

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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

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

Part I Annual Report Identification Information

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan: STATE STREET U.S. BOND INDEX RET ACCT; 1b Three-digit plan number (PN): 416; 1c Effective date of plan; 2a Plan sponsor's name: TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY; 2b Employer Identification Number (EIN): 36-6071399; 2c Plan Sponsor's telephone number: 319-355-6449; 2d Business code

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

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

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

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

Form 5500 (2024) v. 240311

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

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

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

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

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

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

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

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

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

Receipt Confirmation Code _____

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

A Name of plan <u>STATE STREET U.S. BOND INDEX RET ACCT</u>	B Three-digit plan number (PN)	<u>416</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY</u>	D Employer Identification Number (EIN) <u>36-6071399</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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d Entity code

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

c EIN-PN

d Entity code

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

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	1 SOURCE BUSINESS SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor	1 SOURCE BUSINESS SOLUTIONS, LLC	c EIN-PN 27-3793520-333
a	Plan name	ARCHER SYSTEMS, LLC 401(K) PLAN	
b	Name of plan sponsor	ARCHER SYSTEMS, LLC	c EIN-PN 82-2145883-001
a	Plan name	ARMBRECHT & WIERENGA ORTHODONTICS PLC 401(K) PLAN	
b	Name of plan sponsor	ARMBRECHT & WIERENGA ORTHODONTICS PLC	c EIN-PN 38-2163006-001
a	Plan name	BUFFALO VETERINARY PRACTICES 401(K) PLAN	
b	Name of plan sponsor	PET DEGREE HOSPITAL PLLC	c EIN-PN 81-2573552-001
a	Plan name	BUILDING INDUSTRY ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor	BUILDING INDUSTRY ASSOCIATION OF CLARK COUNTY	c EIN-PN 91-0906923-001
a	Plan name	BUTLER, FITZGERALD & FIVESON, P.C. 401(K) PLAN	
b	Name of plan sponsor	BUTLER, FITZGERALD & FIVESON, P.C.	c EIN-PN 20-2841166-001
a	Plan name	CROWN CRAFTS, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	CROWN CRAFTS, INC.	c EIN-PN 58-0678148-002
a	Plan name	CTI CONTROLTECH, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	CTI CONTROLTECH, INC.	c EIN-PN 46-0470086-002
a	Plan name	ENTERRA SOLUTIONS, LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ENTERRA SOLUTIONS, LLC	c EIN-PN 30-0002607-001
a	Plan name	ENVIRO-TOTE, INC. 401(K) PLAN	
b	Name of plan sponsor	ENVIRO-TOTE, INC.	c EIN-PN 02-0445490-001
a	Plan name	ERS PLAN	
b	Name of plan sponsor	UNIVERSAL SITE SERVICES	c EIN-PN 94-1602345-001
a	Plan name	ETHOS BEHAVIORAL HEALTH GROUP 401(K) PLAN	
b	Name of plan sponsor	ETHOS BEHAVIORAL HEALTH GROUP, LLC	c EIN-PN 84-2484878-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
a	Plan name	GMH ASSOCIATES, INC. 401(K) PLAN
b	Name of plan sponsor	GMH ASSOCIATES, INC.
c	EIN-PN	23-2618889-001
a	Plan name	GOLDSMITH GALLERY JEWELERS, INC. 401(K) PLAN
b	Name of plan sponsor	GOLDSMITH GALLERY JEWELERS, INC.
c	EIN-PN	81-0504056-001
a	Plan name	INTEGRITY CONSTRUCTION MANAGEMENT, LLC 401K PLAN
b	Name of plan sponsor	INTEGRITY CONSTRUCTION MANAGEMENT, LLC
c	EIN-PN	45-5124212-001
a	Plan name	INTELLIPRO SERVICE MEP
b	Name of plan sponsor	INTELLIPRO SERVICE INC.
c	EIN-PN	83-3224197-001
a	Plan name	INTERNAL MED ID ASSOCIATES, LLC RETIREMENT PLAN
b	Name of plan sponsor	INTERNAL MED ID ASSOCIATES, LLC
c	EIN-PN	20-8374419-001
a	Plan name	INTERNATIONAL PHOTOGRAPHY SERVICES INC. PROFIT SHARING PLAN
b	Name of plan sponsor	INTERNATIONAL PHOTOGRAPHY SERVICES INC.
c	EIN-PN	13-4052934-001
a	Plan name	INTERTEK, LLC 401(K) PLAN
b	Name of plan sponsor	INTERTEK, LLC
c	EIN-PN	20-3491428-001
a	Plan name	LINCOLN LAND SERVICES, LLC 401(K) PLAN
b	Name of plan sponsor	LINCOLN LAND SERVICES, LLC
c	EIN-PN	20-5535148-001
a	Plan name	LONG ISLAND COMPREHENSIVE, PLLC CASH BALANCE PENSION PLAN
b	Name of plan sponsor	LONG ISLAND COMPREHENSIVE MEDICAL CARE, PLLC
c	EIN-PN	37-1654147-002
a	Plan name	NATIONAL CHILDREN'S CANCER SOCIETY 401(K) PLAN
b	Name of plan sponsor	NATIONAL CHILDREN'S CANCER SOCIETY
c	EIN-PN	37-1227890-001
a	Plan name	NATIONAL FIRE, CHILD & DRUG COUNCILS 401(K) PLAN
b	Name of plan sponsor	NATIONAL CHILD SAFETY COUNCIL
c	EIN-PN	38-6035290-001
a	Plan name	NATIONAL WATER SERVICES 401(K) PLAN
b	Name of plan sponsor	NATIONAL WATER SERVICES
c	EIN-PN	35-2158046-222

