

Form 5500

Department of the Treasury  
Internal Revenue Service

Department of Labor  
Employee Benefits Security  
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110  
1210-0089

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2024 or fiscal plan year beginning 03/01/2024 and ending 02/28/2025

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

Part II Basic Plan Information—enter all requested information

1a Name of plan: TRI CITY FOODS, INC. EMPLOYEE BENEFITS PLAN
1b Three-digit plan number (PN): 501
1c Effective date of plan: 03/01/2004
2a Plan sponsor's name (employer, if for a single-employer plan): TRI CITY FOODS, INC.
2b Employer Identification Number (EIN): 47-1813575
2c Plan Sponsor's telephone number: 281-201-2726
2d Business code (see instructions): 721210

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 rows for employer/plan sponsor and DFE.

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

<b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	<b>3b</b> Administrator's EIN	
	<b>3c</b> Administrator's telephone number	
<b>4</b> 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: <b>a</b> Sponsor's name <b>c</b> Plan Name	<b>4b</b> EIN	
	<b>4d</b> PN	
<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b>	2085
<b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ). <b>a(1)</b> Total number of active participants at the beginning of the plan year ..... <b>a(2)</b> Total number of active participants at the end of the plan year ..... <b>b</b> Retired or separated participants receiving benefits..... <b>c</b> Other retired or separated participants entitled to future benefits ..... <b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> ..... <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. .... <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> ..... <b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) ..... <b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) ..... <b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<b>6a(1)</b>	2077
	<b>6a(2)</b>	1795
	<b>6b</b>	9
	<b>6c</b>	79
	<b>6d</b>	1883
	<b>6e</b>	
	<b>6f</b>	
	<b>6g(1)</b>	
<b>6g(2)</b>		
<b>6h</b>		
<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....	<b>7</b>	

**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:  
4A 4B 4D 4E 4F 4G 4H 4Q

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

**10** Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

<b>a Pension Schedules</b>	<b>b General Schedules</b>
(1) <input type="checkbox"/> <b>R</b> (Retirement Plan Information)	(1) <input type="checkbox"/> <b>H</b> (Financial Information)
(2) <input type="checkbox"/> <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) <input type="checkbox"/> <b>I</b> (Financial Information – Small Plan)
(3) <input type="checkbox"/> <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) <input checked="" type="checkbox"/> <b>A</b> (Insurance Information) – Number Attached <u>8</u>
(4) <input type="checkbox"/> <b>DCG</b> (Individual Plan Information) – Number Attached _____	(4) <input type="checkbox"/> <b>C</b> (Service Provider Information)
(5) <input type="checkbox"/> <b>MEP</b> (Multiple-Employer Retirement Plan Information)	(5) <input type="checkbox"/> <b>D</b> (DFE/Participating Plan Information)
	(6) <input type="checkbox"/> <b>G</b> (Financial Transaction Schedules)

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**Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)**

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**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.

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**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 \_\_\_\_\_

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**SCHEDULE A  
(Form 5500)**

Department of the Treasury  
Internal Revenue Service

Department of Labor  
Employee Benefits Security Administration  
Pension Benefit Guaranty Corporation

**Insurance 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.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

**2024**

**This Form is Open to Public Inspection**

For calendar plan year 2024 or fiscal plan year beginning **03/01/2024** and ending **02/28/2025**

<b>A</b> Name of plan <b>TRI CITY FOODS, INC. EMPLOYEE BENEFITS PLAN</b>		<b>B</b> Three-digit plan number (PN) ▶ <b>501</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>TRI CITY FOODS, INC.</b>		<b>D</b> Employer Identification Number (EIN) <b>47-1813575</b>

**Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

**1 Coverage Information:**

**(a)** Name of insurance carrier  
**METROPOLITAN LIFE INSURANCE COMPANY**

<b>(b)</b> EIN	<b>(c)</b> NAIC code	<b>(d)</b> Contract or identification number	<b>(e)</b> Approximate number of persons covered at end of policy or contract year	<b>Policy or contract year</b>	
				<b>(f)</b> From	<b>(g)</b> To
<b>13-5581829</b>	<b>65978</b>	<b>0205205</b>	<b>2722</b>	<b>03/01/2024</b>	<b>02/28/2025</b>

**2 Insurance fee and commission information.** Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

<b>(a)</b> Total amount of commissions paid <b>201298</b>	<b>(b)</b> Total amount of fees paid <b>16605</b>
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**3 Persons receiving commissions and fees.** (Complete as many entries as needed to report all persons).

**(a)** Name and address of the agent, broker, or other person to whom commissions or fees were paid  
**THE PLEXUS GROUPE LLC**  
**21805 WEST FIELD PARKWAY**  
**SUITE 300**  
**DEER PARK, IL 60010**

<b>(b)</b> Amount of sales and base commissions paid	<b>Fees and other commissions paid</b>		<b>(e)</b> Organization code
	<b>(c)</b> Amount	<b>(d)</b> Purpose	
<b>201298</b>	<b>16605</b>	<b>FEES</b>	<b>3</b>

**(a)** Name and address of the agent, broker, or other person to whom commissions or fees were paid

<b>(b)</b> Amount of sales and base commissions paid	<b>Fees and other commissions paid</b>		<b>(e)</b> Organization code
	<b>(c)</b> Amount	<b>(d)</b> Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

**Part II Investment and Annuity Contract Information**  
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

<b>4</b> Current value of plan's interest under this contract in the general account at year end .....	<b>4</b>	
<b>5</b> Current value of plan's interest under this contract in separate accounts at year end.....	<b>5</b>	

**6** Contracts With Allocated Funds:

**a** State the basis of premium rates ▶

**b** Premiums paid to carrier ..... **6b**

**c** Premiums due but unpaid at the end of the year ..... **6c**

**d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. .... **6d**  
 Specify nature of costs ▶

**e** Type of contract: (1)  individual policies (2)  group deferred annuity  
 (3)  other (specify) ▶

**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶

**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

**a** Type of contract: (1)  deposit administration (2)  immediate participation guarantee  
 (3)  guaranteed investment (4)  other ▶

<b>b</b> Balance at the end of the previous year .....	<b>7b</b>	0	
<b>c</b> Additions: (1) Contributions deposited during the year .....	<b>7c(1)</b>		
	<b>7c(2)</b>		
	<b>7c(3)</b>		
	<b>7c(4)</b>		
	<b>7c(5)</b>		
(6) Total additions .....	<b>7c(6)</b>	0	
<b>d</b> Total of balance and additions (add lines <b>7b</b> and <b>7c(6)</b> ) .....	<b>7d</b>	0	
<b>e</b> Deductions:			
	(1) Disbursed from fund to pay benefits or purchase annuities during year		<b>7e(1)</b>
	(2) Administration charge made by carrier.....		<b>7e(2)</b>
	(3) Transferred to separate account .....		<b>7e(3)</b>
	(4) Other (specify below) .....		<b>7e(4)</b>
(5) Total deductions .....	<b>7e(5)</b>	0	
<b>f</b> Balance at the end of the current year (subtract line <b>7e(5)</b> from line <b>7d</b> ).....	<b>7f</b>	0	

**Part III Welfare Benefit Contract Information**  
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

**8** Benefit and contract type (check all applicable boxes)

- a**  Health (other than dental or vision)     
 **b**  Dental     
 **c**  Vision     
 **d**  Life insurance  
**e**  Temporary disability (accident and sickness)     
 **f**  Long-term disability     
 **g**  Supplemental unemployment     
 **h**  Prescription drug  
**i**  Stop loss (large deductible)     
 **j**  HMO contract     
 **k**  PPO contract     
 **l**  Indemnity contract  
**m**  Other (specify) ▶ **AD&D, SUPPLEMENTAL LIFE, DEPENDENT LIFE, SUPPLEMENTAL AD&D, DEPENDENT AD&D**

**9** Experience-rated contracts:

<b>a</b> Premiums: (1) Amount received .....		<b>9a(1)</b>	
(2) Increase (decrease) in amount due but unpaid .....		<b>9a(2)</b>	
(3) Increase (decrease) in unearned premium reserve .....		<b>9a(3)</b>	
(4) Earned ((1) + (2) - (3)) .....		<b>9a(4)</b>	0
<b>b</b> Benefit charges (1) Claims paid .....		<b>9b(1)</b>	
(2) Increase (decrease) in claim reserves .....		<b>9b(2)</b>	
(3) Incurred claims (add (1) and (2)) .....		<b>9b(3)</b>	0
(4) Claims charged .....		<b>9b(4)</b>	
<b>c</b> Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions .....	<b>9c(1)(A)</b>		
(B) Administrative service or other fees .....	<b>9c(1)(B)</b>		
(C) Other specific acquisition costs .....	<b>9c(1)(C)</b>		
(D) Other expenses .....	<b>9c(1)(D)</b>		
(E) Taxes .....	<b>9c(1)(E)</b>		
(F) Charges for risks or other contingencies .....	<b>9c(1)(F)</b>		
(G) Other retention charges .....	<b>9c(1)(G)</b>		
(H) Total retention .....	<b>9c(1)(H)</b>		0
(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.) .....		<b>9c(2)</b>	
<b>d</b> Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement .....		<b>9d(1)</b>	
(2) Claim reserves .....		<b>9d(2)</b>	
(3) Other reserves .....		<b>9d(3)</b>	
<b>e</b> Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).) .....		<b>9e</b>	

**10** Nonexperience-rated contracts:

<b>a</b> Total premiums or subscription charges paid to carrier .....	<b>10a</b>	1694160
<b>b</b> If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. ....	<b>10b</b>	

Specify nature of costs.

**Part IV Provision of Information**

**11** Did the insurance company fail to provide any information necessary to complete Schedule A? .....  Yes       No

**12** If the answer to line 11 is "Yes," specify the information not provided. ▶

UNABLE TO SEPARATE BY LOCATION

**SCHEDULE A  
(Form 5500)**

Department of the Treasury  
Internal Revenue Service

Department of Labor  
Employee Benefits Security Administration  
Pension Benefit Guaranty Corporation

**Insurance 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.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

**2024**

**This Form is Open to Public Inspection**

For calendar plan year 2024 or fiscal plan year beginning **03/01/2024** and ending **02/28/2025**

<b>A</b> Name of plan <b>TRI CITY FOODS, INC. EMPLOYEE BENEFITS PLAN</b>		<b>B</b> Three-digit plan number (PN) ▶ <b>501</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>TRI CITY FOODS, INC.</b>		<b>D</b> Employer Identification Number (EIN) <b>47-1813575</b>

**Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

**1 Coverage Information:**

**(a)** Name of insurance carrier  
**CONTINENTAL AMERICAN INSURANCE COMPANY**

<b>(b)</b> EIN	<b>(c)</b> NAIC code	<b>(d)</b> Contract or identification number	<b>(e)</b> Approximate number of persons covered at end of policy or contract year	<b>Policy or contract year</b>	
				<b>(f)</b> From	<b>(g)</b> To
<b>57-0514130</b>	<b>71730</b>	<b>0000022624</b>	<b>800</b>	<b>03/01/2024</b>	<b>02/28/2025</b>

**2 Insurance fee and commission information.** Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

<b>(a)</b> Total amount of commissions paid <b>277699</b>	<b>(b)</b> Total amount of fees paid <b>0</b>
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**3 Persons receiving commissions and fees.** (Complete as many entries as needed to report all persons).

**(a)** Name and address of the agent, broker, or other person to whom commissions or fees were paid  
**ROCKWELL & ASSOCIATES LTD** **303 WEST ERIE STREET**  
**SUITE 400**  
**CHICAGO, IL 60654**

<b>(b)</b> Amount of sales and base commissions paid	<b>Fees and other commissions paid</b>		<b>(e)</b> Organization code
	<b>(c)</b> Amount	<b>(d)</b> Purpose	
<b>93218</b>			<b>3</b>

**(a)** Name and address of the agent, broker, or other person to whom commissions or fees were paid  
**THE PLEXUS GROUPE** **21805 FIELD PARKWAY**  
**SUITE 300**  
**DEER PARK, IL 60010**

<b>(b)</b> Amount of sales and base commissions paid	<b>Fees and other commissions paid</b>		<b>(e)</b> Organization code
	<b>(c)</b> Amount	<b>(d)</b> Purpose	
<b>47173</b>			<b>3</b>

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ROCKWELL & ASSOCIATES 303 WEST ERIE STREET  
 SUITE 400  
 CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
11361			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LAINA DEWITT 1540 SOUTH FIRST STREET  
 WILMINGTON, IL 60481

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
8176			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ALFREDO MALDONADO 2837 HOME AVENUE  
 BERWYN, IL 60402

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
8135			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

RAYMOND TOWNSEND 2219 SEELEY  
 UNIT 3F  
 CHICAGO, IL 60647

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
7670			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KIMBERLY A CAMARA 3717 WEST 64TH STREET  
 CHICAGO, IL 60629

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4811			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KENNETH JACKSON

1111 WEST MORTON AVENUE  
SUITE 10  
JACKSONVILLE, IL 62650

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4800			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ASHER MEYERS

655 WEST IRVING PARK ROAD  
APARTMENT 4813  
CHICAGO, IL 60613

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4448			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CHRISTOPHER JIMERSON

625 SOUTH 14TH STREET  
SPRINGFIELD, IL 62703

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4401			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JEANNY M CIFUENTES

7 HELEN COURT  
STREAMWOOD, IL 60107

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4114			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KATE E MCGRATH

1041 HILLSIDE AVENUE  
DEERFIELD, IL 60015

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3757			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

PATRICIA DOYLE

6870 WEST 91ST COURT  
WESTMINSTER, CO 80021

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3536			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CAREY L ROTHBARDT

2339 MASTERS LANE  
RIVERWOODS, IL 60015

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3354			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DAVID R OSBORN

3500 WEST SILVERADO DRIVE  
KANKAKEE, IL 60901

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3084			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JOSEPH W NASH

