GROUP	c EIN-PN 41-1786889-001
a	Plan name IMPACT COMPANIES 401(K) PLAN	
b	Name of plan sponsor ACLVP/IMPACT COMPANIES 401(K)	c EIN-PN 41-2060504-001
a	Plan name PRIMOTIONS LLC 401(K) PLAN	
b	Name of plan sponsor PRIMOTIONS LLC	c EIN-PN 41-2154996-001
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 BAXTER COMFORT SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor PHCCP/BAXTER COMFORT SOLUTIONS	c EIN-PN 42-1008474-001
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 ROMANTIQUE JEWELERS 401K PLAN	
b	Name of plan sponsor AMRP/ROMANTIQUE JEWELERS 401K	c EIN-PN 43-0989179-001
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 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	UNLIMITED OPPORTUNITIES INC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	APDRP/ UNLIMITED OPPORTUNITIES	c EIN-PN 43-1578193-001
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	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	FUENDLING MASONRY INC 401(K) PLAN	
b	Name of plan sponsor	ESCCP/FUENDLING MASONRY INC	c EIN-PN 43-1809919-001
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	THE LOWRY LAW FIRM RETIREMENT PLAN	
b	Name of plan sponsor	ESCRP/MICHAEL D LOWRY PC	c EIN-PN 43-1906631-001
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
a	Plan name	COPPERHEAD REFINISHING 401(K) PLAN	
b	Name of plan sponsor	COPPERHEAD REFINISHING	c EIN-PN 45-0569264-001
a	Plan name	DISTANCE TRUCKING INC 401K PLAN	
b	Name of plan sponsor	LRWP/DISTANCE TRUCKING INC 401	c EIN-PN 45-0606553-001

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	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	HIERHOLZER HOLDINGS 401(K) MULTIPLE EMPLOYER PLAN	
b	Name of plan sponsor	HIERHOLZER HOLDINGS INC	c EIN-PN 45-1299147-333
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	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	SYNERGY ELECTRICAL SERVICES 401(K) PLAN	
b	Name of plan sponsor	MSCCP/SYNERGY ELECTRICAL	c EIN-PN 45-1737710-001
a	Plan name	BREMIK 401(K) PLAN	
b	Name of plan sponsor	BREMIK LLC	c EIN-PN 45-2217618-001
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	BEMARKETING 401(K) PLAN	
b	Name of plan sponsor	BEMARKETING LLC	c EIN-PN 45-2373229-001
a	Plan name	HARTMAN LAWN CARE LLC 401(K) PLAN	
b	Name of plan sponsor	LGAP/HARTMAN LAWN CARE LLC 401	c EIN-PN 45-2381760-001
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

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	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	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	ON GUARD PEST CONTROL 401(K) PLAN	
b	Name of plan sponsor	ON GUARD PEST CONTROL	c EIN-PN 45-3263290-001
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	CODOS LLC 401(K) PLAN	
b	Name of plan sponsor	CODOS LLC	c EIN-PN 45-3955240-001
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	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	MENDEZ ENGINEERING PLLC 401(K) PLAN	
b	Name of plan sponsor	MENDEZ ENGINEERING PLLC	c EIN-PN 45-4247258-001
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	SECURE BENEFITS LLC 401(K) PLAN	
b	Name of plan sponsor	SECURE BENEFITS LLC DBA	c EIN-PN 45-4613561-001
a	Plan name	RTT HEATING AND COOLING LLC 401(K) PLAN	
b	Name of plan sponsor	AMRP/RTT HEATING AND COOLING	c EIN-PN 45-4756453-001

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	LONG ANIMAL HOSPITAL & EMERGENCY CENTER 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	LONG ANIMAL HOSPITAL &
c	EIN-PN	45-4973530-001
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	SCALA & SONS INC 401K PLAN
b	Name of plan sponsor	SXPCP/SCALA & SONS INC 401K
c	EIN-PN	45-5115970-001
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	MIDLAND ANIMAL HOSPITAL 401(K) PLAN
b	Name of plan sponsor	MIDLAND ANIMAL HOSPITAL PC
c	EIN-PN	45-5372877-001
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	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	CBA ARLINGTON 401(K) PLAN
b	Name of plan sponsor	CBAFP/CBA ARLINGTON 401(K) PL
c	EIN-PN	45-5514059-001
a	Plan name	LOGBOAT BREWING 401(K) PLAN
b	Name of plan sponsor	MCBGP/ LOGBOAT BREWING 401(K)
c	EIN-PN	45-5563004-001
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

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	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	PETTIS COUNTY AMBULANCE DISTRICT 457(B) PLAN	
b	Name of plan sponsor	PETTIS COUNTY AMBULANCE	c EIN-PN 46-0786417-001
a	Plan name	WEST O BEER 401(K) PLAN	
b	Name of plan sponsor	NCBGP/WEST O BEER	c EIN-PN 46-1002409-001
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	COMPLETE CARE INJURY CENTER 401(K) PLAN	
b	Name of plan sponsor	PASQUALE J LAURITO PLLC	c EIN-PN 46-1309092-001
a	Plan name	LAWRENCE & ASSOCIATES LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LAWRENCE & ASSOCIATES LLC	c EIN-PN 46-1371057-001
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
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/PEARL WINE BAR 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

