

<b>Form 5500</b>  Department of the Treasury Internal Revenue Service  Department of Labor Employee Benefits Security Administration  Pension Benefit Guaranty Corporation	<b>Annual Return/Report of Employee Benefit Plan</b>  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).  <b>▶ Complete all entries in accordance with the instructions to the Form 5500.</b>	OMB Nos. 1210-0110 1210-0089  <div style="font-size: 24pt; font-weight: bold; text-align: center;">2024</div>  <b>This Form is Open to Public Inspection</b>
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<b>Part I</b>	<b>Annual Report Identification Information</b>
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For calendar plan year 2024 or fiscal plan year beginning 11/08/2024 and ending 12/31/2024

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

a single-employer plan     a DFE (specify) C

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

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

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

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

special extension (enter description)

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

<b>Part II</b>	<b>Basic Plan Information—enter all requested information</b>
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<b>1a</b> Name of plan <u>ALTA FEDERATED MDT SMALL CAP CORE</u>	<b>1b</b> Three-digit plan number (PN) ▶ <u>001</u>  <b>1c</b> Effective date of plan
<b>2a</b> Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>ALTA TRUST COMPANY</u>  <u>3500 S. PHILLIPS AVE.</u> <u>STE. 201</u> <u>SIOUX FALLS, SD 57105</u>	<b>2b</b> Employer Identification Number (EIN) <u>99-2666297</u>  <b>2c</b> Plan Sponsor's telephone number <u>303-996-3781</u>  <b>2d</b> Business code (see instructions)

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

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

<b>SIGN HERE</b>			
	<b>Signature of plan administrator</b>	Date	Enter name of individual signing as plan administrator
<b>SIGN HERE</b>			
	<b>Signature of employer/plan sponsor</b>	Date	Enter name of individual signing as employer or plan sponsor
<b>SIGN HERE</b>	<u>Filed with authorized/valid electronic signature.</u>	<u>09/08/2025</u>	<u>MACKENZIE LOTHERT</u>
	<b>Signature of DFE</b>	Date	Enter name of individual signing as DFE

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

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

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

<b>9a</b> 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	<b>9b</b> 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)

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

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

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

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

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

Receipt Confirmation Code \_\_\_\_\_

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<b>SCHEDULE D</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>	<b>DFE/Participating Plan Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).  <b>▶ File as an attachment to Form 5500.</b>	OMB No. 1210-0110  <hr/> <b>2024</b>  <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2024 or fiscal plan year beginning 11/08/2024 and ending 12/31/2024

<b>A</b> Name of plan <u>ALTA FEDERATED MDT SMALL CAP CORE</u>	<b>B</b> Three-digit plan number (PN)	<u>001</u>
<b>C</b> Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>ALTA TRUST COMPANY</u>	<b>D</b> Employer Identification Number (EIN) <u>99-2666297</u>	

<b>Part I</b>	<b>Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)</b> (Complete as many entries as needed to report all interests in DFEs)
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<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>ALTA TRUST SHORT TERM INVESTMENT</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>ALTA TRUST</u>		
<b>c</b> EIN-PN <u>92-0398350-001</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>984474</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

**c** EIN-PN

**d** Entity code

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

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

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

**c** EIN-PN

**d** Entity code

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

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

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

**c** EIN-PN

**d** Entity code

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

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

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

**c** EIN-PN

**d** Entity code

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

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

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

**c** EIN-PN

**d** Entity code

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

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

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

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

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

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

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

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

**c** EIN-PN

**d** Entity code

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

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
<b>a</b>	Plan name 1ST LIBERTY FEDERAL CREDIT UNION CASH OR DEFERRED PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor 1ST LIBERTY FEDERAL CREDIT UNION	<b>c</b> EIN-PN 81-0257864-001
<b>a</b>	Plan name 3 BIRDS MARKETING 401K PLAN	
<b>b</b>	Name of plan sponsor 3 BIRDS MARKETING	<b>c</b> EIN-PN 27-2410716-002
<b>a</b>	Plan name 3A PRESS CORP RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor 3A PRESS CORP	<b>c</b> EIN-PN 66-0530750-001
<b>a</b>	Plan name A.L. LOWDER 401K PLAN	
<b>b</b>	Name of plan sponsor A.L. LOWDER	<b>c</b> EIN-PN 56-0990649-001
<b>a</b>	Plan name ABBOTT SUPPLY COMPANY INC PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor ABBOTT SUPPLY COMPANY, INC.	<b>c</b> EIN-PN 71-0355584-001
<b>a</b>	Plan name ABBYBANK 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor ABBYBANK	<b>c</b> EIN-PN 39-1087461-001
<b>a</b>	Plan name ACCOLADE INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor ACCOLADE, INC	<b>c</b> EIN-PN 01-0969591-001
<b>a</b>	Plan name ACE INDUSTRIAL SUPPLY INC 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor ACE INDUSTRIAL SUPPLY INC	<b>c</b> EIN-PN 41-2161289-001
<b>a</b>	Plan name ACM SERVICES INC 401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor ACM SERVICES	<b>c</b> EIN-PN 52-1673828-001
<b>a</b>	Plan name AD STOWE INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor AD STOWE INC	<b>c</b> EIN-PN 54-0951262-001
<b>a</b>	Plan name ADD ADHD DIAGNOSTIC AND TREATMENT CENTER 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor ADD ADHD DIAGNOSTIC AND TREATMENT CENTER	<b>c</b> EIN-PN 45-5131655-001
<b>a</b>	Plan name ADISON & PARTNERS 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor ADISON & PARTNERS	<b>c</b> EIN-PN 20-1058591-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	ADS BIOTEC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ADS BIOTEC INC	<b>c</b> EIN-PN 47-5306891-001
<b>a</b>	Plan name	ADVANCED CARDIOLOGY ASSOCIATES PC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ADVANCED CARDIOLOGY ASSOCIATES	<b>c</b> EIN-PN 45-4431447-001
<b>a</b>	Plan name	ADVANCED ENVIRONMENTAL CORP 401(K) AND PROFIT SHARING	
<b>b</b>	Name of plan sponsor	ADVANCED ENVIRONMENTAL CORP	<b>c</b> EIN-PN 22-3649824-001
<b>a</b>	Plan name	ADVANTAGE ARCHIVES 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ADVANTAGE ARCHIVES	<b>c</b> EIN-PN 82-4512292-001
<b>a</b>	Plan name	AGRI WAY PARTNERS LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	AGRI WAY PARTNERS, LLC	<b>c</b> EIN-PN 11-3661025-001
<b>a</b>	Plan name	AIOI NISSAY DOWA INSURANCE SERVICES USA CORPORATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	AIOI NISSAY DOWA INSURANCE SERVICES USA CORPORATION	<b>c</b> EIN-PN 81-1934970-001
<b>a</b>	Plan name	AIR CARGO TRANSFER INC 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	AIR CARGO TRANSFER INC	<b>c</b> EIN-PN 20-2625280-001
<b>a</b>	Plan name	AIR TRO INC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	AIR-TRO, INC.	<b>c</b> EIN-PN 95-2584068-002
<b>a</b>	Plan name	ALDEN MEDICAL GROUP PLLC RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	ALDEN MEDICAL GROUP, PLLC	<b>c</b> EIN-PN 16-1610849-003
<b>a</b>	Plan name	ALEXS MEAT DISTRIBUTORS CORP 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ALEX'S MEAT DISTRIBUTORS CORP	<b>c</b> EIN-PN 20-0678508-001
<b>a</b>	Plan name	ALL ISLAND HOMES LTD 401(K) PROFIT SHARING PLAN AND TRUSTPLAN	
<b>b</b>	Name of plan sponsor	ALL ISLAND HOMES LTD	<b>c</b> EIN-PN 46-1450672-001
<b>a</b>	Plan name	ALL METAL DESIGNS INC 401(K) SALARY REDUCTION PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	ALL METAL DESIGNS	<b>c</b> EIN-PN 38-1892906-001

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.)	
<b>a</b>	Plan name ALL SEASONS HEATING & COOLING, INC. 401K PLAN	
<b>b</b>	Name of plan sponsor ALL SEASONS HEATING AND COOLING	<b>c</b> EIN-PN 42-1270657-001
<b>a</b>	Plan name ALL SYSTEMS COGENERATION, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor ALL SYSTEMS COGENERATION, INC.	<b>c</b> EIN-PN 11-3175518-001
<b>a</b>	Plan name ALLEN STEELE CO., INC 401K PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor ALLEN STEELE CO., INC	<b>c</b> EIN-PN 39-1178810-001
<b>a</b>	Plan name ALLIED POWER AND SUBSIDIARIES 401K PLAN PKA ALLIED POWER SERVICES 401K PLAN	
<b>b</b>	Name of plan sponsor ALLIED POWER SERVICES, LLC.	<b>c</b> EIN-PN 37-1857278-001
<b>a</b>	Plan name ALPINE MEDICAL GROUP RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor ALPINE MEDICAL GROUP LLC	<b>c</b> EIN-PN 84-1401924-001
<b>a</b>	Plan name ALTAIS HEALTH SERVICES 401K PLAN	
<b>b</b>	Name of plan sponsor ALTAIS HEALTH SERVICES	<b>c</b> EIN-PN 92-0757200-001
<b>a</b>	Plan name AMERICAN EXPEDITION VEHICLES 401(K) PLAN	
<b>b</b>	Name of plan sponsor AMERICAN EXPEDITION VEHICLES	<b>c</b> EIN-PN 20-5328810-001
<b>a</b>	Plan name AMERITAS POOLED EMPLOYER PLAN	
<b>b</b>	Name of plan sponsor AMERITAS PEP	<b>c</b> EIN-PN 82-3095168-011
<b>a</b>	Plan name AMS REAL ESTATE SERVICES 401(K) PLAN	
<b>b</b>	Name of plan sponsor AMS REAL ESTATE SERVICES	<b>c</b> EIN-PN 20-3411329-001
<b>a</b>	Plan name APPROVED MORTGAGE 401(K) PLAN	
<b>b</b>	Name of plan sponsor APPROVED MORTGAGE CORPORATION	<b>c</b> EIN-PN 35-1911849-001
<b>a</b>	Plan name ARCHER REVIEW 401(K) PLAN	
<b>b</b>	Name of plan sponsor USMLEGALAXY LLC DBA ARCHER REVIEW	<b>c</b> EIN-PN 26-4288906-001
<b>a</b>	Plan name ARCO DEVELOPMENT SERVICES 401K/PS PLAN	
<b>b</b>	Name of plan sponsor ARCO DEVELOPMENT SERVICES PLLC	<b>c</b> EIN-PN 86-2988745-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	ARRAY ALLIANCE, INC. 401K PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ARRAY ALLIANCE, INC.	<b>c</b> EIN-PN 82-5248574-001
<b>a</b>	Plan name	ARTEFACT GROUP 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ARTEFACT GROUP	<b>c</b> EIN-PN 20-3035342-001
<b>a</b>	Plan name	ASCENT CLOUD LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ASCENT CLOUD LLC	<b>c</b> EIN-PN 82-3015447-001
<b>a</b>	Plan name	ASI 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ASI	<b>c</b> EIN-PN 94-3289429-001
<b>a</b>	Plan name	ASPHALT DRUM MIXERS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ASPHALT DRUM MIXERS, INC.	<b>c</b> EIN-PN 35-1572077-001
<b>a</b>	Plan name	ASSET ENTERPRISES INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ASSET ENTERPRISES, INC	<b>c</b> EIN-PN 57-1103029-001
<b>a</b>	Plan name	ASSOCIATED CLINIC OF PSYCHOLOGY 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ASSOCIATED CLINIC OF PSYCHOLOGY	<b>c</b> EIN-PN 41-1425197-001
<b>a</b>	Plan name	ASSOCIATION OF PROSECUTING ATTORNEYS INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ASSOCIATION OF PROSECUTING ATTORNEYS, INC	<b>c</b> EIN-PN 26-3117485-001
<b>a</b>	Plan name	ASTRO MET, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ASTRO MET, INC	<b>c</b> EIN-PN 31-0641716-002
<b>a</b>	Plan name	ATKINS BUILDING SERVICE AND PRODUCTS INC 401(K)	
<b>b</b>	Name of plan sponsor	ATKINS BUILDING SERVICE AND PRODUCTS, INC	<b>c</b> EIN-PN 43-1187055-001
<b>a</b>	Plan name	ATLAS HEADREST LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ATLAS HEADREST LLC	<b>c</b> EIN-PN 46-2760241-001
<b>a</b>	Plan name	ATTICA VETERINARY ASSOCIATES PC AMENDED AND RESTATED DEFERRED PROFIT SHARING	
<b>b</b>	Name of plan sponsor	ATTICA VETERINARY ASSOCIATES, PC	<b>c</b> EIN-PN 16-0999661-001

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.)	
<b>a</b>	Plan name AUBURN FOUNDRY INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor AUBURN FOUNDRY	<b>c</b> EIN-PN 16-0916055-003
<b>a</b>	Plan name AUSTIN BIOASSAYS LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor AUSTIN BIOASSAYS, LLC	<b>c</b> EIN-PN 74-3025171-001
<b>a</b>	Plan name AUTOMOTIVE PARTS ASSOCIATES INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor AUTOMOTIVE PARTS ASSOCIATES, INC	<b>c</b> EIN-PN 48-1156791-001
<b>a</b>	Plan name AZOMITE MINERAL PRODUCTS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor AZOMITE MINERAL PRODUCTS, INC.	<b>c</b> EIN-PN 46-4123319-001
<b>a</b>	Plan name BABB, INC. PROFIT SHARING TRUST	
<b>b</b>	Name of plan sponsor BABB INC.	<b>c</b> EIN-PN 25-1102236-001
<b>a</b>	Plan name BAKER LAW GROUP 401(K) PLAN	
<b>b</b>	Name of plan sponsor BAKER LAW GROUP	<b>c</b> EIN-PN 27-5382391-001
<b>a</b>	Plan name BANK FIVE NINE 401(K) PLAN	
<b>b</b>	Name of plan sponsor BANK FIVE NINE	<b>c</b> EIN-PN 39-0148000-002
<b>a</b>	Plan name BANK OF ELGIN 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor BANK OF ELGIN	<b>c</b> EIN-PN 47-0098100-001
<b>a</b>	Plan name BANK OF OAK RIDGE 401(K) PLAN	
<b>b</b>	Name of plan sponsor BANK OF OAK RIDGE	<b>c</b> EIN-PN 56-2149229-001
<b>a</b>	Plan name BARGHAUSEN CONSULTING ENGINEERS INC 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor BARGHAUSEN CONSULTING ENGINEERS, INC	<b>c</b> EIN-PN 91-1192493-001
<b>a</b>	Plan name BARRETT FIREARMS MANUFACTURING INC 401(K) SALARY REDUCTION PLAN	
<b>b</b>	Name of plan sponsor BARRETT FIREARMS MANUFACTURING	<b>c</b> EIN-PN 62-1224445-001
<b>a</b>	Plan name BARRY, EVANS, JOSEPHS & SNIPES 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor J.M. BARRY & ASSOCIATES	<b>c</b> EIN-PN 26-2748759-001

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.)		
<b>a</b>	Plan name <b>BASE4 VENTURES LLC 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BASE4 VENTURES, LLC</b>	<b>c</b> EIN-PN <b>20-4601127-001</b>
<b>a</b>	Plan name <b>BASS ENERGY SERVICES LLC AND AFFILIATES 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BASS ENERGY SERVICES LLC AND AFFILIATES</b>	<b>c</b> EIN-PN <b>20-8235561-001</b>
<b>a</b>	Plan name <b>BAY AREA MANAGEMENT SERVICES, INC. PROFIT SHARING PLAN &amp; TRUST</b>	
<b>b</b>	Name of plan sponsor <b>BAY AREA MANAGEMENT SERVICES, INC.</b>	<b>c</b> EIN-PN <b>38-2657836-001</b>
<b>a</b>	Plan name <b>BAYOU ELECTRICAL SERVICES 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BAYOU ELECTRICAL SERVICES</b>	<b>c</b> EIN-PN <b>76-0537058-001</b>
<b>a</b>	Plan name <b>BBTC RETIREMENT SAVINGS PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BRISTOL BAY TELEPHONE COOPERATIVE, INC. (BBTC)</b>	<b>c</b> EIN-PN <b>92-0047849-001</b>
<b>a</b>	Plan name <b>BEAR ACQUISITIONS INC 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BEAR ACQUISITIONS, INC</b>	<b>c</b> EIN-PN <b>81-4357848-001</b>
<b>a</b>	Plan name <b>BEAR MOUNTAIN ORCHARDS INC 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BEAR MOUNTAIN ORCHARDS, INC</b>	<b>c</b> EIN-PN <b>23-2166855-001</b>
<b>a</b>	Plan name <b>BECK GOGOLSKI AND CO INC 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BECK, GOGOLSKI AND CO, INC</b>	<b>c</b> EIN-PN <b>26-3397779-001</b>
<b>a</b>	Plan name <b>BECKER LAW, PLLC 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BECKER LAW, PLLC</b>	<b>c</b> EIN-PN <b>85-3980077-001</b>
<b>a</b>	Plan name <b>BELDOCK LEVINE AND HOFFMAN LLP PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BELDOCK LEVINE AND HOFFMAN LLP</b>	<b>c</b> EIN-PN <b>13-2501554-004</b>
<b>a</b>	Plan name <b>BEMCO OF WESTERN NEW YORK INC 401K PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BEMCO OF WESTERN NEW YORK INC</b>	<b>c</b> EIN-PN <b>16-1539492-001</b>
<b>a</b>	Plan name <b>BENEBIOS, INC. EMPLOYEES RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BENEBIOS, INC.</b>	<b>c</b> EIN-PN <b>35-1840489-001</b>

<b>Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
<b>a</b>	Plan name	BENJAMIN BROTHERS INC 401(K) PROFIT SHARING PLAN
<b>b</b>	Name of plan sponsor	BENJAMIN BROTHERS, INC
<b>c</b>	EIN-PN	22-1427656-002
<b>a</b>	Plan name	BERESFORD BOOTH RETIREMENT PLAN
<b>b</b>	Name of plan sponsor	BERESFORD BOOTH
<b>c</b>	EIN-PN	30-0008684-001
<b>a</b>	Plan name	BERNSTEIN REALTY INC 401(K) PROFIT SHARING RETIREMENT PLAN
<b>b</b>	Name of plan sponsor	BERNSTEIN REALTY, INC
<b>c</b>	EIN-PN	76-0420840-001
<b>a</b>	Plan name	BESWICK CORPORATION 401(K) PLAN
<b>b</b>	Name of plan sponsor	BESWICK CORPORATION
<b>c</b>	EIN-PN	38-1977703-001
<b>a</b>	Plan name	BIG HORN CONSTRUCTION 401K
<b>b</b>	Name of plan sponsor	BIG HORN CONSTRUCTION CO.
<b>c</b>	EIN-PN	20-3697819-001
<b>a</b>	Plan name	BILL'S ELECTRIC 401K PLAN
<b>b</b>	Name of plan sponsor	BILL'S ELECTRIC, INC.
<b>c</b>	EIN-PN	44-0661886-001
<b>a</b>	Plan name	BIRCHWOOD LABORATORIES LLC RETIREMENT SAVINGS PLAN
<b>b</b>	Name of plan sponsor	BIRCHWOOD LABORATORIES, LLC
<b>c</b>	EIN-PN	41-1351619-001
<b>a</b>	Plan name	BLUE RIBBON BUILDERS 401(K) PSP
<b>b</b>	Name of plan sponsor	BLUE RIBBON BUILDERS INC.
<b>c</b>	EIN-PN	81-0383673-001
<b>a</b>	Plan name	BLUECAT NETWORKS USA INC 401(K) PLAN
<b>b</b>	Name of plan sponsor	BLUECAT NETWORKS USA
<b>c</b>	EIN-PN	98-0484057-001
<b>a</b>	Plan name	BNK CONSTRUCTION INC 401(K) PROFIT SHARING PLAN
<b>b</b>	Name of plan sponsor	BNK CONSTRUCTION, INC
<b>c</b>	EIN-PN	93-1179120-001
<b>a</b>	Plan name	BOB BROWN CHEVROLET INC PROFIT SHARING PLAN
<b>b</b>	Name of plan sponsor	BOB BROWN CHEVROLET, INC
<b>c</b>	EIN-PN	42-0846759-001
<b>a</b>	Plan name	BOB CIASULLI AUTO GROUP 401(K) PLAN
<b>b</b>	Name of plan sponsor	BOB CIASULLI AUTO GROUP, INC
<b>c</b>	EIN-PN	22-2973033-001