11725 SOUTH YALE AVENUE  
CHICAGO, IL 60628

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2775			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

F R NASCA & ASSOCIATES LLC

165 NORTH CANAL STREET  
716  
CHICAGO, IL 60606

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2760			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANDREW CASPERSON 303 WEST ERIE STREET  
 SUITE 400  
 CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2675			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TEENA M KNOTZ 120 E GENESSEE STREET  
 LELAND, IL 60531

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2551			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JOHN PARISH 6033 NORTH SHERIDAN ROAD  
 15K  
 CHICAGO, IL 60660

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2089			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

NICKO M JACKSON 7612 SOUTH ESSEX AVENUE  
 CHICAGO, IL 60649

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2068			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

STANLEY WRIGHT 8934 SOUTH DORCHESTER AVENUE  
 CHICAGO, IL 60619

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1945			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL E MCCARTHY PO BOX 1047  
DUNDEE, IL 60118

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1879			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CAROLINE MONTOYA 1941 RIDGELAND AVENUE 1F  
BERWYN, IL 60402

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1831			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JORGE COVARRUBIAS 4934 WEST DIVERSEY AVENUE  
CHICAGO, IL 60639

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1789			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KANDACE M MCCARTHY 143 WEST WARFIELD DRIVE  
MOORESVILLE, NC 28115

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1779			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

OVERBECK INSURANCE SERVICES 1033 SOUTH BOULEVARD  
OAK PARK, IL 60302

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1762			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SCALETTA INSURANCE AGENCY  
4552 NORTH OTTAWA  
NORRIDGE, IL 60706

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1740			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TIMOTHY S INGRAM  
1355 LYNNFIELD STREET  
SUITE 259  
MEMPHIS, TN 33819

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1708			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CLARAETTA ROGERS  
6978 PRAIRIE RUN AVENUE  
PORTAGE, IN 46368

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1593			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MERCIN ZUREK  
210 DES PLAINES AVENUE  
UNIT D  
FOREST PARK, IL 60130

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1592			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHELE M BRIGHT  
1430 LOCH LOMOND  
CRYSTAL LAKE, IL 60014

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1565			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

3KZ LLC 535 ABBEYWOOD DRIVE  
CARY, IL 60013

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1553			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JONATHAN L BAZELL 903 ANN ARBOR LANE  
VERNON HILLS, IL 60061

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1249			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL J SKOFF 1490 FLORA CHURCH ROAD  
KIRKLAND, IL 60146

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1107			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DANIEL A MARINEZ 303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1065			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

NIKERINA INC 303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1045			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

VANESSA C CASTREJON 7524 WEST 64TH STREET  
SUMMIT, IL 60501

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
953			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KAIDEN TRUNINGER 721 WEST WALNUT STREET  
CHILLICOTHE, IL 61523

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
951			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

RALPH E JOHNSON 24745 WEST MANOR DRIVE  
SHOREWOOD, IL 60404

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
932			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CRYSTAL E BOWNS PO BOX 6178  
CHICAGO, IL 60680

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
930			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

HELENA HESS 239 RUTH PLACE  
CLINTON, IA 52732

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
930			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BRENDON J PASTA

2123 NORTH RACINE AVENUE  
 APARTMENT 1  
 CHICAGO, IL 60614

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
929			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

WERONIKA J PAS

4605 LAKE TRAIL DRIVE  
 LISLE, IL 60532

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
870			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JORDAN MAHER

325 WEST HURON STREET  
 CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
815			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DEIDRA STROTHERS

17695 HILLCREST DRIVE  
 COUNTRY CLUB HILLS, IL 60478

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
748			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

WILLIAM S ROUSONELOS

23504 ROVERS CROSSING DRIVE  
 SHOREWOOD, IL 60404

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
685			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHELLE L FODREY

332 SOUTH GRACE STREET  
LOMBARD, IL 60148

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
678			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

GIANNINA G GIL VERA

6200 FOREST AVENUE  
GARY, IN 46403

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
652			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANNA MARINEZ

303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
648			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TIANNA C PEARSON

351 CLYDE AVENUE  
CALUMET CITY, IL 60409

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
640			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CYNTHIA R XEROGIANES

6250 NORTH OAKLEY AVENUE  
APARTMENT #1  
CHICAGO, IL 60659

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
635			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ARELI HEREDIA

1633 NORTH ARTESIAN AVENUE  
CHICAGO, IL 60647

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
629			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JOSHUA E LASKO

5737 NORTH KIMBALL AVENUE  
CHICAGO, IL 60659

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
611			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JASON JONES

2644 WEST 6TH AVENUE  
GARY, IN 46404

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
606			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LIAM H RYAN

4124 NORTH SHERIDAN ROAD  
CHICAGO, IL 60613

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
602			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ROBERT J AURIN

2737 NORTH HAMPDEN COURT  
CHICAGO, IL 60614

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
564			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SEENA JOHN 15419 WEST 127TH STREET  
LEMONT, LA 60439

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
533			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LUKE A ROCKWELL 303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
531			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ERENIA CASTELLANOS GONZALEZ 14628 CAPITAL DRIVE  
PLAINFIELD, IL 60544

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
521			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JAMES W BUCHANAN 2924 STILLWATER COURT  
PLAINFIELD, IL 60586

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
518			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

RYAN M BEYER 104 MEDINA COURT  
EAST PEORIA, IL 61611

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
485			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JENNIFER M JONES 19730 TERRACE AVENUE  
UNIT 4  
LYNWOOD, IL 60411

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
441			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CHANTA D TORRES 2815 SOUTH KILBOURN AVENUE  
CHICAGO, IL 60623

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
423			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

STEPHEN GOLEBIEWSKI 228 OAKE AVENUE  
WESTMONT, IL 60559

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
411			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ELINA NIKERNA 1025 WEST 20TH PLACE  
UNIT 1  
CHICAGO, IL 60608

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
384			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ALEXANDER KINSEL 7301 NORTH SHERIDAN ROAD  
CHICAGO, IL 60626

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
383			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KEVIN T MERSEREAU 248 KATHRYN LANE  
NORTH AURORA, IL 60542

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
353			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

HARRELL & ASSOCIATES INC 11121 SOUTH EMEMCO AVENUE  
CHICAGO, IL 60628

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
351			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARK A HARRELL 11121 SOUTH EMERALD  
CHICAGO, IL 60628

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
349			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL J MALLOY 226 SOUTH MONROE STREET  
HINSDALE, IL 60521

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
345			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CORNELIUS B SAVOY 6 JOYCE COURT  
ALGONQUIN, IL 60102

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
328			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

GARY J IRVIN

675 SOUTH RIDGEVIEW LANE  
PEORIA, IL 61604

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
327			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

AARON J DUNNILL

1137 EAST 5000 NORTH ROAD  
BOURBONNAIS, IL 60914

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
325			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KENT AUSTERMANN

3953 NORTH PAULINA STREET  
CHICAGO, IL 60613

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
311			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LETICIA BIEBART

810 NORTH BENNETT STREET  
GENEVA, IL 60134

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
306			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARVIN E HARSTON

908 NEWCASTLE DRIVE  
APARTMENT 4  
CHAMPAIGN, IL 61822

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
302			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

REBECCA L LYDON 901 NEUFARFIELD DRIVE  
JOLIET, IL 60432

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
287			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

RAFAEL T DIAZ 5030 NORTH MONTICELLO AVENUE  
CHICAGO, IL 60625

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
286			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DANIEL MARINEZ 303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
267			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL J SKOFF 3433 BAXTER ROAD  
KIRKLAND, IL 60146

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
266			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

HERLYN OATIS 8825 SOUTH HALSTED STREET  
CHICAGO, IL 60620

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
258			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

PATRICE HUNTER

900 NEUFRAIRFIELD DRIVE  
JOLIET, IL 60432

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
253			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BEHRAM A DABOO

3152 OLLERTON AVENUE  
AURORA, IL 60502

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
243			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

STEVEN SWANSON

1523 47TH AVENUE  
SUITE 3  
MOLINE, IL 61265

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
231			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANN KIM

1360 SANDBURG TERRACE  
904  
CHICAGO, IL 60610

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
204			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANTONIO R TRISTINO

303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
190			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JOANNA M ROCKWELL 303 WEST ERIE STREET  
 SUITE 400  
 CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
185			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BETTER BENEFITS GROUP LLC WEST WILLOW KNOLL  
 SUITE 205  
 PEORIA, IL 61614

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
172			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JAMES J JUSTIC 10537 SOUTH KOLIN AVENUE  
 OAK LAWN, IL 60453

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
160			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JERROD R WIGTON 3450 WEST WAVELAND AVENUE  
 CHICAGO, IL 60618

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
150			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ERNESTO GONZALEZ 14628 CAPITAL DRIVE  
 PLAINFIELD, IL 60544

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
124			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SARAH BUSS  
131 LAKEWOOD AVENUE  
EAST PEORIA, IL 61611

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
122			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BENEFIT COMMUNICATIONS, INC.  
2977 SIDCO DRIVE  
NASHVILLE, TN 37204

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
121			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KIM S NELSON  
2510 112TH STREET  
MOSCOW, IA 52760

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
114			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

PATRICK BERMUDEZ  
2233 NORTH CHAMPLAIN STREET  
ARLINGTON HEIGHTS, IL 60004

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
113			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BRIAN CHRONISTER  
10337 SOUTH ALBANY AVENUE  
CHICAGO, IL 60655

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
104			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JEANA M NASCA 810 SUMMIT ROAD  
LAKE ZURICH, IL 60047

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
103			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANGELA FERRIGAN 602 WOOD STREET  
DEKALB, IL 60115

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
101			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JAMIE L BLANKENSHIP 5253 WHITE OAK DRIVE  
SMITHTON, IL 62285

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
88			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BRENDA S WILLIAMS 101 NORTH ORR DRIVE  
NORMAL, IL 61761

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
88			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ROBERT W GARCIA 217 ANDREW LANE  
SCHAUMBURG, IL 60193

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
87			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KRISTA M GNAT 5617 SNOW DROP LANE  
LISLE, IL 60532

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
84			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

AMY E DOWELL 2131 BELLEVUE AVENUE  
BETTERDORF, IA 52722

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
82			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

AUSTIN L OLESEN 325 WEST HURON STREET  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
81			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SHERIL A HAGIE 184 SUNSHINE DRIVE  
BOLINGBROOK, IL 60490

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
75			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CAROL D CHERRY 336 PLEASANT STREET  
SYCAMORE, IL 60178

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
73			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL DISTASIO 4353 WEST IRVING PARK ROAD  
CHICAGO, IL 60638

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
71			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SARAH E HELMAN 303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
68			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CASEY N LAUGHLIN 2745 WEST DIVISION STREET  
CHICAGO, IL 60622

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
65			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL J OTT 15429 SOUTH PINTO STREET  
HOMER GLEN, IL 60491

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
64			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KIMLIANNE T WASHINGTON 10105 SOUTH VERNON AVENUE  
CHICAGO, IL 60628

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
64			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KATHERINE T FOREST 4N173 IL ROUTE 83  
BENSENVILLE, IL 60106

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
61			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KIM EDWARDS 812 WOOD AVENUE  
GENEVA, IL 60134

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
60			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SAMUEL C KLINGHER 1226 WEST WINONA STREET  
APARTMENT 1S  
CHICAGO, IL 60640

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
59			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MALLORY A DUGAN 300 FAYS COURT  
SUGAR GROVE, IL 60554

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
54			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MITCHELL V BANDUR 325 WEST HURON STREET  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
54			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DIANA COURTNEY 3131 WESTMAR  
BETTENDORF, IA 52722

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
53			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHELLE WELTY 1616 MARLBORO LANE  
CREST HILL, IL 60403

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
53			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LAKEISHA A ARNOLD 48 ENGLEWOOD AVENUE  
BELLWOOD, IL 60104

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
51			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARIANA VAZQUEZ 234 DRIFTWOOD LANE  
SCHAUMBURG, IL 60193

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
48			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SHELLY R STEINWAGNER 44 VALENTINE LANE  
HIGHLAND, IL 62249

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
45			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JASON D COX  
 1620 1/2 WEST WALLEN AVENUE  
 #3S  
 CHICAGO, IL 60626

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
43			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

PAULA R MATTHEWS  
 PO BOX 164  
 ARENZVILLE, IL 62611

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
42			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KRISTI L HARSHBARGER  
 545 WEST BROMPTON  
 CHICAGO, IL 60657

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
40			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JEANINE SMITH  
 51 AUGUSTA STREET  
 OAK PARK, IL 60302

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
39			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ZUREK & ASSOCIATES LLC  
 210 DES PLAINES AVENUE  
 UNIT D  
 FOREST PARK, IL 60130

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
38			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARIA J NOVOA 26 COUR D'ALENE  
PALOS HILLS, IL 60465

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
37			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

HAROLD SHEPARD 4118 NORTH MARMORA AVENUE  
CHICAGO, IL 60634

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
36			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JAMISON MYCYK 800 SOUTH WELLS STREET  
APARTMENT 1032  
CHICAGO, IL 60607

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
36			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ERICK CENCULA 1981 YASGUR DRIVE  
WOODSTOCK, IL 60098

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
33			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

GEORGE W YOUNG 2850 ALGONQUIN ROAD  
APARTMENT 110  
ROLLING MEADOWS, IL 60008

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
31			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ISAAC SALINAS 5341 SOUTH AVERS  
CHICAGO, IL 60632

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
31			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

RACHAEL GREEN 404 NORTH LOCUSTS STREET  
GREENVILLE, IL 62246

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
30			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LISA M SCHUMACHER 10 HERON COURT  
LAKE IN THE HILLS, IL 60156

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
22			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SARAH JOHNSTON 900 CATON AVENUE  
JOLIET, IL 60435

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
19			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