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	ENGINEERED BUILDING SYSTEMS INC 401(K) PLAN	
b	Name of plan sponsor	TBAP/ENGINEERED BUILDING	c EIN-PN 46-1862866-001
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	HOLMES CUNNINGHAM LLC 401(K) PS PLAN	
b	Name of plan sponsor	HBABMP/HOLMES CUNNINGHAM LLC 4	c EIN-PN 46-1980559-001
a	Plan name	MERIDETH ENTERPRISES 401(K) PLAN	
b	Name of plan sponsor	CBAFP/MERIDETH ENTERPRISES 401	c EIN-PN 46-2234801-001
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
a	Plan name	RT MOTORSPORTS INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	RT MOTORSPORTS INC	c EIN-PN 46-3037943-001
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	TAMPA STANDARD LLC 401(K) PLAN	
b	Name of plan sponsor	TAMPA STANDARD LLC	c EIN-PN 46-4220292-100
a	Plan name	BPI INC 401(K) PLAN	
b	Name of plan sponsor	BPI INC	c EIN-PN 46-4225750-001
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	STANLEY STEEMER OF E-TOWN INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	HCCRP STANLEY STEEMER OF E-TOW	c EIN-PN 46-4509966-001

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	POSITIVE SYNERGY CORP 401(K) PLAN	
b	Name of plan sponsor	POSITIVE SYNERGY CORPORATION	c EIN-PN 46-4637450-001
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	FIRE RESEARCH & TECHNOLOGY LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	FIRE RESEARCH & TECHNOLOGY LLC	c EIN-PN 46-5200446-001
a	Plan name	CBA MONUMENT 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA MONUMENT 401(K) PLAN	c EIN-PN 46-5319999-001
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	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	AMERICAN MACHINE WORKS 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	AMERICAN MACHINE WORKS INC	c EIN-PN 47-0598726-001
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	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	GENERAL FIRE & SAFETY EQUIPMENT COMPANY OF OMAHA INC 401(K) PLAN	
b	Name of plan sponsor	GENERAL FIRE & SAFETY	c EIN-PN 47-0645369-001
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

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	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
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	LOCUM RESTITUTIO LLC DBA CHICK-FIL-A ROCKMART 401(K) PLAN	
b	Name of plan sponsor	GIOAP/ LOCUM RESTITUTIO LLC DB	c EIN-PN 47-1774594-001
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	JTAJE LLC 401(K) PLAN	
b	Name of plan sponsor	GIOAP/JTAJE 401(K) PLAN	c EIN-PN 47-1950125-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	SOUTHERN 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	CHICK-FIL-A VICTORY AT SKIDAWAY 401(K) PLAN	
b	Name of plan sponsor	GIOAP/CHICK-FIL-A VICTORY AT	c EIN-PN 47-2193611-001
a	Plan name	CBA INDEPENDENCE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA INDEPENDENCE 401(K)	c EIN-PN 47-2320472-001
a	Plan name	CBA PARKER 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA PARKER 401(K) PLAN	c EIN-PN 47-2334961-001
a	Plan name	CBA TULSA HILLS 401(K) PLAN	
b	Name of plan sponsor	CBAFP/ CBA TULSA HILLS 401(K)	c EIN-PN 47-2361961-001
a	Plan name	CBA BEDFORD 401(K) PLAN	
b	Name of plan sponsor	CBAFP/ CBA BEDFORD 401(K) PLAN	c EIN-PN 47-2415565-001
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	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	NYC SNOW SERVICES 401(K) PLAN	
b	Name of plan sponsor	PDRSP/NYC SNOW SERVICES 401(K)	c EIN-PN 47-2725593-001

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	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	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	GUMBOS GROUNDSKEEPING LLC 401K PLAN	
b Name of plan sponsor	LMRCP/GUMBOS GROUNDSKEEPING	c EIN-PN 47-3092300-001
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
a Plan name	ONE STOP DENTAL PA 401(K) PLAN	
b Name of plan sponsor	ONE STOP DENTAL PA	c EIN-PN 47-3163594-001
a Plan name	DUCKETT LADD LLP 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	DUCKETT LADD LLP	c EIN-PN 47-3802730-001
a Plan name	NEW BEYBRIDGE LLC 401(K) PLAN	
b Name of plan sponsor	NEW BEYBRIDGE LLC	c EIN-PN 47-4004029-001
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

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 CFA WESTFIELD RETIREMENT PLAN	
b	Name of plan sponsor GIOAP/CFA WESTFIELD RETIREMENT	c EIN-PN 47-4108990-001
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 CULLIGAN OF NEW HAMPSHIRE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WATER 101 LLC DBA CULLIGAN	c EIN-PN 47-4218698-001
a	Plan name CBA BEAUMONT 401K PLAN	
b	Name of plan sponsor CBAFP/CBA BEAUMONT 401K PLAN	c EIN-PN 47-4223794-001
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 KROS STRAIN BREWING COMPANY 401(K) PLAN	
b	Name of plan sponsor NCBGP/KROS STRAIN BREWING COMP	c EIN-PN 47-4539602-001
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
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 AMERICAN AIR BALANCE LLC 401(K) PLAN	
b	Name of plan sponsor EFSP/AMERICAN AIR BALANCE LLC	c EIN-PN 47-5606536-001
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