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name NCA RETIREMENT PLAN	
b	Name of plan sponsor NEVADA CARDIOLOGY ASSOCIATES	c EIN-PN 88-0293130-001
a	Plan name PETE & PETE CONTAINER SERVICE, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor PETE & PETE CONTAINER SERVICE, INC.	c EIN-PN 31-1548571-001
a	Plan name PETE & PETE CONTAINER SERVICE, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor PETE & PETE CONTAINER SERVICE, INC.	c EIN-PN 31-1548571-777
a	Plan name PETROLEUM EQUIPMENT INSTITUTE 401(K)/PROFIT SHARING PLAN	
b	Name of plan sponsor PETROLEUM EQUIPMENT INSTITUTE	c EIN-PN 73-0593344-002
a	Plan name ROCKET COMPOSITES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ROCKET COMPOSITES, INC.	c EIN-PN 27-0395707-001
a	Plan name ROCKY MOUNTAIN BUSINESS SYSTEMS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ROCKY MOUNTAIN BUSINESS SYSTEMS, INC.	c EIN-PN 85-0330110-002
a	Plan name ROTTET STUDIO, LLC 401(K) PLAN	
b	Name of plan sponsor ROTTET STUDIO LLC	c EIN-PN 26-1648926-001
a	Plan name ROY SAKUMA PRODUCTIONS, INC. 401(K) PLAN	
b	Name of plan sponsor ROY SAKUMA PRODUCTIONS, INC.	c EIN-PN 99-0173485-001
a	Plan name TAG GOALPATH SOLUTIONS 401(K) RETIREMENT PLAN EXCHANGE	
b	Name of plan sponsor ADMINISTRATIVE GROUP, LLC DBA TAG RESOURCES	c EIN-PN 62-1874768-001
a	Plan name TAG WEALTH ENHANCEMENT GROUP 401(K) RETIREMENT PLAN EXCHANGE	
b	Name of plan sponsor TAG RESOURCES, LLC	c EIN-PN 62-1874774-012
a	Plan name TAKANO NAKAMURA LANDSCAPING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TAKANO NAKAMURA LANDSCAPING, INC.	c EIN-PN 99-0204144-001
a	Plan name TAX FAVORED BENEFITS, INC. RETIREMENT PLAN EXCHANGE	
b	Name of plan sponsor TAX FAVORED BENEFITS, INC.	c EIN-PN 48-0912395-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name TURNER ENGINEERING CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TURNER ENGINEERING CORPORATION	c EIN-PN 20-3882870-002
a	Plan name UNISAND INCORPORATED 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor UNISAND INCORPORATED	c EIN-PN 34-1658346-001
a	Plan name 417 ROYAL RESTAURANT, LLC 401 (K) PLAN	
b	Name of plan sponsor 417 ROYAL RESTAURANT, LLC	c EIN-PN 46-3172979-001
a	Plan name A LA CARTE FOODS 401(K) PLAN	
b	Name of plan sponsor A LA CARTE	c EIN-PN 81-2972833-001
a	Plan name A&B ENVIRONMENTAL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor A&B ENVIRONMENTAL SERVICES, INC.	c EIN-PN 76-0261001-001
a	Plan name ASPIRE HIGHER EDUCATIONAL SERVICES 401(K) PLAN	
b	Name of plan sponsor ASPIRE HIGHER EDUCATIONAL SERVICES	c EIN-PN 81-3643454-001
a	Plan name ASSISTANCE LEAGUE OF LOS ANGELES 401(K) PLAN	
b	Name of plan sponsor ASSISTANCE LEAGUE OF LOS ANGELES	c EIN-PN 95-1641960-001
a	Plan name ASSOCIATED CONSTRUCTION PRODUCTS, INC. 401(K) PLAN	
b	Name of plan sponsor ASSOCIATED CONSTRUCTION PRODUCTS, INC.	c EIN-PN 59-2692893-001
a	Plan name BUX-MONT TRANSPORTATION 401(K) PLAN	
b	Name of plan sponsor BUX-MONT TRANSPORTATION	c EIN-PN 23-1576223-001
a	Plan name C & S DRAPERIES, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor C & S DRAPERIES, INC.	c EIN-PN 77-0072946-001
a	Plan name CABRILLO HOLDINGS, LLC 401(K) PLAN	
b	Name of plan sponsor CABRILLO HOLDINGS, LLC	c EIN-PN 35-2485780-001
a	Plan name CADILLAC OF MAHWAH LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor CADILLAC OF MAHWAH LLC	c EIN-PN 01-0950579-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
a	Plan name	CAIL 401(K) PLAN
b	Name of plan sponsor	COMMONWEALTH ACCIDENT INJURY LAW, PC
c	EIN-PN	47-4546366-001
a	Plan name	CVIN, LLC 401(K) RETIREMENT PLAN
b	Name of plan sponsor	CVIN, LLC
c	EIN-PN	77-0407563-001
a	Plan name	CVR ASSOCIATES, INC. 401(K)
b	Name of plan sponsor	CVR ASSOCIATES, INC.
c	EIN-PN	04-3273457-777
a	Plan name	CW LAW LLP 401(K) PLAN
b	Name of plan sponsor	CW LAW LLP
c	EIN-PN	85-3275179-001
a	Plan name	D & W MANAGEMENT, INC. 401(K) PLAN
b	Name of plan sponsor	D & W MANAGEMENT, INC.
c	EIN-PN	77-0420267-001
a	Plan name	D H GRIFFIN OF TEXAS INC 401(K) PROFIT SHARING PLAN AND TRUST
b	Name of plan sponsor	D H GRIFFIN OF TEXAS INC
c	EIN-PN	76-0455054-001
a	Plan name	DANNIBLE & MCKEE, LLP 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	DANNIBLE & MCKEE, LLP
c	EIN-PN	33-0996661-001
a	Plan name	EVERT & WEATHERSBY RETIREMENT PLAN
b	Name of plan sponsor	EVERT & WEATHERSBY, LLC
c	EIN-PN	58-1830721-001
a	Plan name	EXCEL CABINETS, INC. 401(K) PLAN
b	Name of plan sponsor	EXCEL CABINETS, INC.
c	EIN-PN	33-0521926-001
a	Plan name	EXECUTIVE 1 HC LLC 401(K) PLAN
b	Name of plan sponsor	EXECUTIVE 1 HC LLC
c	EIN-PN	82-3076130-001
a	Plan name	EXOTIC FASTENERS, INC. 401(K) PROFIT SHARING PLAN AND TRUST
b	Name of plan sponsor	EXOTIC FASTENERS, INC.
c	EIN-PN	46-1551899-001
a	Plan name	GPDDC, LLC 401 (K) PLAN
b	Name of plan sponsor	GRAMERCY PARK DIGESTIVE DISEASE CENTER, LLC
c	EIN-PN	04-3769350-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	GRAPE EXPECTATIONS 401(K) PLAN	
b	Name of plan sponsor	GRAPE EXPECTATIONS	c EIN-PN 94-2423490-002
a	Plan name	GRAPHIC COMMUNICATIONS 401(K) PLAN	
b	Name of plan sponsor	PRINTING INDUSTRIES ASSOCIATION, INC. OF SOUTHERN CALIFORNIA	c EIN-PN 95-1501502-001
a	Plan name	GREAT MOUNTAIN PARTNERS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	GREAT MOUNTAIN PARTNERS LLC	c EIN-PN 84-3463093-001
a	Plan name	IVY HAWN 401(K) PLAN	
b	Name of plan sponsor	VOLUSIA CHARTER SCHOOL OF EXCELLENCE	c EIN-PN 30-0600042-001
a	Plan name	J & L HOLDINGS, INC. 401(K) PLAN	
b	Name of plan sponsor	J & L HOLDINGS, INC.	c EIN-PN 91-2146403-001
a	Plan name	M & E, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	M & E, LLC DBA CLEVES AND LONNEMANN	c EIN-PN 81-4622672-002
a	Plan name	MAGNOLIA COMMUNITY SERVICES, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	MAGNOLIA COMMUNITY SERVICES, INC.	c EIN-PN 72-0423625-001
a	Plan name	MAKAI HR RETIREMENT PLAN	
b	Name of plan sponsor	KCPHI SERVICES, LLC DBA MAKAI HR	c EIN-PN 82-3809240-333
a	Plan name	NEHAL CONTRACTING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NEHAL CONTRACTING, INC.	c EIN-PN 58-2587356-001
a	Plan name	PIPELINE SYSTEM HOLDINGS, LLC	
b	Name of plan sponsor	PIPELINE HEALTH SYSTEM, LLC	c EIN-PN 82-3626084-001
a	Plan name	PLANNED RETIREMENT CONSULTANTS & ADMINISTRATORS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	PLANNED RETIREMENT CONSULTANTS & ADMINISTRATORS, LLC	c EIN-PN 22-2116608-002
a	Plan name	PLANSOURCE FINANCIAL SERVICES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	PLANSOURCE FINANCIAL SERVICES, INC.	c EIN-PN 59-3707284-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name SACCO & FILLAS, LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SACCO & FILLAS, LLP	c EIN-PN 16-1706802-001
a	Plan name SAMUEL P. MARTIN INSURANCE AGENCY, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor SAMUEL P. MARTIN INSURANCE AGENCY, INC.	c EIN-PN 22-2117154-001
a	Plan name TECHNOFLO SYSTEMS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TECHNOFLO SYSTEMS	c EIN-PN 77-0557580-001
a	Plan name TEKSECUTE TECHNOLOGY GROUP 401K PLAN	
b	Name of plan sponsor TEKSECUTE TECHNOLOGY GROUP, LLC	c EIN-PN 01-0548119-001
a	Plan name UNITED RECYCLING AND CONTAINER 401(K) PLAN AND TRUST	
b	Name of plan sponsor TOPSOILS, INC. DBA UNITED RECYCLING AND CONTAINER	c EIN-PN 91-1688438-001
a	Plan name UNIVERSAL TANK & FABRICATION INC. 401(K) PLAN	
b	Name of plan sponsor UNIVERSAL TANK & FABRICATION INC.	c EIN-PN 94-4428204-001
a	Plan name UPSHIFT HR 401(K) PLAN	
b	Name of plan sponsor UPSHIFT HR	c EIN-PN 87-4055304-001
a	Plan name UPSTATE OB/GYN ASSOCIATES, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor UPSTATE OB/GYN ASSOCIATES, P.C.	c EIN-PN 14-1600870-001
a	Plan name FLEET DRIVER SERVICE, INC. 401(K) PLAN	
b	Name of plan sponsor FLEET DRIVER SERVICE, INC.	c EIN-PN 45-3685803-333
a	Plan name FOREST HILLTOP CHIROPRACTIC ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor FOREST HILLTOP CHIROPRACTIC ASSOCIATES, INC.	c EIN-PN 25-1603610-001
a	Plan name FORM GRINDING TECH INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor FORM GRINDING TECH INC	c EIN-PN 38-3502129-001
a	Plan name SLS CONTROL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SLS CONTROL, INC.	c EIN-PN 82-2311359-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name SMITHTOWN ACUPUNCTURE & WELLNESS, P.C. 401K PLAN	
b	Name of plan sponsor SMITHTOWN ACUPUNCTURE & WELLNESS, P.C.	c EIN-PN 03-0451440-001
a	Plan name SMX 401(K) PLAN	
b	Name of plan sponsor SMARTRONIX, LLC	c EIN-PN 52-1922012-001
a	Plan name SOLIDUS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PRECISION EQUIPMENT SYSTEMS, LLC DBA SOLIDUS	c EIN-PN 46-5723146-001
a	Plan name SOUTH BAY FORD, INC. AND FORD WEST 401(K) PLAN	
b	Name of plan sponsor SOUTH BAY FORD	c EIN-PN 95-4451497-001
a	Plan name GREENWOOD MOTORS 401(K) RETIREMENT PLAN & TRUST	
b	Name of plan sponsor GREENWOOD MOTORS	c EIN-PN 77-0560344-001
a	Plan name GROWING GENERATIONS 401(K) PLAN	
b	Name of plan sponsor GROWING GENERATIONS	c EIN-PN 95-4619204-001
a	Plan name GUHROO 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor EXECUTIVE RESOURCE GROUP LLC DBA GUHROO	c EIN-PN 46-4868112-001
a	Plan name TERESI TRUCKING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TERESI TRUCKING, LLC	c EIN-PN 94-1712166-001
a	Plan name THE BERRY MAN, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE BERRY MAN, INC.	c EIN-PN 77-0341777-001
a	Plan name THE CONGRESS LAKE COMPANY 401(K) PLAN	
b	Name of plan sponsor THE CONGRESS LAKE COMPANY	c EIN-PN 34-0160950-001
a	Plan name HAWTHORNE CHEVROLET 401(K) PLAN	
b	Name of plan sponsor HAWTHORNE CHEVROLET	c EIN-PN 22-0981720-001
a	Plan name THE MEDIA CAPTAIN, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE MEDIA CAPTAIN, LLC	c EIN-PN 27-3370344-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name THE MOSSER GROUP EMPLOYEE SAVINGS PLAN & TRUST	
b	Name of plan sponsor WMOG, INC.	c EIN-PN 34-1133357-003
a	Plan name THE NAPOLI GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor THE NAPOLI GROUP, LLC	c EIN-PN 20-0100132-001
a	Plan name ABIGDESTINATION 401(K) PLAN	
b	Name of plan sponsor ABIGDESTINATION LLC	c EIN-PN 26-2206411-001
a	Plan name ACCURATE INGREDIENTS, INC. RETIREMENT PLAN	
b	Name of plan sponsor ACCURATE INGREDIENTS, INC.	c EIN-PN 11-2571863-001
a	Plan name J COSMETIC SERVICES, LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor J COSMETIC SERVICES, LLC DBA PERILLO COLLISION CENTER	c EIN-PN 20-3181332-001