AARON J DUNNILL 1137 EAST 5000 NORTH ROAD  
BOURBONNAIS, IL 60914

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
17			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JONATHAN TEMPLETON 626 NEWPORT AVENUE  
WESTMONT, IL 60559

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
16			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ALEX HUEBNER 401 WEST FULLERTON PARKWAY  
APARTMENT 1508E  
CHICAGO, IL 60148

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
15			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

AUNYA STEPHENS 4547 SOUTH GREENWOOD AVENUE  
CHICAGO, IL 60653

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
13			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

FRANK A HAMILTON 9504 BRIGHTON BUNKER HILL ROAD  
BUNKER HILL, IL 62014

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
13			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

PATRICK J VEECH 754 EXMOOR OAKS DRIVE  
HIGHLAND PARK, IL 60035

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
12			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JONATHAN A CHEEKS 460 WASHINGTON  
OAK PARK, IL 60302

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
12			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CHRISTOPHER R CORDON 2019 NORTH MAIN STREET  
APARTMENT 204B  
WHEATON, IL 60187

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
11			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

WENDY MAYERHOFER 490 EAST ROOSEVELT ROAD  
SUITE 203  
WEST CHICAGO, IL 60185

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
10			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARICELA DELGADO 303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
9			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KASSANDRA R PERSONETT 303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
9			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JOHN S HERNANDEZ 303 WEST ERIE STREET  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
8			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CAROLINE R OCONNOR 2611 WEST AGATITE AVENUE  
CHICAGO, IL 60625

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
8			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CHRISTOPHER STRANEY 101 EAST QUINCY STREET  
RIVERSIDE, IL 60546

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
8			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TAYLEN C ARVIGO 309 SOUTH 4TH STREET  
OREGON, IL 61061

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
6			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

HECTOR F SANCHEZ CASTRO 16109 WASUSAU AVENUE  
SOUTH HOLLAND, IL 60473

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JESSICA R MENA 4967 PINE MEADOW PARKWAY  
LOVES PARK, IL 61111

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

REINALDO UGARTE 5249 SOUTH KEATING AVENUE  
CHICAGO, IL 60632

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BENJAMIN T KINSEL 303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL DEAVENS 9751 SOUTH CHARLES STREET  
APARTMENT 1F  
CHICAGO, IL 60643

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

STEFANIE KRIZIC 6305 NORTH MILWAUKEE  
CHICAGO, IL 60646

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DERRICK CYRUS

2161 NORTH CALIFORNIA AVENUE  
CHICAGO, IL 60647

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARLA VEARIL

908 EAST SHORT STREET  
TUSCOLA, IL 61953

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SELENA BELLOWS

8050 SOUT SANGAMON STREET  
CHICAGO, IL 60620

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CHRISTOPHER J O'BRIEN

6133 NORTH NORTHWEST HIGHWAY  
SUITE B  
CHICAGO, IL 60631

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ROBERT F SINN

127 GRAY DRIVE  
GILMAN, IL 60938

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SCALETTA INSURANCE AGENCY  
4552 NORTH OTTAWA  
NORRIDGE, IL 60706

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TANESHA JONES  
5821 SOUTH CALUMET AVENUE  
FLOOR 3  
CHICAGO, IL 60637

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DENNIS CASSENS  
3422 COLONY BAY DRIVE  
ROCKFORD, IL 61109

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-2			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANDREW CRAWFORD  
6 COLLINS PLACE  
JACKSONVILLE, IL 62650

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-2			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JANET CHRISP  
3134 WEST 84TH STREET  
CHICAGO, IL 60652

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-2			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ADAM C LOTTINO 1244 THOMAS COURT  
203  
GLENDALE HEIGHTS, IL 60139

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-4			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

VINCENT SCALETTA 4552 NORTH OTTAWA  
NORRIDGE, IL 60706

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-4			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ABELARDO RODRIGUEZ 1127 NORTH CHRISTIANA AVENUE  
2ND FLOOR  
CHICAGO, IL 60651

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-4			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

STEPHEN ARNESON 303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARILYN P SIMPSON 1743 NORTH LEAVITT  
402  
CHICAGO, IL 60647

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JESUS FLORES 303 WEST ERIE STREET  
 SUITE 400  
 CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CHRISTA HAYNES 361 CIMARRON COURT  
 AURORA, IL 60504

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

AMBER N ARNOLD 1355 NORTH BLUFF ROAD  
 SUITE A  
 COLLINSVILLE, IL 62234

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-10			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JESSE A SAMAWI 303 WEST ERIE STREET  
 CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-11			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KARA M BRYAN 140 SOUTH FIRST STREET  
 WILMINGTON, IL 60481

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-16			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JACOB T ARNOLD  
 1355 NORTH BLUFF ROAD  
 SUITE A  
 COLLINSVILLE, IL 62234

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-17			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CARMEN R EIGENBAUER  
 210 SOUTH OAK STREET  
 PO BOX 318  
 BUCKLEY, IL 60918

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-17			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BRENDA S WILLIAMS  
 101 NORTH ORR DRIVE  
 APARTMENT 6  
 NORMAL, IL 61761

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-18			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANTHONY TRISTANO  
 490 EAST ROOSEVELT ROAD  
 SUITE 203  
 WEST CHICAGO, IL 60185

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-19			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JOHN T POKRZYWINSKI  
 1505 FENDER ROAD  
 NAPERVILLE, IL 60565

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-20			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

REILY J WILSON

5116 HOMESTRETCH DRIVE  
LOVES PARK, IL 61111

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-25			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

NASCA & ASSOCIATES

303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-29			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TARA M STEINERT

800 LAKESHORE DRIVE  
CHAMPAIGN, IL 61822

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-36			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KEITH DOWNS

1216 WEST GRAND  
CHICAGO, IL 60642

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-37			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BRIAN HANLEY

506 CANTERBURY DRIVE  
LAGRANGE, GA 30241

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-40			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

COLIN M JONES  
 1125 HAMPSHIRE  
 SUITE 201  
 QUINCY, IL 62301

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-118			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KRISTIN L ARVINGO  
 3422 COLONY BAY DRIVE  
 ROCKFORD, IL 61109

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-124			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANDREW W CASPERSON AND ASSOCIATES  
 303 WEST ERIE STREET  
 SUITE 400  
 CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-188			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

F R NASCA & ASSOCIATES LLC  
 165 NORTH CANAL STREET  
 716  
 CHICAGO, IL 60606

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-355			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ADAM ROBINSON  
 3341 SOUTH SPRING STREET  
 SPRINGFIELD, IL 62703

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-2541			3

**Part II Investment and Annuity Contract Information**  
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

<b>4</b> Current value of plan's interest under this contract in the general account at year end .....	<b>4</b>	
<b>5</b> Current value of plan's interest under this contract in separate accounts at year end.....	<b>5</b>	

**6** Contracts With Allocated Funds:

**a** State the basis of premium rates ▶

**b** Premiums paid to carrier ..... **6b**

**c** Premiums due but unpaid at the end of the year ..... **6c**

**d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. .... **6d**  
 Specify nature of costs ▶

**e** Type of contract: (1)  individual policies (2)  group deferred annuity  
 (3)  other (specify) ▶

**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶

**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

**a** Type of contract: (1)  deposit administration (2)  immediate participation guarantee  
 (3)  guaranteed investment (4)  other ▶

<b>b</b> Balance at the end of the previous year .....	<b>7b</b>	0
<b>c</b> Additions: (1) Contributions deposited during the year .....	<b>7c(1)</b>	
	<b>7c(2)</b>	
	<b>7c(3)</b>	
	<b>7c(4)</b>	
	<b>7c(5)</b>	
(6) Total additions .....	<b>7c(6)</b>	0
<b>d</b> Total of balance and additions (add lines <b>7b</b> and <b>7c(6)</b> ) .....	<b>7d</b>	0
<b>e</b> Deductions: (1) Disbursed from fund to pay benefits or purchase annuities during year .....	<b>7e(1)</b>	
	<b>7e(2)</b>	
	<b>7e(3)</b>	
	<b>7e(4)</b>	
	(5) Total deductions .....	
<b>f</b> Balance at the end of the current year (subtract line <b>7e(5)</b> from line <b>7d</b> ).....	<b>7f</b>	0

**Part III Welfare Benefit Contract Information**  
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

**8** Benefit and contract type (check all applicable boxes)

- a**  Health (other than dental or vision)     
 **b**  Dental     
 **c**  Vision     
 **d**  Life insurance  
**e**  Temporary disability (accident and sickness)     
 **f**  Long-term disability     
 **g**  Supplemental unemployment     
 **h**  Prescription drug  
**i**  Stop loss (large deductible)     
 **j**  HMO contract     
 **k**  PPO contract     
 **l**  Indemnity contract  
**m**  Other (specify) ▶ **ACCIDENT, CRITICAL ILLNESS, DISABILITY, WHOLE LIFE, HOSPITAL INDEMNITY, BENEXTEND**

**9** Experience-rated contracts:

<b>a</b> Premiums: (1) Amount received .....		<b>9a(1)</b>	
(2) Increase (decrease) in amount due but unpaid .....		<b>9a(2)</b>	
(3) Increase (decrease) in unearned premium reserve .....		<b>9a(3)</b>	
(4) Earned ((1) + (2) - (3)) .....		<b>9a(4)</b>	0
<b>b</b> Benefit charges (1) Claims paid .....		<b>9b(1)</b>	
(2) Increase (decrease) in claim reserves .....		<b>9b(2)</b>	
(3) Incurred claims (add (1) and (2)) .....		<b>9b(3)</b>	0
(4) Claims charged .....		<b>9b(4)</b>	
<b>c</b> Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions .....	<b>9c(1)(A)</b>		
(B) Administrative service or other fees .....	<b>9c(1)(B)</b>		
(C) Other specific acquisition costs .....	<b>9c(1)(C)</b>		
(D) Other expenses .....	<b>9c(1)(D)</b>		
(E) Taxes .....	<b>9c(1)(E)</b>		
(F) Charges for risks or other contingencies .....	<b>9c(1)(F)</b>		
(G) Other retention charges .....	<b>9c(1)(G)</b>		
(H) Total retention .....	<b>9c(1)(H)</b>		0
(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.) .....		<b>9c(2)</b>	
<b>d</b> Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement .....		<b>9d(1)</b>	
(2) Claim reserves .....		<b>9d(2)</b>	
(3) Other reserves .....		<b>9d(3)</b>	
<b>e</b> Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).) .....		<b>9e</b>	

**10** Nonexperience-rated contracts:

<b>a</b> Total premiums or subscription charges paid to carrier .....	<b>10a</b>	482145
<b>b</b> If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. .... Specify nature of costs.	<b>10b</b>	

**Part IV Provision of Information**

**11** Did the insurance company fail to provide any information necessary to complete Schedule A? .....  Yes  No

**12** If the answer to line 11 is "Yes," specify the information not provided. ▶

**SCHEDULE A  
(Form 5500)**

Department of the Treasury  
Internal Revenue Service

Department of Labor  
Employee Benefits Security Administration  
Pension Benefit Guaranty Corporation

**Insurance 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.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

**2024**

**This Form is Open to Public Inspection**

For calendar plan year 2024 or fiscal plan year beginning **03/01/2024** and ending **02/28/2025**

<b>A</b> Name of plan <b>TRI CITY FOODS, INC. EMPLOYEE BENEFITS PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶ <b>501</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>TRI CITY FOODS, INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>47-1813575</b>

**Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

**1 Coverage Information:**

(a) Name of insurance carrier

**CONTINENTAL AMERICAN INSURANCE COMPANY**

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
<b>57-0514130</b>	<b>71730</b>	<b>0000012624</b>	<b>395</b>	<b>03/01/2024</b>	<b>02/28/2025</b>

**2 Insurance fee and commission information.** Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid <b>107277</b>	(b) Total amount of fees paid <b>0</b>
---	---

**3 Persons receiving commissions and fees.** (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

**ROCKWELL & ASSOCIATES LTD**  
**303 WEST ERIE**  
**SUITE 400**  
**CHICAGO, IL 60654**

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
<b>30150</b>			<b>3</b>

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

**THE PLEXUS GROUPE**  
**21805 FIELD PARKWAY 300**  
**DEER PARK, IL 60010**

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
<b>26633</b>			<b>3</b>

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

Schedule A (Form 5500) 2024  
v. 240311

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

REBECCA L LYDON 901 NEUFARFIELD DRIVE  
JOLIET, IL 60432

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5137			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ROCKWELL & ASSOCIATES 303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4363			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL J OTT 15429 SOUTH PINTO STREET  
HOMER GLEN, IL 60491

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3873			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

GARY J IRVIN 675 SOUTH RIDGEVIEW LANE  
PEORIA, IL 61604

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3657			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

COLIN M JONES 1125 HAMPSHIRE  
SUITE 201  
QUINCY, IL 62301

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3622			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TIANNA C PEARSON 351 CLYDE AVENUE  
CALUMET CITY, IL 60409

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2108			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CLARAETTA ROGERS 6978 PRAIRIE RUN AVENUE  
PORTAGE, IN 46368

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1882			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SARAH JOHNSTON 900 CATON AVENUE  
JOLIET, IL 60435

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1551			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

HARRELL & ASSOCIATES INC 11121 SOUTH EMEMCO AVENUE  
CHICAGO, IL 60628

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1476			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BECKY CLARK 11000 SOUTH KEATING AVENUE  
#1C  
OAK LAWN, IL 60453

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1278			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL J MALLOY

226 SOUTH MONROE STREET  
HINSDALE, IL 60521

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1277			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL E MCCARTHY

PO BOX 1047  
DUNDEE, IL 60118

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1253			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

VANESSA C CASTREJON

7524 WEST 64TH STREET  
SUMMIT, IL 60501

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1019			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BRENDA S WILLIAMS