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	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	HAWAII HEART ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor	HMAP/HAWAII HEART ASSOCIATES 4	c EIN-PN 48-4388785-001
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	DUKES LUMBER & HOME CENTER INC PROFIT SHARING PLAN	
b	Name of plan sponsor	DUKES LUMBER & HOME CENTER INC	c EIN-PN 51-0119404-001
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	A ABBY GROUP 401(K) PLAN	
b	Name of plan sponsor	AMCP/A ABBY GROUP 401(K) PLAN	c EIN-PN 51-0477856-001
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	TOROID CORPORATION 401(K) PLAN	
b	Name of plan sponsor	TOROID CORPORATION	c EIN-PN 52-1264266-001

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	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	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
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	FIELDER ELECTRIC MOTOR REPAIR INC 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	FIELDER ELECTRIC MOTOR
c	EIN-PN	54-1062815-001
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	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	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	KATY FAMILY PHYSICIAN RETIREMENT PLAN
b	Name of plan sponsor	SGPAP/ KATY FAMILY PHYSICIAN
c	EIN-PN	54-2154902-001
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

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	401(K) PROFIT SHARING PLAN FOR EMPLOYEES OF NORTH COUNTRY CONTRACTORS LLC	
b	Name of plan sponsor	NORTH COUNTRY CONTRACTORS LLC	c EIN-PN 55-0858326-010
a	Plan name	EANC/CATAPULT EMPLOYERS ASSOCIATION 401K PLAN	
b	Name of plan sponsor	EANC/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	REDTEAM SOFTWARE LLC 401(K) PLAN	
b	Name of plan sponsor	REDTEAM SOFTWARE LLC	c EIN-PN 56-2656679-001
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	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	MEDICAL CENTER LLP 401(K) PLAN	
b	Name of plan sponsor	NCCPAP/MEDICAL CENTER	c EIN-PN 58-0949770-003

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 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
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 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 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 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 SUNSHINE WATER CONTROL 401(A) PLAN	
b	Name of plan sponsor SUNSHINE WCD	c EIN-PN 59-1150382-001
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 T & G CONSTRUCTORS 401(K) PLAN	
b	Name of plan sponsor T & G CONSTRUCTORS	c EIN-PN 59-2806739-001
a	Plan name LIG MARINE MANAGERS 401(K) PLAN	
b	Name of plan sponsor LIG MARINE MANAGERS INC	c EIN-PN 59-2948140-001

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	DECK SYSTEMS INC 401(K) PLAN	
b	Name of plan sponsor	DECK SYSTEMS INC	c EIN-PN 59-3014164-001
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	GRAYSTONE RESTORATION 401(K) PLAN	
b	Name of plan sponsor	GRAYSTONE CONSTRUCTION	c EIN-PN 59-3617849-002
a	Plan name	FAMILY AND COSMETIC DENTISTRY PA 401(K) PLAN	
b	Name of plan sponsor	FAMILY & COSMETIC	c EIN-PN 59-3619526-001
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	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	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	HOME CAB COMPANY 401(K) PLAN	
b	Name of plan sponsor	MSCCP/HOME CAB COMPANY 401(K)	c EIN-PN 61-0928582-001

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 BOSWELL CONTRACTING INC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor BOSWELL CONTRACTING INC	c EIN-PN 61-0976698-001
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 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
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 TRINSOFT LLC 401(K) PLAN	
b	Name of plan sponsor SFCRP/TRINSOFT LLC 401(K) PLAN	c EIN-PN 61-1311296-001
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 COUNTRYSIDE ANIMAL HOSPITAL 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor MSCCP/COUNTRYSIDE ANIMAL	c EIN-PN 61-1323117-001
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

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	THOROUGHbred FINANCIAL AGENCY 401K PLAN	
b	Name of plan sponsor	TBAP/THOROUGHbred FINANCIAL AG	c EIN-PN 61-1346520-001
a	Plan name	BOX LAKE NETWORKS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	BOX LAKE NETWORKS INC	c EIN-PN 61-1359880-001
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	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	INTERSTATE TRANSMISSION RETIREMENT PLAN	
b	Name of plan sponsor	CRAIP/INTERSTATE TRANSMISSION	c EIN-PN 61-1452194-001
a	Plan name	WJ ANDRIOTS 401(K) PLAN	
b	Name of plan sponsor	SCCRP/WJ ANDRIOTS LLC	c EIN-PN 61-1489653-001
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	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	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

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	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	CBA ATASCOCITA 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA ATASCOCITA 401(K)	c EIN-PN 65-1271656-001
a	Plan name	MUTUAL ASSISTANCE NETWORK OF DEL PASO HEIGHTS 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	MUTUAL ASSISTANCE NETWORK	c EIN-PN 68-0332694-001
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	LEARNING ARTS CORPORATION	
b	Name of plan sponsor	LEARNING ARTS	c EIN-PN 68-0434185-001
a	Plan name	SERVE WYOMING 401(K) PLAN	
b	Name of plan sponsor	SERVE WYOMING	c EIN-PN 68-0556475-001
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	JANI KING GULF COAST 401K PLAN	
b	Name of plan sponsor	ENMON ENTERPRISES LLC DBA JANI	c EIN-PN 72-1124143-001
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