a	Plan name J. J. MAUGET COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor J. J. MAUGET COMPANY, INC.	c EIN-PN 95-1968672-002
a	Plan name J. MILANO CO., INC. 401(K) PLAN	
b	Name of plan sponsor J. MILANO CO., INC.	c EIN-PN 94-1653879-001
a	Plan name JA USA 401(K) PLAN	
b	Name of plan sponsor JUNIOR ACHIEVEMENT USA	c EIN-PN 84-1267604-334
a	Plan name UTAH MANUFACTURERS ASSOCIATION MEP 401(K) PLAN	
b	Name of plan sponsor UTAH MANUFACTURERS ASSOCIATION	c EIN-PN 87-0187660-333
a	Plan name ALABAMA AGC 401(K) MULTIPLE EMPLOYER PLAN	
b	Name of plan sponsor ALABAMA ASSOCIATED GENERAL CONTRACTORS, INC.	c EIN-PN 63-6049915-555
a	Plan name ALCON ENTERTAINMENT, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ALCON ENTERTAINMENT	c EIN-PN 62-1674411-001
a	Plan name KAHUA 401(K) PLAN	
b	Name of plan sponsor KAHUA INC.	c EIN-PN 27-0523308-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	W.M. GRACE CONSTRUCTION, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	W.M. GRACE CONSTRUCTION, INC.	c EIN-PN 43-0894463-002
a	Plan name	ASTI'S SOUTH HILLS PHARMACY LLC RETIREMENT PLAN	
b	Name of plan sponsor	C & G HEALTH SOLUTIONS DBA ASTIS SOUTH HILLS PHARMACY	c EIN-PN 45-5632914-001
a	Plan name	ATHERTON & ASSOCIATES LLP 401(K) PLAN	
b	Name of plan sponsor	ATHERTON & ASSOCIATES LLP	c EIN-PN 94-1239084-001
a	Plan name	MAPLE LEAF CHEESEMAKERS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MAPLE LEAF CHEESEMAKERS, INC.	c EIN-PN 39-1895024-001
a	Plan name	MARCUS, WATANABE & DAVE, LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MARCUS, WATANABE & DAVE, LLP	c EIN-PN 95-4319447-001
a	Plan name	MARQUEZ BROTHERS INTERNATIONAL, INC. AND AFFILIATES 401(K) PLAN	
b	Name of plan sponsor	MARQUEZ BROTHERS INTERNATIONAL, INC	c EIN-PN 94-2789431-889
a	Plan name	BEACON HOSPITAL MANAGEMENT, INC. 401(K) PLAN	
b	Name of plan sponsor	BEACON HOSPITAL MANAGEMENT, INC.	c EIN-PN 27-3174264-002
a	Plan name	BEAR INDUSTRIES 401(K) SAVINGS PLAN	
b	Name of plan sponsor	BEAR INDUSTRIES, INC.	c EIN-PN 72-0861682-001
a	Plan name	MCMAHON'S OF LUXEMBURG, INC. 401(K) PLAN	
b	Name of plan sponsor	MCMAHON'S OF LUXEMBURG, INC.	c EIN-PN 39-1164634-001
a	Plan name	CALSOFT SYSTEMS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CALSOFT SYSTEMS	c EIN-PN 33-0593327-001
a	Plan name	CAMINO FEDERAL CREDIT UNION 401(K) PROFIT SHARING	
b	Name of plan sponsor	CAMINO FEDERAL CREDIT UNION	c EIN-PN 95-1676228-002
a	Plan name	CAPITAL AREA TITLE, LLC 401(K) PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor	CAPITAL AREA TITLE, LLC	c EIN-PN 20-4865361-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name NEW JERSEY ORAL AND MAXILLOFACIAL SURGERY ASSOCIATES, PC 401(K) PS PLAN	
b	Name of plan sponsor NEW JERSEY ORAL AND MAXILLOFACIAL SURGERY ASSOCIATES, PC DBA BARBIER	c EIN-PN 22-2918632-001
a	Plan name ONEPATH 401(K) GPS	
b	Name of plan sponsor PLAN PROFESSIONALS, LLC D/B/A NPPG PLAN PROFESSIONALS	c EIN-PN 85-3213245-007
a	Plan name ONESOURCE PROS 401(K) PLAN	
b	Name of plan sponsor ONESOURCE PROFESSIONAL SEARCH, LLC	c EIN-PN 13-4301164-001
a	Plan name PMI KYOTO 401(K) PLAN	
b	Name of plan sponsor PMI KYOTO PACKAGING SYSTEMS, INC.	c EIN-PN 36-3900736-001
a	Plan name DAVID&GOLIATH EMPLOYEES 401K/PROFIT SHARING PLAN	
b	Name of plan sponsor DAVID&GOLIATH, LLC	c EIN-PN 13-4088671-001
a	Plan name DAVIDSON BROTHERS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DAVIDSON BROTHERS, INC.	c EIN-PN 25-1488298-002
a	Plan name DE MATTEI CONSTRUCTION INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DE MATTEI CONSTRUCTION INC.	c EIN-PN 77-0210774-001
a	Plan name PURCHASING POWER 401(K) PLAN	
b	Name of plan sponsor PURCHASING POWER, LLC	c EIN-PN 90-0193342-222
a	Plan name DOGWOOD SITE CONTRACTORS LLC 401(K) PLAN	
b	Name of plan sponsor DOGWOOD SITE CONTRACTORS LLC	c EIN-PN 87-1345377-001
a	Plan name DONIGER/BURROUGHS 401(K)	
b	Name of plan sponsor DONIGER/BURROUGHS	c EIN-PN 27-4329677-001
a	Plan name SANDERS CANDY FACTORY, INC. 401(K) PLAN	
b	Name of plan sponsor SANDERS CANDY FACTORY, INC.	c EIN-PN 95-4248513-001
a	Plan name SCULLY SPORTSWEAR 401(K) PLAN	
b	Name of plan sponsor SCULLY SPORTSWEAR, INC.	c EIN-PN 95-2240766-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	FALCON TRADING COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FALCON TRADING COMPANY, INC.	c EIN-PN 94-2863170-001
a	Plan name	AUTISM SPECTRUM CONSULTANTS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	AUTISM SPECTRUM CONSULTANTS, INC.	c EIN-PN 20-0401114-001
a	Plan name	AVMA LIFE TRUST, LLC MEP 401(K) PS PLAN	
b	Name of plan sponsor	AVMA LIFE TRUST, LLC	c EIN-PN 84-2685033-001
a	Plan name	AVW EQUIPMENT COMPANY INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	AVW EQUIPMENT COMPANY INC.	c EIN-PN 36-2780525-001
a	Plan name	MASTERY LOGISTICS SYSTEMS, INC. 401K PLAN	
b	Name of plan sponsor	MASTERY LOGISTICS SYSTEMS, INC.	c EIN-PN 83-1185597-001
a	Plan name	MATCHSTICK VENTURES LLC 401(K) PLAN	
b	Name of plan sponsor	MATCHSTICK VENTURES LLC	c EIN-PN 47-2994395-001
a	Plan name	MEDICOM TECHNOLOGIES RETIREMENT PLAN	
b	Name of plan sponsor	MEDICOM TECHNOLOGIES, INC	c EIN-PN 47-5342804-001
a	Plan name	MEEHLEIS MODULAR BUILDINGS, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	MEEHLEIS MODULAR BUILDINGS, INC.	c EIN-PN 94-2971321-002
a	Plan name	MERCER THOMPSON LLC ATTORNEYS 401(K) PLAN	
b	Name of plan sponsor	MERCER THOMPSON LLC	c EIN-PN 27-0253380-777
a	Plan name	MERRELL LLC EMPLOYEE 401(K) PLAN	
b	Name of plan sponsor	MERRELL LLC	c EIN-PN 81-2931810-001
a	Plan name	BENO J. GUNDLACH COMPANY 401(K) PLAN	
b	Name of plan sponsor	BJG INVESTMENTS COMPANY	c EIN-PN 46-1578021-002
a	Plan name	BEST CONTRACTING SERVICES, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	BEST CONTRACTING SERVICES, INC.	c EIN-PN 95-3781209-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	BHRS RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	BE HR STRONG, LLC	c EIN-PN 88-3455524-001
a	Plan name	NORTHWEST EYE SPECIALISTS, PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NORTHWEST EYE SPECIALISTS, PLLC	c EIN-PN 86-0720868-005
a	Plan name	CAPRICORN SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	CAPRICORN SYSTEMS, INC.	c EIN-PN 58-2514176-002
a	Plan name	CARE MANAGEMENT, INC. 401(K) PLAN	
b	Name of plan sponsor	CARE MANAGEMENT, INC.	c EIN-PN 11-3117425-001
a	Plan name	CAROLINA DEALERSHIPS, INC. 401(K) PLAN	
b	Name of plan sponsor	CAROLINA DEALERSHIPS, INC.	c EIN-PN 20-0465434-001
a	Plan name	OVERHEAD DOOR COMPANY OF COVINGTON, INC. 401(K) PLAN	
b	Name of plan sponsor	OVERHEAD DOOR COMPANY OF COVINGTON, INC.	c EIN-PN 61-0718497-001
a	Plan name	CHILD & MARTON LLP 401(K) PLAN	
b	Name of plan sponsor	CHILD & MARTON LLP	c EIN-PN 80-0051807-001
a	Plan name	CHRISTINE LYNCH, MA, LPC, INC. 401(K) PLAN	
b	Name of plan sponsor	CHRISTINE LYNCH, MA, LPC INC.	c EIN-PN 84-1905388-001
a	Plan name	CINGULAR HR 401(K) PLAN	
b	Name of plan sponsor	CINGULAR HR	c EIN-PN 46-1128124-001
a	Plan name	CLAIMS RESOURCE SERVICES, INC 401(K) PLAN & TRUST	
b	Name of plan sponsor	CLAIMS RESOURCE SERVICES, INC.	c EIN-PN 94-3241983-001
a	Plan name	CLARK BROTHERS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CLARK BROTHERS, INC.	c EIN-PN 94-1572305-002
a	Plan name	POWERS GENERATOR 401(K) PLAN	
b	Name of plan sponsor	POWERS GENERATOR	c EIN-PN 02-0523661-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	PRECISION 2000 401(K) PLAN	
b	Name of plan sponsor	PRECISION 2000, INC.	c EIN-PN 58-2427359-001
a	Plan name	PRECISION FABRICATING 401(K) PLAN	
b	Name of plan sponsor	PRECISION FABRICATING GROUP	c EIN-PN 47-1669880-001
a	Plan name	PRESIDIO EMPLOYEE CO LLC 401(K) PLAN	
b	Name of plan sponsor	PRESIDIO EMPLOYEE CO LLC	c EIN-PN 82-5116779-001
a	Plan name	PRINT AND GRAPHICS RETIREMENT PLAN	
b	Name of plan sponsor	PRINTING INDUSTRIES ALLIANCE	c EIN-PN 16-1037029-001
a	Plan name	DELTA CONSTRUCTORS, LLC 401(K) PLAN	
b	Name of plan sponsor	DELTA CONSTRUCTORS, LLC	c EIN-PN 37-1552952-001
a	Plan name	DEPLOYED GLOBAL SOLUTIONS, LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	DEPLOYED GLOBAL SOLUTIONS, LLC	c EIN-PN 87-1779097-001
a	Plan name	DEPLOYED SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor	DEPLOYED SERVICES, LLC	c EIN-PN 84-5019630-001
a	Plan name	DYNAMIC RESEARCH, INC. RETIREMENT PLAN	
b	Name of plan sponsor	DYNAMIC RESEARCH	c EIN-PN 95-3385947-001
a	Plan name	EAR MEDICAL GROUP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	EAR MEDICAL GROUP, P.A.	c EIN-PN 74-2283401-001
a	Plan name	EAST HARTFORD ORTHODONTICS, LLC 401(K) PLAN	
b	Name of plan sponsor	EAST HARTFORD ORTHODONTICS, LLC	c EIN-PN 45-3967784-001
a	Plan name	EASTCOAST ENTERTAINMENT, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	EASTCOAST ENTERTAINMENT, INC.	c EIN-PN 54-1024623-001
a	Plan name	QUICK STOP RECYCLING INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	QUICK STOP RECYCLING INC.	c EIN-PN 20-5072935-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	RABIN & BERDO, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	RABIN & BERDO, P.C.	c EIN-PN 52-1763604-001
a	Plan name	RALLY FOR RETIREMENT 401(K) PLAN	
b	Name of plan sponsor	GREAT SALONS OF KNOXVILLE, INC.	c EIN-PN 84-1616153-002
a	Plan name	SESSUMS LAW GROUP, PA 401(K) SAVINGS PLAN	
b	Name of plan sponsor	SESSUMS LAW GROUP, PA	c EIN-PN 26-2276482-001
a	Plan name	SGCP MANAGEMENT CO., LLC 401(K) PLAN	
b	Name of plan sponsor	SGCP MANAGEMENT CO., LLC	c EIN-PN 82-4752245-001
a	Plan name	SHIMA SEIKI U.S.A., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SHIMA SEIKI U.S.A., INC.	c EIN-PN 22-2708902-001
a	Plan name	FBA RETIREMENT PLAN	
b	Name of plan sponsor	AUSTIN 3(16) FIDUCIARY LIMITED	c EIN-PN 46-2981114-001
a	Plan name	FELTON DENTAL CARE 401(K) PLAN & TRUST	
b	Name of plan sponsor	BRETT R. FELTON, DMD, PC	c EIN-PN 27-0215608-001
a	Plan name	FORRESTALL PLAN	
b	Name of plan sponsor	JEFF FORRESTALL CPA PC	c EIN-PN 58-2514091-333
a	Plan name	FOSTER MARINE CONTRACTORS, INC. 401(K) PLAN	
b	Name of plan sponsor	FOSTER MARINE CONTRACTORS, INC.	c EIN-PN 59-1054370-001
a	Plan name	FOUST FOUNDATIONS 401(K) PLAN	
b	Name of plan sponsor	FOUST FOUNDATIONS, INC.	c EIN-PN 39-2021879-001
a	Plan name	FOX MANAGEMENT REHABILITATION SERVICES LLC, 401(K) PLAN	
b	Name of plan sponsor	FOX MANAGEMENT REHABILITATION SERVICES, LLC	c EIN-PN 22-3729445-001
a	Plan name	SOUTHEAST PERSONNEL LEASING RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	SOUTHEAST PERSONNEL LEASING, INC.	c EIN-PN 59-3298197-333