101 NORTH ORR DRIVE  
UNIT 6  
NORMAL, IL 61761

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1014			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHELLE L FODREY

332 SOUTH GRACE STREET  
LOMBARD, IL 60148

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
945			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ERVICES OVERBECK INSURANCE 1033 SOUTH BOULEVARD  
OAK PARK, IL 60302

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
893			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

COLLEEN PETERS 128 SOUTH AUSTIN BOULEVARD  
APARTMENT 3  
OAK PARK, IL 60304

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
874			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JANET CHRISP 3134 WEST 84TH STREET  
CHICAGO, IL 60652

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
848			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KEVIN T MERSEREAU 248 KATHRYN LANE  
NORTH AURORA, IL 60542

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
796			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ERENIA CASTELLANOS GONZALEZ 14628 CAPITAL DRIVE  
PLAINFIELD, IL 60544

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
695			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARK A HARRELL 11121 SOUTH EMERALD CHICAGO, IL 60628

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
694			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KIMLIANNE T WASHINGTON 10105 SOUTH VERNON AVENUE CHICAGO, IL 60628

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
663			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

NASCA & ASSOCIATES 303 WEST ERIE STREET SUITE 400 CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
648			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

RALPH E JOHNSON 24745 WEST MANOR DRIVE SHOREWOOD, IL 60404

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
638			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BENEFIT COMMUNICATIONS, INC. 2977 SIDCO DRIVE NASHVILLE, TN 37204

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
617			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

NICKO M JACKSON 7612 SOUTH ESSEX AVENUE  
2  
CHICAGO, IL 60649

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
612			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BETTER BENEFITS GROUP LLC WEST WILLOW KNOLL  
SUITE 205  
PEORIA, IL 61614

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
598			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

YOLANDA K RICHMOND 15161 WOODLAND DRIVE  
II  
SOUTH HOLLAND, IL 60473

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
543			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANDREW W CASPERSON AND ASSOCIATES L 303 WEST ERIE  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
525			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

AUSTIN L OLESEN 325 WEST HURON STREET  
SUITE 215  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
495			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CRYSTAL E BOWNS  
 PO BOX 6178  
 CHICAGO, IL 60680

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
471			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JORGE COVARRUBIAS  
 4934 WEST DIVERSEY AVENUE  
 CHICAGO, IL 60639

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
360			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LC ZUREK & ASSOCIATES  
 210 DES PLAINES AVENUE  
 UNIT D  
 FOREST PARK, IL 60130

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
318			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

PATRICIA DOYLE  
 6870 WEST 91ST COURT  
 7-303  
 WESTMINSTER, CO 80021

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
295			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ALFREDO MALDONADO JR  
 2837 HOME AVENUE  
 BERWYN, IL 60402

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
295			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARIA J NOVOA  
26 COUR D'ALENE  
PALOS HILLS, IL 60465

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
242			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

K HARRIS & ASSOCIATES, LLC  
950 WEST NORTON AVENUE  
SUITE 201  
MUSKEGON, MI 49441

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
196			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL DISTASIO  
4353 WEST IRVING PARK ROAD  
CHICAGO, IL 60641

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
195			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JAMES W BUCHANAN  
2924 STILLWATER COURT  
PLAINFIELD, IL 60586

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
180			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ELINA NIKERINA  
1025 WEST 20TH PLACE  
UNIT 1  
CHICAGO, IL 60608

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
151			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JONATHAN A CHEEKS 460 WASHINGTON  
OAK PARK, IL 60302

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
149			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SAMUEL C KLINGHER 1226 WEST WINONA STREET  
APARTMENT 1S  
CHICAGO, IL 60640

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
137			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BRIAN CHRONISTER 10337 SOUTH ALBANY AVENUE  
CHICAGO, IL 60655

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
136			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TODD DEVOSS 321 NORTH CLARK STREET  
SUITE 625  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
121			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANN KIM 1360 SANDBURG TERRACE 904  
CHICAGO, IL 60610

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
120			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

YANIRA MARIN

4305 NORTH DAMEN AVENUE  
 APARTMENT 2 E  
 CHICAGO, IL 60618

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
119			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JENNIFER M JONES

19730 TERRACE AVENUE  
 UNIT 4  
 LYNWOOD, IL 60411

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
105			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARK D BARBIER

802 DEER TRAIL LANE  
 OAK BROOK, IL 60523

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
105			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KAIDEN TRUNINGER

721 WEST WALNUT STREET  
 CHILLICOTHE, IL 61523

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
97			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ALEXANDER KINSEL

7301 NORTH SHERIDAN ROAD  
 CHICAGO, IL 60626

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
95			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LETICIA BIEBART

810 NORTH BENNETT STREET  
GENEVA, IL 60134

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
77			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JONATHAN L BAZELL

903 ANN LABOR LANE  
VERNON HILLS, IL 60061

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
77			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ROBERT W GARCIA

217 ANDREW LANE  
SCHAUMBURG, IL 60193

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
75			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TANESHA JONES

5821 SOUTH CALUMET AVENUE  
FLOOR 3  
CHICAGO, IL 60637

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
73			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

RAPHAEL RAHEEM

303 WEST ERIE  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
67			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ASHER MEYERS

655 WEST IRVING PARK ROAD  
 APARTMENT 4813  
 CHICAGO, IL 60613

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
64			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DEIDRA STROTHERS

17695 HILLCREST DRIVE  
 COUNTRY CLUB HILLS, IL 60478

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
64			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

REINALDO UGARTE

5249 SOUTH KEATING AVENUE  
 CHICAGO, IL 60632

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
62			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TETIANA BUCHANAN

2924 STILLWATER COURT  
 PLAINFIELD, IL 60586

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
58			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

RAFAEL T DIAZ

5030 NORTH MONTICELLO AVENUE  
 CHICAGO, IL 60625

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
53			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JOHN PARISH 6033 NORTH SHERIDAN ROAD  
15K  
CHICAGO, IL 60660

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
52			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KARA M BRYAN 140 SOUTH FIRST STREET  
APARTMENT 1W  
WILMINGTON, IL 60481

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
52			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ALICIA CLIFTON 3915 HUNTING RIDGE DRIVE  
LILBURN, GA 30047

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
52			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

WILLIAM M WARDLAW JR 187 SOUTH CULVER STREET  
LAWRENCEVILLE, GA 30046

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
51			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TEENA M KLOTZ 120 EAST GENESSEE STREET  
LELAND, IL 60531

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
46			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JEANA M NASCA  
 810 SUMMIT ROAD  
 LAKE ZURICH  
 LAKE ZURICH, IL 60047

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
46			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DANIEL MARINEZ  
 303 WEST ERIE STREET  
 SUITE 400  
 CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
45			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL J SKOFF  
 1490 FLORA CHURCH ROAD  
 KIRKLAND, IL 60146

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
45			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DANIEL A MARINEZ  
 303 WEST ERIE  
 SUITE 400  
 CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
39			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BRENDA S WILLIAMS  
 101 NORTH ORR DRIVE  
 APARTMENT 6  
 NORMAL, IL 61761

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
38			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ERNESTO GONZALEZ 14628 CAPITAL DRIVE  
PLAINFIELD, IL 60544

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
37			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CHANTA D TORRES 2815 SOUTH KILBOURN AVENUE  
CHICAGO, IL 60623

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
35			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CYNTHIA M JOHNSON 1359 EAST 62ND STREET  
APARTMEN 3W  
CHICAGO, IL 60637

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
35			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LUKE A ROCKWELL 303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
33			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KRISTEN L ARVIGO 3422 COLONY BAY DRIVE  
ROCKFORD, IL 61109

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
33			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

THE PLEXUS GROUPE

21805 FIELD PARKWAY 300  
DEER PARK, IL 60010

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
33			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JORDAN MAHER

325 WEST HURON STREET  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
32			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

GIANNINA G GIL VERA

6200 FOREST AVENUE  
GARY, IN 46403

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
30			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

RYAN M BEYER

104 MEDINA COURT  
EAST PEORIA, IL 61611

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
28			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHELLE WELTY

1616 MARLBORO LANE  
CREST HILL, IL 60403

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
28			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KIM EDWARDS 812 WOOD AVENUE  
GENEVA, IL 60134

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
27			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JOSEPH W NASH 11725 SOUTH YALE AVENUE  
CHICAGO, IL 60628

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
27			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CHRISTOPHER STRANEY 101 EAST QUINCY STREET  
RIVERSIDE, IL 60546

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
27			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANNA MARINEZ 303 WEST ERIE  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
26			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LARRY S GIRTLEY 5125 WEST BLOOMINGDALE  
CHICAGO, IL 60639

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
25			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DERRICK CYRUS

2161 NORTH CALIFORNIA AVENUE  
CHICAGO, IL 60647

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
25			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ABELARDO RODRIGUEZ

1127 NORTH CHRISTIANA AVENUE  
2ND FLOOR  
CHICAGO, IL 60651

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
25			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JERROD R WIGTON

3450 WEST WAVELAND AVENUE  
1F  
CHICAGO, IL 60618

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
24			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

PATRICK BERMUDEZ

2233 NORTH CHAMPLAIN STREET  
ARLINGTON HEIGHTS, IL 60004

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
23			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MITCHELL V BANDUR

325 WEST HURON STREET  
SUITE 215  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
23			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

F R NASCA & ASSOCIATES LLC 165 NORTH CANAL STREET 716  
CHICAGO, IL 60606

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
22			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

F R NASCA & ASSOCIATES LLC 165 NORTH CANAL STREET  
716  
CHICAGO, IL 60606

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
22			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

AARON J DUNNILL 1137 EAST 5000 NORTH ROAD  
BOURBONNAIS, IL 60914

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
21			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANTONIO R TRISTINO 303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
18			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KANDACE M MCCARTHY PO BOX 1047  
DUNDEE, IL 60118

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
17			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LISA M SCHUMACHER

10 HERON COURT  
LAKE IN THE HILLS, IL 60156

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
17			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

PATRICK J VEECH

754 EXMOOR OAKS DRIVE  
HIGHLAND PARK, IL 60035

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
17			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

RODNEY M WARUHIU

1062 WEST COLUMBIA AVENUE  
APARTMENT GDN  
CHICAGO, IL 60626

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
17			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MATTHEW J LE ANELLI

1411 WEST SUPERIOR STREET  
#3  
CHICAGO, IL 60642

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
16			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ALEX HUEBNER

401 WEST FULLERTON PARKWAY  
APARTMENT 1508E  
CHICAGO, IL 60614

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
15			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JEANNY M CIFUENTES 7 HELEN COURT  
STREAMWOOD, IL 60107

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
15			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SEENA JOHN 15419 WEST 127TH STREET  
LEMONT, IL 60439

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
15			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DENNIS CASSENS 3422 COLONY BAY DRIVE  
ROCKFORD, IL 61109

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
15			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SHERIL A HAGIE 184 SUNSHINE DRIVE  
BOLINGBROOK, IL 60490

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
14			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANGELA FERRIGAN 602 WOOD STREET  
DEKALB, IL 60115

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
14			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KENT AUSTERMANN

3953 NORTH PAULINA STREET  
CHICAGO, IL 60613

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
14			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

THOMAS A STILLWELL

3311 WEST CULLOM AVENUE  
CHICAGO, IL 60618

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
14			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JOSEPH A NASCA

28081 WEST MAPLE AVENUE  
BARRINGTON, IL 60010

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
14			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JASON D COX

1620 1/2 WEST WALLEN AVENUE  
#3S  
CHICAGO, IL 60626

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
13			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JOHN S HERNANDEZ

303 WEST ERIE STREET  
#400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
12			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

NOEMI ROSA-AXELSEN  
 PO BOX 195  
 MATTESON, IL 60443

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
12			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KATE E MCGRATH  
 1041 HILLSIDE AVENUE  
 DEERFIELD, IL 60015

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
11			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

FRANK Z WILLIAMS  
 1812 SOUTH STATE STREET  
 UNIT 8  
 CHICAGO, IL 60616

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
11			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CHRISTOPHER R CORDON  
 2019 NORTH MAIN STREET  
 APARTMENT 204 B  
 WHEATON, IL 60178

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
11			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANDREW C MENKE  
 303 WEST ERIE  
 #400  
 CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
10			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ARELI HEREDIA

1633 NORTH ARTESIAN AVENUE  
CHICAGO, IL 60647

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
10			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KRISTA M GNAT

5617 SNOW DROP LANE  
LISLE, IL 60532

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
9			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JASON JONES

2644 WEST 6TH AVENUE  
GARY, IN 46404

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
9			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MIKE S GAYNOR

8672 SHORE WAY DRIVE SOUTHWEST  
BRYON CENTER, MI 49315

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
9			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ERIC J SPENGL

303 WEST ERIE  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
9			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

FRED ABERNATHY 8408 SOUTH CARPENTER  
CHICAGO, IL 60620

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
8			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KANDACE M MCCARTHY 143 WEST WARFIELD DRIVE  
MOORESVILLE, NC 28115

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
8			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KEITH DOWNS 1216 WEST GRAND  
CHICAGO, IL 60642

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
8			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

GENCY SCALETTA INSURANCE A 4552 NORTH OTTAWA  
NORRIDGE, IL 60706

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
7			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SANTIAGO & ASSOCIATES LLC 950 WEST NORTON AVENUE  
SUITE 201  
MUSKEGON, MI 49441

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
7			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ORA M ANDERSON

630 NORTH HAMLIN AVENUE  
CHICAGO, IL 60624

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
7			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ROBERT M LANE

303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
7			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TARA LUNDQUIST

9624 SOUTH HAMILTON AVENUE  
CHICAGO, IL 60643

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
6			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BENJAMIN T KINSEL

303 WEST ERIE STREET  
#400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
6			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CASEY N LAUGHLIN