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 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 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 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 LEET EYECARE 401(K) PLAN	
b	Name of plan sponsor LEET EYECARE	c EIN-PN 75-2970637-001
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 ALLIANCE PAYROLL SERVICES INC RETIREMENT TRUST	
b	Name of plan sponsor APCGP/ALLIANCE PAYROLL SERVICE	c EIN-PN 76-0400279-001
a	Plan name ADVISORS FINANCIAL GROUP 401(K) PLAN	
b	Name of plan sponsor ADVISORS FINANCIAL GROUP	c EIN-PN 76-0556119-001
a	Plan name ABSOLUTE TURNKEY SERVICES INC 401(K) PLAN	
b	Name of plan sponsor ABSOLUTE TURNKEY	c EIN-PN 77-0433577-001

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	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	PSS CONTRACTORS LLC 401(K) PLAN	
b	Name of plan sponsor	EFSP/PSS CONTRACTORS LLC 401(K)	c EIN-PN 80-0100245-001
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	CBA FISHERS 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA FISHERS 401(K) PLAN	c EIN-PN 80-0872995-001
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	CBA KATY FIRETHORNE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA KATY FIRETHORNE	c EIN-PN 81-1122905-001
a	Plan name	PALS BREWING COMPANY 401(K) PLAN	
b	Name of plan sponsor	NCBGP/PALS BREWING COMPANY 401	c EIN-PN 81-1333535-001
a	Plan name	TREE OF LIFE COUNSELING CENTER 401(K) PLAN	
b	Name of plan sponsor	TREE OF LIFE COUNSELING	c EIN-PN 81-1503771-001
a	Plan name	GREVEN GROUP LLC 401(K) PLAN	
b	Name of plan sponsor	GREVEN GROUP LLC	c EIN-PN 81-2446392-001
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

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 THORNTON 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA THORNTON 401(K) PLAN	c EIN-PN 81-2773457-001
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	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	LOST WAY BREWERY 401(K) PLAN	
b	Name of plan sponsor	NCBGP/LOST WAY BREWERY 401(K)	c EIN-PN 81-3691045-001
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	UNDERGROUND MAGNETICS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	UNDERGROUND MAGNETICS INC	c EIN-PN 81-3855562-001
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	J STEPHENS PLUMBING 401(K) PLAN	
b	Name of plan sponsor	PHCCP/J STEPHENS PLUMBING 401	c EIN-PN 81-4150270-001
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	CBA GREENVILLE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA GREENVILLE 401(K) P	c EIN-PN 81-4416477-001

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 LEWISVILLE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA LEWISVILLE 401(K) P	c EIN-PN 81-4502638-001
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	PORTER BANKS BALDWIN & SHAW 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PORTER BANKS BALDWIN & SHAW	c EIN-PN 81-4822291-001
a	Plan name	SANTEE METAL WORKS LLC 401(K) PLAN	
b	Name of plan sponsor	AAMDP/SANTEE METAL WORKS LLC	c EIN-PN 81-4884827-001
a	Plan name	OPHTHALMOLOGY CONSULTANTS OF OAHU 401(K) PLAN	
b	Name of plan sponsor	HMAP/OPHTHALMOLOGY CONSULT	c EIN-PN 81-5109081-333
a	Plan name	SUSAN SCHERBEL PA LLC RETIREMENT AND 401(K) PLAN	
b	Name of plan sponsor	BHFSP/ SUSAN SCHERBEL PA LLC R	c EIN-PN 81-5115574-001
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	DURA-VATOR LLC 401(K) PLAN	
b	Name of plan sponsor	DURA-VATOR LLC	c EIN-PN 81-5279720-001
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

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	NIRVANA CARE 401K PLAN	
b Name of plan sponsor	NIRVANA CARE PLLC	c EIN-PN 82-0730715-001
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
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	JADEJA CIMONE LAW PC 401(K) PLAN	
b Name of plan sponsor	JADEJA CIMONE LAW PC	c EIN-PN 82-1353857-002
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 WESTMINSTER 401(K) PLAN	
b Name of plan sponsor	CBAFP/CBA WESTMINSTER 401(K)	c EIN-PN 82-1618458-001
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	ANGLER SECURITY SOLUTIONS LLC 401(K) PLAN	
b Name of plan sponsor	FPORP/ANGLER SECURITY SOLUTION	c EIN-PN 82-1949957-001

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	NATELLI GROUP FAMILY LLC 401(K) PLAN	
b	Name of plan sponsor	AMCP/NATELLI GROUP FAMILY LLC	c EIN-PN 82-2136893-001
a	Plan name	INCENDIARY BREWING COMPANY 401(K) PLAN	
b	Name of plan sponsor	NCCBGP/INCENDIARY BREWING COMP	c EIN-PN 82-2166515-001
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	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	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
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	CHICKABAY LLC 401(K) PLAN	
b	Name of plan sponsor	GIOAP/CHICKABAY LLC 401(K) PLA	c EIN-PN 82-3269988-001
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	WILD FRONTIER LLC 401(K) PLAN	
b	Name of plan sponsor	GIOAP/WILD FRONTIER LLC	c EIN-PN 82-3526174-001