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name SPALDING HOSIERY SHOPPE, INC. 401(K) PLAN	
b	Name of plan sponsor THE SOCK SHOPPE, SPALDING HOSIERY SHOPPE, INC.	c EIN-PN 58-0899136-001
a	Plan name SPERTUS LANDES & JOSEPHS, LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SPERTUS LANDES & JOSEPHS, LLP	c EIN-PN 46-1531301-001
a	Plan name SPOONER RISK CONTROL SERVICES, INC. MULTIPLE EMPLOYER 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SURETY HR, INC.	c EIN-PN 82-1825780-003
a	Plan name ST. JOHN MEDICAL ENDEAVORS, INC. 401(K) PLAN	
b	Name of plan sponsor ST. JOHN MEDICAL ENDEAVORS, INC.	c EIN-PN 45-2411775-001
a	Plan name HANKOOK & COMPANY ES AMERICA RETIREMENT PLAN	
b	Name of plan sponsor HANKOOK & COMPANY ES AMERICA CORP	c EIN-PN 36-4858427-001
a	Plan name HARBERSON HOLDINGS, INC 401(K) SAVINGS & INVESTMENT PLAN	
b	Name of plan sponsor HARBERSON HOLDINGS INC.	c EIN-PN 56-2438638-002
a	Plan name THE EMPLOYEE 401(K) PLAN	
b	Name of plan sponsor CORPORATE SOLUTIONS, INC.	c EIN-PN 74-2817774-333
a	Plan name HICI 401(K) PLAN	
b	Name of plan sponsor BEAUTY CAREER'S INSTITUTE, INC.	c EIN-PN 65-1025807-001
a	Plan name HIGH PROPERTIES 401(K) PLAN	
b	Name of plan sponsor HIGH PROPERTY MANAGEMENT LLC	c EIN-PN 42-1516913-001
a	Plan name HINKLEY OPTOMETRIC CORPORATION 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor HINKLEY OPTOMETRIC CORPORATION	c EIN-PN 94-2419643-001
a	Plan name THE WORTHE REAL ESTATE GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor THE WORTHE REAL ESTATE GROUP, INC.	c EIN-PN 95-4521084-001
a	Plan name THERAFIT REHAB 401(K) PLAN	
b	Name of plan sponsor THERAFIT REHAB, INC	c EIN-PN 26-2417596-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	ACQUIS CONSULTING GROUP, LLC RETIREMENT PLAN	
b	Name of plan sponsor	ACQUIS CONSULTING GROUP, LLC	c EIN-PN 13-3990791-002
a	Plan name	ACTECH RETIREMENT PLAN	
b	Name of plan sponsor	ADVANCED CRUSHER TECHNOLOGIES, INC. DBA ACTECH, INC.	c EIN-PN 91-1910674-001
a	Plan name	ADC LTD NM 401(K) PLAN	
b	Name of plan sponsor	ADC LTD NM	c EIN-PN 85-0464911-001
a	Plan name	ADC LTD NM UNION 401(K) PLAN	
b	Name of plan sponsor	ADC LTD NM	c EIN-PN 85-0464911-003
a	Plan name	JEFFREY A. WELLER, D.D.S., PC 401(K) PLAN	
b	Name of plan sponsor	JEFFREY A. WELLER, D.D.S., PC	c EIN-PN 36-4052634-777
a	Plan name	JENKINS WOODWORKING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	JENKINS WOODWORKING, INC.	c EIN-PN 05-0419446-001
a	Plan name	JMK GROUP, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	JMK GROUP, INC. DBA THE AGENCY	c EIN-PN 95-4133869-001
a	Plan name	VALLEY ALLERGY CLINIC, PC EMPLOYEES PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	VALLEY ALLERGY CLINIC, PC.	c EIN-PN 38-2209197-001
a	Plan name	VAN DE POEL, LEVY, THOMAS LLP 401(K) PLAN	
b	Name of plan sponsor	VAN DE POEL	c EIN-PN 68-0485819-001
a	Plan name	VENERUSO & ACCINELLI PROFIT SHARING PLAN	
b	Name of plan sponsor	VENERUSO & ACCINELLI, ATTORNEYS AT LAW, LLP	c EIN-PN 81-3879700-001
a	Plan name	VENTERRA REALTY INC. 401(K) PLAN	
b	Name of plan sponsor	VENTERRA REALTY INC.	c EIN-PN 52-2351470-001
a	Plan name	ALLPRO CORPORATION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	ALLPRO CORPORATION	c EIN-PN 59-3347302-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	KELLEHER + HOLLAND GROUP 401(K) PLAN	
b	Name of plan sponsor	KELLEHER + HOLLAND, LLC	c EIN-PN 85-2363788-001
a	Plan name	KIDDER LAW FIRM, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KIDDER LAW FIRM, LLC	c EIN-PN 47-3161211-002
a	Plan name	WALL TO WALL FLOOR COVERING, LLC 401(K) PROFIT AND SHARING PLAN	
b	Name of plan sponsor	WALL TO WALL FLOOR COVERING, LLC	c EIN-PN 23-2904050-001
a	Plan name	WARREN LEX LLP 401(K) PLAN	
b	Name of plan sponsor	WARREN LEX LLP	c EIN-PN 47-1931598-001
a	Plan name	WASEYABEK DEVELOPMENT COMPANY, LLC 401(K) PLAN	
b	Name of plan sponsor	WASEYABEK DEVELOPMENT COMPANY, LLC	c EIN-PN 45-2425291-001
a	Plan name	ADVANCED TEXTILES ASSOCIATION	
b	Name of plan sponsor	ADVANCED TEXTILES ASSOCIATION	c EIN-PN 41-0434683-001
a	Plan name	ALTHON MICRO, INC. 401(K) PLAN	
b	Name of plan sponsor	ALTHON MICRO INC.	c EIN-PN 95-4285664-001
a	Plan name	ALVIN ARELLANO O. D. INC. 401(K) PLAN	
b	Name of plan sponsor	ALVIN ARELLANO O. D. INC.	c EIN-PN 26-0037948-001
a	Plan name	AM-TREE 401(K) PLAN	
b	Name of plan sponsor	AM-TREE DEVELOPMENTAL NURSERY SCHOOL, INC.	c EIN-PN 22-2761331-001
a	Plan name	AMARILLO PEDIATRIC DENTISTRY AND ORTHODONTICS, PA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	AMARILLO PEDIATRIC DENTISTRY AND ORTHODONTICS, PA	c EIN-PN 75-2779027-001
a	Plan name	AMER TECHNOLOGY, INC. 401(K) PLAN	
b	Name of plan sponsor	AMER TECHNOLOGY, INC.	c EIN-PN 74-2828249-001
a	Plan name	AMERICAN CONCRETE EMPLOYEE'S RETIREMENT PLAN	
b	Name of plan sponsor	AMERICAN CONCRETE, INC.	c EIN-PN 58-2060679-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name AXIOM ACQUISITION VENTURES MANAGEMENT 401(K) PLAN	
b	Name of plan sponsor AXIOM ACQUISITION VENTURES MANAGEMENT, LLC	c EIN-PN 85-3091143-001
a	Plan name AXIOM MULTIPLE EMPLOYER 401(K) SAVINGS PLAN	
b	Name of plan sponsor AXIOM HUMAN RESOURCE SOLUTIONS INC.	c EIN-PN 45-2777523-333
a	Plan name AYKO GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor AYKO GROUP LLC	c EIN-PN 47-4533642-001
a	Plan name B&R MOLL, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor B&R MOLL, INC.	c EIN-PN 20-0026172-001
a	Plan name BADGER TRUCK & AUTOMOTIVE GROUP 401(K) PLAN	
b	Name of plan sponsor BADGER TRUCK & AUTOMOTIVE GROUP	c EIN-PN 39-1044839-002
a	Plan name BILL BRADLEY PLUMBING, INC. 401(K) PLAN	
b	Name of plan sponsor BILL BRADLEY PLUMBING, INC.	c EIN-PN 63-0657536-001
a	Plan name BIOTAP MEDICAL 401K RETIREMENT PLAN	
b	Name of plan sponsor VERRALAB JA, LLC	c EIN-PN 45-4430352-001
a	Plan name BLACK OPTICAL LLC 401(K) PLAN	
b	Name of plan sponsor BLACK OPTICAL LLC	c EIN-PN 86-3692802-001
a	Plan name CEDAR RAPIDS OB-GYN SPECIALISTS, PC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CEDAR RAPIDS OB-GYN SPECIALISTS, PC	c EIN-PN 42-1232291-001
a	Plan name CENTRAL CALIFORNIA CHILD DEVELOPMENT SERVICES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor CENTRAL CALIFORNIA CHILD DEVELOPMENT SERVICES, INC.	c EIN-PN 68-0025437-001
a	Plan name COASTAL REALTY ADVISORS, LLC 401(K) PLAN	
b	Name of plan sponsor COASTAL REALTY ADVISORS, LLC	c EIN-PN 86-1887280-001
a	Plan name COASTLINE FACILITIES & MAINTENANCE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DRS DBA COASTLINE FACILITIES & MAINTENANCE	c EIN-PN 82-4678956-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	DIGESTIVE CARE MEDICAL CENTER, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DIGESTIVE CARE MEDICAL CENTER, INC.	c EIN-PN 75-3037371-003
a	Plan name	DIRECT A/V 401K PLAN	
b	Name of plan sponsor	DIRECT A/V	c EIN-PN 95-4735867-003
a	Plan name	DISCOVERY KIDS LEARNING CENTER 401(K) PLAN	
b	Name of plan sponsor	DISCOVERY KIDS LEARNING CENTER, INC.	c EIN-PN 16-1551791-001
a	Plan name	DIXIE SEAL AND STAMP COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DIXIE SEAL AND STAMP COMPANY, INC.	c EIN-PN 58-0222270-001
a	Plan name	ECG, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ECG, INC.	c EIN-PN 22-2944262-001
a	Plan name	ECOLOGY SERVICES, INC. (NON-UNION) 401(K) PLAN	
b	Name of plan sponsor	ECOLOGY SERVICES, INC.	c EIN-PN 52-1633982-002
a	Plan name	ECOLOGY SERVICES, INC. UNION 401(K) PLAN	
b	Name of plan sponsor	ECOLOGY SERVICES, INC.	c EIN-PN 52-1633980-001
a	Plan name	EDWARD LESKE COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	EDWARD LESKE COMPANY	c EIN-PN 22-1506426-001
a	Plan name	FERREIRA POWER SOUTH, LLC 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	FERREIRA POWER SOUTH 401(K)	c EIN-PN 88-2909820-001
a	Plan name	FISHERIES SUPPLY CO. 401(K) PLAN	
b	Name of plan sponsor	FISHERIES SUPPLY CO.	c EIN-PN 91-0222320-001
a	Plan name	FPMA 401(K) MULTIPLE EMPLOYER PLAN	
b	Name of plan sponsor	FLORIDA PODIATRIC MEDICAL ASSOCIATION	c EIN-PN 59-3134492-333
a	Plan name	FRESNO M, LLC 401(K) PLAN	
b	Name of plan sponsor	FRESNO M, LLC	c EIN-PN 38-4235861-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	HATTERAS PRESS, INC. 401(K) RETIREMENT PLAN & TRUST	
b	Name of plan sponsor	HATTERAS PRESS, INC.	c EIN-PN 22-2491250-001
a	Plan name	HAWAII DIAGNOSTIC RADIOLOGY SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor	HAWAII DIAGNOSTIC RADIOLOGY SERVICES, LLC	c EIN-PN 99-0143112-001
a	Plan name	HISTORICAL RESEARCH ASSOCIATES, INC. 401(K) PLAN	
b	Name of plan sponsor	HISTORICAL RESEARCH ASSOCIATES, INC.	c EIN-PN 81-0373761-001
a	Plan name	JOBSOURCE NORTH AMERICA, INC. 401(K) PLAN	
b	Name of plan sponsor	JOBSOURCE NORTH AMERICA, INC.	c EIN-PN 81-5133458-001
a	Plan name	JOHN E. FOX, INC. 401(K) PLAN	
b	Name of plan sponsor	JOHN E. FOX, INC.	c EIN-PN 56-1094403-001
a	Plan name	JOHN MULLEN & COMPANY, INC. 401(K) RETIREMENT SAVINGS PLAN - PLAN A	
b	Name of plan sponsor	JOHN MULLEN & COMPANY, INC.	c EIN-PN 99-0109877-001
a	Plan name	JOLI DIAGNOSTIC, INC. 401(K) PLAN	
b	Name of plan sponsor	JOLI DIAGNOSTIC, INC.	c EIN-PN 16-1454895-001
a	Plan name	KINGDOM TITLE SOLUTIONS, INC. 401(K) PLAN	
b	Name of plan sponsor	KINGDOM TITLE SOLUTIONS, INC.	c EIN-PN 20-8646472-001
a	Plan name	MATTRESS DIRECT 401(K) PLAN	
b	Name of plan sponsor	MATTRESS DIRECT, LLC	c EIN-PN 72-1502440-001
a	Plan name	MAUER CHEVROLET 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	MAUER CHEVROLET	c EIN-PN 26-4600875-777
a	Plan name	MEYBOHM REALTORS, LLC PROFIT SHARING PLAN	
b	Name of plan sponsor	MEYBOHM REALTORS, LLC	c EIN-PN 58-2508705-002
a	Plan name	MICHEL & ASSOCIATES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MICHEL & ASSOCIATES, A PROFESSIONAL CORPORATION	c EIN-PN 27-0313611-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	MICHELL ENTERPRISES, LLC 401K PLAN	
b	Name of plan sponsor	MICHELL ENTERPRISES, LLC	c EIN-PN 20-0354910-001
a	Plan name	MICLEE MANAGEMENT GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor	MICLEE MANAGEMENT GROUP, LLC	c EIN-PN 27-1717856-001
a	Plan name	MIDWAY TRAILERS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MIDWAY TRAILERS, INC.	c EIN-PN 43-1204852-002
a	Plan name	MILLER MAYS & ASSOCIATES LLC 401(K) PLAN	
b	Name of plan sponsor	MILLER MAYS & ASSOCIATES, LLC	c EIN-PN 45-4818677-001
a	Plan name	NPE ENTERPRISE, LLC 401(K) PLAN	
b	Name of plan sponsor	NPE ENTERPRISE, LLC	c EIN-PN 20-8229316-222
a	Plan name	NULLABLE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NULLABLE, INC.	c EIN-PN 47-1671054-001
a	Plan name	OBERG FREIGHT 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	OBERG FREIGHT	c EIN-PN 42-1233437-001
a	Plan name	OKLAHOMA HOME BUILDERS MEP 401(K)	
b	Name of plan sponsor	OKLAHOMA HOME BUILDERS ASSOCIATION	c EIN-PN 73-0683222-333
a	Plan name	P & I 401(K) AND PENSION PLAN	
b	Name of plan sponsor	PERLITER & INGALSBE	c EIN-PN 95-2124423-003
a	Plan name	PROCTEK, INC. RETIREMENT SAVINGS 401(K) PLAN	
b	Name of plan sponsor	PROCTEK, INC.	c EIN-PN 20-8271050-001
a	Plan name	PRODUCT DEVELOPMENT ASSOCIATES RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	PRODUCT DEVELOPMENT ASSOCIATES, INC.	c EIN-PN 41-1791080-001
a	Plan name	PROFESSIONAL EYE ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PROFESSIONAL EYE ASSOCIATES, INC.	c EIN-PN 58-1148820-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name PROFILE RACING INC. EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor PROFILE RACING, INC.	c EIN-PN 22-1921633-001
a	Plan name RALPH BRENNAN RESTAURANT GROUP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor RALPH BRENNAN RESTAURANT GROUP, L.L.C.	c EIN-PN 72-1350467-001
a	Plan name RBK CONSTRUCTION, INC. 401(K) PLAN	
b	Name of plan sponsor RBK CONSTRUCTION INC.	c EIN-PN 52-2277650-001
a	Plan name REGIS FINANCIAL PARTNERS, LLC 401(K) PLAN	
b	Name of plan sponsor REGIS FINANCIAL PARTNERS, LLC	c EIN-PN 20-8083708-001
a	Plan name SITE SUPPLY, INC. 401(K) PLAN	
b	Name of plan sponsor SITE SUPPLY, INC.	c EIN-PN 31-1350146-001
a	Plan name SKYVIEW CHOICE, LLC 401(K) PLAN	
b	Name of plan sponsor SKYVIEW CHOICE, LLC	c EIN-PN 82-3517647-001
a	Plan name STACK VETERINARY HOSPITAL PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor STACK VETERINARY HOSPITAL, PLLC	c EIN-PN 30-0773499-777
a	Plan name STAG INDUSTRIAL MANAGEMENT LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor STAG INDUSTRIAL MANAGEMENT LLC	c EIN-PN 27-3647617-001
a	Plan name STANGENES INDUSTRIES, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor STANGENES INDUSTRIES, INC.	c EIN-PN 94-2247016-001
a	Plan name STARR, DARCY, AND STARR 401(K) PLAN	
b	Name of plan sponsor STARR, DARCY, AND STARR, P.C, CPA'S	c EIN-PN 22-2775971-001
a	Plan name STEUBER CORPORATION 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor STEUBER CORPORATION	c EIN-PN 33-0436736-001
a	Plan name THE JOE N. GUY COMPANY, INCORPORATED SAFE HARBOR 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JOE N. GUY COMPANY, INCORPORATED	c EIN-PN 58-1048254-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name THE MASTER WALL, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor MASTER WALL, INC.	c EIN-PN 58-1777823-002
a	Plan name THOMPSON & HARVEY BAY AREA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THOMPSON & HARVEY BAY AREA, LLC	c EIN-PN 27-1531650-001
a	Plan name TITUS PRECISION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TITUS PRECISION COMPANY	c EIN-PN 87-3842552-222
a	Plan name VIRDI EYE CLINIC, P.C. 401(K) SAVINGS PLAN	
b	Name of plan sponsor VIRDI EYE CLINIC, P.C.	c EIN-PN 36-3313791-002
a	Plan name VISIONSPARK 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor VISIONSPARK	c EIN-PN 45-4202552-001
a	Plan name VN HOME HEALTH CARE RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor VN HOME HEALTH CARE	c EIN-PN 47-0921521-001
a	Plan name WASHER HILL LIPSCOMB CABANISS ARCHITECTURE PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor WASHER HILL LIPSCOMB CABANISS ARCHITECTURE LLC	c EIN-PN 86-1091681-001
a	Plan name AMERICAN MARINE SERVICES GROUP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor AMERICAN WORKBOATS, INC.	c EIN-PN 99-0164323-001
a	Plan name AMERICAN TEXTILE EMPLOYEES' SAVINGS PLAN	
b	Name of plan sponsor AMERICAN TEXTILE MAINTENANCE COMPANY	c EIN-PN 95-2076802-004
a	Plan name AMERICARE, INC. 401(K) PLAN	
b	Name of plan sponsor AMERICARE, INC.	c EIN-PN 11-2608743-002
a	Plan name BMR PARTNERS, INC. 401(K) PLAN	
b	Name of plan sponsor BMR PARTNERS, INC.	c EIN-PN 47-3763181-222
a	Plan name BOARDMAN, LLC 401(K) PLAN	
b	Name of plan sponsor BOARDMAN, LLC	c EIN-PN 73-1470937-003