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.)	
<b>a</b>	Plan name <b>BONNEY FORGE CORP DEFERRED PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BONNEY FORGE CORP</b>	<b>c</b> EIN-PN <b>23-2308673-001</b>
<b>a</b>	Plan name <b>BONNEY FORGE CORP DEFERRED PROFIT SHARING PLAN FOR BARGAINING UNIT EMPLOYEES</b>	
<b>b</b>	Name of plan sponsor <b>BONNEY FORGE CORP</b>	<b>c</b> EIN-PN <b>23-2308673-003</b>
<b>a</b>	Plan name <b>BORDAS AND BORDAS 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BORDAS AND BORDAS</b>	<b>c</b> EIN-PN <b>55-0784362-001</b>
<b>a</b>	Plan name <b>BOSON HEALTH 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BOSON DHO LLC</b>	<b>c</b> EIN-PN <b>47-1336709-001</b>
<b>a</b>	Plan name <b>BOSTON DUCK TOURS LIMITED PARTNERSHIP 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BOSTON DUCK TOURS</b>	<b>c</b> EIN-PN <b>04-3229346-001</b>
<b>a</b>	Plan name <b>BRANCO ENTERPRISES INC 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BRANCO ENTERPRISES, INC.</b>	<b>c</b> EIN-PN <b>43-1090740-001</b>
<b>a</b>	Plan name <b>BRET B GILSDORF DDS LLC 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BRET B GILSDORF, DDS, LLC</b>	<b>c</b> EIN-PN <b>90-0920288-001</b>
<b>a</b>	Plan name <b>BREVARD ACHIEVEMENT CENTER INC 401(K) SAVINGS PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BREVARD ACHIEVEMENT CENTER, INC</b>	<b>c</b> EIN-PN <b>59-1203280-002</b>
<b>a</b>	Plan name <b>BT HEALTH 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>BT HEALTH</b>	<b>c</b> EIN-PN <b>45-3733601-001</b>
<b>a</b>	Plan name <b>BURN BRIGHT LLC 401(K) PSP</b>	
<b>b</b>	Name of plan sponsor <b>BURN BRIGHT, LLC</b>	<b>c</b> EIN-PN <b>46-5562373-002</b>
<b>a</b>	Plan name <b>C.D. BARNES ASSOCIATES, INC. 401K &amp; PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>C.D. BARNES ASSOCIATES, INC.</b>	<b>c</b> EIN-PN <b>38-1442303-001</b>
<b>a</b>	Plan name <b>CA HOLDINGS LLC 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CA HOLDINGS, LLC</b>	<b>c</b> EIN-PN <b>58-2540189-001</b>

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	CAB INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CAB, INC	<b>c</b> EIN-PN 58-1466151-001
<b>a</b>	Plan name	CACHE VALLEY BANK 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	CACHE VALLEY BANK	<b>c</b> EIN-PN 87-0310100-001
<b>a</b>	Plan name	CACIALLI AUTO REPAIR INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CACIALLI AUTO REPAIR INC	<b>c</b> EIN-PN 20-5681021-001
<b>a</b>	Plan name	CALIFORNIA SECURITY SERVICES 401K PS PLAN TRUST	
<b>b</b>	Name of plan sponsor	CALIFORNIA SECURITY SERVICES INC	<b>c</b> EIN-PN 71-0906883-001
<b>a</b>	Plan name	CALYAN WAX COMPANY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CALYAN WAX COMPANY	<b>c</b> EIN-PN 82-0938803-001
<b>a</b>	Plan name	CAMPBELL WILLIAMS FERENCE HALL 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CAMPBELL, WILLIAMS, FERENCE, HALL	<b>c</b> EIN-PN 87-0500178-001
<b>a</b>	Plan name	CAPITAL HEALTH SERVICES, INC. SAVINGS PLAN & TRUST	
<b>b</b>	Name of plan sponsor	CAPITAL HEALTH SERVICES, INC	<b>c</b> EIN-PN 20-1292646-001
<b>a</b>	Plan name	CAPITOL CREDIT UNION 401(K) PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	CAPITOL CREDIT UNION	<b>c</b> EIN-PN 74-6054885-002
<b>a</b>	Plan name	CARAMEROS AND RAWLS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CARAMEROS AND RAWLS	<b>c</b> EIN-PN 76-0518397-001
<b>a</b>	Plan name	CARDINAL MANUFACTURING COMPANY INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	CARDINAL MANUFACTURING COMPANY, INC	<b>c</b> EIN-PN 37-1433936-001
<b>a</b>	Plan name	CARE 4 U PLUS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CARE 4 U PLUS LLC	<b>c</b> EIN-PN 61-1493568-001
<b>a</b>	Plan name	CAREPOINT MEDICAL SOLUTIONS LLC 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	CAREPOINT MEDICAL SOLUTIONS, LLC	<b>c</b> EIN-PN 20-8876631-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	CARR LANE MANUFACTURING CO PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CARR LANE MANUFACTURING COMPANY	<b>c</b> EIN-PN 43-0673233-001
<b>a</b>	Plan name	CARR VALLEY CHEESE COMPANY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CARR VALLEY CHEESE COMPANY, INC	<b>c</b> EIN-PN 39-1558709-001
<b>a</b>	Plan name	CASELLAS ALCOVER AND BURGOS RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	CASELLAS, ALCOVER AND BURGOS	<b>c</b> EIN-PN 66-0690092-001
<b>a</b>	Plan name	CATRAC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CAPITAL AREA TRAUMA REGIONAL ADVISORY COUNCIL (CATRAC)	<b>c</b> EIN-PN 74-2747806-002
<b>a</b>	Plan name	CBHF ENGINEERING PLLC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	CBHF ENGINEERING	<b>c</b> EIN-PN 20-8054486-001
<b>a</b>	Plan name	CBR MANAGEMENT SERVICE INC	
<b>b</b>	Name of plan sponsor	CBR MANAGEMENT SERVICE, INC	<b>c</b> EIN-PN 86-0820414-333
<b>a</b>	Plan name	CCR USA AIRPORT MANAGEMENT, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CCR USA AIRPORT MANAGEMENT INC.	<b>c</b> EIN-PN 47-5421686-001
<b>a</b>	Plan name	CDR COMPANIES 401(K) PLAN FKA MAGUIRE FLEXSAVER PLAN	
<b>b</b>	Name of plan sponsor	CDR MAGUIRE, INC.	<b>c</b> EIN-PN 05-0318211-002
<b>a</b>	Plan name	CE PRECISION ASSEMBLIES INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CE PRECISION ASSEMBLIES, INC	<b>c</b> EIN-PN 52-1462844-001
<b>a</b>	Plan name	CELLTRION USA INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CELLTRION USA, INC	<b>c</b> EIN-PN 36-4905731-001
<b>a</b>	Plan name	CENTER DEVELOPMENT CORPORATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CENTER DEVELOPMENT CORPORATION	<b>c</b> EIN-PN 13-3512977-001
<b>a</b>	Plan name	CENTRAL BRACE AND PROSTHETICS INC PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	CENTRAL BRACE AND PROSTHETICS	<b>c</b> EIN-PN 61-1053249-001

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.)	
<b>a</b>	Plan name <b>CENTRAL COAST FAMILY CARE 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CENTRAL COAST FAMILY CARE MEDICAL ASSOCIATES OF SANTA MARIA, INC</b>	<b>c</b> EIN-PN <b>77-0404320-001</b>
<b>a</b>	Plan name <b>CENTRAL MAINE POWERSPORTS 401(K) RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>AUGUSTA AUTO SALES</b>	<b>c</b> EIN-PN <b>57-1175978-001</b>
<b>a</b>	Plan name <b>CENTRAL SEMICONDUCTOR CORP. 401K PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CENTRAL SEMICONDUCTOR CORP</b>	<b>c</b> EIN-PN <b>11-2324629-001</b>
<b>a</b>	Plan name <b>CENTRAL STATE BANK EMPLOYEES SAVINGS AND PROFIT SHARING PLAN AND TRUST</b>	
<b>b</b>	Name of plan sponsor <b>CENTRAL STATE BANK</b>	<b>c</b> EIN-PN <b>63-0039180-002</b>
<b>a</b>	Plan name <b>CENTRAL TOOLS INC 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CENTRAL TOOLS INC</b>	<b>c</b> EIN-PN <b>05-0402749-001</b>
<b>a</b>	Plan name <b>CENTRO DE SERVICIOS PRIMARIOS DE SALUD DE PATILLAS INC SAVINGS PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CENTRO DE SERVICIOS PRIMARIES DE SALUD DE PATILLAS, INC</b>	<b>c</b> EIN-PN <b>66-0430826-001</b>
<b>a</b>	Plan name <b>CENTURY GROUP 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>THE CENTURY GROUP</b>	<b>c</b> EIN-PN <b>93-1022773-001</b>
<b>a</b>	Plan name <b>CERVELLO GLOBAL CORPORATION 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CERVELLO GLOBAL CORPORATION</b>	<b>c</b> EIN-PN <b>27-2488822-001</b>
<b>a</b>	Plan name <b>CERVELLO TECHNOLOGIES LLC 401(K) PROFIT SHARING PLAN &amp; TRUST</b>	
<b>b</b>	Name of plan sponsor <b>CERVELLO GLOBAL CORPORATION</b>	<b>c</b> EIN-PN <b>27-2488822-001</b>
<b>a</b>	Plan name <b>CERVELLO TECHNOLOGIES LLC PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CERVELLO GLOBAL CORPORATION</b>	<b>c</b> EIN-PN <b>27-2488822-002</b>
<b>a</b>	Plan name <b>CESAR D HIDALGO MD PC PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CESAR D HIDALGO, MD</b>	<b>c</b> EIN-PN <b>38-2626550-001</b>
<b>a</b>	Plan name <b>CFG RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CFG</b>	<b>c</b> EIN-PN <b>26-4077163-001</b>

<b>Part II</b>	<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
<b>a</b>	Plan name CFS PEP	
<b>b</b>	Name of plan sponsor TRG FIDUCIARY SERVICES POOLED PLAN PROVIDER	<b>c</b> EIN-PN 88-4291217-001
<b>a</b>	Plan name CHAPIN AND BANGS CO INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor CHAPIN AND BANGS COMPANY, INC	<b>c</b> EIN-PN 06-0290380-001
<b>a</b>	Plan name CHAPIN AND BANGS UNION 401(K) PLAN	
<b>b</b>	Name of plan sponsor CHAPIN AND BANGS COMPANY, INC	<b>c</b> EIN-PN 06-0290380-004
<b>a</b>	Plan name CHARLOTTE LUNG AND HEALTH CENTER, INC. 401(K) & PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor CHARLOTTE LUNG & HEALTH CENTER	<b>c</b> EIN-PN 56-2190843-001
<b>a</b>	Plan name CHARTER SCHOOL BUSINESS MANAGEMENT INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor CHARTER SCHOOL BUSINESS MANAGEMENT, INC.	<b>c</b> EIN-PN 20-4911319-001
<b>a</b>	Plan name CHERRY VALLEY CLUB 401(K) PLAN	
<b>b</b>	Name of plan sponsor CHERRY VALLEY CLUB, INC.	<b>c</b> EIN-PN 11-0621590-001
<b>a</b>	Plan name CHILDREN AND ADOLESCENT CLINIC PC PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor CHILDREN AND ADOLESCENT CLINIC	<b>c</b> EIN-PN 47-0637178-002
<b>a</b>	Plan name CHILDRENS DAY NURSERY AND FAMILY CENTER 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor CHILDREN'S DAY NURSERY AND FAMILY CENTER	<b>c</b> EIN-PN 22-1493153-002
<b>a</b>	Plan name CHOICE FINANCIAL GROUP 401(K) PLAN	
<b>b</b>	Name of plan sponsor CHOICE BANK	<b>c</b> EIN-PN 45-0117790-001
<b>a</b>	Plan name CITY PETS RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor CITY PETS PLLC	<b>c</b> EIN-PN 01-0693341-001
<b>a</b>	Plan name CLEAN CUT TREE SERVICE, INC 401K PLAN	
<b>b</b>	Name of plan sponsor CLEAN CUT TREE SERVICE, INC	<b>c</b> EIN-PN 36-3963749-002
<b>a</b>	Plan name CLEVENGER FRABLE LAVALLEE INC PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor CLEVENGER FRABLE LAVALLEE INC	<b>c</b> EIN-PN 13-3749900-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	CMP EMPLOYEE SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	CORPORATION FOR THE PROMOTION OF RIFLE PRACTICE AND FIREARMS SAFETY	<b>c</b> EIN-PN 34-1839195-001
<b>a</b>	Plan name	CMS COMMUNICATIONS INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CMS COMMUNICATIONS	<b>c</b> EIN-PN 43-1388746-001
<b>a</b>	Plan name	COASTAL EQUIPMENT CORP. 401K PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	COASTAL EQUIPMENT CORP	<b>c</b> EIN-PN 54-0990869-002
<b>a</b>	Plan name	COASTAL HYDRAULICS INC 401K PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	COASTAL HYDRAULICS INC	<b>c</b> EIN-PN 57-0749948-001
<b>a</b>	Plan name	COBEY, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	COBEY, INC.	<b>c</b> EIN-PN 16-1303278-001
<b>a</b>	Plan name	COLDEN AND SEYMOUR EAR NOSE THROAT AND ALLERGY 401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	COLDEN AND SEYMOUR EAR, NOSE, THROAT AND ALLERGY	<b>c</b> EIN-PN 20-3995326-001
<b>a</b>	Plan name	COLORADO BLUESKY ENTERPRISES INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	COLORADO BLUESKY ENTERPRISES, INC.	<b>c</b> EIN-PN 84-0561888-001
<b>a</b>	Plan name	COLORADO DERMATOLOGY GROUP PLLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	COLORADO DERMATOLOGY GROUP, PLLC	<b>c</b> EIN-PN 81-3218047-001
<b>a</b>	Plan name	COMFORT DENTAL GROUP PLLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	COMFORT DENTAL SPA	<b>c</b> EIN-PN 20-1386426-001
<b>a</b>	Plan name	COMMANDER BUILDINGS 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	COMMANDER BUILDINGS, INC	<b>c</b> EIN-PN 86-3706474-001
<b>a</b>	Plan name	COMMERCIAL GLASS & ALUMINUM INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	COMMERCIAL GLASS & ALUMINUM INC.	<b>c</b> EIN-PN 20-8113192-001
<b>a</b>	Plan name	COMMUNITY CARE OF NORTH CAROLINA INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	COMMUNITY CARE OF NORTH CAROLINA, INC	<b>c</b> EIN-PN 46-3355510-001

<b>Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
<b>a</b> Plan name	COMMUNITY FIRST FOUNDATION 401K PLAN FKA COLORADO GIVES FOUNDATION 401K	
<b>b</b> Name of plan sponsor	COMMUNITY FIRST FOUNDATION	<b>c</b> EIN-PN 51-0157964-001
<b>a</b> Plan name	COMMUNITY WEST CREDIT UNION 401(K) PLAN	
<b>b</b> Name of plan sponsor	COMMUNITY WEST CREDIT UNION	<b>c</b> EIN-PN 38-1844068-002
<b>a</b> Plan name	CONESYS 401(K) PLAN	
<b>b</b> Name of plan sponsor	CONESYS INC	<b>c</b> EIN-PN 95-4724210-001
<b>a</b> Plan name	CONNECT LOGISTICS, INC 401K PLAN	
<b>b</b> Name of plan sponsor	CONNECT LOGISTICS, INC.	<b>c</b> EIN-PN 20-8567688-001
<b>a</b> Plan name	CONTEMPORARY & COSMETIC DERMATOLOGY, PC 401(K) PROFIT SHARING PLAN	
<b>b</b> Name of plan sponsor	CONTEMPORARY & COSMETIC DERMATOLOGY, PC	<b>c</b> EIN-PN 22-3591934-001
<b>a</b> Plan name	CONVENIENT DENTAL SPECIALISTS 401(K) RETIREMENT PLAN	
<b>b</b> Name of plan sponsor	CONVENIENT DENTAL SPECIALISTS	<b>c</b> EIN-PN 81-3731618-001
<b>a</b> Plan name	CORE PHYSICAL THERAPY RETIREMENT PLAN	
<b>b</b> Name of plan sponsor	CORE PHYSICAL THERAPY	<b>c</b> EIN-PN 30-0192702-001
<b>a</b> Plan name	CORNERSTONE SOLUTIONS GROUP INC 401(K) RETIREMENT PLAN	
<b>b</b> Name of plan sponsor	CORNERSTONE SOLUTIONS GROUP	<b>c</b> EIN-PN 43-1554545-001
<b>a</b> Plan name	CORNERSTONEPEO PEP	
<b>b</b> Name of plan sponsor	CORNERSTONE FINANCIAL PARTNERS AND ASSOCIATES	<b>c</b> EIN-PN 93-4011691-001
<b>a</b> Plan name	CORRUGATED REPLACEMENTS INC RETIREMENT PLAN	
<b>b</b> Name of plan sponsor	CORRUGATED REPLACEMENTS, INC.	<b>c</b> EIN-PN 58-1433555-002
<b>a</b> Plan name	COUNTY NATIONAL BANK 401(K) PLAN	
<b>b</b> Name of plan sponsor	HILLSDALE COUNTY NATIONAL BANK	<b>c</b> EIN-PN 38-0650660-001
<b>a</b> Plan name	COUNTY ROAD ASSOCIATION OF MICHIGAN 401(K) PROFIT SHARING PLAN	
<b>b</b> Name of plan sponsor	COUNTY ROAD ASSOCIATION OF MICHIGAN	<b>c</b> EIN-PN 38-6004884-002

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
<b>a</b>	Plan name	CRAFT PATTERN AND MOLD LLC 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	CRAFT PATTERN AND MOLD LLC	<b>c</b> EIN-PN 26-1531960-001
<b>a</b>	Plan name	CRESCENT PRINTING COMPANY, INC. 401K PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	CRESCENT PRINTING COMPANY, INC.	<b>c</b> EIN-PN 39-0981785-001
<b>a</b>	Plan name	CUMMINGS DENTAL 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	MATTHEW J CUMMINGS DDS, PC	<b>c</b> EIN-PN 43-1631536-001
<b>a</b>	Plan name	CURTIS RESTAURANT SUPPLY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CURTIS RESTAURANT SUPPLY	<b>c</b> EIN-PN 42-1560514-001
<b>a</b>	Plan name	CUSTOM MOLDING SOLUTIONS INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	CUSTOM MOLDING SOLUTIONS	<b>c</b> EIN-PN 01-0646199-001
<b>a</b>	Plan name	CUSTOMERSTREAM LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	CUSTOMERSTREAM, LLC	<b>c</b> EIN-PN 20-4900186-001
<b>a</b>	Plan name	CUTEK INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	CUTEK, INC	<b>c</b> EIN-PN 20-2732426-001
<b>a</b>	Plan name	CYPRESS HCM INC 401(K) PROFIT SHARING PLAN TRUST	
<b>b</b>	Name of plan sponsor	CYPRESS HCM	<b>c</b> EIN-PN 82-0852673-001
<b>a</b>	Plan name	D AND F LIQUIDATORS INC EMPLOYEES 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DANDF LIQUIDATORS, INC	<b>c</b> EIN-PN 94-1724360-001
<b>a</b>	Plan name	D GREG SEAL DDS PC PROFIT SHARING TRUST	
<b>b</b>	Name of plan sponsor	D GREG SEAL DDS PC	<b>c</b> EIN-PN 43-1226091-003
<b>a</b>	Plan name	DANIELS AND ERICKSON 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DANIELS AND ERICKSON	<b>c</b> EIN-PN 75-2916499-001
<b>a</b>	Plan name	DAVANNIS INC 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	DAVANNI'S, INC	<b>c</b> EIN-PN 41-1249827-001