2745 WEST DIVISION STREET  
APARTMENT 3  
CHICAGO, IL 60622

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
6			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JOANNA M ROCKWELL 303 WEST ERIE STREET  
 SUITE 400  
 CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
6			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL A STRANG 2810 WEST 100TH PLACE  
 EVERGREEN PARK, IL 60805

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
6			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DAVE L SKJEFTJE 396 5TH AVENUE  
 GRANITE FALLS, MN 56241

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
6			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LACAIRA A ROGERS 349 SOUTH KEELER AVENUE  
 CHICAGO, IL 60624

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
6			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

WILLIAM S ROUSONELOS 23504 ROVERS CROSSING DRIVE  
 SHOREWOOD, IL 60404

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARICELA DELGADO 303 WEST ERIE  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARILYN P SIMPSON 1743 NORTH LEAVITT 402  
CHICAGO, IL 60647

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ISAAC SALINAS 5341 SOUTH AVERS  
CHICAGO, IL 60632

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LYNETTE R STEVENS 303 NORTH 3RD STREET  
WYOMING, IL 61491

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

AUNYA STEPHENS 4547 SOUTH GREENWOOD AVENUE  
CHICAGO, IL 60653

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MATTHEW R LORENZ

1021 PROSPECT POINT ROAD  
JORDAN, MN 55352

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JULIE A PARACHE

4819 WEST ADDISON STREET  
CHICAGO, IL 60641

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CHRISTOPHER J O'BRIEN

6133 NORTH NORTHWEST HIGHWAY  
SUITE B  
CHICAGO, IL 60631

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CAROLYN D AGRE

3940 189TH AVENUE NORTHWEST  
NEW LONDON, MN 56273

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SCOTT A SMITH

5300 OAKBROOK PARKWAY  
SUITE 350  
NORCROSS, GA 30093

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

GENCY SCALETTA INSURANCE A 4552 NORTH OTTAWA  
NORRIDGE, IL 60706

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

QINGYU CAI 556 WEST 29TH STREET  
CHICAGO, IL 60616

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JACQUELYNN M BROWN 1675 KOLFF STREET  
PO BOX 25407  
NEWPORT, MN 55055

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JESSE A SAMAWI 303 WEST ERIE STREET  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TRACI L NATOLI 1145 CHENOA LANE SOUTHWEST  
ORONOCO, MN 55960

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JOHN PAUL THOMPSON SR 6395 SOUTH KEWAUNEE WAY  
AURORA, CO 80016

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KASSANDRA R PERSONETT 303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DINA L LONGTIN 233 EAST 13TH STREET 2302  
CHICAGO, IL 60605

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ADAM C LOTTINO 1244 THOMAS COURT  
203  
GLENDALE HEIGHTS, IL 60139

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TAYLEN C ARVIGO 309 SOUTH 4TH STREET  
OREGON, IL 61061

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CYNTHIA R XEROGIANES 6250 NORTH OAKLEY AVENUE  
 APARTMENT #1  
 CHICAGO, IL 60659

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JESSICA R MENA 4967 PINE MEADOW PARKWAY  
 3  
 LOVES PARK, IL 61111

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

GEORGE W YOUNG 2850 ALGONQUIN ROAD  
 APARTMENT 110  
 ROLLING MEADOWS, IL 60008

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

STEPHANIE KRIZIC 6305 NORTH MILWAUKEE  
 CHICAGO, IL 60646

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ROBERT J ARNOLD 5250 WEST HENDERSON STREET  
 FIRST FLOOR  
 CHICAGO, IL 60641

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SARAH E HELMAN 303 WEST ERIE #400 CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DAVID R SUTTER 303 WEST ERIE STREET SUITE # 400 CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

WENDY M RANKIN 990 PEBBLESTONE COURT ALPHARETTA, GA 30009

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

HECTOR F SANCHEZ CASTRO 16109 WASUSAU AVENUE SOUTH HOLLAND, IL 60473

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

3KZ LLC 535 ABBEYWOOD DRIVE CARY, IL 60013

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

STEPHEN ARNESON 303 WEST ERIE STREET  
 SUITE 400  
 CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ERICK CENCULA 1981 YASGUR DRIVE  
 WOODSTOCK, IL 60098

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KENNETH A KIRK 351 ATLANTA STREET  
 MARIETTA, GA 30060

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

WILLIAM M WARDLAW JR 187 SOUTH CULVER STREET  
 LAWRENCEVILLE, GA 30046

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ORISSA CLAVER 39 EAST DIVISION STREET  
 373 B  
 CHICAGO, IL 60610

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JEFFREY M HANSEN 608 OAK COURT  
ST CLOUD, MN 56304

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHELLE RAE MAGUIRE 17590 ITALY PATH  
LAKEVILLE, MN 55044

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DUSTIN R JOHNSON 720 SOUTH WELLS STREET  
APARTMENT 1716  
CHICAGO, IL 60607

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

HAROLD SHEPARD 4118 NORTH MARMORA AVENUE  
CHICAGO, IL 60634

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JAMES D DUDLEY 3061 EDGEWOOD COURT  
COLUMBUS, GA 31907

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MATT IBACH

1107 OXFORD STREET  
DOWNERS GROVE, IL 60516

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-1			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DARIEL J STACK

303 WEST ERIE  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-3			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JESUS FLORES

303 WEST ERIE STREET  
SUITE 400  
CHICAGO, IL 60610

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-4			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TREVOR R FENNELL

133 WEST 22ND STREET  
NEW YORK, NY 10011

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-5			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DENNIS CASSENS

3422 COLONY BAY DRIVE  
ROCKFORD, IL 61109

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-7			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARTHA A DUBOIS

8431 SOUTH 84TH AVENUE  
HICKORY HILLS, IL 60457

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-11			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ROBERT J AURIN

2737 NORTH HAMPDEN COURT  
CHICAGO, IL 60614

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-25			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JAMES J JUSTIC

10537 SOUTH KOLIN AVENUE  
OAK LAWN, IL 60453

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-27			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JAMISON MYCYK

800 SOUTH WELLS STREET  
APARTMENT 1032  
CHICAGO, IL 60607

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-104			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ROCKWELL & ASSOCIATES

303 WEST ERIE  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-138			3

**Part II Investment and Annuity Contract Information**  
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

<b>4</b> Current value of plan's interest under this contract in the general account at year end .....	<b>4</b>	
<b>5</b> Current value of plan's interest under this contract in separate accounts at year end.....	<b>5</b>	

**6** Contracts With Allocated Funds:

**a** State the basis of premium rates ▶

**b** Premiums paid to carrier ..... **6b**

**c** Premiums due but unpaid at the end of the year ..... **6c**

**d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. .... **6d**  
 Specify nature of costs ▶

**e** Type of contract: (1)  individual policies (2)  group deferred annuity  
 (3)  other (specify) ▶

**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶

**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

**a** Type of contract: (1)  deposit administration (2)  immediate participation guarantee  
 (3)  guaranteed investment (4)  other ▶

<b>b</b> Balance at the end of the previous year .....	<b>7b</b>	0
<b>c</b> Additions: (1) Contributions deposited during the year .....	<b>7c(1)</b>	
	<b>7c(2)</b>	
	<b>7c(3)</b>	
	<b>7c(4)</b>	
	<b>7c(5)</b>	
(6) Total additions .....	<b>7c(6)</b>	0
<b>d</b> Total of balance and additions (add lines <b>7b</b> and <b>7c(6)</b> ) .....	<b>7d</b>	0
<b>e</b> Deductions: (1) Disbursed from fund to pay benefits or purchase annuities during year .....	<b>7e(1)</b>	
	<b>7e(2)</b>	
	<b>7e(3)</b>	
	<b>7e(4)</b>	
	(5) Total deductions .....	
<b>f</b> Balance at the end of the current year (subtract line <b>7e(5)</b> from line <b>7d</b> ).....	<b>7f</b>	0

**Part III Welfare Benefit Contract Information**  
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

**8** Benefit and contract type (check all applicable boxes)

- a**  Health (other than dental or vision)
- b**  Dental
- c**  Vision
- d**  Life insurance
- e**  Temporary disability (accident and sickness)
- f**  Long-term disability
- g**  Supplemental unemployment
- h**  Prescription drug
- i**  Stop loss (large deductible)
- j**  HMO contract
- k**  PPO contract
- l**  Indemnity contract
- m**  Other (specify) **▶ ACCIDENT, CRITICAL ILLNESS, DISABILITY, WHOLE LIFE, HOSPITAL INDEMNITY, BENEXTEND**

**9** Experience-rated contracts:

<b>a</b>	Premiums: (1) Amount received .....	<b>9a(1)</b>		
	(2) Increase (decrease) in amount due but unpaid .....	<b>9a(2)</b>		
	(3) Increase (decrease) in unearned premium reserve .....	<b>9a(3)</b>		
	(4) Earned ((1) + (2) - (3)) .....		<b>9a(4)</b>	0
<b>b</b>	Benefit charges (1) Claims paid .....	<b>9b(1)</b>		
	(2) Increase (decrease) in claim reserves .....	<b>9b(2)</b>		
	(3) Incurred claims (add (1) and (2)) .....		<b>9b(3)</b>	0
	(4) Claims charged .....		<b>9b(4)</b>	
<b>c</b>	Remainder of premium: (1) Retention charges (on an accrual basis) --			
	(A) Commissions .....	<b>9c(1)(A)</b>		
	(B) Administrative service or other fees .....	<b>9c(1)(B)</b>		
	(C) Other specific acquisition costs .....	<b>9c(1)(C)</b>		
	(D) Other expenses .....	<b>9c(1)(D)</b>		
	(E) Taxes .....	<b>9c(1)(E)</b>		
	(F) Charges for risks or other contingencies .....	<b>9c(1)(F)</b>		
	(G) Other retention charges .....	<b>9c(1)(G)</b>		
	(H) Total retention .....		<b>9c(1)(H)</b>	0
	(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.) .....		<b>9c(2)</b>	
<b>d</b>	Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement .....		<b>9d(1)</b>	
	(2) Claim reserves .....		<b>9d(2)</b>	
	(3) Other reserves .....		<b>9d(3)</b>	
<b>e</b>	Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).) .....		<b>9e</b>	

**10** Nonexperience-rated contracts:

<b>a</b>	Total premiums or subscription charges paid to carrier .....	<b>10a</b>		418631
<b>b</b>	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. .... Specify nature of costs.	<b>10b</b>		

**Part IV Provision of Information**

**11** Did the insurance company fail to provide any information necessary to complete Schedule A? .....  Yes  No

**12** If the answer to line 11 is "Yes," specify the information not provided. ▶

**SCHEDULE A  
(Form 5500)**

Department of the Treasury  
Internal Revenue Service

Department of Labor  
Employee Benefits Security Administration  
Pension Benefit Guaranty Corporation

**Insurance 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.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

**2024**

**This Form is Open to Public Inspection**

For calendar plan year 2024 or fiscal plan year beginning **03/01/2024** and ending **02/28/2025**

<b>A</b> Name of plan <b>TRI CITY FOODS, INC. EMPLOYEE BENEFITS PLAN</b>		<b>B</b> Three-digit plan number (PN) ▶ <b>501</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>TRI CITY FOODS, INC.</b>		<b>D</b> Employer Identification Number (EIN) <b>47-1813575</b>

**Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

**1 Coverage Information:**

**(a)** Name of insurance carrier

**METROPOLITAN LIFE INSURANCE COMPANY**

<b>(b)</b> EIN	<b>(c)</b> NAIC code	<b>(d)</b> Contract or identification number	<b>(e)</b> Approximate number of persons covered at end of policy or contract year	<b>Policy or contract year</b>	
				<b>(f)</b> From	<b>(g)</b> To
<b>13-5581829</b>	<b>65978</b>	<b>0236034</b>	<b>2223</b>	<b>03/01/2024</b>	<b>02/28/2025</b>

**2 Insurance fee and commission information.** Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

<b>(a)</b> Total amount of commissions paid <b>0</b>	<b>(b)</b> Total amount of fees paid <b>2794</b>
---	---

**3 Persons receiving commissions and fees.** (Complete as many entries as needed to report all persons).

**(a)** Name and address of the agent, broker, or other person to whom commissions or fees were paid

**THE PLEXUS GROUP LLC**  
**21805 WEST FIELD PARKWAY**  
**SUITE 300**  
**DEER PARK, IL 60010**

<b>(b)</b> Amount of sales and base commissions paid	<b>Fees and other commissions paid</b>		<b>(e)</b> Organization code
	<b>(c)</b> Amount	<b>(d)</b> Purpose	
	<b>2794</b>	<b>FEES</b>	<b>3</b>

**(a)** Name and address of the agent, broker, or other person to whom commissions or fees were paid

<b>(b)</b> Amount of sales and base commissions paid	<b>Fees and other commissions paid</b>		<b>(e)</b> Organization code
	<b>(c)</b> Amount	<b>(d)</b> Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

**Part II Investment and Annuity Contract Information**  
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

<b>4</b> Current value of plan's interest under this contract in the general account at year end .....	<b>4</b>	
<b>5</b> Current value of plan's interest under this contract in separate accounts at year end.....	<b>5</b>	

**6** Contracts With Allocated Funds:

**a** State the basis of premium rates ▶

**b** Premiums paid to carrier ..... **6b**

**c** Premiums due but unpaid at the end of the year ..... **6c**

**d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. .... **6d**  
 Specify nature of costs ▶

**e** Type of contract: (1)  individual policies (2)  group deferred annuity  
 (3)  other (specify) ▶

**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶

**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

**a** Type of contract: (1)  deposit administration (2)  immediate participation guarantee  
 (3)  guaranteed investment (4)  other ▶