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name BOGHOSIAN RAISIN PACKING COMPANY, INC. 401(K)	
b	Name of plan sponsor BOGHOSIAN RAISIN PACKING COMPANY, INC.	c EIN-PN 94-2175344-002
a	Plan name COLUMBUS PACIFIC DEVELOPMENT LLC 401(K) PLAN	
b	Name of plan sponsor COLUMBUS PACIFIC DEVELOPMENT LLC	c EIN-PN 81-3151427-001
a	Plan name COLUMBUS PACIFIC PROPERTIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COLUMBUS PACIFIC PROPERTIES, INC.	c EIN-PN 31-1480429-003
a	Plan name COMCARE 401(K) PLAN	
b	Name of plan sponsor COMCARE PRIMARY MEDICAL GROUP	c EIN-PN 46-1164827-001
a	Plan name EGOODS SUPPLY, INC. 401(K) PLAN	
b	Name of plan sponsor EGOODS SUPPLY, INC.	c EIN-PN 47-3500962-001
a	Plan name ELEVATED SOLAR PERFORMANCE, INC. 401K PLAN	
b	Name of plan sponsor ELEVATED SOLAR PERFORMANCE, INC.	c EIN-PN 81-3830390-001
a	Plan name ELEVATED TECHNOLOGIES, INC. 401(K) PLAN	
b	Name of plan sponsor ELEVATED TECHNOLOGIES INC.	c EIN-PN 38-3146138-001
a	Plan name GANDEE & ASSOCIATES, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor GANDEE & ASSOCIATES, INC.	c EIN-PN 31-1080359-001
a	Plan name HOWARD & ASSOCIATES INTERNATIONAL, INC 401(K) PLAN	
b	Name of plan sponsor HOWARD & ASSOCIATES INTERNATIONAL, INC	c EIN-PN 72-1290834-001
a	Plan name HUDDLE HOUSE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HUDDLE HOUSE, INC.	c EIN-PN 58-0916623-003
a	Plan name HUDSON COMMUNITY ENTERPRISES, INC. 401(K) PLAN	
b	Name of plan sponsor HUDSON COMMUNITY ENTERPRISES, INC.	c EIN-PN 22-1629147-001
a	Plan name HUDSON CONSTRUCTION, INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor HUDSON CONSTRUCTION, INC.	c EIN-PN 25-1655394-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name IAI AMERICA, INC. 401(K) SALARY REDUCTION PLAN	
b	Name of plan sponsor IAI AMERICA, INC.	c EIN-PN 33-0337859-001
a	Plan name KTX - AMERICA, INC. 401(K) PLAN	
b	Name of plan sponsor KTX - AMERICA, INC.	c EIN-PN 30-0031143-001
a	Plan name KUPFERER BROTHERS ORNAMENTAL IRON WORKS INC. 401(K) PLAN	
b	Name of plan sponsor KUPFERER BROTHERS ORNAMENTAL IRON WORKS INC	c EIN-PN 43-0709304-001
a	Plan name LA MADE CREATIVE 401(K) PLAN	
b	Name of plan sponsor LA MADE CREATIVE, INC.	c EIN-PN 47-1699482-001
a	Plan name MJR GROUP LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MJR GROUP, LLC	c EIN-PN 38-3367945-001
a	Plan name MONARCH SALES 401(K) PLAN	
b	Name of plan sponsor MONARCH SALES, LTD., INC.	c EIN-PN 65-0011355-001
a	Plan name PAOLI LAW FIRM, P.C. 401(K) PLAN	
b	Name of plan sponsor PAOLI LAW FIRM, P.C.	c EIN-PN 84-1384608-001
a	Plan name PARRAID 401(K) PLAN	
b	Name of plan sponsor PARRAID, LLC	c EIN-PN 84-3537759-001
a	Plan name PASADENA CHAMBER OF COMMERCE MEMBER RETIREMENT PLAN	
b	Name of plan sponsor CHAMBER OF COMMERCE AND CIVIC ASSOCIATION OF PASADENA	c EIN-PN 95-0616125-002
a	Plan name RELIABLE CONTROLS RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor RELIABLE CONTROLS CORPORATION	c EIN-PN 87-0630670-001
a	Plan name RESA POWER, LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor RESA POWER, LLC	c EIN-PN 45-2810331-001
a	Plan name RETIRE READY 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor RETIRE READY	c EIN-PN 20-1826963-333