<b>Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
<b>a</b> Plan name	DAVIS BROTHERS CONSTRUCTION GROUP 401K PLAN	
<b>b</b> Name of plan sponsor	DAVIS BROTHERS CONSTRUCTION GROUP	<b>c</b> EIN-PN 59-1495341-001
<b>a</b> Plan name	DCS PEP 401(K) PROFIT SHARING PLAN	
<b>b</b> Name of plan sponsor	DCS	<b>c</b> EIN-PN 26-4614358-001
<b>a</b> Plan name	DCSI DERMATOLOGY 401(K) AND PROFIT SHARING PLAN	
<b>b</b> Name of plan sponsor	DERMATOLOGY & CUTANEOUS SURGERY INSTITUTE (DCSI DERMATOLOGY)	<b>c</b> EIN-PN 46-3024222-001
<b>a</b> Plan name	DEEP EAST TEXAS LOCAL WORKFORCE DEVELOPMENT BOARD INC 401(K) PLAN	
<b>b</b> Name of plan sponsor	DEEP EAST TEXAS WORKFORCE SOLUTIONS	<b>c</b> EIN-PN 75-2765176-001
<b>a</b> Plan name	DENTAL PROFESSIONALS, S.C. 401(K) PROFIT SHARING PLAN	
<b>b</b> Name of plan sponsor	DENTAL PROFESSIONALS	<b>c</b> EIN-PN 39-1809079-001
<b>a</b> Plan name	DENTISTRY AT VICKERY CREEK 401(K) PLAN	
<b>b</b> Name of plan sponsor	DENTISTRY AT VICKERY CREEK	<b>c</b> EIN-PN 75-3201454-001
<b>a</b> Plan name	DESIGN RESEARCH ENGINEERING 401(K) AND RETIREMENT SAVINGS PLAN	
<b>b</b> Name of plan sponsor	DESIGN RESEARCH ENGINEERING, LLC	<b>c</b> EIN-PN 38-3264397-001
<b>a</b> Plan name	DICKINSON ARCHITECTS 401(K) PLAN	
<b>b</b> Name of plan sponsor	DICKINSON ARCHITECTS	<b>c</b> EIN-PN 58-1490803-001
<b>a</b> Plan name	DIESEL AFFILIATES 401(K) PROFIT SHARING PLAN	
<b>b</b> Name of plan sponsor	CITY DIESEL OF KNOXVILLE, LLC	<b>c</b> EIN-PN 46-4270134-001
<b>a</b> Plan name	DIGESTIVE HEALTH CONSULTANTS PLC PS PLAN	
<b>b</b> Name of plan sponsor	DIGESTIVE HEALTH CONSULTANTS, PLC	<b>c</b> EIN-PN 38-3416305-001
<b>a</b> Plan name	DIGITAL OFFICE SYSTEMS, INC. 401K PLAN	
<b>b</b> Name of plan sponsor	DIGITAL OFFICE SYSTEMS, INC	<b>c</b> EIN-PN 48-1240864-001
<b>a</b> Plan name	DINWIDDIE-HINES CONSTRUCTION 401(K) RETIREMENT PLAN	
<b>b</b> Name of plan sponsor	DINWIDDIE-HINES CONSTRUCTION	<b>c</b> EIN-PN 68-0348759-002

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.)	
<b>a</b>	Plan name DIRECT MANAGEMENT CORPORATION 401(K) AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor DIRECT MANAGEMENT CORPORATION	<b>c</b> EIN-PN 11-2847720-001
<b>a</b>	Plan name DON MAR CREATIONS INC NONUNION 401(K) PLAN	
<b>b</b>	Name of plan sponsor DON MAR CREATIONS	<b>c</b> EIN-PN 05-0352099-002
<b>a</b>	Plan name DON MAR CREATIONS INC UNION 401(K) PLAN	
<b>b</b>	Name of plan sponsor DON MAR CREATIONS	<b>c</b> EIN-PN 05-0352099-004
<b>a</b>	Plan name DONALD J. SABOURIN DDS PLLC 401K PLAN	
<b>b</b>	Name of plan sponsor DONALD J. SABOURIN DDS PLLC	<b>c</b> EIN-PN 37-1440172-001
<b>a</b>	Plan name DONELANS SAVINGS AND INVESTMENT PLAN	
<b>b</b>	Name of plan sponsor DONELAN'S SUPERMARKETS	<b>c</b> EIN-PN 04-2795789-001
<b>a</b>	Plan name DOWNES SWIMMING POOL CO., INC. PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor DOWNES SWIMMING POOL CO., INC.	<b>c</b> EIN-PN 32-2767503-001
<b>a</b>	Plan name DR RICHARD A STACEY PC PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor DR RICHARD A STACEY, PC	<b>c</b> EIN-PN 47-0827378-001
<b>a</b>	Plan name DYNPRO INC RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor DYNPRO, INC	<b>c</b> EIN-PN 56-2127772-001
<b>a</b>	Plan name EAGLE POINT SOLAR 401(K) PLAN	
<b>b</b>	Name of plan sponsor EAGLE POINT SOLAR, LLC	<b>c</b> EIN-PN 27-0380936-001
<b>a</b>	Plan name EAK PENSION PLAN	
<b>b</b>	Name of plan sponsor VCI, INC.	<b>c</b> EIN-PN 66-0500059-001
<b>a</b>	Plan name EASTERN METAL SUPPLY, INC. 401K PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor EASTERN METAL SUPPLY, INC.	<b>c</b> EIN-PN 59-2249307-001
<b>a</b>	Plan name EDMIK INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor EDMIK INC.	<b>c</b> EIN-PN 36-2367652-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	EDUCATIONAL RESOURCE SYSTEMS INC. 401K PLAN	
<b>b</b>	Name of plan sponsor	EDUCATIONAL RESOURCE SYSTEMS, INC.	<b>c</b> EIN-PN 22-3271219-001
<b>a</b>	Plan name	EDWIN V LONG DDS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	EDWIN V. LONG DDS	<b>c</b> EIN-PN 26-4128121-001
<b>a</b>	Plan name	EIS HOLDINGS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	EIS HOLDINGS	<b>c</b> EIN-PN 82-4707104-001
<b>a</b>	Plan name	ELLINGTON TELEPHONE COMPANY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ELLINGTON TELEPHONE COMPANY	<b>c</b> EIN-PN 43-0258000-001
<b>a</b>	Plan name	EMERALD SITE SERVICES INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	EMERALD SITE SERVICES, INC	<b>c</b> EIN-PN 45-3991150-001
<b>a</b>	Plan name	EMPLOYEE RETIREMENT SAVINGS PLAN OF FIRST COMMUNITY BANK	
<b>b</b>	Name of plan sponsor	FIRST COMMUNITY BANK	<b>c</b> EIN-PN 38-2397827-002
<b>a</b>	Plan name	ENCORE FINANCIAL GROUP RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	ENCORE FINANCIAL	<b>c</b> EIN-PN 20-1924346-001
<b>a</b>	Plan name	ESSEX401K PLAN	
<b>b</b>	Name of plan sponsor	ESSEX PLAZA MANAGEMENT II, LLC	<b>c</b> EIN-PN 22-3412583-001
<b>a</b>	Plan name	EUGENE K. MERECKI, MD, PC SAFE HARBOR 401K & PSP	
<b>b</b>	Name of plan sponsor	EUGENE K. MERECKI, MD, PC	<b>c</b> EIN-PN 03-0488589-001
<b>a</b>	Plan name	EURO TECH CORP PROFIT SHARING 401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	EURO TECH CORPORATION	<b>c</b> EIN-PN 39-1769578-001
<b>a</b>	Plan name	EVAN'S DRUG, INC. PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	EVAN'S DRUG, INC.	<b>c</b> EIN-PN 48-0810802-002
<b>a</b>	Plan name	EVANS GENERAL CONTRACTORS LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	EVANS GENERAL CONTRACTORS, LLC	<b>c</b> EIN-PN 58-2602425-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
<b>a</b>	Plan name	FALCON RAPPAPORT AND BERKMAN PLLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	FALCON RAPPAPORT AND BERKMAN PLLC	<b>c</b> EIN-PN 83-1501701-001
<b>a</b>	Plan name	FAMILY EYE CARE OF NEPA, PC 401K PLAN	
<b>b</b>	Name of plan sponsor	FAMILY EYE CARE OF NEPA PC	<b>c</b> EIN-PN 20-1642828-001
<b>a</b>	Plan name	FAMILY INSURANCE CENTER, LLC 401K PLAN	
<b>b</b>	Name of plan sponsor	FAMILY INSURANCE CENTER, LLC	<b>c</b> EIN-PN 39-1627505-001
<b>a</b>	Plan name	FAMILY VISION 401K PLAN	
<b>b</b>	Name of plan sponsor	FAMILY VISION CENTER OF LA CROSSE LLC	<b>c</b> EIN-PN 81-4895832-001
<b>a</b>	Plan name	FARHAN SIDDIQI MD PA 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	FARHAN SIDDIQI MD PA	<b>c</b> EIN-PN 83-2995871-001
<b>a</b>	Plan name	FAUST CONSULTING ENGINEERS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FAUST CONSULTING ENGINEERS	<b>c</b> EIN-PN 86-2515399-001
<b>a</b>	Plan name	FG BUILDING PRODUCTS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FG BUILDING PRODUCTS	<b>c</b> EIN-PN 83-2093365-001
<b>a</b>	Plan name	FILTERBUY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	TMS MANAGEMENT, LLC	<b>c</b> EIN-PN 82-3713087-001
<b>a</b>	Plan name	FIRST COASTAL CONSTRUCTION CORP 401(K)PLAN PS PLAN	
<b>b</b>	Name of plan sponsor	FIRST COASTAL CONSTRUCTION CORP	<b>c</b> EIN-PN 46-3793642-001
<b>a</b>	Plan name	FIRST COMMONWEALTH FEDERAL CREDIT UNION RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	FIRST COMMONWEALTH FEDERAL CREDIT UNION	<b>c</b> EIN-PN 23-1568331-003
<b>a</b>	Plan name	FIRST MERIT SOLUTIONS LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FIRST MERIT SOLUTIONS, LLC	<b>c</b> EIN-PN 82-4608951-002
<b>a</b>	Plan name	FIRST MINNETONKA CITY BANK EMPLOYEES PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	FIRST MINNETONKA CITY BANK	<b>c</b> EIN-PN 41-0877090-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
<b>a</b>	Plan name	FITE CONSTRUCTION COMPANY LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FITE CONSTRUCTION COMPANY, LLC	<b>c</b> EIN-PN 82-2664626-001
<b>a</b>	Plan name	FIXLER AND LAGATTUTA LLP 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	FIXLER AND LAGATTUTA LLP	<b>c</b> EIN-PN 20-0726956-001
<b>a</b>	Plan name	FOREVER GREEN INTERIOR PLANT DESIGN 401(K)	
<b>b</b>	Name of plan sponsor	FOREVER GREEN	<b>c</b> EIN-PN 47-5379020-001
<b>a</b>	Plan name	FORT WAYNE DERMATOLOGY CONSULTANTS INC PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FORT WAYNE DERMATOLOGY CONSULTANTS, INC	<b>c</b> EIN-PN 30-0149833-005
<b>a</b>	Plan name	FORTY AU 401K PLAN	
<b>b</b>	Name of plan sponsor	FORTY AU, LLC	<b>c</b> EIN-PN 45-3361365-001
<b>a</b>	Plan name	FPS GROUP LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	IPX RETIREMENT	<b>c</b> EIN-PN 38-3931263-001
<b>a</b>	Plan name	FRAMERICA CORPORATION 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	FRAMERICA CORPORATION	<b>c</b> EIN-PN 11-2835418-001
<b>a</b>	Plan name	FRANCISCAN SISTERS OF DILLINGEN 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FRANCISCAN SISTERS OF DILLINGEN	<b>c</b> EIN-PN 45-0226432-001
<b>a</b>	Plan name	FRANK AND DARBY DOE 401(K)	
<b>b</b>	Name of plan sponsor	FRANK AND DARBY DOE	<b>c</b> EIN-PN 20-5100615-001
<b>a</b>	Plan name	FRANK CIOTTA AND ASSOCIATES INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	FRANK CIOTTA AND ASSOCIATES, INC	<b>c</b> EIN-PN 11-2935800-001
<b>a</b>	Plan name	FRANKS REPAIR AND PLUMBING INC PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	FRANK'S REPAIR AND PLUMBING, INC	<b>c</b> EIN-PN 75-1452168-001
<b>a</b>	Plan name	FRAZER & FELDMAN, LLP 401K PLAN	
<b>b</b>	Name of plan sponsor	FRAZER & FELDMAN, LLP	<b>c</b> EIN-PN 26-1528841-002

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	FREEMAN AND MORGAN ARCHITECTS	
<b>b</b>	Name of plan sponsor	FREEMAN AND MORGAN ARCHITECTS	<b>c</b> EIN-PN 54-1182806-001
<b>a</b>	Plan name	FRIENDLY HOLDING COMPANY RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	BETTEN FRIENDLY MOTORS	<b>c</b> EIN-PN 38-2023962-001
<b>a</b>	Plan name	FROST HARDWOOD LUMBER COMPANY 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	FROST HARDWOOD LUMBER COMPANY	<b>c</b> EIN-PN 95-2012458-003
<b>a</b>	Plan name	FUND OFFICE 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FUND OFFICE 401(K) PLAN	<b>c</b> EIN-PN 13-6043636-003
<b>a</b>	Plan name	FUTURE TECHNOLOGIES INC 401(K) RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	FUTURE TECHNOLOGIES, INC	<b>c</b> EIN-PN 06-1240723-004
<b>a</b>	Plan name	FYDA INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FYDA, INC	<b>c</b> EIN-PN 31-1328797-001
<b>a</b>	Plan name	FYI TELEVISION INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FYI TELEVISION INC	<b>c</b> EIN-PN 75-2923372-001
<b>a</b>	Plan name	GANTREX RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	GANTREX, INCORPORATED	<b>c</b> EIN-PN 26-1506279-001
<b>a</b>	Plan name	GAR-BRO MANUFACTURING CO & GARLINGHOUSE BROTHERS INC. PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	GAR-BRO MANUFACTURING	<b>c</b> EIN-PN 95-2320529-001
<b>a</b>	Plan name	GARDEN CITY TREATMENT CENTER, INC. PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	GARDEN CITY TREATMENT CENTER, INC.	<b>c</b> EIN-PN 05-0423525-001
<b>a</b>	Plan name	GASKETS INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	GASKETS, INC	<b>c</b> EIN-PN 39-0981229-001
<b>a</b>	Plan name	GEARS INC 401 K PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	GEARS, INC	<b>c</b> EIN-PN 84-0826066-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	GEM REHAB 401(K) PLAN	
<b>b</b>	Name of plan sponsor	GEM REHAB PT OT SLP PLLC	<b>c</b> EIN-PN 47-2255364-001
<b>a</b>	Plan name	GEMS 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	GUILFOYLE AMBULANCE SERVICE INC.	<b>c</b> EIN-PN 16-1020059-001
<b>a</b>	Plan name	GENEVA ON THE LAKE 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	GENEVA ON THE LAKE RESORT, LLC	<b>c</b> EIN-PN 87-2366986-001
<b>a</b>	Plan name	GETTLESON WITZER AND OCONNOR 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	GETTLESON WITZER AND O'CONNOR	<b>c</b> EIN-PN 95-4802807-001
<b>a</b>	Plan name	GI MEDICINE ASSOCIATES PC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	GI MEDICINE ASSOCIATES, PC	<b>c</b> EIN-PN 38-2081222-002
<b>a</b>	Plan name	GILBERT, WILSON & HUNTER 401(K) PLAN	
<b>b</b>	Name of plan sponsor	GILBERT, WILSON, & HUNTER, LLC	<b>c</b> EIN-PN 86-1993589-001
<b>a</b>	Plan name	GLEN ELLYN VOLUNTEER FIRE COMPANY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	GLEN ELLYN VOLUNTEER FIRE COMPANY	<b>c</b> EIN-PN 36-6091920-002
<b>a</b>	Plan name	GOIDEL LAW GROUP PLLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	GOIDEL LAW GROUP	<b>c</b> EIN-PN 45-3690725-001
<b>a</b>	Plan name	GOLD STAR PLUMBING INC 401(K)	
<b>b</b>	Name of plan sponsor	GOLD STAR PLUMBING INC	<b>c</b> EIN-PN 27-4210076-001
<b>a</b>	Plan name	GOLDEN ARROW 401(K) PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	GOLDEN ARROW TECHNOLOGY AMERICA INC	<b>c</b> EIN-PN 81-3289868-001
<b>a</b>	Plan name	GOLDEN COAST CONSTRUCTION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	GOLDEN COAST CONSTRUCTION	<b>c</b> EIN-PN 52-2449794-001
<b>a</b>	Plan name	GOMEZ & BECKER LLP 401(K) PLAN	
<b>b</b>	Name of plan sponsor	GOMEZ & BECKER LLP	<b>c</b> EIN-PN 81-1214704-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	GOOD DAY PHARMACY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	GOOD DAY PHARMACY	<b>c</b> EIN-PN 84-1047165-001
<b>a</b>	Plan name	GOVERNMENT ACQUISITIONS, INC. 401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	GOVERNMENT ACQUISITIONS	<b>c</b> EIN-PN 31-1269379-001
<b>a</b>	Plan name	GRANBY TELEPHONE COMPANY PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	GRANBY TELEPHONE COMPANY	<b>c</b> EIN-PN 44-0264840-002
<b>a</b>	Plan name	GRAND LODGE A.F & A.M OF MARYLAND 401(K) PLAN	
<b>b</b>	Name of plan sponsor	GRAND LODGE A.F & A.M OF MARYLAND	<b>c</b> EIN-PN 52-0226260-001
<b>a</b>	Plan name	GRANITE LLC 401(K) PROFIT SHARING PLAN TRUST	
<b>b</b>	Name of plan sponsor	GRANITE LLC	<b>c</b> EIN-PN 13-4222122-001
<b>a</b>	Plan name	GRB ENTERTAINMENT 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	GRB ENTERTAINMENT, INC	<b>c</b> EIN-PN 95-4603859-002
<b>a</b>	Plan name	GREEN HILLS HEALTH CARE CENTER INC 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	GREEN HILLS HEALTH CARE CENTER, INC	<b>c</b> EIN-PN 42-1490784-001
<b>a</b>	Plan name	GREGORYS FLEET SUPPLY CORPORATION	
<b>b</b>	Name of plan sponsor	GREGORYS FLEET SUPPLY CORPORATION	<b>c</b> EIN-PN 54-0799767-001
<b>a</b>	Plan name	GREGORYS FOODS INC SAVINGS PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	GREGORY'S FOODS	<b>c</b> EIN-PN 41-1502295-001
<b>a</b>	Plan name	GRETEL LABS INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	GRETEL LABS INC	<b>c</b> EIN-PN 84-2806650-001
<b>a</b>	Plan name	GREY ROCK ENERGY PARTNERS 401(K) RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	GREY ROCK ENERGY MANAGEMENT LLC	<b>c</b> EIN-PN 46-2631848-001
<b>a</b>	Plan name	GROW MARKETING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	GROW MARKETING	<b>c</b> EIN-PN 47-0853473-001

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.)	
<b>a</b>	Plan name <b>GS FOSSUM DDS 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>G.S. FOSSUM, D.D.S.</b>	<b>c</b> EIN-PN <b>74-2509785-001</b>
<b>a</b>	Plan name <b>GUADALUPE COOLING CO 401(K) RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>GUADALUPE COOLING CO</b>	<b>c</b> EIN-PN <b>94-2812347-001</b>
<b>a</b>	Plan name <b>H AND L CONTRACTING LLC 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>H &amp; L CONTRACTING LLC</b>	<b>c</b> EIN-PN <b>46-4082629-001</b>
<b>a</b>	Plan name <b>H&amp;E EQUIPMENT SERVICES, INC. 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>H&amp;E EQUIPMENT SERVICES, INC.</b>	<b>c</b> EIN-PN <b>11-3113455-001</b>
<b>a</b>	Plan name <b>HAAS WAREHOUSING INC RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>HAAS WAREHOUSING, INC.</b>	<b>c</b> EIN-PN <b>44-0369300-001</b>
<b>a</b>	Plan name <b>HAITIAN BRIDGE ALLIANCE, INC 401K PLAN</b>	
<b>b</b>	Name of plan sponsor <b>HAITIAN BRIDGE ALLIANCE, INC</b>	<b>c</b> EIN-PN <b>81-3558713-001</b>
<b>a</b>	Plan name <b>HALIFAX MUTUAL 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>HALIFAX MUTUAL</b>	<b>c</b> EIN-PN <b>56-0946167-001</b>
<b>a</b>	Plan name <b>HALO 401(K) PROFIT SHARING PLAN AND TRUST</b>	
<b>b</b>	Name of plan sponsor <b>HEALTH AND LIFE ORGANIZATION, INC</b>	<b>c</b> EIN-PN <b>02-0714551-001</b>
<b>a</b>	Plan name <b>HANSFORD COUNTY FEEDERS 401K PLAN</b>	
<b>b</b>	Name of plan sponsor <b>HANSFORD COUNTY FEEDERS, LP</b>	<b>c</b> EIN-PN <b>75-2737133-001</b>
<b>a</b>	Plan name <b>HARDING PUMP AND SUPPLY INC PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>HARDING PUMP AND SUPPLY INC</b>	<b>c</b> EIN-PN <b>74-2445090-001</b>
<b>a</b>	Plan name <b>HARMONY FOUNDATION INC 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>HARMONY FOUNDATION, INC</b>	<b>c</b> EIN-PN <b>84-0594732-001</b>
<b>a</b>	Plan name <b>HARVEY TOOL COMPANY, LLC 401(K) RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>HARVEY TOOL COMPANY, LLC</b>	<b>c</b> EIN-PN <b>20-8909122-001</b>