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 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 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
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 LEXINGTON 401(K) PLAN	
b	Name of plan sponsor CBAFP/ CBA LEXINGTON 401(K)	c EIN-PN 82-5076997-001
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 BIG HORN ROOFING 401(K) PLAN	
b	Name of plan sponsor BIG HORN ROOFING INC	c EIN-PN 83-0278171-001
a	Plan name TETON ORTHOPAEDICS 401(K) PLAN	
b	Name of plan sponsor ORTHOPAEDICS OF JACKSON HOLE P	c EIN-PN 83-0322741-001

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	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	HEWN 401K PLAN	
b	Name of plan sponsor	JAK HOME LLC DBA HEWN	c EIN-PN 83-0498320-002
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	FREEWAY INTERNATIONAL LOGISTICS LLC 401(K) PLAN	
b	Name of plan sponsor	FREEWAY INTERNATIONAL	c EIN-PN 83-1072865-001
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	CBA INTERQUEST 401(K) PLAN	
b	Name of plan sponsor	CBAFP/ CBA INTERQUEST 401(K)	c EIN-PN 83-1976351-001
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	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	INGENIUM PLUS RETIREMENT PLAN	
b	Name of plan sponsor	BRCRP/INGENIUM PLUS LLC	c EIN-PN 83-2346281-002
a	Plan name	CBA OMAHA 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA OMAHA 401(K) PLAN	c EIN-PN 83-2420292-001
a	Plan name	MDD THREE 401(K) PLAN	
b	Name of plan sponsor	GIOAP/MDD THREE 401(K) PLAN	c EIN-PN 83-2781860-002

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	CBA NORCROSS PLAN	
b	Name of plan sponsor	CBAFP/CBA NORCROSS	c EIN-PN 83-3142560-001
a	Plan name	RIVER ENDODONTICS 401(K) PLAN	
b	Name of plan sponsor	AYOUB ENDODONTICS LLC DBA RIVE	c EIN-PN 83-3908218-001
a	Plan name	FRONT RANGE POWERLINE SERVICES 401(K) PLAN	
b	Name of plan sponsor	FRONT RANGE POWERLINE SERVICES	c EIN-PN 83-4039541-001
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	PINNACLE HOLDINGS 401(K) PLAN	
b	Name of plan sponsor	AMCP/PINNACLE HOLDINGS 401(K)	c EIN-PN 83-4673982-001
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
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	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

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 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	CBA CHEROKEE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/ CBA CHEROKEE 401(K) PLA	c EIN-PN 84-1977733-001
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	MOREJSTU LLC 401(K) PLAN	
b	Name of plan sponsor	MOREJSTU LLC	c EIN-PN 84-2404944-001
a	Plan name	XPEDITION ENTERPRISES LLC 401(K) PLAN	
b	Name of plan sponsor	XPEDITION ENTERPRISES LLC	c EIN-PN 84-2438478-001
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	CBA AUBREY 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA AUBREY 401(K) PLAN	c EIN-PN 84-3414023-001
a	Plan name	ADDA INFUSION LLC 401(K) PLAN	
b	Name of plan sponsor	NUCAP/ADDA INFUSION LLC 401(K)	c EIN-PN 84-3431918-001
a	Plan name	TRADE MASTERS 401(K) PLAN	
b	Name of plan sponsor	PHCCP/TRADE MASTERS 401(K)	c EIN-PN 84-3451566-001

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 WALKER COMPANY 401(K) PLAN	
b	Name of plan sponsor MSCCP/W PRINCIPLES LLC DBA	c EIN-PN 84-3590572-001
a	Plan name CBA MONTGOMERY TX 401(K) PLAN	
b	Name of plan sponsor CBAFP/ CBA MONTGOMERY TX 401	c EIN-PN 84-3829530-001
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
a	Plan name HEALTH LYNKS LLC 401(K) RETIREMENT SAVINGS PLAN II	
b	Name of plan sponsor HEALTH LYNKS LLC	c EIN-PN 84-3969006-002
a	Plan name HEALTH LYNKS LLC 401(K) RETIREMENT SAVINGS PLAN III	
b	Name of plan sponsor HEALTH LYNKS LLC 401(K) RETIRE	c EIN-PN 84-3969006-002
a	Plan name CBA CHAMPIONS 401(K) PLAN	
b	Name of plan sponsor CBAFP/CBA CHAMPIONS 401(K)	c EIN-PN 84-4060839-001
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 CROWE ELECTRIC INC 401(K) PLAN	
b	Name of plan sponsor SXPCP/CROWE ELECTRIC INC	c EIN-PN 84-4140959-001
a	Plan name CBA STEVENS RANCH 401(K) PLAN	
b	Name of plan sponsor CBAFP/CBA STEVENS RANCH 401(K)	c EIN-PN 84-4347650-001
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