<b>b</b> Balance at the end of the previous year .....	<b>7b</b>	0
<b>c</b> Additions: (1) Contributions deposited during the year .....	<b>7c(1)</b>	
	<b>7c(2)</b>	
	<b>7c(3)</b>	
	<b>7c(4)</b>	
	<b>7c(5)</b>	
(6) Total additions .....	<b>7c(6)</b>	0
<b>d</b> Total of balance and additions (add lines <b>7b</b> and <b>7c(6)</b> ) .....	<b>7d</b>	0
<b>e</b> Deductions: (1) Disbursed from fund to pay benefits or purchase annuities during year .....	<b>7e(1)</b>	
	<b>7e(2)</b>	
	<b>7e(3)</b>	
	<b>7e(4)</b>	
	(5) Total deductions .....	
<b>f</b> Balance at the end of the current year (subtract line <b>7e(5)</b> from line <b>7d</b> ).....	<b>7f</b>	0

**Part III Welfare Benefit Contract Information**  
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

**8** Benefit and contract type (check all applicable boxes)

- a**  Health (other than dental or vision)
- b**  Dental
- c**  Vision
- d**  Life insurance
- e**  Temporary disability (accident and sickness)
- f**  Long-term disability
- g**  Supplemental unemployment
- h**  Prescription drug
- i**  Stop loss (large deductible)
- j**  HMO contract
- k**  PPO contract
- l**  Indemnity contract
- m**  Other (specify) ▶

**9** Experience-rated contracts:

<b>a</b>	Premiums: (1) Amount received .....	<b>9a(1)</b>		
	(2) Increase (decrease) in amount due but unpaid .....	<b>9a(2)</b>		
	(3) Increase (decrease) in unearned premium reserve .....	<b>9a(3)</b>		
	(4) Earned ((1) + (2) - (3)) .....		<b>9a(4)</b>	0
<b>b</b>	Benefit charges (1) Claims paid .....	<b>9b(1)</b>		
	(2) Increase (decrease) in claim reserves .....	<b>9b(2)</b>		
	(3) Incurred claims (add (1) and (2)) .....		<b>9b(3)</b>	0
	(4) Claims charged .....		<b>9b(4)</b>	
<b>c</b>	Remainder of premium: (1) Retention charges (on an accrual basis) --			
	(A) Commissions .....	<b>9c(1)(A)</b>		
	(B) Administrative service or other fees .....	<b>9c(1)(B)</b>		
	(C) Other specific acquisition costs .....	<b>9c(1)(C)</b>		
	(D) Other expenses .....	<b>9c(1)(D)</b>		
	(E) Taxes .....	<b>9c(1)(E)</b>		
	(F) Charges for risks or other contingencies .....	<b>9c(1)(F)</b>		
	(G) Other retention charges .....	<b>9c(1)(G)</b>		
	(H) Total retention .....		<b>9c(1)(H)</b>	0
	(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.) .....		<b>9c(2)</b>	
<b>d</b>	Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement .....		<b>9d(1)</b>	
	(2) Claim reserves .....		<b>9d(2)</b>	
	(3) Other reserves .....		<b>9d(3)</b>	
<b>e</b>	Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).) .....		<b>9e</b>	

**10** Nonexperience-rated contracts:

<b>a</b>	Total premiums or subscription charges paid to carrier .....	<b>10a</b>		114982
<b>b</b>	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. ....	<b>10b</b>		

Specify nature of costs.

**Part IV Provision of Information**

**11** Did the insurance company fail to provide any information necessary to complete Schedule A? .....  Yes  No

**12** If the answer to line 11 is "Yes," specify the information not provided. ▶

UNABLE TO SEPARATE BY LOCATION

**SCHEDULE A  
(Form 5500)**

Department of the Treasury  
Internal Revenue Service

Department of Labor  
Employee Benefits Security Administration  
Pension Benefit Guaranty Corporation

**Insurance 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.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

**2024**

**This Form is Open to Public Inspection**

For calendar plan year 2024 or fiscal plan year beginning **03/01/2024** and ending **02/28/2025**

<b>A</b> Name of plan <b>TRI CITY FOODS, INC. EMPLOYEE BENEFITS PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶ <b>501</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>TRI CITY FOODS, INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>47-1813575</b>

**Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

**1 Coverage Information:**

**(a)** Name of insurance carrier  
**METROPOLITAN LIFE INSURANCE COMPANY**

<b>(b)</b> EIN	<b>(c)</b> NAIC code	<b>(d)</b> Contract or identification number	<b>(e)</b> Approximate number of persons covered at end of policy or contract year	<b>Policy or contract year</b>	
				<b>(f)</b> From	<b>(g)</b> To
<b>13-5581829</b>	<b>65978</b>	<b>0236039</b>	<b>2223</b>	<b>03/01/2024</b>	<b>02/28/2025</b>

**2 Insurance fee and commission information.** Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

<b>(a)</b> Total amount of commissions paid	<b>(b)</b> Total amount of fees paid
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**3 Persons receiving commissions and fees.** (Complete as many entries as needed to report all persons).

**(a)** Name and address of the agent, broker, or other person to whom commissions or fees were paid

<b>(b)</b> Amount of sales and base commissions paid	<b>Fees and other commissions paid</b>		<b>(e)</b> Organization code
	<b>(c)</b> Amount	<b>(d)</b> Purpose	

**(a)** Name and address of the agent, broker, or other person to whom commissions or fees were paid

<b>(b)</b> Amount of sales and base commissions paid	<b>Fees and other commissions paid</b>		<b>(e)</b> Organization code
	<b>(c)</b> Amount	<b>(d)</b> Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

**Part II Investment and Annuity Contract Information**  
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

<b>4</b> Current value of plan's interest under this contract in the general account at year end .....	<b>4</b>	
<b>5</b> Current value of plan's interest under this contract in separate accounts at year end.....	<b>5</b>	

**6** Contracts With Allocated Funds:

**a** State the basis of premium rates ▶

**b** Premiums paid to carrier ..... **6b**

**c** Premiums due but unpaid at the end of the year ..... **6c**

**d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. .... **6d**  
 Specify nature of costs ▶

**e** Type of contract: (1)  individual policies (2)  group deferred annuity  
 (3)  other (specify) ▶

**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶

**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

**a** Type of contract: (1)  deposit administration (2)  immediate participation guarantee  
 (3)  guaranteed investment (4)  other ▶

<b>b</b> Balance at the end of the previous year .....	<b>7b</b>	0
<b>c</b> Additions: (1) Contributions deposited during the year .....	<b>7c(1)</b>	
	<b>7c(2)</b>	
	<b>7c(3)</b>	
	<b>7c(4)</b>	
	<b>7c(5)</b>	
(6) Total additions .....	<b>7c(6)</b>	0
<b>d</b> Total of balance and additions (add lines <b>7b</b> and <b>7c(6)</b> ) .....	<b>7d</b>	0
<b>e</b> Deductions: (1) Disbursed from fund to pay benefits or purchase annuities during year .....	<b>7e(1)</b>	
	<b>7e(2)</b>	
	<b>7e(3)</b>	
	<b>7e(4)</b>	
	(5) Total deductions .....	
<b>f</b> Balance at the end of the current year (subtract line <b>7e(5)</b> from line <b>7d</b> ).....	<b>7f</b>	0

**Part III Welfare Benefit Contract Information**  
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

**8** Benefit and contract type (check all applicable boxes)

- a**  Health (other than dental or vision)
- b**  Dental
- c**  Vision
- d**  Life insurance
- e**  Temporary disability (accident and sickness)
- f**  Long-term disability
- g**  Supplemental unemployment
- h**  Prescription drug
- i**  Stop loss (large deductible)
- j**  HMO contract
- k**  PPO contract
- l**  Indemnity contract
- m**  Other (specify) ▶

**9** Experience-rated contracts:

<b>a</b>	Premiums: (1) Amount received .....	<b>9a(1)</b>		
	(2) Increase (decrease) in amount due but unpaid .....	<b>9a(2)</b>		
	(3) Increase (decrease) in unearned premium reserve .....	<b>9a(3)</b>		
	(4) Earned ((1) + (2) - (3)) .....		<b>9a(4)</b>	0
<b>b</b>	Benefit charges (1) Claims paid .....	<b>9b(1)</b>		
	(2) Increase (decrease) in claim reserves .....	<b>9b(2)</b>		
	(3) Incurred claims (add (1) and (2)) .....		<b>9b(3)</b>	0
	(4) Claims charged .....		<b>9b(4)</b>	
<b>c</b>	Remainder of premium: (1) Retention charges (on an accrual basis) --			
	(A) Commissions .....	<b>9c(1)(A)</b>		
	(B) Administrative service or other fees .....	<b>9c(1)(B)</b>		
	(C) Other specific acquisition costs .....	<b>9c(1)(C)</b>		
	(D) Other expenses .....	<b>9c(1)(D)</b>		
	(E) Taxes .....	<b>9c(1)(E)</b>		
	(F) Charges for risks or other contingencies .....	<b>9c(1)(F)</b>		
	(G) Other retention charges .....	<b>9c(1)(G)</b>		
	(H) Total retention .....		<b>9c(1)(H)</b>	0
	(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.) .....		<b>9c(2)</b>	
<b>d</b>	Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement .....		<b>9d(1)</b>	
	(2) Claim reserves .....		<b>9d(2)</b>	
	(3) Other reserves .....		<b>9d(3)</b>	
<b>e</b>	Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).) .....		<b>9e</b>	

**10** Nonexperience-rated contracts:

<b>a</b>	Total premiums or subscription charges paid to carrier .....	<b>10a</b>		309562
<b>b</b>	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. ....	<b>10b</b>		

Specify nature of costs.

**Part IV Provision of Information**

**11** Did the insurance company fail to provide any information necessary to complete Schedule A? .....  Yes  No

**12** If the answer to line 11 is "Yes," specify the information not provided. ▶

UNABLE TO SEPARATE BY LOCATION

<p><b>SCHEDULE A</b> <b>(Form 5500)</b></p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p>	<p><b>Insurance Information</b></p> <p>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</p> <p>▶ <b>File as an attachment to Form 5500.</b></p> <p>▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).</p>	<p>OMB No. 1210-0110</p> <hr/> <p><b>2024</b></p> <hr/> <p><b>This Form is Open to Public Inspection</b></p>
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For calendar plan year 2024 or fiscal plan year beginning **03/01/2024** and ending **02/28/2025**

<b>A</b> Name of plan <b>TRI CITY FOODS, INC. EMPLOYEE BENEFITS PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶	<b>501</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>TRI CITY FOODS, INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>47-1813575</b>	

**Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

**1 Coverage Information:**

(a) Name of insurance carrier  
**METROPOLITAN LIFE INSURANCE COMPANY**

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
<b>13-5581829</b>	<b>65978</b>	<b>0236035</b>	<b>1339</b>	<b>03/01/2024</b>	<b>02/28/2025</b>

**2 Insurance fee and commission information.** Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

<b>(a) Total amount of commissions paid</b> <b>0</b>	<b>(b) Total amount of fees paid</b> <b>4602</b>
---	---

**3 Persons receiving commissions and fees.** (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

**THE PLEXUS GROUPE LLC**      **21805 WEST FIELD PARKWAY**  
**SUITE 300**  
**DEER PARK, IL 60010**

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	<b>4602</b>	<b>FEES</b>	<b>3</b>

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

**Part II Investment and Annuity Contract Information**  
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

<b>4</b> Current value of plan's interest under this contract in the general account at year end .....	<b>4</b>	
<b>5</b> Current value of plan's interest under this contract in separate accounts at year end.....	<b>5</b>	

**6** Contracts With Allocated Funds:

**a** State the basis of premium rates ▶

**b** Premiums paid to carrier ..... **6b**

**c** Premiums due but unpaid at the end of the year ..... **6c**

**d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. .... **6d**  
 Specify nature of costs ▶

**e** Type of contract: (1)  individual policies (2)  group deferred annuity  
 (3)  other (specify) ▶

**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶

**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

**a** Type of contract: (1)  deposit administration (2)  immediate participation guarantee  
 (3)  guaranteed investment (4)  other ▶

<b>b</b> Balance at the end of the previous year .....	<b>7b</b>	0
<b>c</b> Additions: (1) Contributions deposited during the year .....	<b>7c(1)</b>	
	<b>7c(2)</b>	
	<b>7c(3)</b>	
	<b>7c(4)</b>	
	<b>7c(5)</b>	
(6) Total additions .....	<b>7c(6)</b>	0
<b>d</b> Total of balance and additions (add lines <b>7b</b> and <b>7c(6)</b> ) .....	<b>7d</b>	0
<b>e</b> Deductions: (1) Disbursed from fund to pay benefits or purchase annuities during year .....	<b>7e(1)</b>	
	<b>7e(2)</b>	
	<b>7e(3)</b>	
	<b>7e(4)</b>	
	(5) Total deductions .....	
<b>f</b> Balance at the end of the current year (subtract line <b>7e(5)</b> from line <b>7d</b> ).....	<b>7f</b>	0

**Part III Welfare Benefit Contract Information**  
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

**8** Benefit and contract type (check all applicable boxes)

- a**  Health (other than dental or vision)
- b**  Dental
- c**  Vision
- d**  Life insurance
- e**  Temporary disability (accident and sickness)
- f**  Long-term disability
- g**  Supplemental unemployment
- h**  Prescription drug
- i**  Stop loss (large deductible)
- j**  HMO contract
- k**  PPO contract
- l**  Indemnity contract
- m**  Other (specify) ▶

**9** Experience-rated contracts:

<b>a</b>	Premiums: (1) Amount received .....	<b>9a(1)</b>		
	(2) Increase (decrease) in amount due but unpaid .....	<b>9a(2)</b>		
	(3) Increase (decrease) in unearned premium reserve .....	<b>9a(3)</b>		
	(4) Earned ((1) + (2) - (3)) .....		<b>9a(4)</b>	0
<b>b</b>	Benefit charges (1) Claims paid .....	<b>9b(1)</b>		
	(2) Increase (decrease) in claim reserves .....	<b>9b(2)</b>		
	(3) Incurred claims (add (1) and (2)) .....		<b>9b(3)</b>	0
	(4) Claims charged .....		<b>9b(4)</b>	
<b>c</b>	Remainder of premium: (1) Retention charges (on an accrual basis) --			
	(A) Commissions .....	<b>9c(1)(A)</b>		
	(B) Administrative service or other fees .....	<b>9c(1)(B)</b>		
	(C) Other specific acquisition costs .....	<b>9c(1)(C)</b>		
	(D) Other expenses .....	<b>9c(1)(D)</b>		
	(E) Taxes .....	<b>9c(1)(E)</b>		
	(F) Charges for risks or other contingencies .....	<b>9c(1)(F)</b>		
	(G) Other retention charges .....	<b>9c(1)(G)</b>		
	(H) Total retention .....		<b>9c(1)(H)</b>	0
	(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.) .....		<b>9c(2)</b>	
<b>d</b>	Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement .....		<b>9d(1)</b>	
	(2) Claim reserves .....		<b>9d(2)</b>	
	(3) Other reserves .....		<b>9d(3)</b>	
<b>e</b>	Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).) .....		<b>9e</b>	

**10** Nonexperience-rated contracts:

<b>a</b>	Total premiums or subscription charges paid to carrier .....	<b>10a</b>		392319
<b>b</b>	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. ....	<b>10b</b>		

Specify nature of costs.