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.)	
<b>a</b>	Plan name HAYNES DOWNARD LLC 401K PLAN	
<b>b</b>	Name of plan sponsor HAYNES DOWNARD LLC	<b>c</b> EIN-PN 63-1199963-001
<b>a</b>	Plan name HD SHIPS 401(K) PLAN	
<b>b</b>	Name of plan sponsor HD SHIPPING SOLUTIONS LLC	<b>c</b> EIN-PN 82-4596159-001
<b>a</b>	Plan name HDS TRADING CORP 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor HDS TRADING CORP	<b>c</b> EIN-PN 56-2303877-001
<b>a</b>	Plan name HEARD CITY, 401K	
<b>b</b>	Name of plan sponsor HEARD CITY	<b>c</b> EIN-PN 45-2550387-001
<b>a</b>	Plan name HEELY BROWN COMPANY INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor HEELY BROWN	<b>c</b> EIN-PN 58-0534179-001
<b>a</b>	Plan name HELLERSTEIN AND BRENNER VISION CENTER PC PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor HELLERSTEIN AND BRENNER VISION CENTER PC	<b>c</b> EIN-PN 84-1185693-001
<b>a</b>	Plan name HERB FITZGERALD COMPANY, INC. 401K PLAN	
<b>b</b>	Name of plan sponsor HERB FITZGERALD	<b>c</b> EIN-PN 39-0887285-004
<b>a</b>	Plan name HIAWATHA RUBBER CO 401 K PLAN	
<b>b</b>	Name of plan sponsor HIAWATHA RUBBER	<b>c</b> EIN-PN 41-0683256-004
<b>a</b>	Plan name HIGHHOUSE OIL OPERATIONS INC 401K PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor HIGHHOUSE OIL OPERATIONS INC	<b>c</b> EIN-PN 20-3844440-001
<b>a</b>	Plan name HIGHWAY MARKETING INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor HIGHWAY MARKETING	<b>c</b> EIN-PN 75-2576978-001
<b>a</b>	Plan name HILMAN INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor HILMAN, INC	<b>c</b> EIN-PN 21-0732602-002
<b>a</b>	Plan name HIQ COMPUTERS 401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor HIQ COMPUTERS	<b>c</b> EIN-PN 20-1991107-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	HORIZON FEDERAL CREDIT UNION CAPITAL ACCUMULATION PLAN	
<b>b</b>	Name of plan sponsor	HORIZON FEDERAL CREDIT UNION	<b>c</b> EIN-PN 24-0840764-033
<b>a</b>	Plan name	HOWDYSHELL FLOORING INC 401(K) SAFE HARBOR PLAN	
<b>b</b>	Name of plan sponsor	HOWDYSHELL FLOORING, INC	<b>c</b> EIN-PN 02-0581900-001
<b>a</b>	Plan name	HPM FOUNDATION INC DBA HEALTHPROMED RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	HPM FOUNDATION INC DBA HEALTHPROMED	<b>c</b> EIN-PN 66-0437924-001
<b>a</b>	Plan name	HUGHES SYSTIQUE PRIVATE LIMITED 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	HUGHES SYSTIQUE PRIVATE LIMITED	<b>c</b> EIN-PN 98-0561217-001
<b>a</b>	Plan name	HUNTER MACLEAN EXLEY AND DUNN PC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	HUNTER, MACLEAN, EXLEY AND DUNN, PC	<b>c</b> EIN-PN 58-2211993-001
<b>a</b>	Plan name	HUTCHMED INTERNATIONAL CORPORATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	HUTCHISON MEDIPHARMA INTL INC	<b>c</b> EIN-PN 35-2589406-001
<b>a</b>	Plan name	IC EMPLOYEE LEASING LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	IC EMPLOYEE LEASING LLC	<b>c</b> EIN-PN 32-0360392-001
<b>a</b>	Plan name	IDEAL ENERGY, INC. 401K PLAN	
<b>b</b>	Name of plan sponsor	IDEAL ENERGY, INC.	<b>c</b> EIN-PN 27-0704312-001
<b>a</b>	Plan name	IMMUNOCORE 401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	IMMUNOCORE LLC	<b>c</b> EIN-PN 90-0777485-001
<b>a</b>	Plan name	INDEPENDENT MINING CONSULTANTS	
<b>b</b>	Name of plan sponsor	INDEPENDENT MINING CONSULTANTS	<b>c</b> EIN-PN 86-0460579-001
<b>a</b>	Plan name	INDUSTRIAL MANAGEMENT CONSULTANTS INC PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	INDUSTRIAL MANAGEMENT CONSULTANTS, INC.	<b>c</b> EIN-PN 75-1976033-005
<b>a</b>	Plan name	INNOV8 SOLUTIONS INC. 401K PLAN AND TRUST FKA ELINE LP 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ELINE LP	<b>c</b> EIN-PN 32-0101597-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	INSIGHT SOURCING GROUP INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	INSIGHT SOURCING GROUP, INC	<b>c</b> EIN-PN 55-0793869-001
<b>a</b>	Plan name	INTEGRATED LOGISTICS 2000 LLC 401K PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor	INTEGRATED LOGISTICS 2000 LLC	<b>c</b> EIN-PN 54-1952915-001
<b>a</b>	Plan name	INTEGRATED WEALTH ADVISORY SERVICES, INC. 401 (K) PS PLAN	
<b>b</b>	Name of plan sponsor	INTEGRATED WEALTH ADVISORY SERVICES, INC.	<b>c</b> EIN-PN 48-0988125-001
<b>a</b>	Plan name	INTERCITY RADIOLOGY PC 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	INTERCITY RADIOLOGY	<b>c</b> EIN-PN 81-0306157-002
<b>a</b>	Plan name	INTERNATIONAL CPR INSTITUTE INC	
<b>b</b>	Name of plan sponsor	INTERNATIONAL CPR INSTITUTE INC	<b>c</b> EIN-PN 22-3963690-001
<b>a</b>	Plan name	INTERNATIONAL SOLUTIONS SERVICES LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	INTERNATIONAL SOLUTIONS SERVICES	<b>c</b> EIN-PN 81-5364821-001
<b>a</b>	Plan name	INTERSTATE PACKAGING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	INTERSTATE PACKAGING CORP	<b>c</b> EIN-PN 26-0629639-001
<b>a</b>	Plan name	INVENTURE RENEWABLES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	INVENTURE RENEWABLES, INC.	<b>c</b> EIN-PN 45-4890950-001
<b>a</b>	Plan name	IPG AUTOMOTIVE USA INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	IPG AUTOMOTIVE USA, INC	<b>c</b> EIN-PN 36-4813731-001
<b>a</b>	Plan name	IPOS SYSTEMS LLC 1081.01(D) PLAN	
<b>b</b>	Name of plan sponsor	IPOS SYSTEMS, LLC	<b>c</b> EIN-PN 20-5617459-002
<b>a</b>	Plan name	IPT 401(K) PLAN	
<b>b</b>	Name of plan sponsor	INNOVATIVE PEOPLE AND TECHNOLOGY CORPORATION	<b>c</b> EIN-PN 47-3516351-001
<b>a</b>	Plan name	IRWIN COHEN GROUP 401(K) PLAN	
<b>b</b>	Name of plan sponsor	IRWIN COHEN GROUP	<b>c</b> EIN-PN 36-4458690-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	IVEY PLASTIC SURGERY LLC 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	IVEY PLASTIC SURGERY, LLC	<b>c</b> EIN-PN 84-2564895-001
<b>a</b>	Plan name	IWEN TOOL SUPPLY COMPANY PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	IWEN TOOL SUPPLY COMPANY	<b>c</b> EIN-PN 38-2777964-001
<b>a</b>	Plan name	J & R LANDSCAPING INCORPORATED 401(K) PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor	J & R LANDSCAPING INCORPORATED	<b>c</b> EIN-PN 11-2958690-001
<b>a</b>	Plan name	J3 COMMUNICATIONS LLC 401(K) AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	J3 COMMUNICATIONS, LLC	<b>c</b> EIN-PN 45-3862349-001
<b>a</b>	Plan name	JAMES A QUAGLINO INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	JAMES A QUAGLINO, INC DBA QAUGLINO ROOFING	<b>c</b> EIN-PN 95-2507376-001
<b>a</b>	Plan name	JAMES R. CHILDERS ARCHITECT, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	JAMES R. CHILDERS ARCHITECT, INC.	<b>c</b> EIN-PN 62-1696085-001
<b>a</b>	Plan name	JAMES RIVER FAMILY DENTISTRY PC EMPLOYEES RETIREMENT PLAN RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	JAMES RIVER FAMILY DENTISTRY, PC	<b>c</b> EIN-PN 80-0188961-001
<b>a</b>	Plan name	JANDJ HEATING AND AIR CONDITIONING INC 401(K) PLAN PKA GROSS HEATING	
<b>b</b>	Name of plan sponsor	JANDJ HEATING AND AIR CONDITIONING, INC	<b>c</b> EIN-PN 83-2621720-001
<b>a</b>	Plan name	JAY FULKROAD AND SONS INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	JAY FULKROAD AND SONS, INC	<b>c</b> EIN-PN 23-2044240-002
<b>a</b>	Plan name	JCC OF NEW ORLEANS RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	JCC OF NEW ORLEANS	<b>c</b> EIN-PN 72-0408937-001
<b>a</b>	Plan name	JENSEN MORSE BAKER PLLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	JENSEN MORSE BAKER PLLC	<b>c</b> EIN-PN 81-2621677-001
<b>a</b>	Plan name	JGK FRANCHISING LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	JGK FRANCHISING, LLC	<b>c</b> EIN-PN 83-4443015-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	JIM S ADLER AND ASSOC 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	JIM S ADLER AND ASSOCIATES	<b>c</b> EIN-PN 74-2122055-001
<b>a</b>	Plan name	JM MOLD SOUTH INC 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	JM MOLD SOUTH, INC	<b>c</b> EIN-PN 34-1486643-002
<b>a</b>	Plan name	JOHN A DAL SIN AND SON INC 401(K) PS PLAN	
<b>b</b>	Name of plan sponsor	JOHN A DAL SIN AND SON, INC	<b>c</b> EIN-PN 41-1408861-001
<b>a</b>	Plan name	JOHN F NEELY DMD PA 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	JOHN F NEELY DMD, PA	<b>c</b> EIN-PN 20-2679548-001
<b>a</b>	Plan name	JOHN S JAMES CO RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	JOHN S JAMES CO	<b>c</b> EIN-PN 58-1276963-001
<b>a</b>	Plan name	JOSEPH C DE GRAFFENRIED JR DDS 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	JOSEPH C DE GRAFFENRIED, JR, DDS	<b>c</b> EIN-PN 74-2558586-001
<b>a</b>	Plan name	JPCE 401(K) PLAN	
<b>b</b>	Name of plan sponsor	J. PONTIERI, P.E., D.P.C	<b>c</b> EIN-PN 83-3525617-001
<b>a</b>	Plan name	JSR INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	JSR, INC	<b>c</b> EIN-PN 76-0735639-001
<b>a</b>	Plan name	JSW 401(K) PLAN	
<b>b</b>	Name of plan sponsor	JAPAN STEEL WORKS AMERICA, INC.	<b>c</b> EIN-PN 95-4249292-001
<b>a</b>	Plan name	JUICE PHARMA ADVERTISING LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	JUICE PHARMA ADVERTISING, LLC	<b>c</b> EIN-PN 75-3085102-001
<b>a</b>	Plan name	JW MOORE GROUP 401(K) PLAN	
<b>b</b>	Name of plan sponsor	JW MOORE PRINTING COMPANY	<b>c</b> EIN-PN 62-0303113-001
<b>a</b>	Plan name	K DYMOND INDUSTRIES INC 401(K) PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor	K DYMOND INDUSTRIES INC	<b>c</b> EIN-PN 45-4690553-001

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.)	
<b>a</b>	Plan name <a href="#">KAPS WHOLESALE 401K RETIREMENT PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">KAPS WHOLESALE FOOD SERVICES, INC.</a>	<b>c</b> EIN-PN <a href="#">38-2456300-001</a>
<b>a</b>	Plan name <a href="#">KELTEC INC 401(K) PROFIT SHARING PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">KELTEC, INC</a>	<b>c</b> EIN-PN <a href="#">34-1378057-003</a>
<b>a</b>	Plan name <a href="#">KEMPER AND KEMPER MDS LLP 401(K) PROFIT SHARING PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">KEMPER AND KEMPER, MD'S LLP</a>	<b>c</b> EIN-PN <a href="#">61-1315308-006</a>
<b>a</b>	Plan name <a href="#">KENSINGTON OPHTHALMOLOGY PLC 401(K) PROFIT SHARING PLAN TRUST</a>	
<b>b</b>	Name of plan sponsor <a href="#">KENSINGTON OPHTHALMOLOGY PLC</a>	<b>c</b> EIN-PN <a href="#">38-3594965-001</a>
<b>a</b>	Plan name <a href="#">KEW FOREST PLUMBING AND HEATING INC 401(K) PROFIT SHARING PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">KEW FOREST PLUMBING AND HEATING, INC</a>	<b>c</b> EIN-PN <a href="#">11-0951020-001</a>
<b>a</b>	Plan name <a href="#">KEYSTONE LIME AND COMPANIES 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">KEYSTONE LIME AND COMPANIES</a>	<b>c</b> EIN-PN <a href="#">25-1146455-002</a>
<b>a</b>	Plan name <a href="#">KEYSTONE REAL ESTATE GROUP INC RETIREMENT PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">KEYSTONE REAL ESTATE GROUP, INC</a>	<b>c</b> EIN-PN <a href="#">25-1315549-001</a>
<b>a</b>	Plan name <a href="#">KIRBY AND KIRBY 401(K) PROFIT SHARING PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">KIRBY AND KIRBY, LLP</a>	<b>c</b> EIN-PN <a href="#">81-2373577-001</a>
<b>a</b>	Plan name <a href="#">KIRK RUDY INC PROFIT SHARING PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">KIRK RUDY, INC</a>	<b>c</b> EIN-PN <a href="#">36-2639051-002</a>
<b>a</b>	Plan name <a href="#">KITCHIN &amp; SONS 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">KITCHIN &amp; SON, INC.</a>	<b>c</b> EIN-PN <a href="#">35-0865462-001</a>
<b>a</b>	Plan name <a href="#">KITTREDGE ARCHERY CO 401K PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">KITTREDGE ARCHERY CO</a>	<b>c</b> EIN-PN <a href="#">95-2103532-001</a>
<b>a</b>	Plan name <a href="#">KJB FIREPLACES, INC. 401K PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">KJB FIREPLACES INC.</a>	<b>c</b> EIN-PN <a href="#">80-0403564-001</a>

<b>Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
<b>a</b> Plan name	KLEINPETER FARMS DAIRY LLC 401(K) PLAN	
<b>b</b> Name of plan sponsor	KLEINPETER FARMS DAIRY, LLC	<b>c</b> EIN-PN 72-0486435-003
<b>a</b> Plan name	KLOPFENSTEIN HOMEROOMS FURNITURE 401K PLAN	
<b>b</b> Name of plan sponsor	KLOPFENSTEIN HOMEROOMS FURNITURE	<b>c</b> EIN-PN 35-1887230-001
<b>a</b> Plan name	KNOWLEDGEWORKS FOUNDATION 401(K) & RETIREMENT PLAN	
<b>b</b> Name of plan sponsor	KNOWLEDGEWORKS FOUNDATION	<b>c</b> EIN-PN 31-1321973-003
<b>a</b> Plan name	KOKO CONTRACTING 401(K) PROFIT SHARING PLAN	
<b>b</b> Name of plan sponsor	KOKO CONTRACTING, INC	<b>c</b> EIN-PN 11-2679631-002
<b>a</b> Plan name	KONEN AND ASSOCIATES 401(K) PLAN	
<b>b</b> Name of plan sponsor	KONEN AND ASSOCIATES, PA	<b>c</b> EIN-PN 75-2877778-001
<b>a</b> Plan name	KORBER PHARMA SOFTWARE, INC 401K PROFIT SHARING PLAN FKA WERUM IT SOLUTIONS AMERICA INC 401 K PROFIT SHARING PLAN TRUST	
<b>b</b> Name of plan sponsor	KORBER PHARMA SOFTWARE FKA WERUM IT SOLUTIONS INC.	<b>c</b> EIN-PN 51-0401251-001
<b>a</b> Plan name	KRA CORPORATION 401(K) PROFIT SHARING PLAN	
<b>b</b> Name of plan sponsor	KRA CORPORATION	<b>c</b> EIN-PN 52-1230252-001
<b>a</b> Plan name	KRIEGER KLATT ARCHITECTS 401(K) PLAN	
<b>b</b> Name of plan sponsor	KRIEGER KLATT ARCHITECTS	<b>c</b> EIN-PN 32-0336788-001
<b>a</b> Plan name	KRISHNAN COMPANY PC CPAS 401(K) PROFIT SHARING PLAN	
<b>b</b> Name of plan sponsor	KRISHNAN COMPANY, PC, CPAS	<b>c</b> EIN-PN 58-2621421-001
<b>a</b> Plan name	L G BARCUS AND SONS INC PROFIT SHARING 401(K) PLAN	
<b>b</b> Name of plan sponsor	LG BARCUS AND SONS, INC	<b>c</b> EIN-PN 48-0537757-002
<b>a</b> Plan name	L J GONZER ASSOCIATES INC SAVINGS PLAN	
<b>b</b> Name of plan sponsor	L J GONZER ASSOCIATES, INC	<b>c</b> EIN-PN 22-1671351-002
<b>a</b> Plan name	L.A.S. CORPORATION 401K PLAN	
<b>b</b> Name of plan sponsor	LABOR AIDING SYSTEMS CORPORATION	<b>c</b> EIN-PN 46-2427882-001

<b>Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
<b>a</b>	Plan name	LA BELLA VITA MEDI SPA 401K PLAN
<b>b</b>	Name of plan sponsor	LA BELLA VITA MEDI SPA
<b>c</b>	EIN-PN	88-2471973-001
<b>a</b>	Plan name	LA MARCHE MANUFACTURING COMPANY 401(K) PLAN
<b>b</b>	Name of plan sponsor	LA MARCHE MANUFACTURING COMPANY
<b>c</b>	EIN-PN	36-2305262-001
<b>a</b>	Plan name	LACO TECHNOLOGIES, INC. 401(K) PROFIT SHARING PLAN
<b>b</b>	Name of plan sponsor	LACO TECHNOLOGIES, INC.
<b>c</b>	EIN-PN	87-0367986-001
<b>a</b>	Plan name	LAKES ORAL & MAXILLOFACIAL SURGERY P.C. 401(K) PLAN
<b>b</b>	Name of plan sponsor	LAKES ORAL & MAXILLOFACIAL SURGERY
<b>c</b>	EIN-PN	76-0766579-001
<b>a</b>	Plan name	LAKESHORE FAMILY DENTAL CARE SC 401(K) PROFIT SHARING PLAN
<b>b</b>	Name of plan sponsor	LAKESHORE FAMILY DENTAL CARE SC
<b>c</b>	EIN-PN	30-0010946-001
<b>a</b>	Plan name	LANDTECH LLC 401(K) PLAN
<b>b</b>	Name of plan sponsor	LANDTECH, LLC
<b>c</b>	EIN-PN	47-5051198-003
<b>a</b>	Plan name	LANGE BROS. WOODWORK CO., INC. 401K PLAN
<b>b</b>	Name of plan sponsor	LANGE BROS. WOODWORK CO., INC.
<b>c</b>	EIN-PN	39-0866468-001
<b>a</b>	Plan name	LARA & LUNA APC 401K PLAN
<b>b</b>	Name of plan sponsor	LARA & LUNA APC
<b>c</b>	EIN-PN	80-0715437-001
<b>a</b>	Plan name	LAW OFFICES OF DAVID W. HOLUB PC RETIREMENT PLAN AND TRUST
<b>b</b>	Name of plan sponsor	LAW OFFICES OF DAVID W. HOLUB
<b>c</b>	EIN-PN	20-3383755-001
<b>a</b>	Plan name	LAYDON INDUSTRIES LLC 401(K) PLAN 003
<b>b</b>	Name of plan sponsor	LAYDON INDUSTRIES, LLC
<b>c</b>	EIN-PN	20-2193189-003
<b>a</b>	Plan name	LDI MAP LLC 401(K) PLAN
<b>b</b>	Name of plan sponsor	LDI MAP, LLC
<b>c</b>	EIN-PN	37-1852548-001
<b>a</b>	Plan name	LEADINGAGE CALIFORNIA RETIREMENT PLAN
<b>b</b>	Name of plan sponsor	LEADINGAGE CALIFORNIA
<b>c</b>	EIN-PN	35-2509858-003