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	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	TURTLE MOUNTAIN BREWING COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	RRNMP/TURTLE MOUNTAIN BREWING	c EIN-PN 85-0454275-001
a	Plan name	GLOSS HAIR PARLOR 401(K) PLAN	
b	Name of plan sponsor	BSCCP/GLOSS HAIR PARLOR 401(K)	c EIN-PN 85-0560356-001
a	Plan name	M25 LLC 401K PLAN	
b	Name of plan sponsor	GIOAP/M25 LLC 401K PLAN	c EIN-PN 85-0722519-001
a	Plan name	AHG 401(K) PLAN	
b	Name of plan sponsor	BRPP/AHG 401(K) PLAN	c EIN-PN 85-0843929-001
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 NEW TAMPA 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA NEW TAMPA 401(K) PLA	c EIN-PN 85-1049398-001
a	Plan name	DRS PAVLIK AND BARGEN DDS PC 401(K) PLAN	
b	Name of plan sponsor	DRS PAVLIK AND BARGEN DDS PC	c EIN-PN 85-1238047-001
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	CBA FALCON 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA FALCON 401(K) PLAN	c EIN-PN 85-1388044-001

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	LILICOL LLC 401(K) PLAN	
b	Name of plan sponsor	GIOAP/LILICOL LLC	c EIN-PN 85-1575800-001
a	Plan name	PVONE 401(K) PLAN	
b	Name of plan sponsor	PVONE CAPITAL LLC	c EIN-PN 85-1883713-001
a	Plan name	KONA BUILT CONSTRUCTION LLC 401(K) PLAN	
b	Name of plan sponsor	ABSRP/KONA BUILT CONSTRUCTION	c EIN-PN 85-2084428-001
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	CBA WAKE FOREST 401(K) PLAN	
b	Name of plan sponsor	CBAFP/ CBA WAKE FOREST 401(K)	c EIN-PN 85-2320223-001
a	Plan name	BHAWK 401(K) PLAN	
b	Name of plan sponsor	NCCBGP/BRAD HALLING AMERICAN	c EIN-PN 85-2879434-001
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

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/ 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
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/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/BENSON WOODWORKING CO INC PLAN	
b	Name of plan sponsor	LPEP/BENSON WOODWORKING CO INC	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

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/BII SERVICES CORP PLAN	
b	Name of plan sponsor	LPEP/BII SERVICES CORP	c EIN-PN 85-3213245-301
a	Plan name	LPE/BOONE SUPPORTED LIVING LLC	
b	Name of plan sponsor	LPEP/BOONE SUPPORTED LIVING	c EIN-PN 85-3213245-301
a	Plan name	LPE/CADOGAN TATE NEW YORK LIMITED PLAN	
b	Name of plan sponsor	LPEP/CADOGAN TATE NEW YORK	c EIN-PN 85-3213245-301
a	Plan name	LPE/CAPTAIN D'S LLC PLAN	
b	Name of plan sponsor	LPEP/CAPTAIN DS LLC	c EIN-PN 85-3213245-301
a	Plan name	LPE/CENTER FOR POLICING EQUITY PLAN	
b	Name of plan sponsor	LPEP/ LPE CENTER FOR POLICING	c EIN-PN 85-3213245-301
a	Plan name	LPE/CENTRAL TEXTILES INC PLAN	
b	Name of plan sponsor	LPEP/ CENTRAL TEXTILES INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/CHARLES CITY TIMBER AND MAT PLAN	
b	Name of plan sponsor	LPEP/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	LPEP/CHECK MATE INDUSTRIES INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/CONTOUR FINE TOOLING INC PLAN	
b	Name of plan sponsor	LPEP/CONTOUR FINE TOOLING INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/DESIGN TO PRINT INC PLAN	
b	Name of plan sponsor	LPEP/DESIGN TO PRINT INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/EAST HILLS AUTO GROUP PLAN	
b	Name of plan sponsor	LPEP/EAST HILLS AUTO GROUP	c EIN-PN 85-3213245-301
a	Plan name	LPE/ELDREDGE LUMBER & HARDWARE INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LPEP/ELDREDGE LUMBER & HARDWAR	c EIN-PN 85-3213245-301

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	LPE/ELITE STAFFING INC PLAN	
b	Name of plan sponsor	LPEP/ELITE STAFFING INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/EXTENDED CARE CONSULTING LLC PLAN	
b	Name of plan sponsor	LPEP/EXTENDED CARE CONSULTING	c EIN-PN 85-3213245-301
a	Plan name	LPE/FAMILY MEDICAL CENTERS 401(K) PLAN	
b	Name of plan sponsor	LPEP/FAMILY MEDICAL CENTERS	c EIN-PN 85-3213245-301
a	Plan name	LPE/GARLYN O SHELTON INC PLAN	
b	Name of plan sponsor	LPEP/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	LPEP/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	LPEP/GOLD MOUNTAIN COMMUNICATI	c EIN-PN 85-3213245-301
a	Plan name	LPE/HANSEN PROPERTIES INC PLAN	
b	Name of plan sponsor	LPEP/HANSEN PROPERTIES INC	c EIN-PN 85-3213245-301
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/LINDA GAUNT COMMUNICATIONS LLC	
b	Name of plan sponsor	LPEP/LINDA GAUNT COMMUNICATION	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