**Part IV Provision of Information**

**11** Did the insurance company fail to provide any information necessary to complete Schedule A? .....  Yes  No

**12** If the answer to line 11 is "Yes," specify the information not provided. ▶

UNABLE TO SEPARATE BY LOCATION

<p><b>SCHEDULE A</b> <b>(Form 5500)</b></p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p>	<p><b>Insurance Information</b></p> <p>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</p> <p>▶ <b>File as an attachment to Form 5500.</b></p> <p>▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).</p>	<p>OMB No. 1210-0110</p> <hr/> <p><b>2024</b></p> <hr/> <p><b>This Form is Open to Public Inspection</b></p>
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For calendar plan year 2024 or fiscal plan year beginning **03/01/2024** and ending **02/28/2025**

<p><b>A</b> Name of plan <b>TRI CITY FOODS, INC. EMPLOYEE BENEFITS PLAN</b></p>	<p><b>B</b> Three-digit plan number (PN) ▶</p>	<p><b>501</b></p>
<p><b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>TRI CITY FOODS, INC.</b></p>	<p><b>D</b> Employer Identification Number (EIN) <b>47-1813575</b></p>	

**Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

**1 Coverage Information:**

(a) Name of insurance carrier  
**METLIFE LEGAL PLANS**

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
34-1650967	00000	9904944	167	03/01/2024	02/28/2025

**2 Insurance fee and commission information.** Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

<p>(a) Total amount of commissions paid <b>4012</b></p>	<p>(b) Total amount of fees paid <b>553</b></p>
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**3 Persons receiving commissions and fees.** (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

**THE PLEXUS GROUPE LLC**      **21805 WEST FIELD PARKWAY**  
**SUITE 300**  
**DEER PARK, IL 60010**

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4012	538	FEES	3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

**PLEXUS GROUPE**      **21805 WEST FIELD PARKWAY**  
**SUITE 300**  
**DEER PARK, IL 60010**

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	15	FEES	3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

**Part II Investment and Annuity Contract Information**  
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

<b>4</b> Current value of plan's interest under this contract in the general account at year end .....	<b>4</b>	
<b>5</b> Current value of plan's interest under this contract in separate accounts at year end.....	<b>5</b>	

**6** Contracts With Allocated Funds:

**a** State the basis of premium rates ▶

**b** Premiums paid to carrier ..... **6b**

**c** Premiums due but unpaid at the end of the year ..... **6c**

**d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. .... **6d**  
 Specify nature of costs ▶

**e** Type of contract: (1)  individual policies (2)  group deferred annuity  
 (3)  other (specify) ▶

**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶

**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

**a** Type of contract: (1)  deposit administration (2)  immediate participation guarantee  
 (3)  guaranteed investment (4)  other ▶

<b>b</b> Balance at the end of the previous year .....	<b>7b</b>	0
<b>c</b> Additions: (1) Contributions deposited during the year .....	<b>7c(1)</b>	
	<b>7c(2)</b>	
	<b>7c(3)</b>	
	<b>7c(4)</b>	
	<b>7c(5)</b>	
(6) Total additions .....	<b>7c(6)</b>	0
<b>d</b> Total of balance and additions (add lines <b>7b</b> and <b>7c(6)</b> ) .....	<b>7d</b>	0
<b>e</b> Deductions: (1) Disbursed from fund to pay benefits or purchase annuities during year .....	<b>7e(1)</b>	
	<b>7e(2)</b>	
	<b>7e(3)</b>	
	<b>7e(4)</b>	
	(5) Total deductions .....	
<b>f</b> Balance at the end of the current year (subtract line <b>7e(5)</b> from line <b>7d</b> ).....	<b>7f</b>	0

**Part III Welfare Benefit Contract Information**  
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

**8** Benefit and contract type (check all applicable boxes)

- a**  Health (other than dental or vision)
- b**  Dental
- c**  Vision
- d**  Life insurance
- e**  Temporary disability (accident and sickness)
- f**  Long-term disability
- g**  Supplemental unemployment
- h**  Prescription drug
- i**  Stop loss (large deductible)
- j**  HMO contract
- k**  PPO contract
- l**  Indemnity contract
- m**  Other (specify) ▶ **PREPAID LEGAL**

**9** Experience-rated contracts:

<b>a</b>	Premiums: (1) Amount received .....	<b>9a(1)</b>		
	(2) Increase (decrease) in amount due but unpaid .....	<b>9a(2)</b>		
	(3) Increase (decrease) in unearned premium reserve .....	<b>9a(3)</b>		
	(4) Earned ((1) + (2) - (3)) .....		<b>9a(4)</b>	0
<b>b</b>	Benefit charges (1) Claims paid .....	<b>9b(1)</b>		
	(2) Increase (decrease) in claim reserves .....	<b>9b(2)</b>		
	(3) Incurred claims (add (1) and (2)) .....		<b>9b(3)</b>	0
	(4) Claims charged .....		<b>9b(4)</b>	
<b>c</b>	Remainder of premium: (1) Retention charges (on an accrual basis) --			
	(A) Commissions .....	<b>9c(1)(A)</b>		
	(B) Administrative service or other fees .....	<b>9c(1)(B)</b>		
	(C) Other specific acquisition costs .....	<b>9c(1)(C)</b>		
	(D) Other expenses .....	<b>9c(1)(D)</b>		
	(E) Taxes .....	<b>9c(1)(E)</b>		
	(F) Charges for risks or other contingencies .....	<b>9c(1)(F)</b>		
	(G) Other retention charges .....	<b>9c(1)(G)</b>		
	(H) Total retention .....		<b>9c(1)(H)</b>	0
	(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.) .....		<b>9c(2)</b>	
<b>d</b>	Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement .....		<b>9d(1)</b>	
	(2) Claim reserves .....		<b>9d(2)</b>	
	(3) Other reserves .....		<b>9d(3)</b>	
<b>e</b>	Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).) .....		<b>9e</b>	

**10** Nonexperience-rated contracts:

<b>a</b>	Total premiums or subscription charges paid to carrier .....	<b>10a</b>		16110
<b>b</b>	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. ....	<b>10b</b>		

Specify nature of costs.

**Part IV Provision of Information**

**11** Did the insurance company fail to provide any information necessary to complete Schedule A? .....  Yes  No

**12** If the answer to line 11 is "Yes," specify the information not provided. ▶

UNABLE TO SEPARATE BY LOCATION

**SCHEDULE A  
(Form 5500)**

Department of the Treasury  
Internal Revenue Service

Department of Labor  
Employee Benefits Security Administration  
Pension Benefit Guaranty Corporation

**Insurance 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.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

**2024**

**This Form is Open to Public Inspection**

For calendar plan year 2024 or fiscal plan year beginning **03/01/2024** and ending **02/28/2025**

<b>A</b> Name of plan <b>TRI CITY FOODS, INC. EMPLOYEE BENEFITS PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶ <b>501</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>TRI CITY FOODS, INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>47-1813575</b>

**Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

**1 Coverage Information:**

**(a)** Name of insurance carrier  
**CONTINENTAL AMERICAN INSURANCE COMPANY**

<b>(b)</b> EIN	<b>(c)</b> NAIC code	<b>(d)</b> Contract or identification number	<b>(e)</b> Approximate number of persons covered at end of policy or contract year	<b>Policy or contract year</b>	
				<b>(f)</b> From	<b>(g)</b> To
<b>57-0514130</b>	<b>71730</b>	<b>28264</b>	<b>1813</b>	<b>03/01/2024</b>	<b>02/28/2025</b>

**2 Insurance fee and commission information.** Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

<b>(a)</b> Total amount of commissions paid <b>852691</b>	<b>(b)</b> Total amount of fees paid <b>0</b>
--	--

**3 Persons receiving commissions and fees.** (Complete as many entries as needed to report all persons).

**(a)** Name and address of the agent, broker, or other person to whom commissions or fees were paid  
**ROCKWELL & ASSOCIATES LTD** **303 WEST ERIE**  
**SUITE 400**  
**CHICAGO, IL 60654**

<b>(b)</b> Amount of sales and base commissions paid	<b>Fees and other commissions paid</b>		<b>(e)</b> Organization code
	<b>(c)</b> Amount	<b>(d)</b> Purpose	
<b>277000</b>			<b>3</b>

**(a)** Name and address of the agent, broker, or other person to whom commissions or fees were paid  
**THE PLEXUS GROUPE** **21805 FIELD PARKWAY**  
**SUITE 300**  
**DEER PARK, IL 60010**

<b>(b)</b> Amount of sales and base commissions paid	<b>Fees and other commissions paid</b>		<b>(e)</b> Organization code
	<b>(c)</b> Amount	<b>(d)</b> Purpose	
<b>221720</b>			<b>3</b>

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ALFREDO MALDONADO JR 2837 HOME AVENUE  
BERWYN, IL 60402

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
31780			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANNA MARINEZ 303 WEST ERIE  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
31364			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ASHER MEYERS 655 WEST IRVING PARK ROAD  
APARTMENT 4813  
CHICAGO, IL 60613

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
20923			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JAMES W BUCHANAN 2924 STILLWATER COURT  
PLAINFIELD, IL 60586

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
14907			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

PATRICIA DOYLE 6870 WEST 91ST COURT  
7-303  
WESTMINSTER, CO 80021

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
13689			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DANIEL A MARINEZ 303 WEST ERIE  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
13129			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

OVERBECK INSURANCE SERVICES 1033 SOUTH BOULEVARD  
OAK PARK, IL 60302

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
10764			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

F R NASCA & ASSOCIATES LLC 165 NORTH CANAL STREET 716  
CHICAGO, IL 60606

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
10236			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ROBERT J AURIN 2737 NORTH HAMPDEN COURT  
CHICAGO, IL 60614

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
9460			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JORDAN MAHER 325 WEST HURON STREET  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
9180			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BRENDON J PASTA

2123 NORTH RACINE AVENUE  
 APARTMENT 1  
 CHICAGO, IL 60614

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
8808			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARIANA VAZQUEZ

234 DRIFTWOOD LANE  
 SCHAUMBURG, IL 60193

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
8698			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CHRISTOPHER STRANEY

101 EAST QUINCY STREET  
 RIVERSIDE, IL 60546

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
8687			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DANIEL MARINEZ

303 WEST ERIE  
 SUITE 400  
 CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
8598			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LIAM H RYAN

4124 NORTH SHERIDAN ROAD  
 CHICAGO, IL 60613

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
7342			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

VANESSA C CASTREJON 7524 WEST 64TH STREET  
SUMMIT, IL 60501

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
7145			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANDREW CASPERSON 303 WEST ERIE  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
6587			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHELLE L FODREY 332 SOUTH GRACE STREET  
LOMBARD, IL 60148

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5539			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

RYAN M BEYER 104 MEDINA COURT  
EAST PEORIA, IL 61611

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
5473			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MITCHELL V BANDUR 325 WEST HURON STREET  
SUITE 215  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4232			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARCIN ZUREK 210 DES PLAINES AVENUE  
UNIT D  
FOREST PARK, IL 60130

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4147			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

GARY J IRVIN 675 SOUTH RIDGEVIEW LANE  
PEORIA, IL 61604

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
4003			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

REBECCA L LYDON 901 NEUFARFIELD DRIVE  
JOLIET, IL 60432

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3824			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

COLIN M JONES 1125 HAMPSHIRE  
SUITE 201  
QUINCY, IL 62301

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3752			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SCALETТА INSURANCE AGENCY INC 4552 NORTH OTTAWA  
NORRIDGE, IL 60706

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3656			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

HUNTER PATRICE 900 NEUFAIRFIELD DRIVE  
JOLIET, IL 60432

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3346			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JEANNE SMITH 51 AUGUSTA STREET  
OAK PARK, IL 60302

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3301			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CAROLINE MONTOYA 1941 RIDGELAND AVENUE  
1F  
BERWYN, IL 60402

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3296			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

RAYMOND TOWNSEND 2219 NORTH SEELEY  
UNIT 3F  
CHICAGO, IL 60647

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3273			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JEANA M NASCA 810 SUMMIT ROAD  
LAKE ZURICH, IL 60047

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3075			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CAROLINE R OCONNOR

2611 WEST AGATITE AVENUE  
CHICAGO, IL 60625

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3018			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JONATHAN L BAZELL

903 ANN LABOR LANE  
VERNON HILLS, IL 60061

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
3009			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL J OTT

15429 SOUTH PINTO STREET  
HOMER GLEN, IL 60491

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2906			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

COURTNEY GALLACHER

416 9TH AVENUE  
CAMANCHE, IA 52730

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2821			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LISA M SCHUMACHER