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.)		
<b>a</b>	Plan name LECLAIR INDUSTRIES INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor LECLAIR INDUSTRIES	<b>c</b> EIN-PN 64-0669317-001
<b>a</b>	Plan name LEDGEWOOD A PROFESSIONAL CORPORATION 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor LEDGEWOOD	<b>c</b> EIN-PN 23-2663869-001
<b>a</b>	Plan name LEE COUNTY 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor LEE COUNTY	<b>c</b> EIN-PN 42-6004689-001
<b>a</b>	Plan name LEGAL SERVICES OF NORTHERN CALIFORNIA 401(K) PLAN	
<b>b</b>	Name of plan sponsor LEGAL SERVICES OF NORTHERN CALIFORNIA	<b>c</b> EIN-PN 94-1384659-002
<b>a</b>	Plan name LEHMAN & EILEN LLP 401(K) PLAN	
<b>b</b>	Name of plan sponsor LEHMAN & EILEN LLP	<b>c</b> EIN-PN 11-3211659-001
<b>a</b>	Plan name LEZYNE USA INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor LEZYNE USA, INC	<b>c</b> EIN-PN 26-1751977-001
<b>a</b>	Plan name LIBURDI DIMETRICS CORPORATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor LIBURDI DIMETRICS CORPORATION	<b>c</b> EIN-PN 56-2056699-001
<b>a</b>	Plan name LIN CHAI RAWLINSON CPA PC 401(K) PROFIT SHARING	
<b>b</b>	Name of plan sponsor LIN CHAI RAWLINSON, CPA	<b>c</b> EIN-PN 20-4109393-001
<b>a</b>	Plan name LOCATI ARCHITECTS PLLC 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor LOCATI ARCHITECTS	<b>c</b> EIN-PN 20-2075108-001
<b>a</b>	Plan name LOCKART PANAGIOTOU AND CO PLLC 401(K) PROFIT SHARING	
<b>b</b>	Name of plan sponsor LOCKART PANAGIOTOU AND CO PLLC	<b>c</b> EIN-PN 47-2665399-001
<b>a</b>	Plan name LSR LLC 401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor LOUISIANA SUGAR REFINING, LLC	<b>c</b> EIN-PN 80-0489077-001
<b>a</b>	Plan name LVZ INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor LVZ, INC	<b>c</b> EIN-PN 38-3154499-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
<b>a</b>	Plan name	M TERRY ENTERPRISES INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	M TERRY ENTERPRISES, INC 401(K) PLAN	<b>c</b> EIN-PN 75-2581185-001
<b>a</b>	Plan name	MAHER AND COMPANY PC PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	MAHER AND COMPANY, PC	<b>c</b> EIN-PN 43-1857127-001
<b>a</b>	Plan name	MAJIDIAN DENTAL PC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	MAJIDIAN DENTAL PC	<b>c</b> EIN-PN 83-0889738-001
<b>a</b>	Plan name	MANDLER ENTERPRISES LTD 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	MANDLER ENTERPRISES, LTD.	<b>c</b> EIN-PN 13-3912848-003
<b>a</b>	Plan name	MAR BAL INC RETIREMENT SAVING PLAN	
<b>b</b>	Name of plan sponsor	MAR BAL INC	<b>c</b> EIN-PN 34-1059601-004
<b>a</b>	Plan name	MARATHON GROUP 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	MARATHON GROUP	<b>c</b> EIN-PN 47-3303030-001
<b>a</b>	Plan name	MARK III CONSTRUCTION, INC. 401K PLAN	
<b>b</b>	Name of plan sponsor	MARK III CONSTRUCTION	<b>c</b> EIN-PN 27-0998726-002
<b>a</b>	Plan name	MARTIN RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	MARTIN SULLIVAN INC	<b>c</b> EIN-PN 37-1322641-001
<b>a</b>	Plan name	MAST HEATING RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	MAST HEATING AND COMMERCIAL REFRIGERATION, INC	<b>c</b> EIN-PN 38-2263878-001
<b>a</b>	Plan name	MATTHEWS BROTHERS DREDGING, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	MATTHEWS BROTHERS DREDGING, INC.	<b>c</b> EIN-PN 64-0905775-001
<b>a</b>	Plan name	MATT'S AUTOMOTIVE SERVICE CENTER, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	MATT'S AUTOMOTIVE SERVICE CENTER, LLC	<b>c</b> EIN-PN 45-3459495-001
<b>a</b>	Plan name	MAVEN380 LLC DBA 380 COMPANIES RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	MAVEN380 LLC DBA 380 COMPANIES	<b>c</b> EIN-PN 88-1578135-003

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.)	
<b>a</b>	Plan name <b>MAXI AIDS INC 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MAXI AIDS, INC</b>	<b>c</b> EIN-PN <b>11-2812429-001</b>
<b>a</b>	Plan name <b>MBM FABRICATORS COMPANY INC EMPLOYEES SAVINGS AND RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MBM FABRICATORS COMPANY, INC</b>	<b>c</b> EIN-PN <b>38-1684224-001</b>
<b>a</b>	Plan name <b>MCM 401K PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MPF MANAGEMENT, INC</b>	<b>c</b> EIN-PN <b>26-3991822-003</b>
<b>a</b>	Plan name <b>MEALS ON WHEELS OF GREENVILLE INC 401(K) RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MEALS ON WHEELS OF GREENVILLE, INC</b>	<b>c</b> EIN-PN <b>57-0531378-003</b>
<b>a</b>	Plan name <b>MEDIA STRATEGIES INC PROFIT SHARING PLAN AND TRUST</b>	
<b>b</b>	Name of plan sponsor <b>MEDIA STRATEGIES</b>	<b>c</b> EIN-PN <b>38-2484680-001</b>
<b>a</b>	Plan name <b>MEDICAL DEVELOPMENT MANAGEMENT LLC</b>	
<b>b</b>	Name of plan sponsor <b>MEDICAL DEVELOPMENT MANAGEMENT, LLC</b>	<b>c</b> EIN-PN <b>48-1308416-001</b>
<b>a</b>	Plan name <b>MEDLER ELECTRIC COMPANY SAVINGS AND PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MEDLER ELECTRIC COMPANY</b>	<b>c</b> EIN-PN <b>38-1655673-003</b>
<b>a</b>	Plan name <b>MEDTHERAPY BIOTECHNOLOGY INC 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MEDTHERAPY BIOTECH TECHNOLOGY INC</b>	<b>c</b> EIN-PN <b>83-1065536-001</b>
<b>a</b>	Plan name <b>MEJDI TOURS 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MEJDI TOURS</b>	<b>c</b> EIN-PN <b>27-1602633-001</b>
<b>a</b>	Plan name <b>MENACO CORPORATION EMPLOYEES PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MENACO CORPORATION</b>	<b>c</b> EIN-PN <b>66-0400756-001</b>
<b>a</b>	Plan name <b>MERCY CHEFS 401K PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MERCY CHEFS, INC.</b>	<b>c</b> EIN-PN <b>20-5050449-001</b>
<b>a</b>	Plan name <b>MERRELL FAMILY DENTISTRY 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MERRELL FAMILY DENTISTRY</b>	<b>c</b> EIN-PN <b>46-4288509-001</b>

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.)		
<b>a</b>	Plan name MERRIFIELD GARDEN CENTER 401(K) PROFIT SHARING RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor MERRIFIELD GARDEN CENTER	<b>c</b> EIN-PN 54-0936775-001
<b>a</b>	Plan name MESA MACHINE INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor MESA MACHINE INC.	<b>c</b> EIN-PN 75-2281384-125
<b>a</b>	Plan name METAMETRICS, INC. RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor METAMETRICS, INC.	<b>c</b> EIN-PN 56-1520095-002
<b>a</b>	Plan name METRO EDGE DEVELOPMENT PARTNERS 401K PLAN	
<b>b</b>	Name of plan sponsor METRO EDGE DEVELOPMENT PARTNERS	<b>c</b> EIN-PN 85-1494108-001
<b>a</b>	Plan name METROPOLITAN CONTRACTING COMPANY LLC EMPLOYEES 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor METROPOLITAN CONTRACTING CO LLC	<b>c</b> EIN-PN 74-2538899-001
<b>a</b>	Plan name MEWESD LLC DBA PARTNER IN AGING 401(K) PLAN	
<b>b</b>	Name of plan sponsor MEWESD, LLC	<b>c</b> EIN-PN 83-2413517-001
<b>a</b>	Plan name MGROUP ARCHITECTS INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor MGROUP ARCHITECTS, INC	<b>c</b> EIN-PN 20-1428623-001
<b>a</b>	Plan name MICHIGAN PHARMACISTS ASSOC EEF DEFERRED COMP PLAN	
<b>b</b>	Name of plan sponsor MICHIGAN PHARMACISTS ASSOC	<b>c</b> EIN-PN 38-0830740-002
<b>a</b>	Plan name MICKEY TRUCK BODIES INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor MICKEY TRUCK BODIES, INC	<b>c</b> EIN-PN 56-0512881-004
<b>a</b>	Plan name MIKE BARNEY NISSAN 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor MIKE BARNEY NISSAN	<b>c</b> EIN-PN 16-1128183-001
<b>a</b>	Plan name MILL SUPPLIES INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor MILL SUPPLIES, INC	<b>c</b> EIN-PN 64-0327921-001
<b>a</b>	Plan name MILLER EXCAVATING INC NON UNION 401(K) PLAN	
<b>b</b>	Name of plan sponsor MILLER EXCAVATING, INC	<b>c</b> EIN-PN 41-0951547-001

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.)		
<b>a</b>	Plan name MILLER-STEPHENSON & ASSOCIATES P.C. 401K PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor MILLER-STEPHENSON & ASSOCIATES P.C	<b>c</b> EIN-PN 54-1109225-001
<b>a</b>	Plan name MITCHELL SALES AGENCY INC 401(K) AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor MITCHELL SALES AGENCY, INC	<b>c</b> EIN-PN 82-1500725-001
<b>a</b>	Plan name MJD ADVISORS 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor MJD ADVISORS	<b>c</b> EIN-PN 87-2510335-001
<b>a</b>	Plan name MMM INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor MMM PLUMBING, HEATING, AND A C, INC	<b>c</b> EIN-PN 75-1941004-001
<b>a</b>	Plan name MODEN GIROUX INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor MODEN GIROUX, INC	<b>c</b> EIN-PN 16-1201730-001
<b>a</b>	Plan name MOHS MICROGRAPHIC AND SKIN SURGERY PLLC 401(K)	
<b>b</b>	Name of plan sponsor MOHS MICROGRAPHIC AND SKIN SURGERY PLLC	<b>c</b> EIN-PN 27-5099347-001
<b>a</b>	Plan name MOMENTOUS HEALTH CARE BATTLE CREEK 401K PLAN	
<b>b</b>	Name of plan sponsor MOMENTOUS HEALTH CARE	<b>c</b> EIN-PN 86-2476347-001
<b>a</b>	Plan name MONAHAN PARTNERS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor MONAHAN PARTNERS, INC	<b>c</b> EIN-PN 27-4287133-001
<b>a</b>	Plan name MONTGOMERY NEUROSURGICAL ASSOCIATES PC PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor MONTGOMERY NEUROSURGICAL ASSOCIATES, PC	<b>c</b> EIN-PN 63-0995627-001
<b>a</b>	Plan name MORRIS ASSOCIATES INC PROFIT SHARING 401(K) TRUST	
<b>b</b>	Name of plan sponsor MORRIS ASSOCIATES, INC	<b>c</b> EIN-PN 38-1675733-001
<b>a</b>	Plan name MORRIS HEIGHTS HEALTH CENTER RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor MORRIS HEIGHTS HEALTH CENTER	<b>c</b> EIN-PN 06-1081232-001
<b>a</b>	Plan name MORRISH-WALLACE CONSTRUCTION, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor MORRISH-WALLACE CONSTRUCTION, INC. DBA RYBA MARINE CONSTRUCTION CO.	<b>c</b> EIN-PN 38-2745465-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	MORRISON VENTURES, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	MORRISON VENTURES, LLC	<b>c</b> EIN-PN 74-2840710-001
<b>a</b>	Plan name	MORTENSON KIM RAIDIOUS INC 401K PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	MORTENSON KIM RAIDIOUS INC	<b>c</b> EIN-PN 39-1091017-001
<b>a</b>	Plan name	MOUNTAIN PLAINS YOUTH SERVICES YOUTHWORKS 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	MOUNTAIN PLAINS YOUTH SERVICES YOUTHWORKS	<b>c</b> EIN-PN 46-0345922-001
<b>a</b>	Plan name	MOVENDO CAPITAL US INC	
<b>b</b>	Name of plan sponsor	MOVENDO CAPITAL US, INC	<b>c</b> EIN-PN 32-0695084-001
<b>a</b>	Plan name	MPM 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	MADISON PROPERTY MANAGEMENT, INC.	<b>c</b> EIN-PN 39-1622225-001
<b>a</b>	Plan name	MR GREENJEANS PRODUCE EMPLOYEE RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	MR GREENJEANS PRODUCE	<b>c</b> EIN-PN 59-3072478-001
<b>a</b>	Plan name	MRA ADVERTISING PRODUCTION SUPPORT SERVICES INC EMPLOYEES PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	MRA ADVERTISING PRODUCTION SUPPORT SERVICES, INC	<b>c</b> EIN-PN 31-0998090-001
<b>a</b>	Plan name	MSH FAMILY ENTERPRISES 401(K) PLAN	
<b>b</b>	Name of plan sponsor	MSH FAMILY ENTERPRISES, LLC DBA SHEPHARD FUNERAL CHAPEL	<b>c</b> EIN-PN 92-1662936-001
<b>a</b>	Plan name	MUELLNER CONSTRUCTION OF ILLINOIS INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	MUELLNER CONSTRUCTION OF ILLINOIS, INC	<b>c</b> EIN-PN 36-3438307-001
<b>a</b>	Plan name	MULTI CARE MEDICAL PC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	MULTI CARE MEDICAL	<b>c</b> EIN-PN 43-1905031-001
<b>a</b>	Plan name	MULTIEXPORT FOODS INC 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	MULTIEXPORT FOODS, INC	<b>c</b> EIN-PN 65-0361348-002
<b>a</b>	Plan name	MURR SILER AND ACCOMAZZO PC 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	MURR SILER AND ACCOMAZZO, PC	<b>c</b> EIN-PN 84-1203371-002

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	NATIONWIDE MARKETING GROUP LLC RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	NATIONWIDE MARKETING GROUP, LLC	<b>c</b> EIN-PN 55-0817538-001
<b>a</b>	Plan name	NATURES WAY FARMS LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	NATURE'S WAY FARMS, LLC	<b>c</b> EIN-PN 83-1033824-001
<b>a</b>	Plan name	NCDS PEP	
<b>b</b>	Name of plan sponsor	RETIREMENT PLAN SOLUTIONS, INC	<b>c</b> EIN-PN 56-1762637-002
<b>a</b>	Plan name	NDC CONSTRUCTION COMPANY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	NDC CONSTRUCTION COMPANY	<b>c</b> EIN-PN 59-3423927-001
<b>a</b>	Plan name	NEBRASKA ORTHOPAEDIC PHYSICAL THERAPY PC SAFE HARBOR PLAN	
<b>b</b>	Name of plan sponsor	NEBRASKA ORTHOPAEDIC PHYSICAL THERAPY, PC	<b>c</b> EIN-PN 20-4862752-001
<b>a</b>	Plan name	NEISD DEFERRED COMPENSATION RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	NORTH EAST INDEPENDENT SCHOOL DISTRICT	<b>c</b> EIN-PN 74-6015301-001
<b>a</b>	Plan name	NELSON BROTHERS INC EMPLOYEE CAPITAL ACCUMULATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	NELSON BROTHERS, INC	<b>c</b> EIN-PN 63-0479482-002
<b>a</b>	Plan name	NENNEKER ELECTRIC SERVICE INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	NENNEKER ELECTRIC SERVICE, INC	<b>c</b> EIN-PN 35-2018821-001
<b>a</b>	Plan name	NETCOM SERVICES LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	NETCOM SERVICES, LLC	<b>c</b> EIN-PN 47-0845862-001
<b>a</b>	Plan name	NEUMANN CO INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	NEUMANN CO, INC	<b>c</b> EIN-PN 39-1418597-001
<b>a</b>	Plan name	NEW DAY DENTISTRY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	NEW DAY DENTISTRY	<b>c</b> EIN-PN 26-2618923-001
<b>a</b>	Plan name	NEWLAND CONSTRUCTION COMPANY, INC. 401(K) DEFERRED COMPENSATION AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	NEWLAND CONSTRUCTION CO., INC.	<b>c</b> EIN-PN 91-0489231-001

<b>Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>		
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
<b>a</b>	Plan name	NEXGEN 401(K)
<b>b</b>	Name of plan sponsor	NEXGEN INDUSTRIAL SERVICES, INC
<b>c</b>	EIN-PN	27-3073403-001
<b>a</b>	Plan name	NEXONE, INC. 401(K) PLAN
<b>b</b>	Name of plan sponsor	NEXONE, INC.
<b>c</b>	EIN-PN	87-0661191-001
<b>a</b>	Plan name	NEXT RETIREMENT PLAN ENTERPRISE
<b>b</b>	Name of plan sponsor	MAGII PENSION SERVICES, LLC
<b>c</b>	EIN-PN	26-2480211-001
<b>a</b>	Plan name	NEXVEL CONSULTING LLC RETIREMENT PLAN
<b>b</b>	Name of plan sponsor	NEXVEL CONSULTING LLC
<b>c</b>	EIN-PN	66-0678233-001
<b>a</b>	Plan name	NIC 401(K) SAVINGS PLAN
<b>b</b>	Name of plan sponsor	NET-INTEGRATED CONSULTING (NIC)
<b>c</b>	EIN-PN	42-1416082-001
<b>a</b>	Plan name	NICKLES BAKERIES EMPLOYEES 401(K) PLAN
<b>b</b>	Name of plan sponsor	ALFRED NICKLES BAKERY, INC
<b>c</b>	EIN-PN	34-0428345-002
<b>a</b>	Plan name	NICKLES BAKERY 401(K) PLAN FOR BARGAINING EMPLOYEES
<b>b</b>	Name of plan sponsor	ALFRED NICKLES BAKERY, INC
<b>c</b>	EIN-PN	34-0428345-003
<b>a</b>	Plan name	NIORARA RESEARCH AND DEVELOPMENT CORP 401(K) PROFIT SHARING PLAN
<b>b</b>	Name of plan sponsor	NIORARA RESEARCH AND DEVELOPMENT CORP
<b>c</b>	EIN-PN	48-1036375-002
<b>a</b>	Plan name	NOONAN LANCE BOYER AND BANACH 401(K) PROFIT SHARING PLAN
<b>b</b>	Name of plan sponsor	NOONAN LANCE BOYER AND BANACH
<b>c</b>	EIN-PN	81-0912398-001
<b>a</b>	Plan name	NORFOLK DREDGING COMPANY PROFIT SHARING PLAN
<b>b</b>	Name of plan sponsor	NORFOLK DREDGING COMPANY
<b>c</b>	EIN-PN	54-0320740-001
<b>a</b>	Plan name	NORTH COAST OCCUPATIONAL, PHYSICAL & SPEECH THERAPY, LLC 401K PLAN
<b>b</b>	Name of plan sponsor	NORTH COAST OCCUPATIONAL, PHYSICAL & SPEECH THERAPY, LLC
<b>c</b>	EIN-PN	16-1466479-001
<b>a</b>	Plan name	NORTHFIELD MANUFACTURING, INC. EMPLOYEES P.S. PLAN 401K
<b>b</b>	Name of plan sponsor	NORTHFIELD MANUFACTURING, INC.
<b>c</b>	EIN-PN	38-2062374-002