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	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/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/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/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

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/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/REAP CONSTRUCTION LTD 401(K) PLAN	
b	Name of plan sponsor	LPEP/REAP CONSTRUCTION LTD	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
a	Plan name	LPE/SEALEVEL CONSTRUCTION INC 401(K) PLAN	
b	Name of plan sponsor	LPEP/SEALEVEL CONSTRUCTION INC	c EIN-PN 85-3213245-301
a	Plan name	LPE/SOUTHWEST MATERIAL HANDLING INC PLAN	
b	Name of plan sponsor	LPEP/SOUTHWEST MATERIAL HANDLI	c EIN-PN 85-3213245-301
a	Plan name	LPE/STRAINRITE 401K PLAN	
b	Name of plan sponsor	LPEP/STRAINRITE 401K PLAN	c EIN-PN 85-3213245-301
a	Plan name	LPE/TEAM HOUSING SOLUTIONS INC 401(K) PLAN	
b	Name of plan sponsor	LPEP/TEAM HOUSING SOLUTIONS IN	c EIN-PN 85-3213245-301
a	Plan name	LPE/THROGS NECK EXTENDED CARE LLC UNION 1199 PLAN	
b	Name of plan sponsor	LPEP/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	LPEP/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	LPEP/LPE WEIL WRECKER SERVICES	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/WESTLAND MANUFACTURING INC DBA DAKOTALAND MANUFACTURING	
b	Name of plan sponsor LPEP/DAKOTALAND MANUFACTURING	c EIN-PN 85-3213245-301
a	Plan name LPE/WINDSOR VETERINARY CLINIC LLC	
b	Name of plan sponsor LPEP/WINDSOR VETERINARY CLINIC	c EIN-PN 85-3213245-301
a	Plan name LPE/WORKFORCE OUTSOURCE SERVICES PLAN	
b	Name of plan sponsor LPEP/WORKFORCE OUTSOURCE SERVI	c EIN-PN 85-3213245-301
a	Plan name LPE/WORLDWIDE COMPUTER SOLUTIONS INC PLAN	
b	Name of plan sponsor LPEP/WORLDWIDE COMPUTER	c EIN-PN 85-3213245-301
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 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 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/FONDO 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MIPE/FONDO 401(K) PROFIT SHARI	c EIN-PN 85-4166502-001
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

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/WESTERN PACIFIC FENCE LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MIPE/WESTERN PACIFIC FENCE LLC	c EIN-PN 85-4166502-001
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 ARROWHEAD MACHINING INC 401(K) PLAN	
b	Name of plan sponsor ACLVP/ ARROWHEAD MACHINING INC	c EIN-PN 85-4208254-001
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 401(K) PROFIT-SHARING PLAN FOR EMPLOYEES OF ARIZONA MINI MIX CONCRETE OF MESA INC	
b	Name of plan sponsor ARIZONA MINI MIX CONCRETE OF	c EIN-PN 86-0638935-001
a	Plan name INSEARCH CORP 401(K) PLAN	
b	Name of plan sponsor INSEARCH CORP	c EIN-PN 86-0648715-001
a	Plan name RECORD ENERGY CONCEPTS INC 401(K) SALARY REDUCTION PLAN AND TRUST	
b	Name of plan sponsor RECORD ENERGY CONCEPTS INC	c EIN-PN 86-0706961-001
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 DRAWER CONNECTION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DRAWER CONNECTION INC	c EIN-PN 86-0900224-002

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	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	MADE WELL RESTORATION 401(K) PLAN	
b	Name of plan sponsor	CIICP/MADE WELL RESTORATION	c EIN-PN 86-1503344-001
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	CBA WEST CHICAGO 401(K) PLAN	
b	Name of plan sponsor	CBA W CHICAGO LLC DBA CBA	c EIN-PN 86-1614427-001
a	Plan name	CBA AURORA 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA AURORA 401(K) PLAN	c EIN-PN 86-1657419-001
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	RONDAY TECHNOLOGIES INC 401(K) PLAN	
b	Name of plan sponsor	LGAP/RONDAY TECHNOLOGIES INC	c EIN-PN 86-2329057-001
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 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 AHWATUKEE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/ CBA AHWATUKEE FOOTHILLS	c EIN-PN 86-3816631-001

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 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	APEC ELECTRICAL SPECIALISTS INC 401(K) PLAN	
b	Name of plan sponsor	AMCP/APEC ELECTRICAL	c EIN-PN 87-0669015-001
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	ATLAS HOME HEALTH AND THERAPY LLC 401(K) PLAN	
b	Name of plan sponsor	ESCCP/ATLAS HOME HEALTH AND T	c EIN-PN 87-1134094-001
a	Plan name	RAVER HAULING 401(K) PLAN	
b	Name of plan sponsor	EFSP/RAVER HAULING 401(K) PLAN	c EIN-PN 87-1433034-001
a	Plan name	CBA GRAND PARKWAY 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA GRAND PARKWAY 401(K)	c EIN-PN 87-1620878-001
a	Plan name	KREHBIELS SPECIALTY MEATS 401(K) PLAN	
b	Name of plan sponsor	ESCCP/KREHBIELS SPECIALTY	c EIN-PN 87-1967508-001
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	CBA ROBINHOOD 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA ROBINHOOD 401(K) PL	c EIN-PN 87-2439727-001
a	Plan name	ABUNDANCE MINDSET 401(K) PLAN	
b	Name of plan sponsor	GIOAP/ABUNDANCE MINDSET 401(K)	c EIN-PN 87-2557232-001