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name SUMMERTOWN METALS 401(K) PLAN	
b	Name of plan sponsor SUMMERTOWN METALS, LLC.	c EIN-PN 84-1705951-001
a	Plan name TONSA AUTOMOTIVE, INC.	
b	Name of plan sponsor TONSA AUTOMOTIVE, INC.	c EIN-PN 11-2577843-001
a	Plan name TOP HAT UNIFORM 401(K) PLAN	
b	Name of plan sponsor TOP HAT UNIFORM, INC.	c EIN-PN 11-1979505-001
a	Plan name WILD, CARTER AND TIPTON A PROFESSIONAL CORP 401(K) PLAN	
b	Name of plan sponsor WILD, CARTER AND TIPTON A PROFESSIONAL CORP	c EIN-PN 94-2589967-002
a	Plan name WILLE ELECTRIC SUPPLY CO., INC. 401(K) PLAN	
b	Name of plan sponsor WILLE ELECTRIC SUPPLY CO., INC.	c EIN-PN 94-1433043-001
a	Plan name WINDES, INC. RETIREMENT TRUST	
b	Name of plan sponsor WINDES, INC.	c EIN-PN 95-3001179-016
a	Plan name AMICABLE HEALTHCARE 401(K) PLAN	
b	Name of plan sponsor AMICABLE HEALTHCARE, INC.	c EIN-PN 91-1814335-001
a	Plan name ANDERSON, JULIAN & HULL, LLP 401(K) PLAN	
b	Name of plan sponsor ANDERSON, JULIAN & HULL, LLP	c EIN-PN 82-0504369-001
a	Plan name ANGELIC HEALTH 401(K) PLAN	
b	Name of plan sponsor ANGELIC PRACTICE MANAGEMENT, LLC	c EIN-PN 82-5301108-001
a	Plan name ANGLIN FLEWELLING RASMUSSEN CAMPBELL & TRYTTEN 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ANGLIN FLEWELLING RASMUSSEN CAMPBELL & TRYTTEN LLP	c EIN-PN 95-4887678-001
a	Plan name BOONE KARLBERG EMPLOYEE PROFIT SHARING RETIREMENT PLAN	
b	Name of plan sponsor BOONE KARLBERG P.C.	c EIN-PN 81-0522567-001
a	Plan name COMPTON CONSTRUCTION 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor COMPTON CONSTRUCTION	c EIN-PN 27-5155259-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	COMPUTER EXCHANGE, LTD. 401(K) PLAN	
b	Name of plan sponsor	COMPUTER EXCHANGE, LTD.	c EIN-PN 58-1649904-003
a	Plan name	CONSOLIDATED EMPLOYER SERVICES 401(K) PLAN	
b	Name of plan sponsor	CONSOLIDATED EMPLOYER SERVICES, INC.	c EIN-PN 47-2468992-001
a	Plan name	ELK GROVE RANCH, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ELK GROVE RANCH, LLC	c EIN-PN 95-2733525-001
a	Plan name	GARZA PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	GARZA INDUSTRIES, INC.	c EIN-PN 33-0505475-001
a	Plan name	GASKINS LECRAW 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SOVEREIGNS ENGINEERING & SURVEYING HOLDINGS INC DBA GASKINS LECRAW	c EIN-PN 58-1500550-002
a	Plan name	IAMIC MEMBERSHIP RETIREMENT OPTION	
b	Name of plan sponsor	ILLINOIS ASSOCIATION OF MUTUAL INSURANCE COMPANIES	c EIN-PN 36-1252847-002
a	Plan name	INCLUSIVE HOUSING RESOURCES 401(K) PLAN	
b	Name of plan sponsor	INCLUSIVE HOUSING RESOURCES	c EIN-PN 84-3657368-001
a	Plan name	INNOVANT, INC. RETIREMENT PLAN	
b	Name of plan sponsor	INNOVANT, INC.	c EIN-PN 45-0499207-001
a	Plan name	LASSEN LAND COMPANY 401(K) PLAN	
b	Name of plan sponsor	ORLAND ALMONDS ACQUISITION COMPANY, LLC	c EIN-PN 83-2450302-001
a	Plan name	LEADING EDGE HUMAN RESOURCES 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	LEADING EDGE LEADERSHIP GROUP LLC	c EIN-PN 80-0737702-001
a	Plan name	LEGACY SENIOR LIVING, LLC 401(K) PLAN	
b	Name of plan sponsor	LEGACY SENIOR LIVING, LLC	c EIN-PN 20-5770211-001
a	Plan name	MONROVIA CHAMBER MEMBER 401(K) PLAN	
b	Name of plan sponsor	MONROVIA CHAMBER OF COMMERCE	c EIN-PN 95-1019540-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name MONTESSORI INTERNATIONAL ACADEMY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MADOKA INTERNATIONAL, INC. DBA MONTESSORI INTERNATIONAL ACADEMY	c EIN-PN 27-3946841-001
a	Plan name MORAN INDUSTRIES INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MORAN INDUSTRIES INC	c EIN-PN 23-2711171-001
a	Plan name PATRICKS GLASS, INC. 401(K) PLAN	
b	Name of plan sponsor PATRICK'S GLASS, INC.	c EIN-PN 27-5286958-001
a	Plan name PATRIOT HEALTH PARTNERS INC. MULTIPLE EMPLOYER PLAN	
b	Name of plan sponsor PATRIOT HEALTH PARTNERS INC.	c EIN-PN 84-1755108-001
a	Plan name PAYDAY EMPLOYER 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PAYDAY, INC.	c EIN-PN 85-0413891-003
a	Plan name RFC RETIREMENT PLAN	
b	Name of plan sponsor ROMANOFF FLOOR COVERING, INC.	c EIN-PN 58-1349072-001
a	Plan name RICE ENTERPRISES LLC 401(K) PLAN	
b	Name of plan sponsor RICE ENTERPRISES, LLC	c EIN-PN 27-1171330-002
a	Plan name SURGICAL ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SURGICAL ASSOCIATES, INC.	c EIN-PN 99-0287995-002
a	Plan name SUSTAINABLEHR RETIREMENT PLAN	
b	Name of plan sponsor SUSTAINABLEHR PEO, LLC	c EIN-PN 84-2747571-001
a	Plan name TOWER INSURANCE ASSOCIATES, INC 401(K) PSP	
b	Name of plan sponsor TOWER INSURANCE ASSOCIATES, INC	c EIN-PN 95-2129075-001
a	Plan name TOYOTA BOSHOKU AKI USA, LLC 401(K) PLAN	
b	Name of plan sponsor TOYOTA BOSHOKU AKI USA, LLC	c EIN-PN 84-2857865-001
a	Plan name TREVOR K IRISH O.D. INC. 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor TREVOR K IRISH O.D. INC.	c EIN-PN 27-1758327-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	WISE AUTO GROUP 401(K) MULTIPLE EMPLOYER PLAN	
b	Name of plan sponsor	LLOYD A WISE MOTOR INC	c EIN-PN 26-2658328-001
a	Plan name	WORKCENTRIC RETIREMENT SAVINGS PROGRAM	
b	Name of plan sponsor	WORKCENTRIC, LLC	c EIN-PN 84-3894931-333
a	Plan name	MRC CREATIONS, LLC 401(K)	
b	Name of plan sponsor	MRC CREATIONS, LLC	c EIN-PN 46-4236344-002
a	Plan name	MSABC MULTIPLE EMPLOYER 401(K) PLAN	
b	Name of plan sponsor	MISSISSIPPI ASSOCIATED BUILDERS & CONTRACTORS, INC.	c EIN-PN 64-0415733-333
a	Plan name	MULBERRY COLLABORATIVE CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor	MULBERRY COLLABORATIVE CONSTRUCTION	c EIN-PN 82-3595383-001
a	Plan name	NATIONAL AUTO CARE 401(K) PLAN	
b	Name of plan sponsor	NATIONAL AUTO CARE CORP.	c EIN-PN 31-1115893-001
a	Plan name	RIDGEMONT EQUITY PARTNERS 401(K) PLAN	
b	Name of plan sponsor	RIDGEMONT EQUITY PARTNERS	c EIN-PN 27-2566095-001
a	Plan name	RKPL, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	RKPL INC.	c EIN-PN 34-1728279-001
a	Plan name	SYSTEMS, LLC RETIREMENT PLAN	
b	Name of plan sponsor	C SYSTEMS, LLC	c EIN-PN 20-1820942-002
a	Plan name	TAG GOALPATH SOLUTIONS 1 401(K) RETIREMENT PLAN EXCHANGE	
b	Name of plan sponsor	TAG RESOURCES, LLC	c EIN-PN 62-1874767-001
a	Plan name	TRI STAR SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor	TRI STAR SERVICES, LLC	c EIN-PN 62-1828852-001
a	Plan name	TRIHIX ATHLETIC APPAREL LLC 401(K) P/S PLAN	
b	Name of plan sponsor	TRIHIX ATHLETIC APPAREL LLC	c EIN-PN 46-4045923-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	TRUE NORTH CUSTOM PUBLISHING, LLC 401(K) PLAN	
b	Name of plan sponsor	TRUE NORTH CUSTOM PUBLISHING, LLC.	c EIN-PN 62-1764489-001
a	Plan name	ZIEHL-ABEGG, INC. 401(K) PLAN	
b	Name of plan sponsor	ZIEHL-ABEGG, INC.	c EIN-PN 20-0338305-001
a	Plan name	ZYNERGIA HR 401(K) PLAN	
b	Name of plan sponsor	SYNERGY HR LLC	c EIN-PN 81-3943870-002
a	Plan name	ANTIOCHIAN ORTHODOX CHRISTIAN ARCHDIOCESE 401(K) PLAN	
b	Name of plan sponsor	ANTIOCHIAN ORTHODOX ARCHDIOCESE	c EIN-PN 11-6007930-001
a	Plan name	ARACOR, INC. 401 (K) PLAN	
b	Name of plan sponsor	ARACOR, INC.	c EIN-PN 74-1480428-002
a	Plan name	BRYAN CHEVROLET, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BRYAN CHEVROLET LLC	c EIN-PN 72-0477660-001
a	Plan name	BRYLAK & ASSOCIATES 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	BRYLAK & ASSOCIATES, LLC	c EIN-PN 37-1510264-001
a	Plan name	BUFFALO RIVER HEALTH CARE, LLC 401(K) PLAN	
b	Name of plan sponsor	BUFFALO RIVER HEALTH CARE, LLC	c EIN-PN 47-0896423-001
a	Plan name	CONTINENTAL EXPRESS, INC. 401(K) PLAN	
b	Name of plan sponsor	CONTINENTAL EXPRESS, INC	c EIN-PN 34-1434240-001
a	Plan name	CORPORATE BUILDING SERVICES INC. 401(K) PLAN	
b	Name of plan sponsor	CORPORATE BUILDING SERVICES INC	c EIN-PN 14-1732520-001
a	Plan name	EMPLOYER FLEXIBLE 401(K) PLAN	
b	Name of plan sponsor	EMPLOYER FLEXIBLE HR, LLC	c EIN-PN 27-4406361-333
a	Plan name	EMPLOYERS RESOURCE 401(K) PLAN	
b	Name of plan sponsor	EMPLOYERS RESOURCE	c EIN-PN 33-0688056-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	ENDURANCE BUILDING SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	ENDURANCE BUILDING SYSTEMS, INC.	c EIN-PN 92-3467996-001
a	Plan name	ENGINEERING DESIGN TECHNOLOGIES, INC. 401(K) PLAN	
b	Name of plan sponsor	ENGINEERING DESIGN TECHNOLOGIES, INC.	c EIN-PN 58-2034541-001
a	Plan name	INSPIRE PR GROUP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	INSPIRE PR GROUP	c EIN-PN 47-1101618-001
a	Plan name	INSPIRING HEALTHCARE RESOURCES 401(K) PLAN	
b	Name of plan sponsor	INSPIRING HEALTHCARE RESOURCES, LLC	c EIN-PN 45-0663989-001
a	Plan name	INSURANCE PROFESSIONALS OF TENNESSEE, LLC 401(K) PLAN	
b	Name of plan sponsor	INSURANCE PROFESSIONALS OF TENNESSEE, LLC	c EIN-PN 20-1340121-001
a	Plan name	LEGON FODIMAN & SUDDUTH, P.A. PROFIT SHARING PLAN	
b	Name of plan sponsor	LEGON FODIMAN & SUDDUTH, P.A.	c EIN-PN 65-0520887-001
a	Plan name	LEIGHTON MCGINN COMPANY PROFIT SHARING PLAN	
b	Name of plan sponsor	LEIGHTON MCGINN COMPANY	c EIN-PN 65-0352005-777
a	Plan name	LIBERTY RETIREMENT PLAN EXCHANGE	
b	Name of plan sponsor	PLAN PROFESSIONALS, LLC D/B/A NPPG PLAN PROFESSIONALS	c EIN-PN 85-3213245-777
a	Plan name	AOW CONSTRUCTION LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	AOW CONSTRUCTION LLC	c EIN-PN 83-2875089-001
a	Plan name	CHARLES E. THOMAS COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CHARLES E. THOMAS COMPANY, INC.	c EIN-PN 95-2280159-001
a	Plan name	EDISON MEDIA RESEARCH, INC. 401(K) PSP	
b	Name of plan sponsor	EDISON MEDIA RESEARCH, INC.	c EIN-PN 22-3305873-001
a	Plan name	FUSION EMPLOYER SERVICES RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	FUSION EMPLOYER SERVICES, LLC	c EIN-PN 13-4337327-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	JOE TANNER & ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	JOE TANNER & ASSOCIATES, INC.	c EIN-PN 58-2339665-001
a	Plan name	MOOREFIELD CONSTRUCTION, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MOOREFIELD CONSTRUCTION, INC.	c EIN-PN 95-3419477-002
a	Plan name	PAMPALONE INSURANCE AGENCY PROFIT SHARING PLAN	
b	Name of plan sponsor	PAMPALONE INSURANCE AGENCY	c EIN-PN 35-0958304-001
a	Plan name	PAOLI LAW FIRM, P.C. 401(K) PLAN	
b	Name of plan sponsor	PAOLI LAW FIRM, P.C.	c EIN-PN 84-1384608-001
a	Plan name	PARTNERSHIP PROJECT INC. 401(K) / PROFIT SHARING PLAN	
b	Name of plan sponsor	PARTNERSHIP PROJECT INC. DBA COMMUNITY BUILDERS	c EIN-PN 68-0431719-001
a	Plan name	PEDIATRIC MEDICINE, PLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	PEDIATRIC MEDICINE, PLC	c EIN-PN 03-0230997-001
a	Plan name	SHANGRI-LA HOTELS INTERNATIONAL, INC. U.S. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	SHANGRI-LA INTERNATIONAL HOTELS, INC.	c EIN-PN 95-3876666-001
a	Plan name	XGS 401(K)	
b	Name of plan sponsor	XG SCIENCES INC.	c EIN-PN 20-4998896-001
a	Plan name	ZAUDERER ASSOCIATES, INC. 401(K) PLAN	
b	Name of plan sponsor	ZAUDERER ASSOCIATES, INC.	c EIN-PN 13-1820511-001
a	Plan name	LEGACY SENIOR LIVING, LLC 401(K) PLAN	
b	Name of plan sponsor	LEGACY SENIOR LIVING, LLC	c EIN-PN 20-5770211-001
a	Plan name	ABC OF IOWA RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ABC OF IOWA	c EIN-PN 42-1029016-001
a	Plan name	MST FINANCIAL SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor	MST FINANCIAL SOLUTIONS, LLC	c EIN-PN 47-2363345-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	ALL-AMERICAN FIRE EQUIPMENT 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	ALL-AMERICAN FIRE EQUIPMENT INC.	c EIN-PN 31-1381503-001
a	Plan name	NEW YORK ACCESSORY GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	NEW YORK ACCESSORY GROUP, INC.	c EIN-PN 13-4175959-002
a	Plan name	ASSISTANCE LEAGUE OF LOS ANGELES 401(K) PLAN	
b	Name of plan sponsor	ASSISTANCE LEAGUE OF LOS ANGELES	c EIN-PN 95-1641960-001
a	Plan name	ASSOCIATED GENERAL CONTRACTORS OF AMERICA, SAN DIEGO CHAPTER, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ASSOCIATED GENERAL CONTRACTORS OF AMERICA, SAN DIEGO CHAPTER, INC.	c EIN-PN 95-1951119-001
a	Plan name	PEREGRINE 401(K) PLAN	
b	Name of plan sponsor	PEREGRINE GLOBAL SERVICES CORPORATION	c EIN-PN 84-4298312-001
a	Plan name	PERSONAL HEALTHCARE MANAGEMENT, LLC 401(K) PLAN	
b	Name of plan sponsor	PERSONAL HEALTHCARE MANAGEMENT, LLC 401(K) PLAN	c EIN-PN 27-3841580-001
a	Plan name	PETROLEUM MARKETING EQUIPMENT 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ACT EQUIPMENT SALES, INC. DBA PETROLEUM MARKETING EQUIPMENT	c EIN-PN 95-4442409-001
a	Plan name	RIVIERA FINANCE, LLC 401(K) PLAN	
b	Name of plan sponsor	RIVIERA FINANCE, LLC	c EIN-PN 95-4572313-001
a	Plan name	ROGERS & TENBROOK, INC. 401(K) PLAN	
b	Name of plan sponsor	ROGERS & TENBROOK, INC.	c EIN-PN 16-1246036-001
a	Plan name	BRIGHTON ESCROW, INC. 401(K) PLAN	
b	Name of plan sponsor	BRIGHTON ESCROW, INC.	c EIN-PN 95-2886413-001
a	Plan name	CLEAR CREEK ENDODONTICS, LLC 401(K) PLAN	
b	Name of plan sponsor	CLEAR CREEK ENDODONTICS, LLC	c EIN-PN 06-1834691-001
a	Plan name	CLEAR PEO, LLC 401(K) SAVINGS PLAN	
b	Name of plan sponsor	CLEAR PEO, LLC	c EIN-PN 35-2535759-333