10 HERON COURT  
LAKE IN THE HILLS, IL 60156

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2730			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

STEVEN SWANSON  
 1523 47TH AVENUE  
 SUITE 3  
 MOLINE, IL 61265

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2676			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CHANTA D TORRES  
 2815 SOUTH KILBOURN AVENUE  
 CHICAGO, IL 60623

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2675			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

GEORGE W YOUNG  
 2850 ALGONQUIN ROAD  
 APARTMENT 110  
 ROLLING MEADOWS, IL 60008

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2657			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

HELENA HESS  
 239 RUTH PLACE  
 CLINTON, IA 52732

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2482			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

WERONIKA J PAS  
 4605 LAKE TRAIL DRIVE  
 APARTMENT 3C  
 LISLE, IL 60532

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2256			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KIMBERLY A CAMARA

3717 WEST 64TH STREET  
CHICAGO, IL 60629

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2246			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TARA L SCOTT

701 5TH STREET  
ANDOVER, IL 61233

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2178			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KIMLIANNE T WASHINGTON

10105 SOUTH VERNON AVENUE  
CHICAGO, IL 60628

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2101			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

COLLEEN PETERS

128 SOUTH AUSTIN BOULEVARD  
APARTMENT 3  
OAK PARK, IL 60304

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1999			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JOHN PARISH

6033 NORTH SHERIDAN ROAD  
15K  
CHICAGO, IL 60660

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1982			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANGELA FERRIGAN 602 WOOD STREET  
DEKALB, IL 60115

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1933			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANDREW W CASPERSON AND ASSOCIATES 303 WEST ERIE  
SUITE 400  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1812			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JOSHUA E LASKO 5737 NORTH KIMBALL AVENUE  
CHICAGO, IL 60659

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1714			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CLARAETTA ROGERS 6978 PRAIRIE RUN AVENUE  
PORTAGE, IN 46368

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1695			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL J SKOFF 1490 FLORA CHURCH ROAD  
KIRKLAND, IL 60146

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1654			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SARAH JOHNSTON 900 CATON AVENUE  
JOLIET, IL 60435

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1651			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BECKY CLARK 11000 SOUTH KEATING AVENUE  
#1C  
OAK LAWN, IL 60453

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1604			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL E MCCARTHY PO BOX 1047  
DUNDEE, IL 60118

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1563			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ZUREK & ASSOCIATES LLC 210 DES PLAINES AVENUE  
UNIT D  
FOREST PARK, IL 60130

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1563			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KATHERINE T FOREST 4N173 IL ROUTE 83  
BENSENVILLE, IL 60106

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1505			3

## (a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SARAH BUSS

131 LAKEWOOD AVENUE  
EAST PEORIA, IL 61611

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1487			3

## (a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BETTER BENEFITS GROUP LLC

WEST WILLOW KNOLL  
SUITE 205  
PEORIA, IL 60614

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1454			3

## (a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

AUSTIN L OLESEN

325 WEST HURON STREET  
SUITE 215  
CHICAGO, IL 60654

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1435			3

## (a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KEVIN T MERSEREAU

248 KATHRYN LANE  
NORTH AURORA, IL 60542

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1375			3

## (a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KENNETH JACKSON

1111 WEST MORTON AVENUE  
SUITE 10  
JACKSONVILLE, IL 62650

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1297			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

RALPH E JOHNSON 24745 WEST MANOR DRIVE  
SHOREWOOD, IL 60404

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1228			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

STEPHEN GOLEMBIEWSKI 228 OAKE AVENUE  
WESTMONT, IL 60559

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1205			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

NICKO M JACKSON 7612 SOUTH ESSEX AVENUE  
2  
CHICAGO, IL 60649

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1204			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JORGE COVARRUBIAS 4934 WEST DIVERSEY AVENUE  
CHICAGO, IL 60639

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1171			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JASON D COX 1620 1/2 WEST WALLEN AVENUE  
#3S  
CHICAGO, IL 60626

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1135			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TEENA M KLOTZ

120 EAST GENESSEE STREET  
LELAND, IL 60531

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1053			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JONATHAN A CHEEKS

460 WASINGTON  
OAK PARK, IL 60302

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
982			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LETICIA BIEBART

810 NORTH BENNETT STREET  
GENEVA, IL 60134

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
961			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KATELYN N TRUDEAU

10840 SOUTH 84TH AVENUE  
PALOS HILLS, IL 60465

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
847			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BRENDA S WILLIAMS

101 NORTH ORR DRIVE  
UNIT 6  
NORMAL, IL 61761

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
845			3

## (a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KENT AUSTERMANN

3953 NORTH PAULINA STREET  
CHICAGO, IL 60613

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
838			3

## (a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BRIAN CHRONISTER

10337 SOUTH ALBANY AVENUE  
CHICAGO, IL 60655

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
763			3

## (a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SEENA JOHN

15419 WEST 127TH STREET  
LEMONT, IL 60439

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
682			3

## (a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

DENNIS CASSENS

3422 COLONY BAY DRIVE  
ROCKFORD, IL 61109

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
589			3

## (a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BEHRAM A DABOO

3152 OLLERTON AVENUE  
AURORA, IL 60502

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
585			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ARELI HEREDIA

1633 NORTH ARTESIAN AVENUE  
CHICAGO, IL 60647

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
571			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LAKEISHA A ARNOLD

48 ENGLEWOOD AVENUE  
BELLWOOD, IL 60104

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
566			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

LAINA DEWITT

1540 SEVEN PINES ROAD  
APARTMENT L  
SPRINGFIELD, IL 62704

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
562			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL J MALLOY

226 SOUTH MONROE STREET  
HINSDALE, IL 60521

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
534			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

HARRELL & ASSOCIATES INC

11121 SOUTH EMEMCO AVENUE  
CHICAGO, IL 60628

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
510			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TIMOTHY S INGRAM 1355 LYNNFIELD STREET  
 SUITE 259  
 MEMPHIS, TN 33819

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
390			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CASEY N LAUGHLIN 2745 WEST DIVISION STREET  
 APARTMENT 3  
 CHICAGO, IL 60622

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
362			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KANDACE M MCCARTHY 143 WEST WARFIELD DRIVE  
 MOORESVILLE, NC 28115

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
347			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KAIDEN TRUNINGER 721 WEST WALNUT STREET  
 CHILLICOTHE, IL 61523

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
329			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BRENDA S WILLIAMS 101 NORTH ORR DRIVE  
 APARTMENT 6  
 NORMAL, IL 61761

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
325			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARLA VEARIL

908 EAST SHORT STREET  
TUSCOLA, IL 61953

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
305			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ADAM ROBINSON

3341 SOUTH SPRING STREET  
SPRINGFIELD, IL 62703

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
210			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JEANNY M CIFUENTES

7 HELEN COURT  
STREAMWOOD, IL 60107

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
169			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

JAMES J JUSTIC

10537 SOUTH KOLIN AVENUE  
OAK LAWN, IL 60453

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
164			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MICHAEL DISTASIO

4353 WEST IRVING PARK ROAD  
CHICAGO, IL 60641

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
111			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ISAAC SALINAS

5341 SOUTH AVERS  
CHICAGO, IL 60632

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
110			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

AARON J DUNNILL

1137 EAST 5000 NORTH ROAD  
BOURBONNAIS, IL 60914

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
102			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARK A HARRELL

11121 SOUTH EMERALD  
CHICAGO, IL 60628

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
100			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

TARA M STEINERT

800 LAKESHORE DRIVE  
TUSCOLA, IL 61953

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
97			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ERICK CENCULA

1981 YASGUR DRIVE  
WOODSTOCK, IL 60098

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
91			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

MARVIN E HARSTON 908 NEWCASTLE DRIVE  
 APARTMENT 4  
 CHAMPAIGN, IL 61822

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
51			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KARA M BRYAN 140 SOUTH FIRST STREET  
 APARTMENT 1W  
 WILMINGTON, IL 60481

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
34			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

REILY J WILSON 5116 HOMESTRETCH DRIVE  
 LOVES PARK, IL 61111

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
31			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

SAMUEL C KLINGHER 1226 WEST WINONA STREET  
 APARTMENT 1S  
 CHICAGO, IL 60640

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
24			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANTHONY TRISTANO REVIEW PMC  
 CLARENDON HILLS, IL 60514

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
23			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

PAULA R MATTHEWS PO BOX 164  
ARENZVILLE, IL 62611

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
19			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

WILLIAM S ROUSONELOUS 23504 ROVERS CROSSING DRIVE  
SHOREWOOD, IL 60404

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
17			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

OLIVIA R PERRY 3025 NORTH SEMINARY AVENUE  
2R  
CHICAGO, IL 60657

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
13			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

HERLYN OATIS 8825 SOUTH HALSTED STREET  
CHICAGO, IL 60620

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
11			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KRISTIN L ARVIGO 3422 COLONY BAY DRIVE  
ROCKFORD, IL 61109

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
9			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

AARON J DUNNILL

1137 EAST 5000 NORTH ROAD  
BOURBONNAIS, IL 60914

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
7			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

KATE E MCGRATH

1041 HILLSIDE AVENUE  
DEERFIELD, IL 60015

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
7			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

ANDREW CRAWFORD

6 COLLINS PLACE  
JACKSONVILLE, IL 62650

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
6			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

BRIAN M HANLEY

506 CANTERBURY DRIVE  
LAGRANGE, GA 30241

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-2			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

CORNELIUS B SAVOY

6 JOYCE COURT  
ALGONQUIN, IL 60102

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
-14			3

**Part II Investment and Annuity Contract Information**  
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

<b>4</b> Current value of plan's interest under this contract in the general account at year end .....	<b>4</b>	
<b>5</b> Current value of plan's interest under this contract in separate accounts at year end.....	<b>5</b>	

**6** Contracts With Allocated Funds:

**a** State the basis of premium rates ▶

**b** Premiums paid to carrier ..... **6b**

**c** Premiums due but unpaid at the end of the year ..... **6c**

**d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. .... **6d**  
 Specify nature of costs ▶

**e** Type of contract: (1)  individual policies (2)  group deferred annuity  
 (3)  other (specify) ▶

**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶

**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

**a** Type of contract: (1)  deposit administration (2)  immediate participation guarantee  
 (3)  guaranteed investment (4)  other ▶

<b>b</b> Balance at the end of the previous year .....	<b>7b</b>	0
<b>c</b> Additions: (1) Contributions deposited during the year .....	<b>7c(1)</b>	
	<b>7c(2)</b>	
	<b>7c(3)</b>	
	<b>7c(4)</b>	
	<b>7c(5)</b>	
(6) Total additions .....	<b>7c(6)</b>	0
<b>d</b> Total of balance and additions (add lines <b>7b</b> and <b>7c(6)</b> ) .....	<b>7d</b>	0
<b>e</b> Deductions:	<b>7e(1)</b>	
	<b>7e(2)</b>	
	<b>7e(3)</b>	
	<b>7e(4)</b>	
	(5) Total deductions .....	
<b>f</b> Balance at the end of the current year (subtract line <b>7e(5)</b> from line <b>7d</b> ).....	<b>7f</b>	0

**Part III Welfare Benefit Contract Information**  
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

**8** Benefit and contract type (check all applicable boxes)

- a**  Health (other than dental or vision)     
 **b**  Dental     
 **c**  Vision     
 **d**  Life insurance  
**e**  Temporary disability (accident and sickness)     
 **f**  Long-term disability     
 **g**  Supplemental unemployment     
 **h**  Prescription drug  
**i**  Stop loss (large deductible)     
 **j**  HMO contract     
 **k**  PPO contract     
 **l**  Indemnity contract  
**m**  Other (specify) ▶ **ACCIDENT, CRITICAL ILLNESS, DISABILITY, WHOLE LIFE, HOSPITAL INDEMNITY, BENEXTEND**

**9** Experience-rated contracts:

<b>a</b> Premiums: (1) Amount received .....	<b>9a(1)</b>		
(2) Increase (decrease) in amount due but unpaid .....	<b>9a(2)</b>		
(3) Increase (decrease) in unearned premium reserve .....	<b>9a(3)</b>		
(4) Earned ((1) + (2) - (3)) .....		<b>9a(4)</b>	0
<b>b</b> Benefit charges (1) Claims paid .....	<b>9b(1)</b>		
(2) Increase (decrease) in claim reserves .....	<b>9b(2)</b>		
(3) Incurred claims (add (1) and (2)) .....		<b>9b(3)</b>	0
(4) Claims charged .....		<b>9b(4)</b>	
<b>c</b> Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions .....	<b>9c(1)(A)</b>		
(B) Administrative service or other fees .....	<b>9c(1)(B)</b>		
(C) Other specific acquisition costs .....	<b>9c(1)(C)</b>		
(D) Other expenses .....	<b>9c(1)(D)</b>		
(E) Taxes .....	<b>9c(1)(E)</b>		
(F) Charges for risks or other contingencies .....	<b>9c(1)(F)</b>		
(G) Other retention charges .....	<b>9c(1)(G)</b>		
(H) Total retention .....		<b>9c(1)(H)</b>	0
(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.) .....		<b>9c(2)</b>	
<b>d</b> Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement .....		<b>9d(1)</b>	
(2) Claim reserves .....		<b>9d(2)</b>	
(3) Other reserves .....		<b>9d(3)</b>	
<b>e</b> Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).) .....		<b>9e</b>	

**10** Nonexperience-rated contracts:

<b>a</b> Total premiums or subscription charges paid to carrier .....	<b>10a</b>	2226444
<b>b</b> If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. .... Specify nature of costs.	<b>10b</b>	

**Part IV Provision of Information**

**11** Did the insurance company fail to provide any information necessary to complete Schedule A? .....  Yes  No

**12** If the answer to line 11 is "Yes," specify the information not provided. ▶