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.)	
<b>a</b>	Plan name NORTHWEST COMMUNITY CONNECTIONS 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor NORTHWEST COMMUNITY CONNECTIONS	<b>c</b> EIN-PN 20-5865035-001
<b>a</b>	Plan name NOTCHVIEW DENTAL GROUP LLP 401(K) PS PLAN	
<b>b</b>	Name of plan sponsor NOTCHVIEW DENTAL GROUP LLP	<b>c</b> EIN-PN 22-3413144-001
<b>a</b>	Plan name NOTEABLE LLC	
<b>b</b>	Name of plan sponsor NOTEABLE, LLC	<b>c</b> EIN-PN 81-1019681-001
<b>a</b>	Plan name NOVA MARKETING SERVICES RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor NOVA MARKETING, LLC	<b>c</b> EIN-PN 20-3470103-001
<b>a</b>	Plan name NPOWER SOLUTIONS, LLC 401K PLAN PKA ALLIED POWER RESOURCES 401K PLAN	
<b>b</b>	Name of plan sponsor NPOWER SOLUTIONS, LLC	<b>c</b> EIN-PN 82-1707939-001
<b>a</b>	Plan name NRHA P.A. PROFIT SHARING 401K PLAN & TRUST	
<b>b</b>	Name of plan sponsor NRHA P.A.	<b>c</b> EIN-PN 27-4601121-001
<b>a</b>	Plan name OAKLAND DIVISION CHAPTER 13 STANDING TRUSTEE 401(K) PLAN	
<b>b</b>	Name of plan sponsor OAKLAND DIVISION CHAPTER 13	<b>c</b> EIN-PN 94-3224501-001
<b>a</b>	Plan name OFFICE OF THE CHAPTER 13 TRUSTEE AKRON OHIO 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor OFFICE OF THE CHAPTER 13 TRUSTEE, AKRON, OHIO	<b>c</b> EIN-PN 34-1566275-001
<b>a</b>	Plan name OLASH MEDICAL ASSOCIATES RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor OLASH MEDICAL ASSOCIATES	<b>c</b> EIN-PN 61-0673730-004
<b>a</b>	Plan name OLSON AND OLSON 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor OLSON AND OLSON LLP	<b>c</b> EIN-PN 74-1901996-001
<b>a</b>	Plan name OLYMPIA SALES COMPANY INC EMPLOYEE 401(K) PLAN	
<b>b</b>	Name of plan sponsor OLYMPIA SALES COMPANY, INC	<b>c</b> EIN-PN 87-0228488-003
<b>a</b>	Plan name OMAHA PRIMARY EYE CARE 401(K) PLAN	
<b>b</b>	Name of plan sponsor OMAHA PRIMARY EYE CARE	<b>c</b> EIN-PN 47-0808437-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	OPEN TECHNOLOGY SOLUTIONS LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	OPEN TECHNOLOGY SOLUTIONS, LLC	<b>c</b> EIN-PN 20-0038158-001
<b>a</b>	Plan name	ORTHOPAEDICS SPINE AND SPORTS 401K PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	TOTAL ORTHOPEDIC SPINE AND SPORTS MEDICINE	<b>c</b> EIN-PN 20-5290355-001
<b>a</b>	Plan name	P&C AUTO	
<b>b</b>	Name of plan sponsor	CARRIBEAN AUTO DISTRIBUTIONS	<b>c</b> EIN-PN 66-0661674-001
<b>a</b>	Plan name	PACIFIC STANDARD CORPORATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PACIFIC STANDARD CORPORATION	<b>c</b> EIN-PN 91-1546277-001
<b>a</b>	Plan name	PACIFIC WEST ASSOCIATION OF REALTORS 401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	PACIFIC WEST ASSOCIATION OF REALTORS	<b>c</b> EIN-PN 33-0729887-001
<b>a</b>	Plan name	PADRO HOMES INC 401(K)	
<b>b</b>	Name of plan sponsor	PADRO HOMES INC	<b>c</b> EIN-PN 81-1173385-001
<b>a</b>	Plan name	PALMETTO PROACTIVE HEALTHCARE 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PALMETTO PROACTIVE HEALTHCARE, LLC	<b>c</b> EIN-PN 27-1636007-002
<b>a</b>	Plan name	PANTHEON WEALTH PLANNING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PANTHEON WEALTH PLANNING	<b>c</b> EIN-PN 46-1605584-001
<b>a</b>	Plan name	PAPERLESS INC 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	PAPERLESS INC	<b>c</b> EIN-PN 26-3488606-001
<b>a</b>	Plan name	PARALLAX VISUAL COMMUNICATIONS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PARALLAX VISUAL COMMUNICATIONS	<b>c</b> EIN-PN 36-4664280-001
<b>a</b>	Plan name	PATTERSON BROTHERS INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	PATTERSON BROTHERS, INC	<b>c</b> EIN-PN 62-1386479-001
<b>a</b>	Plan name	PCI 401K AKA PROFESSIONAL CONSULTANTS	
<b>b</b>	Name of plan sponsor	PCI	<b>c</b> EIN-PN 81-0351030-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	PEDCARE PA SEG MANAGEMENT LLC 401(K)	
<b>b</b>	Name of plan sponsor	PEDIATRIC CLINIC OF MESQUITE, SUNNYVALE AND GARLAND	<b>c</b> EIN-PN 01-0562155-001
<b>a</b>	Plan name	PELLA PRODUCTS, INC. RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	PELLA PRODUCTS, INC.	<b>c</b> EIN-PN 04-2303271-002
<b>a</b>	Plan name	PENINSULA DIAGNOSTIC IMAGING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PENINSULA DIAGNOSTICS IMAGING, INC	<b>c</b> EIN-PN 94-3319715-001
<b>a</b>	Plan name	PENNIAN BANK 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PENNIAN BANK	<b>c</b> EIN-PN 23-0873877-001
<b>a</b>	Plan name	PENNINGTON PA PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	PENNINGTON PA	<b>c</b> EIN-PN 59-3184236-001
<b>a</b>	Plan name	PERFORMA LIMITED US LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	PERFORMA LIMITED (US) LLC	<b>c</b> EIN-PN 30-0619882-001
<b>a</b>	Plan name	PETE FOWLER CONSTRUCTION SERVICES INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PETE FOWLER CONSTRUCTION SERVICES, INC	<b>c</b> EIN-PN 33-0690564-001
<b>a</b>	Plan name	PETERSON PROPERTIES 401(K) PROFIT SHARING PLAN FKA JA PETERSON ENTERPRISES	
<b>b</b>	Name of plan sponsor	PETERSON PROPERTIES, INC	<b>c</b> EIN-PN 48-0919120-001
<b>a</b>	Plan name	PHARMA BIO SERV PR INC RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	PHARMA BIO SERV PR, INC	<b>c</b> EIN-PN 66-0549685-002
<b>a</b>	Plan name	PHILADELPHIA RESERVE SUPPLY COMPANY 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	PHILADELPHIA RESERVE SUPPLY COMPANY	<b>c</b> EIN-PN 23-0973030-003
<b>a</b>	Plan name	PIC BUSINESS SYSTEMS INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	PIC BUSINESS SYSTEMS, INC	<b>c</b> EIN-PN 74-2490209-001
<b>a</b>	Plan name	PICKLE IRON RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	PICKLE IRON INC	<b>c</b> EIN-PN 46-5418410-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	PIERSON WIRELESS SAFE HARBOR 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PIERSON WIRELESS	<b>c</b> EIN-PN 20-1240400-001
<b>a</b>	Plan name	PINELAWN CEMETERY 401K PLAN	
<b>b</b>	Name of plan sponsor	PINELAWN CEMETERY	<b>c</b> EIN-PN 11-1190044-002
<b>a</b>	Plan name	PINELAWN CEMETERY UNION 401K PLAN	
<b>b</b>	Name of plan sponsor	PINELAWN CEMETERY	<b>c</b> EIN-PN 11-1190044-004
<b>a</b>	Plan name	PIZARRO & GONZALEZ RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	PIZARRO & GONZALEZ	<b>c</b> EIN-PN 66-0874652-001
<b>a</b>	Plan name	PLACER PRIVATE PHYSICIANS 401K	
<b>b</b>	Name of plan sponsor	PLACER PRIVATE PHYSICIANS	<b>c</b> EIN-PN 47-1159090-001
<b>a</b>	Plan name	PLAZA ADVISORY GROUP INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	PLAZA ADVISORY GROUP, INC	<b>c</b> EIN-PN 43-1854117-001
<b>a</b>	Plan name	PMDSOFT 401 (K)	
<b>b</b>	Name of plan sponsor	PMDSOFT, INC.	<b>c</b> EIN-PN 58-2424430-001
<b>a</b>	Plan name	POKY FEEDERS INC. EMPLOYEE SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	POKY FEEDERS INC.	<b>c</b> EIN-PN 36-3052749-001
<b>a</b>	Plan name	POZNECKI CAMARILLO LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	POZNECKI CAMARILLO, LLC	<b>c</b> EIN-PN 74-2214090-001
<b>a</b>	Plan name	PPI 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	PLAN COMPLIANCE SERVICES, INC	<b>c</b> EIN-PN 59-3708427-005
<b>a</b>	Plan name	PPIC 401(K) SAFE HARBOR PLAN	
<b>b</b>	Name of plan sponsor	PATRIOT POWER INVESTMENT CORPORATION	<b>c</b> EIN-PN 27-1061316-002
<b>a</b>	Plan name	PRECISION FLUID CONTROL 401(K) PLAN & TRUST	
<b>b</b>	Name of plan sponsor	PRECISION FLUID CONTROL	<b>c</b> EIN-PN 20-1155852-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
<b>a</b>	Plan name	PREFERRED BEEF GROUP 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PREFERRED BEEF GROUP	<b>c</b> EIN-PN 75-2737133-001
<b>a</b>	Plan name	PREMIER GOLD MINES USA, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PREMIER GOLD MINES USA, INC.	<b>c</b> EIN-PN 32-0353333-001
<b>a</b>	Plan name	PREMIER MEDICAL RESOURCES, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PREMIER MEDICAL RESOURCES, LLC	<b>c</b> EIN-PN 82-4466632-001
<b>a</b>	Plan name	PREMIER TRANSPORT USA INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PREMIER TRANSPORT USA INC	<b>c</b> EIN-PN 20-2658104-001
<b>a</b>	Plan name	PREMIUM PEANUT LLC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	PREMIUM PEANUT, LLC	<b>c</b> EIN-PN 47-2464504-001
<b>a</b>	Plan name	PRESERVATION ARTS LLC 401(K) PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	PRESERVATION ARTS, LLC	<b>c</b> EIN-PN 46-3890911-001
<b>a</b>	Plan name	PRIME PAYROLL SOLUTIONS SAFE HARBOR 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PRIME PAYROLL SOLUTIONS	<b>c</b> EIN-PN 81-0773205-001
<b>a</b>	Plan name	PRIORITY ONE SECURITY INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PRIORITY ONE SECURITY SERVICES, INC	<b>c</b> EIN-PN 81-0575504-001
<b>a</b>	Plan name	PROFESSIONAL RETAIL SERVICES INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	PROFESSIONAL RETAIL SERVICES	<b>c</b> EIN-PN 11-3568901-001
<b>a</b>	Plan name	PROMED MOLDED PRODUCTS, INC. 401(K)	
<b>b</b>	Name of plan sponsor	PROMED MOLDED PRODUCTS, INC.	<b>c</b> EIN-PN 41-1635956-001
<b>a</b>	Plan name	PROVENANCE ENGINEERING, LLC 401K PLAN	
<b>b</b>	Name of plan sponsor	PROVENANCE ENGINEERING, LLC	<b>c</b> EIN-PN 83-4318489-001
<b>a</b>	Plan name	PTI 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PAVEMENT TREATMENTS, INC	<b>c</b> EIN-PN 01-0433790-001

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.)		
<b>a</b>	Plan name PUMA ENERGY PUERTO RICO RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor PUMA ENERGY CARIBE, LLC	<b>c</b> EIN-PN 66-0759525-001
<b>a</b>	Plan name PURE HEALTH MIAMI 401K PLAN	
<b>b</b>	Name of plan sponsor PURE HEALTH MIAMI, LLC	<b>c</b> EIN-PN 30-0785533-001
<b>a</b>	Plan name PUYALLUP DERMATOLOGY CLINIC PS 401(K) PLAN	
<b>b</b>	Name of plan sponsor PUYALLUP DERMATOLOGY CLINIC	<b>c</b> EIN-PN 91-1149545-001
<b>a</b>	Plan name PVE INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor PVE, INC	<b>c</b> EIN-PN 87-0651583-001
<b>a</b>	Plan name QUAGLINO ENTERPRISES LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor QUAGLINO ENTERPRISES, LLC	<b>c</b> EIN-PN 92-1030781-001
<b>a</b>	Plan name QUALIFICATION & REGULATORY CONSULTANTS GROUP RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor QRC GROUP, LLC	<b>c</b> EIN-PN 66-0657276-001
<b>a</b>	Plan name R & D TOOL & ENGINEERING COMPANY PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor R & D TOOL & ENGINEERING COMPANY	<b>c</b> EIN-PN 43-1237713-001
<b>a</b>	Plan name R LAWSON INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor R LAWSON INC.	<b>c</b> EIN-PN 05-0601742-001
<b>a</b>	Plan name RAB-COM LTD. 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor RAB-COM LTD.	<b>c</b> EIN-PN 94-3049616-001
<b>a</b>	Plan name RADIOGRAPHIC ENGINEERING INC 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor RADIOGRAPHIC ENGINEERING INC	<b>c</b> EIN-PN 59-3704820-002
<b>a</b>	Plan name RALCO ELECTRIC INC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor RALCO ELECTRIC, INC	<b>c</b> EIN-PN 04-3079549-001
<b>a</b>	Plan name RAMACO RESOURCES, INC. 401K PLAN	
<b>b</b>	Name of plan sponsor RAMACO RESOURCES, INC.	<b>c</b> EIN-PN 38-4018838-001

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.)		
<b>a</b>	Plan name <b>RAMLOW STEIN INC 401(K) SAVINGS PLAN</b>	
<b>b</b>	Name of plan sponsor <b>RAMLOWSTEIN, INC</b>	<b>c</b> EIN-PN <b>39-1533614-001</b>
<b>a</b>	Plan name <b>RANDD RESTORATION 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>R AND D RESTORATION INC</b>	<b>c</b> EIN-PN <b>46-5770161-001</b>
<b>a</b>	Plan name <b>RAVLICH ENTERPRISES INC 401(K) PROFIT SHARING PLAN TRUST</b>	
<b>b</b>	Name of plan sponsor <b>RAVLICH ENTERPRISES</b>	<b>c</b> EIN-PN <b>73-1674852-001</b>
<b>a</b>	Plan name <b>RE PURVIS AND ASSOCIATES INC 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>RE PURVIS AND ASSOCIATES, INC</b>	<b>c</b> EIN-PN <b>41-1668392-001</b>
<b>a</b>	Plan name <b>RECORE ELECTRICAL CONTRACTORS INC 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>RECORE ELECTRICAL CONTRACTORS</b>	<b>c</b> EIN-PN <b>56-1373085-001</b>
<b>a</b>	Plan name <b>REEDER ENERGY PARTNERS, L.P. 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>REEDER ENERGY PARTNERS, L.P.</b>	<b>c</b> EIN-PN <b>30-0323095-001</b>
<b>a</b>	Plan name <b>REGEN PROJECTS PROFIT SHARING PLAN AND TRUST</b>	
<b>b</b>	Name of plan sponsor <b>STUART REGEN GALLERY INC. DBA REGEN PROJECTS</b>	<b>c</b> EIN-PN <b>95-4239553-001</b>
<b>a</b>	Plan name <b>REHAB CARE COORDINATION 401(K) SAVINGS PLAN</b>	
<b>b</b>	Name of plan sponsor <b>REHABILITATION CARE COORDINATION</b>	<b>c</b> EIN-PN <b>75-3007798-001</b>
<b>a</b>	Plan name <b>RESTORE ONE INC 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>RESTORE ONE, INC</b>	<b>c</b> EIN-PN <b>20-8295069-001</b>
<b>a</b>	Plan name <b>RETIREMENT PLAN FOR EMPLOYEES OF CITIZENS BANK AND TRUST COMPANY</b>	
<b>b</b>	Name of plan sponsor <b>CITIZENS BANK AND TRUST COMPANY</b>	<b>c</b> EIN-PN <b>72-0152830-001</b>
<b>a</b>	Plan name <b>RIATA CAPITAL GROUP 401(K)</b>	
<b>b</b>	Name of plan sponsor <b>RIATA CAPITAL GROUP, LLC</b>	<b>c</b> EIN-PN <b>47-1248486-001</b>
<b>a</b>	Plan name <b>RICHARD L LAGERMAN DDS SC RETIREMENT SAVINGS PLAN</b>	
<b>b</b>	Name of plan sponsor <b>RICHARD L LAGERMAN, DDS, SC</b>	<b>c</b> EIN-PN <b>39-1337115-001</b>

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	RICHMOND FITNESS INC EMPLOYEE SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	RICHMOND FITNESS	<b>c</b> EIN-PN 54-1560789-001
<b>a</b>	Plan name	RIVERA-MUNICH & HERNANDEZ LAW OFFICES P.S.C. RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	RIVERA-MUNICH & HERNANDEZ LAW OFFICES P.S.C.	<b>c</b> EIN-PN 66-0691976-001
<b>a</b>	Plan name	RMF ENGINEERING, INC. 401K PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	RMF ENGINEERING	<b>c</b> EIN-PN 52-1279953-001
<b>a</b>	Plan name	ROBERT R ANDREAS AND SONS INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ROBERT R. ANDREAS & SONS, INC.	<b>c</b> EIN-PN 36-2751339-001
<b>a</b>	Plan name	ROCHESTER COLON AND RECTAL PC PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ROCHESTER COLON AND RECTAL PC	<b>c</b> EIN-PN 38-2903233-001
<b>a</b>	Plan name	ROCKY MOUNTAIN COIN INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ROCKY MOUNTAIN COIN, INC	<b>c</b> EIN-PN 84-1073028-001
<b>a</b>	Plan name	ROJOLI SERVICES INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ROJOLI SERVICES, INC.	<b>c</b> EIN-PN 83-4007069-001
<b>a</b>	Plan name	ROLLING E. ENTERPRISE, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ROLLING E. ENTERPRISE, LLC	<b>c</b> EIN-PN 47-2112327-001
<b>a</b>	Plan name	RONAN ENGINEERING COMPANY PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	RONAN ENGINEERING COMPANY	<b>c</b> EIN-PN 95-2313212-001
<b>a</b>	Plan name	ROOT RIVER STATE BANK PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ROOT RIVER STATE BANK	<b>c</b> EIN-PN 41-0509460-001
<b>a</b>	Plan name	ROTHE DEVELOPMENT INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ROTHE DEVELOPMENT, INC	<b>c</b> EIN-PN 74-1606784-001
<b>a</b>	Plan name	ROTHE SAN ANTONIO CALIBRATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ROTHE SAN ANTONIO CALIBRATION	<b>c</b> EIN-PN 83-1978837-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	RTI COMMUNITY MANAGEMENT ASSOCIATES INC	
<b>b</b>	Name of plan sponsor	RTI COMMUNITY MANAGEMENT ASSOCIATES, INC.	<b>c</b> EIN-PN 75-1892308-001
<b>a</b>	Plan name	SALTCO LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	SALTCO, LLC	<b>c</b> EIN-PN 61-1796787-001
<b>a</b>	Plan name	SARATOGA DERMATOLOGY PC SAFE HARBOR 401(K) PSP	
<b>b</b>	Name of plan sponsor	SARATOGA DERMATOLOGY	<b>c</b> EIN-PN 14-1819232-001
<b>a</b>	Plan name	SAYLORSBURG LUMBER PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	SAYLORSBURG LUMBER CO, INC	<b>c</b> EIN-PN 23-2493106-001
<b>a</b>	Plan name	SCHAFER, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	SCHAFER, INC.	<b>c</b> EIN-PN 38-1548200-003
<b>a</b>	Plan name	SCHLEICH ENTERPRISES INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	SCHLEICH ENTERPRISES, INC	<b>c</b> EIN-PN 47-0648893-002
<b>a</b>	Plan name	SCHNEIDER ENGINEERING LTD 401(K) AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	SCHNEIDER ENGINEERING, LTD.	<b>c</b> EIN-PN 74-2883926-001
<b>a</b>	Plan name	SCOTT FAMILY DENTISTRY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	SCOTT FAMILY DENTISTRY	<b>c</b> EIN-PN 37-1451726-001
<b>a</b>	Plan name	SEA RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	HAGE CONSULTING GROUP, PSC	<b>c</b> EIN-PN 66-0800962-001
<b>a</b>	Plan name	SEALED INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	SEALED INC	<b>c</b> EIN-PN 45-3478769-001
<b>a</b>	Plan name	SECURESTRUX 401(K) PLAN	
<b>b</b>	Name of plan sponsor	SECURESTRUX, LLC	<b>c</b> EIN-PN 26-2577741-001
<b>a</b>	Plan name	SECURING AMERICAS FUTURE ENERGY FOUNDATION 401(K) PROFIT SHARING	
<b>b</b>	Name of plan sponsor	SECURING AMERICA'S FUTURE ENERGY	<b>c</b> EIN-PN 20-1727977-001