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	SHOWALTER CONSTRUCTION COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SHOWALTER CONSTRUCTION COMPANY, INC.	c EIN-PN 56-1525236-001
a	Plan name	SQUARE ENIX, INC. 401(K) PLAN	
b	Name of plan sponsor	SQUARE ENIX, INC.	c EIN-PN 91-1442488-001
a	Plan name	ELLENOS 401(K) PLAN	
b	Name of plan sponsor	REAL GREEK LLC	c EIN-PN 45-5592934-001
a	Plan name	EMPLOY SOURCE, INC. 401(K) PLAN	
b	Name of plan sponsor	EMPLOY SOURCE, INC.	c EIN-PN 27-0477134-333
a	Plan name	TOPCO SALES 401(K) PLAN	
b	Name of plan sponsor	TOPCO SALES	c EIN-PN 45-5582989-001
a	Plan name	TOWER HEMATOLOGY ONCOLOGY MEDICAL GROUP 401(K) PLAN	
b	Name of plan sponsor	TOWER HEMATOLOGY ONCOLOGY MEDICAL GROUP	c EIN-PN 95-4363145-001
a	Plan name	TRI STAR SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor	TRI STAR SERVICES, LLC	c EIN-PN 62-1828852-001
a	Plan name	TRIUMPH HOSPITALITY GROUP PLAN	
b	Name of plan sponsor	TRIUMPH HOSPITALITY GROUP, LLC	c EIN-PN 13-4201198-001
a	Plan name	TRUE NORTH CUSTOM PUBLISHING, LLC 401(K) PLAN	
b	Name of plan sponsor	TRUE NORTH CUSTOM PUBLISHING, LLC.	c EIN-PN 62-1764489-001
a	Plan name	VENERUSO & ACCINELLI PROFIT SHARING PLAN	
b	Name of plan sponsor	VENERUSO & ACCINELLI, ATTORNEYS AT LAW, LLP	c EIN-PN 81-3879700-001
a	Plan name	FC 401(K) PLAN	
b	Name of plan sponsor	FORMATION CAPITAL, LLC	c EIN-PN 23-2986268-001
a	Plan name	GILCHRIST TINGLEY, P.C. PROFIT SHARING/401(K) PLAN	
b	Name of plan sponsor	GILCHRIST TINGLEY, P.C.	c EIN-PN 10-0001062-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	GLOBAL BROADBAND SOLUTIONS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GLOBAL BROADBAND SOLUTIONS, LLC	c EIN-PN 54-1871592-001
a	Plan name	GMH ASSOCIATES, INC. 401(K) PLAN	
b	Name of plan sponsor	GMH ASSOCIATES, INC.	c EIN-PN 23-2618889-001
a	Plan name	INNOVANT, INC. RETIREMENT PLAN	
b	Name of plan sponsor	INNOVANT, INC.	c EIN-PN 45-0499207-001
a	Plan name	KELLIHER/SAMETS, LTD. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KELLIHER/SAMETS, LTD.	c EIN-PN 03-0270393-001
a	Plan name	GPDDC, LLC 401 (K) PLAN	
b	Name of plan sponsor	GRAMERCY PARK DIGESTIVE DISEASE CENTER, LLC	c EIN-PN 04-3769350-001
a	Plan name	INTEGRATED LEADERSHIP SYSTEMS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	INTEGRATED LEADERSHIP SYSTEMS	c EIN-PN 94-3462501-001
a	Plan name	INVO PEO, INC. 401(K) PLAN	
b	Name of plan sponsor	INVO PEO, INC.	c EIN-PN 27-1067748-001
a	Plan name	LIFARS RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	LIFARS LLC	c EIN-PN 46-0875969-001
a	Plan name	LIVING CARE LIFESTYLES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MILLENNIUM ADVISORS, INC. DBA LIVING CARE LIFESTYLES	c EIN-PN 91-1644545-001
a	Plan name	LOFTIN DENTAL 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TODD A. LOFTIN DDS A DENTAL CORPORATION, INC.	c EIN-PN 45-5257377-001
a	Plan name	ACF WEST 401(K) PLAN	
b	Name of plan sponsor	NW GEOSYNTHETICS, INC. DBA ACF WEST, INC.	c EIN-PN 93-1052778-001
a	Plan name	ACQUIS CONSULTING GROUP, LLC RETIREMENT PLAN	
b	Name of plan sponsor	ACQUIS CONSULTING GROUP, LLC	c EIN-PN 13-3990791-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	ALSAHLANI AND ALBAZAZZ DENTAL, LTD. PROFIT SHARING PLAN	
b	Name of plan sponsor	ALSAHLANI AND ALBAZAZZ DENTAL, LTD.	c EIN-PN 36-3365578-001
a	Plan name	NOTTHOFF ENGINEERING L.A., INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	NOTTHOFF ENGINEERING L.A., INC.	c EIN-PN 26-4530407-001
a	Plan name	ATLANTIC CONCRETE COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	ATLANTIC CONCRETE COMPANY, INC.	c EIN-PN 51-0171445-001
a	Plan name	PINNACLE WALL SYSTEMS 401(K) PLAN	
b	Name of plan sponsor	PINNACLE WALL SYSTEMS, INC.	c EIN-PN 26-4353827-001
a	Plan name	PLANNED RETIREMENT CONSULTANTS & ADMINISTRATORS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	PLANNED RETIREMENT CONSULTANTS & ADMINISTRATORS, LLC	c EIN-PN 22-2116608-002
a	Plan name	PLANSOURCE FINANCIAL SERVICES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	PLANSOURCE FINANCIAL SERVICES, INC.	c EIN-PN 59-3707284-001
a	Plan name	S & S INDUSTRIAL SUPPLY, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	S & S INDUSTRIAL SUPPLY, INC.	c EIN-PN 38-1914712-001
a	Plan name	BUILDING INDUSTRY ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor	BUILDING INDUSTRY ASSOCIATION OF CLARK COUNTY	c EIN-PN 91-0906923-001
a	Plan name	SMALL BUSINESS RETIREMENT PLAN EXCHANGE	
b	Name of plan sponsor	SMALL BUSINESS RETIREMENT PLAN EXCHANGE	c EIN-PN 45-4813650-001
a	Plan name	CROWN CRAFTS, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	CROWN CRAFTS, INC.	c EIN-PN 58-0678148-002
a	Plan name	CRUICKSHANK, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CRUICKSHANK, INC.	c EIN-PN 58-1409679-001
a	Plan name	EPIC HEALTHCARE MANAGEMENT, LLC 401(K) PLAN	
b	Name of plan sponsor	EPIC HEALTHCARE MANAGEMENT, LLC	c EIN-PN 27-4757579-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a Plan name	TWIN PEAKS, INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	TWIN PEAKS, INC.	c EIN-PN 11-3106466-001
a Plan name	ULTRA POWER CORP. 401(K) PLAN	
b Name of plan sponsor	ULTRA POWER CORP.	c EIN-PN 14-1576983-002
a Plan name	VISIONARY PAYROLL SOLUTIONS, LLC 401(K) PLAN	
b Name of plan sponsor	VISIONARY PAYROLL SOLUTIONS, LLC	c EIN-PN 45-4077661-001
a Plan name	W. BRUCE CLARK M.D. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	W. BRUCE CLARK, M.D., P.C.	c EIN-PN 14-1659231-002
a Plan name	W.A. HAMMOND DRIERITE COMPANY 401(K) RETIREMENT PLAN	
b Name of plan sponsor	W.A. HAMMOND DRIERITE COMPANY, L.T.D.	c EIN-PN 31-1140535-002
a Plan name	FILCO INDUSTRIES, INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	FILCO INDUSTRIES, INC.	c EIN-PN 20-4431613-001
a Plan name	FIREMEN'S ASSOCIATION OF THE STATE OF NEW YORK 401(K) RETIREMENT PLAN	
b Name of plan sponsor	FIREMEN'S ASSOCIATION OF THE STATE OF NEW YORK	c EIN-PN 13-5604180-002
a Plan name	FIRST FREIGHT TRANSPORT, INC. 401(K) PLAN	
b Name of plan sponsor	FIRST FREIGHT TRANSPORT, INC.	c EIN-PN 16-1227272-001
a Plan name	ADMINISTRATIVE ONESOURCE 401(K) PLAN	
b Name of plan sponsor	ADMINISTRATIVE ONESOURCE, LLC	c EIN-PN 20-0714959-001
a Plan name	AGC SELECT 401(K)	
b Name of plan sponsor	AGC SELECT 401(K)	c EIN-PN 74-0490820-002
a Plan name	AGS SERVICES, LLC 401(K) PLAN	
b Name of plan sponsor	AGS SERVICES, LLC	c EIN-PN 83-2603713-001
a Plan name	AMERICAN ONE SOURCE, INC. MEP 401(K) PLAN	
b Name of plan sponsor	AMERICAN ONE SOURCE, INC.	c EIN-PN 71-0934616-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name AMIEE LYNN, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor AMIEE LYNN, INC.	c EIN-PN 65-1160566-001
a	Plan name BALKAN MANUFACTURING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BALKAN MANUFACTURING, INC.	c EIN-PN 94-2574978-001
a	Plan name BEARDOWADAMS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BEARDOWADAMS, INC.	c EIN-PN 99-0372789-001
a	Plan name COMMERCIAL SPECIALTY TRUCK HOLDINGS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COMMERCIAL SPECIALTY TRUCK HOLDINGS, LLC	c EIN-PN 46-5167460-001
a	Plan name COMMUNITY FOUNDATION OF TAMPA 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor COMMUNITY FOUNDATION OF TAMPA	c EIN-PN 59-3001853-777
a	Plan name COMSTOCK, CROSSER & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor COMSTOCK, CROSSER & ASSOCIATES DEVELOPMENT COMPANY, LLC	c EIN-PN 95-4665584-001
a	Plan name CONSOLIDATED PERSONNEL SERVICES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CPS, INC.	c EIN-PN 86-0745045-001
a	Plan name DAY SECKLER LLP 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor DAY SECKLER LLP	c EIN-PN 26-2310586-001
a	Plan name EPOCH SOLUTIONS GROUP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor EPOCH SOLUTIONS GROUP LLC	c EIN-PN 20-4472485-001
a	Plan name EVENTS.COM 401(K) PLAN	
b	Name of plan sponsor EVENTS.COM	c EIN-PN 80-0488603-001
a	Plan name EXAKTIME INNOVATIONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor EXAKTIME INNOVATIONS, INC.	c EIN-PN 01-0552589-001
a	Plan name FLASH RAISE FUNDING 401(K) PLAN	
b	Name of plan sponsor FLASH RAISE FUNDING, LLC	c EIN-PN 87-2600294-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	FLOW-FX PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	ORTHOPEDIC GENERATIONS, LLC DBA FLOW-FX, LLC	c EIN-PN 37-1650185-001
a	Plan name	FOCUS HOPE 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	FOCUS HOPE	c EIN-PN 38-1948285-002
a	Plan name	HAIGHT LAW GROUP, PC 401(K) PLAN	
b	Name of plan sponsor	HAIGHT LAW GROUP, PC	c EIN-PN 20-8962303-001
a	Plan name	HANKIN & MAZEL 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HANKIN & MAZEL, PLLC	c EIN-PN 01-0647238-001
a	Plan name	J. MILANO CO., INC. 401(K) PLAN	
b	Name of plan sponsor	J. MILANO CO., INC.	c EIN-PN 94-1653879-001
a	Plan name	KRUSE & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor	KRUSE & ASSOCIATES, INC.	c EIN-PN 73-1444019-001
a	Plan name	LA MADE CREATIVE 401(K) PLAN	
b	Name of plan sponsor	LA MADE CREATIVE, INC.	c EIN-PN 47-1699482-001
a	Plan name	LANDIVAR 401(K) PLAN	
b	Name of plan sponsor	LANDIVAR & ASSOCIATES, LLC	c EIN-PN 75-3088910-001
a	Plan name	M&W DISTRIBUTION SERVICES, INC. TAX-FAVORED SAVINGS TRUST	
b	Name of plan sponsor	M&W DISTRIBUTION SERVICES, INC.	c EIN-PN 58-1164068-001
a	Plan name	NATIONAL RETIREMENT PLAN EXCHANGE	
b	Name of plan sponsor	NATIONAL RETIREMENT PLAN EXCHANGE	c EIN-PN 45-4813651-001
a	Plan name	NEFI	
b	Name of plan sponsor	THE NEW ENGLAND FUEL INSTITUTE/EDUCATIONAL FOUNDATION	c EIN-PN 04-2078321-001
a	Plan name	NEW CARLTON REHAB & NURSING 401(K) PLAN	
b	Name of plan sponsor	NEW CARLTON REHAB & NURSING CENTER, LLC	c EIN-PN 83-0363137-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name O.B. BUILDERS, INC. 401(K) PLAN	
b	Name of plan sponsor O.B. BUILDERS, INC.	c EIN-PN 56-2095163-001
a	Plan name POLSINELLO FUELS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor POLSINELLO FUELS, INC.	c EIN-PN 14-1495096-002
a	Plan name POWERBUILD CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor POWERBUILD CONSTRUCTION, LLC	c EIN-PN 81-1737022-001
a	Plan name SPECIALIZED ENGINEERING, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SPECIALIZED ENGINEERING, LLC.	c EIN-PN 68-0454280-001
a	Plan name SPEECH & VOICE SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor SPEECH & VOICE SOLUTIONS	c EIN-PN 20-8174445-001
a	Plan name SUCCESS ADVERTISING, INC. 401 (K) PROFIT SHARING PLAN	
b	Name of plan sponsor SUCCESS ADVERTISING, INC.	c EIN-PN 22-1919260-001
a	Plan name TECH TRADING PROFIT SHARING PLAN	
b	Name of plan sponsor TECH TRADING OF NEW YORK, INC.	c EIN-PN 14-1734227-001
a	Plan name UNITED TECH 401(K) SAVINGS PLAN	
b	Name of plan sponsor UNITED TECH EMPLOYEE MANAGEMENT, INC.	c EIN-PN 47-3252875-333
a	Plan name UPSTATE OB/GYN ASSOCIATES, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor UPSTATE OB/GYN ASSOCIATES, P.C.	c EIN-PN 14-1600870-001
a	Plan name WESTERN INTEGRATED 401(K) PLAN	
b	Name of plan sponsor WESTERN INTEGRATED MATERIALS	c EIN-PN 26-0852608-003
a	Plan name ANAN FAIDI MD 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ANAN FAIDI MD, INC.	c EIN-PN 68-0285302-001
a	Plan name CETEK, INC. 401(K) PLAN	
b	Name of plan sponsor CETEK, INC.	c EIN-PN 42-1514155-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name CHAMPION SOLUTIONS GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor CHAMPION SOLUTIONS GROUP, INC.	c EIN-PN 59-2347579-001
a	Plan name MAVERICK SOFTWARE CONSULTING 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MAVERICK SOFTWARE CONSULTING	c EIN-PN 41-1979904-001
a	Plan name OVERVIEW BUSINESS HOLDINGS, LLC 401(K) PLAN	
b	Name of plan sponsor WILLET DAIRY, LLC	c EIN-PN 16-1453541-002
a	Plan name SCHULTZ FORD LINCOLN MERCURY INC. & AFFILIATES 401(K) PLAN	
b	Name of plan sponsor SCHULTZ FORD LINCOLN MERCURY INC.	c EIN-PN 13-1730338-001
a	Plan name WOMENS OB/GYN PC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WOMEN'S OB/GYN PC	c EIN-PN 81-0802359-001
a	Plan name BENEFITS AND PAYROLL, INC. MULTIPLE EMPLOYER 401(K) PLAN	
b	Name of plan sponsor BENEFITS AND PAYROLL, INC.	c EIN-PN 45-4965806-001
a	Plan name BERLI'S BODY & FINE AUTO FINISHES 401(K) PLAN	
b	Name of plan sponsor BERLI'S BODY & FINE AUTO FINISHES	c EIN-PN 93-1259386-001
a	Plan name DELAWARE ENGINEERING, D.P.C. 401(K) PLAN AND TRUST	
b	Name of plan sponsor DELAWARE ENGINEERING, D.P.C.	c EIN-PN 16-1370126-001
a	Plan name DELTA PACKAGING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DELTA PACKAGING, INC.	c EIN-PN 23-2424721-001
a	Plan name DELTA ZETA SORORITY SAVINGS INCENTIVE PLAN	
b	Name of plan sponsor DELTA ZETA SORORITY	c EIN-PN 35-0267676-001
a	Plan name DEVELOPMENT COUNSELLORS INTERNATIONAL 401(K) SAVINGS PLAN	
b	Name of plan sponsor DEVELOPMENT COUNSELLORS INTERNATIONAL	c EIN-PN 13-1945303-005
a	Plan name HEALTHCARE GEORGIA FOUNDATION 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor HEALTHCARE GEORGIA FOUNDATION INC.	c EIN-PN 58-2418091-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name MANURSING ISLAND CLUB 401(K) PLAN	
b	Name of plan sponsor MANURSING ISLAND CLUB	c EIN-PN 13-1719395-001
a	Plan name PROFESSIONAL EYE ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PROFESSIONAL EYE ASSOCIATES, INC.	c EIN-PN 58-1148820-001
a	Plan name PROVIDENCE CATHOLIC SCHOOL 401(K) PLAN	
b	Name of plan sponsor PROVIDENCE CATHOLIC SCHOOL, INC.	c EIN-PN 74-1222275-001
a	Plan name TECHNICOM SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor TECHNICOM SERVICES, INC. DBA INTERBAY TECHNOLOGIES	c EIN-PN 36-4412325-001
a	Plan name PS 260, INC. RETIREMENT PLAN	
b	Name of plan sponsor PS 260, INC.	c EIN-PN 13-3413729-777
a	Plan name PURCHASING POWER 401(K) PLAN	
b	Name of plan sponsor PURCHASING POWER, LLC	c EIN-PN 90-0193342-222
a	Plan name R.C.I. PLBG INC. 401(K) PLAN	
b	Name of plan sponsor R.C.I. PLBG INC.	c EIN-PN 45-2239899-001
a	Plan name THE MCLEOD COMPANIES 401(K) PLAN	
b	Name of plan sponsor MCLEOD EXPRESS, LLC	c EIN-PN 35-2156793-222
a	Plan name THE PEDIATRIC OFFICE, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE PEDIATRIC OFFICE, LLC	c EIN-PN 58-2646129-001
a	Plan name THE POWER DOOR & EDWARDS EMPLOYEES' RETIREMENT PLAN	
b	Name of plan sponsor POWER DOOR PRODUCTS, INC.	c EIN-PN 13-2746069-001
a	Plan name BHK OF AMERICA 401(K) PLAN	
b	Name of plan sponsor BHK OF AMERICA	c EIN-PN 22-2114939-001
a	Plan name BILL'S BOOKKEEPING SERVICES 401(K) PLAN	
b	Name of plan sponsor BILL'S BOOKKEEPING SERVICES, LLC	c EIN-PN 27-0420780-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	DOWLING CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DOWLING CORPORATION	c EIN-PN 02-0395136-001
a	Plan name	DURHAM CONSTRUCTION COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DURHAM CONSTRUCTION COMPANY, INC.	c EIN-PN 02-0642097-001
a	Plan name	HIGHROADS, LLC 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	SONGY HIGHROADS, LLC	c EIN-PN 45-4485594-001
a	Plan name	HISTORICAL RESEARCH ASSOCIATES, INC. 401(K) PLAN	
b	Name of plan sponsor	HISTORICAL RESEARCH ASSOCIATES, INC.	c EIN-PN 81-0373761-001
a	Plan name	MICHAEL'S / MFH, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	MICHAEL'S / MFH, INC.	c EIN-PN 31-1117594-001
a	Plan name	BOONE KARLBERG EMPLOYEE PROFIT SHARING RETIREMENT PLAN	
b	Name of plan sponsor	BOONE KARLBERG P.C.	c EIN-PN 81-0522567-001
a	Plan name	BRAHMAN CAPITAL EMPLOYEES PROFIT SHARING PLAN	
b	Name of plan sponsor	BRAHMAN CAPITAL	c EIN-PN 13-3542470-001
a	Plan name	EASTERN ARMORED SERVICES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	EASTERN ARMORED SERVICES, INC.	c EIN-PN 22-3193394-001
a	Plan name	HS1 MEDICAL MANAGEMENT, INC. 401(K) PLAN	
b	Name of plan sponsor	HS1 MEDICAL MANAGEMENT, INC.	c EIN-PN 65-0622851-001
a	Plan name	MINIMAL ACCESS SURGERY, INC. 401(K) PLAN	
b	Name of plan sponsor	MINIMAL ACCESS SURGERY, INC.	c EIN-PN 45-0521250-001
a	Plan name	MMR RESEARCH WORLD WIDE INC. 401(K) PLAN	
b	Name of plan sponsor	MMR RESEARCH WORLD WIDE INC.	c EIN-PN 01-0788273-001
a	Plan name	RICHFORD HEALTH CENTER, INC. 401(K) PLAN	
b	Name of plan sponsor	RICHFORD HEALTH CENTER, INC.	c EIN-PN 03-0215982-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