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 BERTHOUD 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA BERTHOUD 401(K) PLAN	c EIN-PN 87-2758627-001
a	Plan name	REGENERATE RESTAURANT GROUP 401(K) PLAN	
b	Name of plan sponsor	GIOAP/REGENERATE RESTAURANT	c EIN-PN 87-3024951-001
a	Plan name	INSPIRE HOLDINGS RETIREMENT PLAN	
b	Name of plan sponsor	AMRP/INSPIRE HOLDINGS RETIREME	c EIN-PN 87-3289385-001
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	7 STAR HOSPITALITY RESOURCE LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	7SHR/CT BAGELS LLC DBA BAGEL	c EIN-PN 87-3638143-005
a	Plan name	TRI POINT VETERINARY CLINIC 401K PLAN	
b	Name of plan sponsor	TBAP/TRI POINT VETERINARY CLIN	c EIN-PN 87-3714177-001
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	ATLAS COMPANION ANIMAL SERVICES RETIREMENT PLAN	
b	Name of plan sponsor	ATLAS COMPANION ANIMAL	c EIN-PN 87-4074103-001
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
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

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	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	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	STEVE BEYER PRODUCTIONS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	STEVE BEYER PRODUCTIONS INC	c EIN-PN 88-0376475-002
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	CBA BUCKEYE 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA BUCKEYE 401(K) PLAN	c EIN-PN 88-0693413-001
a	Plan name	CBA APEX 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA APEX 401(K) PLAN	c EIN-PN 88-1197955-001
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	COMPANY 401(K) PLAN	c EIN-PN 88-1959956-001

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 LONGMONT 401(K) PLAN	
b	Name of plan sponsor	CBAFP/CBA LONGMONT 401(K) PLAN	c EIN-PN 88-2047318-001
a	Plan name	SENEZ CONSULTING INC 401K PLAN	
b	Name of plan sponsor	TBAP/SENEZ CONSULTING INC 401K	c EIN-PN 88-2059097-001
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	DAYMARK WEALTH PARTNERS LLC 401(K) PLAN	
b	Name of plan sponsor	DAYMARK WEALTH PARTNERS LLC	c EIN-PN 88-2642047-001
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	SPECIALIZED STEEL SOLUTIONS 401(K) PLAN & TRUST	
b	Name of plan sponsor	PBXP/SPECIALIZED STEEL SOLUTI	c EIN-PN 88-4183247-001
a	Plan name	DSK FINANCE 401(K) PLAN	
b	Name of plan sponsor	DSK FINANCE 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)	
<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	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	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	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
a	Plan name	LOUDOUN FUNERAL CHAPEL INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LOUDOUN FUNERAL CHAPEL INC	c EIN-PN 93-2953456-001
a	Plan name	JONLE COMPANY PROFIT SHARING PLAN	
b	Name of plan sponsor	JLE WATERMARK LLC	c EIN-PN 93-3212119-002
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	THE LAGUNA PLAYHOUSE SAVINGS PLAN	
b	Name of plan sponsor	LAGUNA PLAYHOUSE (THE)	c EIN-PN 95-1509841-002

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 GARVEY WHOLESALE BEVERAGE INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GARVEY WHOLESALE BEVERAGE INC	c EIN-PN 95-2913730-002
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 WAYNE H MARTIN MD INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WAYNE H MARTIN MD INC	c EIN-PN 95-4303127-002
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 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
a	Plan name HARTZ SEARCH 401(K) PLAN	
b	Name of plan sponsor TREETOP TALENT ADVISORS LLC	c EIN-PN 99-3514976-001
a	Plan name GD PSYCH SERVICES 401(K) PLAN	
b	Name of plan sponsor RRNMP/GD PSYCH SERVICES	c EIN-PN 81-4419303-001
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 - 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 - WATSON & LINDBERGH HOTEL LLC PLAN	
b	Name of plan sponsor ASRA/WATSON & LINDBERGH HOTEL	c EIN-PN 01-0165117-333

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 2065 MODERATE	B Three-digit plan number (PN) ▶ 216
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.

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	4634
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)	21218657
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	
(15) Other.....	1c(15)	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	12126897	21223291
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	2936	3644
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	2936	3644
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	12123961	21219647

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)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		0
(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)	545854	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		545854
(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)		1497722
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		2043576

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)	2570	
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)	10341	
(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)		12911
j Total expenses. Add all expense amounts in column (b) and enter total	2j		12911

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		2030665
l Transfers of assets:			
(1) To this plan	2l(1)		9468958
(2) From this plan	2l(2)		2403937

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 _____.