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.)	
<b>a</b> Plan name	SECURITY EQUIPMENT CORPORATION 401(K) PLAN	
<b>b</b> Name of plan sponsor	SECURITY EQUIPMENT CORPORATION	<b>c</b> EIN-PN 43-1080928-002
<b>a</b> Plan name	SEIDEL SCHROEDER & COMPANY 401(K) PROFIT SHARING AND TRUST	
<b>b</b> Name of plan sponsor	SEIDEL SCHROEDER	<b>c</b> EIN-PN 74-2052353-001
<b>a</b> Plan name	SEIDER HEATING D/B/A ENVIRA-TECH 401K PLAN	
<b>b</b> Name of plan sponsor	SEIDER HEATING	<b>c</b> EIN-PN 39-1602647-001
<b>a</b> Plan name	SELLWOOD MEDICAL CLINIC 401(K) PLAN	
<b>b</b> Name of plan sponsor	SELLWOOD MEDICAL CLINIC	<b>c</b> EIN-PN 71-0920784-001
<b>a</b> Plan name	SEQUOIA PACIFIC BUILDERS INC 401(K) PLAN	
<b>b</b> Name of plan sponsor	SEQUOIA PACIFIC BUILDERS, INC	<b>c</b> EIN-PN 94-2826625-001
<b>a</b> Plan name	SESSIONS ISRAEL AND SHARTLE LLC 401(K) RETIREMENT SAVINGS PLAN	
<b>b</b> Name of plan sponsor	SESSIONS, ISRAEL AND SHARTLE, LLC	<b>c</b> EIN-PN 47-2102132-001
<b>a</b> Plan name	SHELBY CRUSHED STONE INC 401(K) PROFIT SHARING PLAN	
<b>b</b> Name of plan sponsor	SHELBY CRUSHED STONE	<b>c</b> EIN-PN 20-2421945-001
<b>a</b> Plan name	SHORELAND INC. 401K PROFIT SHARING PLAN	
<b>b</b> Name of plan sponsor	SHORELAND INC.	<b>c</b> EIN-PN 39-1444288-001
<b>a</b> Plan name	SHOREMATE 401(K) PLAN	
<b>b</b> Name of plan sponsor	SHOREMATE	<b>c</b> EIN-PN 20-4225000-001
<b>a</b> Plan name	SIDHU PEDIATRICS LLC PROFIT SHARING PLAN FKA SENATOBIA PEDIATRICS LLC PROFIT SHARING PLAN	
<b>b</b> Name of plan sponsor	SENATOBIA CHILDRENS CLINIC, PC	<b>c</b> EIN-PN 64-0888518-001
<b>a</b> Plan name	SIDNEY REHAB LLC 401 (K) PLAN	
<b>b</b> Name of plan sponsor	SIDNEY REHAB LLC	<b>c</b> EIN-PN 88-1395276-001
<b>a</b> Plan name	SIMONMED 401(K) PROFIT SHARING PLAN	
<b>b</b> Name of plan sponsor	SIMONMED	<b>c</b> EIN-PN 26-4000683-001

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.)	
<b>a</b>	Plan name SINGER BURKE ZIMMER AND BUTLER LLP 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor SINGER BURKE ZIMMER AND BUTLER, LLP	<b>c</b> EIN-PN 95-4537885-001
<b>a</b>	Plan name SKC ASSOCIATES 401K PLAN	
<b>b</b>	Name of plan sponsor SKC ASSOCIATES LLC	<b>c</b> EIN-PN 84-6352330-001
<b>a</b>	Plan name SMH OPERATIONS LLC, 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor SMH OPERATIONS LLC	<b>c</b> EIN-PN 82-4217476-001
<b>a</b>	Plan name SONNY OLIVER REALTY RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor OLIVER OIL COMPANY, SONNY OLIVER REALTY COMPANY	<b>c</b> EIN-PN 56-2150863-001
<b>a</b>	Plan name SOUNDVIEW HEATING AND AIR CONDITIONING INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor SOUNDVIEW HEATING & AIR CONDITIONING, INC.	<b>c</b> EIN-PN 80-0004498-001
<b>a</b>	Plan name SOUTHERN OBSTETRICS AND GYNECOLOGIC ASSOCIATES SC PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor SOUTHERN OBSTETRICS & GYNECOLOGIC ASSOCIATES, SC	<b>c</b> EIN-PN 37-1116881-004
<b>a</b>	Plan name SPMR LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor SMARTPHONE METER READING, LLC	<b>c</b> EIN-PN 75-1584252-002
<b>a</b>	Plan name SPORTS CARE PHYSICAL THERAPY PC PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor SPORTS CARE PHYSICAL THERAPY PC	<b>c</b> EIN-PN 11-3556386-001
<b>a</b>	Plan name SPORTSMED PT LLC 401(K) PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor SPORTSMED PT LLC	<b>c</b> EIN-PN 82-4913997-001
<b>a</b>	Plan name SPUD SOFTWARE 401K PLAN	
<b>b</b>	Name of plan sponsor SPUD SOFTWARE INC	<b>c</b> EIN-PN 38-3344039-001
<b>a</b>	Plan name SRT SECURITIES INC SAVINGS PLAN	
<b>b</b>	Name of plan sponsor SRT SECURITIES, INC	<b>c</b> EIN-PN 27-2872190-001
<b>a</b>	Plan name ST. LOUIS DEVELOPMENT CORP EMPLOYEES' RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor ST. LOUIS DEVELOPMENT CORPORATION	<b>c</b> EIN-PN 43-1490972-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	STANDARD ENTERPRISES INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	STANDARD ENTERPRISES, INC.	<b>c</b> EIN-PN 72-0683436-001
<b>a</b>	Plan name	STANMAR INC RESTATED SAVINGS PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	STANMAR, INC	<b>c</b> EIN-PN 04-2275792-001
<b>a</b>	Plan name	STARK RFID 401(K) PLAN	
<b>b</b>	Name of plan sponsor	STARK EM LLC	<b>c</b> EIN-PN 27-4289634-001
<b>a</b>	Plan name	STARLINGER-SAHM INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	AMERICAN STARLINGER-SAHM, INC.	<b>c</b> EIN-PN 30-0126360-001
<b>a</b>	Plan name	STATE UTILITIES INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	STATE UTILITIES, INC	<b>c</b> EIN-PN 11-1856168-002
<b>a</b>	Plan name	STEVEN J FORCHE MD PC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	STEVEN J FORCHE, MD, PC	<b>c</b> EIN-PN 38-2089738-001
<b>a</b>	Plan name	STONEBRAKER MCQUARY AGENCY GROUP INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	STONEBRAKER MCQUARY AGENCY GROUP, INC	<b>c</b> EIN-PN 91-1665933-001
<b>a</b>	Plan name	STOTLER FEED 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	STOTLER FEED	<b>c</b> EIN-PN 71-0978002-001
<b>a</b>	Plan name	STRATEGIC SOLUTIONS INTERNATIONAL 401(K) PLAN	
<b>b</b>	Name of plan sponsor	STRATEGIC SOLUTIONS INTERNATIONAL	<b>c</b> EIN-PN 47-3486699-001
<b>a</b>	Plan name	STRATEGY ENGINEERING AND CONSULTING LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	STRATEGY ENGINEERING AND CONSULTING LLC	<b>c</b> EIN-PN 27-0598695-001
<b>a</b>	Plan name	STUEKEN 401K PLAN	
<b>b</b>	Name of plan sponsor	STUEKEN, LLC	<b>c</b> EIN-PN 58-2285181-001
<b>a</b>	Plan name	SUCCESS BRANDS INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	SUCCESS BRANDS, INC	<b>c</b> EIN-PN 05-0552834-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	SUDEKUM CASSIDY AND SHULRUFF CHTD PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	SUDEKUM, CASSIDY AND SHULRUFF, CHTD	<b>c</b> EIN-PN 36-3866178-001
<b>a</b>	Plan name	SUMMERHAYS DEVELOPMENT INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	SUMMERHAYS MUSIC	<b>c</b> EIN-PN 87-6121486-001
<b>a</b>	Plan name	SUMMIT CONSULTING LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	SUMMIT CONSULTING, LLC	<b>c</b> EIN-PN 95-4816438-001
<b>a</b>	Plan name	SUN CITY GROUP 401K PLAN	
<b>b</b>	Name of plan sponsor	SUN CITY GROUP, INC.	<b>c</b> EIN-PN 20-5001442-001
<b>a</b>	Plan name	SUNDOG PARTNERSHIP 401(K) PLAN	
<b>b</b>	Name of plan sponsor	SUNDOG PARTNERSHIP	<b>c</b> EIN-PN 75-3046044-001
<b>a</b>	Plan name	SUNSHINE RIDES EMPLOYEE RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	TAZCO, INC	<b>c</b> EIN-PN 84-1162315-001
<b>a</b>	Plan name	SUPERIOR MOTION CONTROLS, INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	SUPERIOR MOTION CONTROLS, INC	<b>c</b> EIN-PN 20-5992878-001
<b>a</b>	Plan name	SUPPLY LINE INTERNATIONAL, LLC PROFIT SHARING 401K	
<b>b</b>	Name of plan sponsor	SUPPLY LINE INTERNATIONAL, LLC	<b>c</b> EIN-PN 46-0720013-001
<b>a</b>	Plan name	SURF AIR MOBILITY INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	SURF AIR MOBILITY INC.	<b>c</b> EIN-PN 36-5025592-001
<b>a</b>	Plan name	SUSE 401(K) PLAN	
<b>b</b>	Name of plan sponsor	SUSE, LLC	<b>c</b> EIN-PN 45-4703967-001
<b>a</b>	Plan name	SWEENEY AND HARKIN CARPENTRY AND DRY WALL CORP PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	SWEENEY AND HARKIN CARPENTRY AND DRY WALL CORP	<b>c</b> EIN-PN 13-3014228-002
<b>a</b>	Plan name	SWIMMING POOL PRO INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	SWIMMING POOL PRO INC.	<b>c</b> EIN-PN 82-1773425-001

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.)	
<b>a</b>	Plan name SYNERGY DISASTER RECOVERY 401(K) PLAN	
<b>b</b>	Name of plan sponsor SYNERGY DISASTER RECOVERY	<b>c</b> EIN-PN 84-3533519-001
<b>a</b>	Plan name TALLAHASSEE ORTHOPEDIC CLINIC ILL PL 401 K PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor TALLAHASSEE ORTHOPEDIC CLINIC, ILL, PL	<b>c</b> EIN-PN 59-3598056-001
<b>a</b>	Plan name TAPPERS FINE JEWELRY INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor TAPPERS FINE JEWELRY, INC	<b>c</b> EIN-PN 38-2149120-001
<b>a</b>	Plan name TARANTIN INDUSTRIES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor TARANTIN INDUSTRIES, INC.	<b>c</b> EIN-PN 22-2461286-001
<b>a</b>	Plan name TAYLOR AND SYFAN CONSULTING ENGINEERS INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor TAYLOR AND SYFAN CONSULTING ENGINEERS INC	<b>c</b> EIN-PN 77-0466685-001
<b>a</b>	Plan name TAYLOR SALES AND SERVICE INC 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor TAYLOR SALES AND SERVICE INC	<b>c</b> EIN-PN 63-1189014-002
<b>a</b>	Plan name TCSI TRANSLAND INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor TCSI TRANSLAND, INC	<b>c</b> EIN-PN 43-1869361-001
<b>a</b>	Plan name TECHPRO SOLUTIONS LLC	
<b>b</b>	Name of plan sponsor TECHPRO SOLUTIONS LLC	<b>c</b> EIN-PN 27-1640628-001
<b>a</b>	Plan name TEN PERCENT HAPPIER 401(K) PLAN	
<b>b</b>	Name of plan sponsor 10% HAPPIER, INC.	<b>c</b> EIN-PN 46-2001415-001
<b>a</b>	Plan name TENNYSON CAPITAL PARTNERS 401(K) PLAN	
<b>b</b>	Name of plan sponsor TENNYSON CAPITAL PARTNERS	<b>c</b> EIN-PN 47-2877272-001
<b>a</b>	Plan name TEXANS ANESTHESIOLOGY ASSOCIATES 401(K) PLAN	
<b>b</b>	Name of plan sponsor TEXANS ANESTHESIOLOGY ASSOCIATES	<b>c</b> EIN-PN 26-0507982-001
<b>a</b>	Plan name TEXAS AND SOUTHWESTERN CATTLE RAISERS ASSOCIATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor TEXAS AND SOUTHWESTERN CATTLE RAISERS ASSOCIATION	<b>c</b> EIN-PN 75-0608420-002

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	THE ADVANTAGE COMPANIES RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	THE ADVANTAGE COMPANIES	<b>c</b> EIN-PN 75-3120463-001
<b>a</b>	Plan name	THE AGC OF KENTUCKY CONSTRUCTION INDUSTRY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	AGC OF KENTUCKY	<b>c</b> EIN-PN 61-0263820-001
<b>a</b>	Plan name	THE ARTISAN 401(K) PEP	
<b>b</b>	Name of plan sponsor	THE ARTISAN 401(K) PEP	<b>c</b> EIN-PN 42-1468222-023
<b>a</b>	Plan name	THE BREWER COMPANY EMPLOYEES RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	THE BREWER COMPANY	<b>c</b> EIN-PN 31-0224000-002
<b>a</b>	Plan name	THE BUSINESS COUNCIL FOR SUSTAINABLE ENERGY 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	BCSE	<b>c</b> EIN-PN 52-1801630-001
<b>a</b>	Plan name	THE CONTRACTORS RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	LAYDON INDUSTRIES, LLC	<b>c</b> EIN-PN 20-2193189-002
<b>a</b>	Plan name	THE CONVERSE PROFESSIONAL GROUP 401(K) PLAN	
<b>b</b>	Name of plan sponsor	THE CONVERSE PROFESSIONAL GROUP	<b>c</b> EIN-PN 95-4020122-002
<b>a</b>	Plan name	THE DOBRUSIN LAW FIRM PC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	THE DOBRUSIN LAW FIRM, PC	<b>c</b> EIN-PN 38-3570622-001
<b>a</b>	Plan name	THE E401(K) PLAN FROM FIDELITY INSIGHTS NORTH AMERICA 401(K) PLANS	
<b>b</b>	Name of plan sponsor	INSIGHTS NORTH AMERICA, INC	<b>c</b> EIN-PN 61-1413692-001
<b>a</b>	Plan name	THE ELAM GROUP 401(K) PLAN	
<b>b</b>	Name of plan sponsor	THE ELAM GROUP	<b>c</b> EIN-PN 47-2325876-001
<b>a</b>	Plan name	THE FULLER LOWENBERG AND CO CPAS PC401(K) SAVINGS ANDTRUST	
<b>b</b>	Name of plan sponsor	THE FULLER LOWENBERG & CO., CPAS, P.C.	<b>c</b> EIN-PN 20-0066099-001
<b>a</b>	Plan name	THE GLASGOLD GROUP 401(K) PLAN	
<b>b</b>	Name of plan sponsor	THE GLASGOLD GROUP	<b>c</b> EIN-PN 26-0646977-002

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	THE HARPER COMPANY RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	THE HARPER COMPANY	<b>c</b> EIN-PN 31-0533105-001
<b>a</b>	Plan name	THE HIGH ROAD PROGRAM 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	THE HIGH ROAD PROGRAM	<b>c</b> EIN-PN 95-3175986-001
<b>a</b>	Plan name	THE HUNT CORPORATE SERVICES INC. 401K SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	THE HUNT CORPORATE SERVICES, INC.	<b>c</b> EIN-PN 11-2557534-001
<b>a</b>	Plan name	THE IFH GROUP INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	THE IFH GROUP, INC	<b>c</b> EIN-PN 36-4216754-001
<b>a</b>	Plan name	THE LINCOLN SQUARE CONDOMINIUM 401(K) PLAN	
<b>b</b>	Name of plan sponsor	THE LINCOLN SQUARE CONDOMINIUM	<b>c</b> EIN-PN 13-3794593-001
<b>a</b>	Plan name	THE LLOYD GROUP 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	THE LLOYD GROUP, INC	<b>c</b> EIN-PN 58-2183364-001
<b>a</b>	Plan name	THE OAKSTAR BANK 401(K) PLAN	
<b>b</b>	Name of plan sponsor	OAKSTAR BANK	<b>c</b> EIN-PN 20-3405719-001
<b>a</b>	Plan name	THE OFFICE OF MARVEL & MARCHAND ARCHITECTS, LLP RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	THE OFFICE OF MARVEL & MARCHAND ARCHITECTS	<b>c</b> EIN-PN 66-0542558-001
<b>a</b>	Plan name	THE PAPER CUT, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	THE PAPER CUT	<b>c</b> EIN-PN 39-1987465-001
<b>a</b>	Plan name	THE ROCK BROOK CONSULTING GROUP PA 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ROCK BROOK CONSULTING GROUP, PA	<b>c</b> EIN-PN 46-2876020-001
<b>a</b>	Plan name	THE STORAGE PLACE 401K PLAN	
<b>b</b>	Name of plan sponsor	ADVANTAGE PUBLIC STORAGE LLC DBA THE STORAGE PLACE	<b>c</b> EIN-PN 74-2944121-001
<b>a</b>	Plan name	THE THOMPSON CENTER FOR PLASTIC SURGERY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	THE THOMPSON CENTER FOR PLASTIC SURGERY	<b>c</b> EIN-PN 20-2827755-001

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.)	
<b>a</b>	Plan name TIBER CREEK HOLDINGS INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor TIBER CREEK HOLDINGS, INC	<b>c</b> EIN-PN 52-2023469-001
<b>a</b>	Plan name TIME EQUITIES INC 401(K) PROFIT SHARING PLAN TRUST	
<b>b</b>	Name of plan sponsor TIME EQUITIES, INC.	<b>c</b> EIN-PN 13-2659445-001
<b>a</b>	Plan name TODD BREMER AND LAWSON INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor TODD, BREMER & LAWSON, INC	<b>c</b> EIN-PN 57-0605947-001
<b>a</b>	Plan name TOLIC US RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor TOLIC-US	<b>c</b> EIN-PN 66-0235829-001
<b>a</b>	Plan name TORGESON ELECTRIC CO. INC SALARY SAVINGS PLAN	
<b>b</b>	Name of plan sponsor TORGESON ELECTRIC CO, INC	<b>c</b> EIN-PN 48-0891707-001
<b>a</b>	Plan name TORGESON TRENCHING, INC SALARY SAVINGS PLAN	
<b>b</b>	Name of plan sponsor TORGESON TRENCHING, INC	<b>c</b> EIN-PN 48-1196882-001
<b>a</b>	Plan name TORREY PINES DERMATOLOGY, A MED CORP RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor TORREY PINES DERMATOLOGY	<b>c</b> EIN-PN 14-1869205-002
<b>a</b>	Plan name TOTAL HIGHSPEED INTERNET SERVICE 401(K) PLAN	
<b>b</b>	Name of plan sponsor TOTAL HIGHSPEED INTERNET SERVICE	<b>c</b> EIN-PN 20-2178258-001
<b>a</b>	Plan name TOWNSEN 401(K)	
<b>b</b>	Name of plan sponsor SOUTHEAST TEXAS MEDICAL VENTURES LLC	<b>c</b> EIN-PN 36-4867084-001
<b>a</b>	Plan name TRANSITIONAL SERVICES OF NEW YORK FOR LONG ISLAND	
<b>b</b>	Name of plan sponsor TRANSITIONAL SERVICES OF NEW YORK FOR LONG ISLAND INC.	<b>c</b> EIN-PN 11-2592828-002
<b>a</b>	Plan name TRAVOIS 401(K) PLAN	
<b>b</b>	Name of plan sponsor TRAVOIS, INC	<b>c</b> EIN-PN 41-1811386-001
<b>a</b>	Plan name TRG 401(K) PLAN PEP	
<b>b</b>	Name of plan sponsor TRG 401(K) PLAN (PEP)	<b>c</b> EIN-PN 93-2789379-005