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

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

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

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

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b Name of plan sponsor		c EIN-PN

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

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan STATE STREET U.S. BOND INDEX RET ACCT	B Three-digit plan number (PN) ▶ 416
C Plan sponsor's name as shown on line 2a of Form 5500 TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	D Employer Identification Number (EIN) 36-6071399

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

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	
(2) U.S. Government securities	1c(2)	
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B)	
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	
(10) Value of interest in pooled separate accounts	1c(10)	
(11) Value of interest in master trust investment accounts	1c(11)	
(12) Value of interest in 103-12 investment entities	1c(12)	
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	115784181
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	112049241
(15) Other	1c(15)	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	115784181	112049241
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	1	
k Total liabilities (add all amounts in lines 1g through 1j)	1k	1	
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	115784180	112049241

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)		
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		
(2) Dividends:			
(A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	1792444	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		1792444

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)		
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses.....	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		1792444
l Transfers of assets:			
(1) To this plan.....	2l(1)		29825720
(2) From this plan	2l(2)		35353103

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) Unmodified (2) Qualified (3) Disclaimer (4) Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) DOL Regulation 2520.103-8 (2) DOL Regulation 2520.103-12(d) (3) neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name:

(2) EIN:

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) This form is filed for a CCT, PSA, DCG or MTIA. (2) It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)			
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
e Was this plan covered by a fidelity bond?			
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?			
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)			
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
l Has the plan failed to provide any benefit when due under the plan?			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? Yes No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) Yes No Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.