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	TRIAD STEEL SERVICES INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	TRIAD STEEL SERVICES, INC	<b>c</b> EIN-PN 86-0786278-001
<b>a</b>	Plan name	TRIBE513 PA 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	TRIBE513, PA	<b>c</b> EIN-PN 20-3730220-001
<b>a</b>	Plan name	TRILLIAN TECHNOLOGIES 401(K) PLAN	
<b>b</b>	Name of plan sponsor	TRILLIAN TECHNOLOGIES	<b>c</b> EIN-PN 27-3369679-001
<b>a</b>	Plan name	TRISTAR BANK 401(K) PLAN	
<b>b</b>	Name of plan sponsor	TRISTAR BANK	<b>c</b> EIN-PN 56-2136525-001
<b>a</b>	Plan name	TRITECH HEALTHCARE MANAGEMENT LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	TRITECH HEALTHCARE MANAGEMENT, LLC	<b>c</b> EIN-PN 11-3476592-001
<b>a</b>	Plan name	TRUE AG AND TURF LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	TRUE AG AND TURF, LLC	<b>c</b> EIN-PN 93-1668406-001
<b>a</b>	Plan name	TRUE NORTH ANESTHESIA PROFIT SHARING PLAN PKA NURSE ANESTHESIA OF MAINE LLC PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	NURSE ANESTHESIA OF MAINE LLC	<b>c</b> EIN-PN 41-2096532-001
<b>a</b>	Plan name	TRUE TITLE OF METAIRIE LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	TRUE TITLE OF METAIRIE, LLC	<b>c</b> EIN-PN 04-3665255-001
<b>a</b>	Plan name	TUBES INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	TUBES, INC	<b>c</b> EIN-PN 76-0121226-002
<b>a</b>	Plan name	TULSA ENGINEERING AND PLANNING ASSOCIATES INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	TULSA ENGINEERING AND PLANNING ASSOCIATES, INC	<b>c</b> EIN-PN 73-1032354-001
<b>a</b>	Plan name	TURNURE MEDICAL GROUP INC 401K PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor	TURNURE MEDICAL GROUP INC	<b>c</b> EIN-PN 94-3343246-001
<b>a</b>	Plan name	TWIN OAKS COUNTRY CLUB 401(K) AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	TWIN OAKS COUNTRY CLUB INC	<b>c</b> EIN-PN 44-0596038-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	UAS RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	UAS INTERNATIONAL TRIP SUPPORT	<b>c</b> EIN-PN 48-1308956-001
<b>a</b>	Plan name	UNIFORM INDUSTRIAL CORP 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	UNIFORM INDUSTRIAL CORP	<b>c</b> EIN-PN 33-0439884-001
<b>a</b>	Plan name	UNITED NORTHERN MORTGAGE BANKERS LTD 401K RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	UNITED NORTHERN MORTGAGE BANKERS, LTD	<b>c</b> EIN-PN 11-2590182-001
<b>a</b>	Plan name	UNITED PLANT GOWERS INC 401K PLAN	
<b>b</b>	Name of plan sponsor	UNITED PLANT GROWERS INC	<b>c</b> EIN-PN 33-0783952-001
<b>a</b>	Plan name	UNITED SPINAL ASSOCIATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	UNITED SPINAL ASSOCIATION	<b>c</b> EIN-PN 13-5612621-001
<b>a</b>	Plan name	UNITY HOSPICE 401(K) PLAN	
<b>b</b>	Name of plan sponsor	UNITY HOSPICE	<b>c</b> EIN-PN 36-3982347-001
<b>a</b>	Plan name	UNIVERSAL PRINTING CO., LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	UNIVERSAL PRINTING COMPANY	<b>c</b> EIN-PN 30-0609958-001
<b>a</b>	Plan name	UNMANNED SYSTEMS INCORPORATED 401K PLAN	
<b>b</b>	Name of plan sponsor	UNMANNED SYSTEMS INCORPORATED	<b>c</b> EIN-PN 27-0056512-001
<b>a</b>	Plan name	UNMB HOME LOANS INC 401K RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	UNMB HOME LOANS INC	<b>c</b> EIN-PN 11-2590182-001
<b>a</b>	Plan name	UPSTATE FOREVER 401(K) PLAN	
<b>b</b>	Name of plan sponsor	UPSTATE FOREVER	<b>c</b> EIN-PN 57-1070433-001
<b>a</b>	Plan name	USILLUMINATIONS LLC 401(K)	
<b>b</b>	Name of plan sponsor	USILLUMINATIONS LLC	<b>c</b> EIN-PN 27-5495132-001
<b>a</b>	Plan name	UTB 401(K) RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	UNITED TEXAS BANK	<b>c</b> EIN-PN 75-2008275-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	VALLEY FARM TRANSPORT 401(K) PLAN	
<b>b</b>	Name of plan sponsor	VALLEY FARM TRANSPORT	<b>c</b> EIN-PN 38-3893563-002
<b>a</b>	Plan name	VALLEY IRON INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	VALLEY IRON, INC.	<b>c</b> EIN-PN 77-0014269-001
<b>a</b>	Plan name	VANCE FAMILY MEDICINE PA 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	VANCE FAMILY MEDICINE, P.A.	<b>c</b> EIN-PN 56-1892600-001
<b>a</b>	Plan name	VANDALIA REHAB, LLC 401K PLAN	
<b>b</b>	Name of plan sponsor	VANDALIA REHAB, LLC	<b>c</b> EIN-PN 88-1291851-001
<b>a</b>	Plan name	VBS INC 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	VBS INC	<b>c</b> EIN-PN 42-1432674-001
<b>a</b>	Plan name	VERNER CADBY FORD INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	VERNER CADBY FORD, INC	<b>c</b> EIN-PN 22-1356330-001
<b>a</b>	Plan name	VERTREES HEADACHE CENTER 401K	
<b>b</b>	Name of plan sponsor	VERTREES HEADACHE CENTER PLLC	<b>c</b> EIN-PN 84-3250239-001
<b>a</b>	Plan name	VERVE RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	VERVE, A CREDIT UNION	<b>c</b> EIN-PN 39-0711674-011
<b>a</b>	Plan name	VETERINARY EMERGENCY CENTER OF MANCHESTER PLLC 401(K)	
<b>b</b>	Name of plan sponsor	VETERINARY EMERGENCY CENTER OF MANCHESTER, PLLC	<b>c</b> EIN-PN 20-2902768-001
<b>a</b>	Plan name	VIRANIM TECHNICAL SOLUTIONS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	VIRANIM TECHNICAL SOLUTIONS INC	<b>c</b> EIN-PN 81-4411666-001
<b>a</b>	Plan name	VISTA VETERINARY HOSPITAL INC PC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	VISTA VETERINARY HOSPITAL INC PC	<b>c</b> EIN-PN 91-2089735-001
<b>a</b>	Plan name	VOYAGER PEP	
<b>b</b>	Name of plan sponsor	VOYAGER PEP	<b>c</b> EIN-PN 85-4019239-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
<b>a</b>	Plan name	VSR TECHNOLOGIES	
<b>b</b>	Name of plan sponsor	VSR TECHNOLOGIES IN	<b>c</b> EIN-PN 38-3332406-001
<b>a</b>	Plan name	W BRANDS GLOBAL, INC. 401K PLAN	
<b>b</b>	Name of plan sponsor	W BRANDS GLOBAL, INC.	<b>c</b> EIN-PN 75-2732495-001
<b>a</b>	Plan name	WAGSTAFF TAYLOR AND ASSOCIATES INC 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	WAGSTAFF TAYLOR & ASSOCIATES INC	<b>c</b> EIN-PN 88-4393921-001
<b>a</b>	Plan name	WALKER'S RENTON SUBARU-MAZDA 401(K) PLAN	
<b>b</b>	Name of plan sponsor	WALKER'S RENTON SUBARU-MAZDA	<b>c</b> EIN-PN 91-1387558-001
<b>a</b>	Plan name	WALLACE BROTHERS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	WALLACE BROS DISPOSAL, INC	<b>c</b> EIN-PN 20-1786869-001
<b>a</b>	Plan name	WAUKESHA ROOFING & METAL, INC. 401K SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	WAUKESHA ROOFING & SHEET METAL, INC.	<b>c</b> EIN-PN 39-1730835-001
<b>a</b>	Plan name	WAYNE ENTERPRISES INC 401(K) RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	WAYNE ENTERPRISES, INC	<b>c</b> EIN-PN 76-0000815-001
<b>a</b>	Plan name	WAYNE R. WARD INC. PROFIT SHARING 401K PLAN	
<b>b</b>	Name of plan sponsor	WAYNE R. WARD INC	<b>c</b> EIN-PN 48-0126191-001
<b>a</b>	Plan name	WEISS MANFREDI ARCHITECTS LLP 401(K) PLAN	
<b>b</b>	Name of plan sponsor	WEISS MANFREDI ARCHITECTS LLP	<b>c</b> EIN-PN 13-3650054-001
<b>a</b>	Plan name	WENCO INDUSTRIES INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	WENCO INDUSTRIES	<b>c</b> EIN-PN 84-0820842-001
<b>a</b>	Plan name	WESTLAKE RESTAURANT MANAGEMENT 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	WESTLAKE RESTAURANT MANAGEMENT	<b>c</b> EIN-PN 20-2006923-001
<b>a</b>	Plan name	WESTOSHA TOOL 401K PLAN	
<b>b</b>	Name of plan sponsor	WESTOSHA TOOL	<b>c</b> EIN-PN 39-1276613-001

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.)		
<b>a</b>	Plan name WHITERABBITAI 401(K) PLAN	
<b>b</b>	Name of plan sponsor WHITERABBITAI	<b>c</b> EIN-PN 81-4869165-001
<b>a</b>	Plan name WHITING SYSTEMS INC 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor WHITING SYSTEMS INC	<b>c</b> EIN-PN 71-0453145-001
<b>a</b>	Plan name WILCOR INTERNATIONAL INC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor WILCOR INTERNATIONAL	<b>c</b> EIN-PN 16-1360687-001
<b>a</b>	Plan name WILCOX BUILDING SPECIALTIES INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor WILCOX BUILDING SPECIALTIES INC.	<b>c</b> EIN-PN 16-1492627-001
<b>a</b>	Plan name WILLIAMS LAW FIRM PC PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor WILLIAMS LAW FIRM, P.C.	<b>c</b> EIN-PN 81-0386710-004
<b>a</b>	Plan name WILSON MCGINLEY COMPANY INC EMPLOYEES PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor WILSON MCGINLEY, INC	<b>c</b> EIN-PN 25-1185720-001
<b>a</b>	Plan name WINDING ROOFING COMPANY INC EMPLOYEES PROFIT SHARING TRUST	
<b>b</b>	Name of plan sponsor WINDING ROOFING COMPANY, INC	<b>c</b> EIN-PN 39-1946617-001
<b>a</b>	Plan name WINN FINANCIAL GROUP SOLO K	
<b>b</b>	Name of plan sponsor WINN FINANCIAL GROUP	<b>c</b> EIN-PN 46-1974044-001
<b>a</b>	Plan name WINN FINANCIAL SERVICES SOLO 401(K) PLAN	
<b>b</b>	Name of plan sponsor WINN FINANCIAL SERVICES	<b>c</b> EIN-PN 30-0008558-001
<b>a</b>	Plan name WMS ADVISORS LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor WMS ADVISORS, LLC	<b>c</b> EIN-PN 52-1569072-001
<b>a</b>	Plan name WOLFE ELECTRIC COMPANY 401(K) PLAN	
<b>b</b>	Name of plan sponsor WOLFE ELECTRIC COMPANY	<b>c</b> EIN-PN 74-2925512-003
<b>a</b>	Plan name WOMEN IN MECHANICAL PIPING CORP 401(K) PROFIT SHARING PLAN FKA ASHLAR MECHANICAL CORPORATION 401K PLAN	
<b>b</b>	Name of plan sponsor ASHLAR MECHANICAL CORPORATION	<b>c</b> EIN-PN 11-2689180-001

**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.)

<b>a</b> Plan name	WOOSHIN NORTH AMERICA LLC 401K PLAN	
<b>b</b> Name of plan sponsor	WOOSHIN NORTH AMERICA LLC	<b>c</b> EIN-PN 47-4359221-001
<b>a</b> Plan name	X FAB TEXAS INC EMPLOYEES 401(K) PROFIT SHARING PLAN	
<b>b</b> Name of plan sponsor	X FAB TEXAS, INC	<b>c</b> EIN-PN 75-2798998-001
<b>a</b> Plan name	YOUNG AND BURTON INC 401(K) SAVING AND RETIREMENT PLAN	
<b>b</b> Name of plan sponsor	YOUNG AND BURTON, INC	<b>c</b> EIN-PN 68-0142022-001
<b>a</b> Plan name	YOUNG BLACK LEADERSHIP ALLIANCE 401(K) PLAN	
<b>b</b> Name of plan sponsor	YOUNG BLACK LEADERSHIP ALLIANCE	<b>c</b> EIN-PN 26-2984776-001
<b>a</b> Plan name	YOUTH FIRST INC 401(K) PLAN	
<b>b</b> Name of plan sponsor	YOUTH FIRST, INC	<b>c</b> EIN-PN 35-2050168-001
<b>a</b> Plan name	Z MAR TECHNOLOGY INC RETIREMENT PLAN	
<b>b</b> Name of plan sponsor	Z-MAR TECHNOLOGY	<b>c</b> EIN-PN 56-1627125-002
<b>a</b> Plan name	ZYMEWORKS BIOPHARMACEUTICALS 401(K) PLAN	
<b>b</b> Name of plan sponsor	ZYMEWORKS BIOPHARMACEUTICALS, INC	<b>c</b> EIN-PN 47-2569713-001
<b>a</b> Plan name		
<b>b</b> Name of plan sponsor		<b>c</b> EIN-PN
<b>a</b> Plan name		
<b>b</b> Name of plan sponsor		<b>c</b> EIN-PN
<b>a</b> Plan name		
<b>b</b> Name of plan sponsor		<b>c</b> EIN-PN
<b>a</b> Plan name		
<b>b</b> Name of plan sponsor		<b>c</b> EIN-PN
<b>a</b> Plan name		
<b>b</b> Name of plan sponsor		<b>c</b> EIN-PN

<b>SCHEDULE H</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Financial Information</b>  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).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2024</b>  <b>This Form is Open to Public Inspection</b>
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For calendar plan year 2024 or fiscal plan year beginning <b>11/08/2024</b> and ending <b>12/31/2024</b>	
<b>A</b> Name of plan <b>ALTA FEDERATED MDT SMALL CAP CORE</b>	<b>B</b> Three-digit plan number (PN) ▶ <b>001</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>ALTA TRUST COMPANY</b>	<b>D</b> Employer Identification Number (EIN) <b>99-2666297</b>

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

		(a) Beginning of Year	(b) End of Year
<b>Assets</b>			
<b>a</b> Total noninterest-bearing cash .....	<b>1a</b>		
<b>b</b> Receivables (less allowance for doubtful accounts):			
<b>(1)</b> Employer contributions .....	<b>1b(1)</b>		
<b>(2)</b> Participant contributions .....	<b>1b(2)</b>		
<b>(3)</b> Other .....	<b>1b(3)</b>		56227
<b>c</b> General investments:			
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....	<b>1c(1)</b>		285258
<b>(2)</b> U.S. Government securities .....	<b>1c(2)</b>		
<b>(3)</b> Corporate debt instruments (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(3)(A)</b>		
<b>(B)</b> All other .....	<b>1c(3)(B)</b>		
<b>(4)</b> Corporate stocks (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(4)(A)</b>		
<b>(B)</b> Common .....	<b>1c(4)(B)</b>		
<b>(5)</b> Partnership/joint venture interests .....	<b>1c(5)</b>		
<b>(6)</b> Real estate (other than employer real property) .....	<b>1c(6)</b>		
<b>(7)</b> Loans (other than to participants) .....	<b>1c(7)</b>		
<b>(8)</b> Participant loans .....	<b>1c(8)</b>		
<b>(9)</b> Value of interest in common/collective trusts .....	<b>1c(9)</b>		984474
<b>(10)</b> Value of interest in pooled separate accounts .....	<b>1c(10)</b>		
<b>(11)</b> Value of interest in master trust investment accounts .....	<b>1c(11)</b>		
<b>(12)</b> Value of interest in 103-12 investment entities .....	<b>1c(12)</b>		
<b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....	<b>1c(13)</b>		34507837
<b>(14)</b> Value of funds held in insurance company general account (unallocated contracts) .....	<b>1c(14)</b>		
<b>(15)</b> Other .....	<b>1c(15)</b>		

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		35833796
<b>Liabilities</b>			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		21606
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		1130826
k Total liabilities (add all amounts in lines 1g through 1j).....	1k		1152432
<b>Net Assets</b>			
l Net assets (subtract line 1k from line 1f).....	1l		34681364

**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.

<b>Income</b>		(a) Amount	(b) Total
<b>a Contributions:</b>			
(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>b Earnings on investments:</b>			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	9257	
(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)		9257
(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)	83909	
(D) Total dividends. Add lines 2b(2)(A), (B), and (C).....	2b(2)(D)		83909
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts .....	<b>2b(6)</b>		
(7) Net investment gain (loss) from pooled separate accounts .....	<b>2b(7)</b>		
(8) Net investment gain (loss) from master trust investment accounts .....	<b>2b(8)</b>		
(9) Net investment gain (loss) from 103-12 investment entities .....	<b>2b(9)</b>		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) .....	<b>2b(10)</b>		
<b>c</b> Other income .....	<b>2c</b>		-1958568
<b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total .....	<b>2d</b>		-1865402

**Expenses**

<b>e</b> Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers .....	<b>2e(1)</b>		
(2) To insurance carriers for the provision of benefits .....	<b>2e(2)</b>		
(3) Other .....	<b>2e(3)</b>		
(4) Total benefit payments. Add lines <b>2e(1)</b> through <b>(3)</b> .....	<b>2e(4)</b>		
<b>f</b> Corrective distributions (see instructions) .....	<b>2f</b>		
<b>g</b> Certain deemed distributions of participant loans (see instructions) .....	<b>2g</b>		
<b>h</b> Interest expense .....	<b>2h</b>		
<b>i</b> Administrative expenses:			
(1) Salaries and allowances .....	<b>2i(1)</b>		
(2) Contract administrator fees .....	<b>2i(2)</b>		
(3) Recordkeeping fees .....	<b>2i(3)</b>		
(4) IQPA audit fees .....	<b>2i(4)</b>		
(5) Investment advisory and investment management fees .....	<b>2i(5)</b>		
(6) Bank or trust company trustee/custodial fees .....	<b>2i(6)</b>		
(7) Actuarial fees .....	<b>2i(7)</b>		
(8) Legal fees .....	<b>2i(8)</b>		
(9) Valuation/appraisal fees .....	<b>2i(9)</b>		
(10) Other trustee fees and expenses .....	<b>2i(10)</b>		
(11) Other expenses .....	<b>2i(11)</b>	75837	
(12) Total administrative expenses. Add lines <b>2i(1)</b> through <b>(11)</b> .....	<b>2i(12)</b>		75837
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total .....	<b>2j</b>		75837

**Net Income and Reconciliation**

<b>k</b> Net income (loss). Subtract line <b>2j</b> from line <b>2d</b> .....	<b>2k</b>		-1941239
<b>l</b> Transfers of assets:			
(1) To this plan .....	<b>2l(1)</b>		51229685
(2) From this plan .....	<b>2l(2)</b>		14607082

**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
<b>a</b> 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>b</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.)			
<b>c</b> 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.)			
<b>d</b> 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.)			
<b>e</b> Was this plan covered by a fidelity bond?			
<b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?			
<b>g</b> 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?			
<b>h</b> 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?			
<b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)			
<b>j</b> 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.)			
<b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
<b>l</b> Has the plan failed to provide any benefit when due under the plan?			
<b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
<b>n</b> 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.)

<b>5b(1)</b> Name of plan(s)	<b>5b(2)</b> EIN(s)	<b>5b(3)</b> 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 \_\_\_\_\_.