

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

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

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

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

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 12/03/2024 and ending 12/31/2024

A Name of plan <u>ALTA LORD ABBETT INTERNATIONAL EQUITY</u>	B Three-digit plan number (PN)	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>ALTA TRUST COMPANY</u>	D Employer Identification Number (EIN) <u>99-2652504</u>	

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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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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)

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a Plan name	3 BIRDS MARKETING 401K PLAN	
b Name of plan sponsor	3 BIRDS MARKETING	c EIN-PN 27-2410716-002
a Plan name	3A PRESS CORP RETIREMENT PLAN	
b Name of plan sponsor	3A PRESS CORP	c EIN-PN 66-0530750-001
a Plan name	A.L. LOWDER 401K PLAN	
b Name of plan sponsor	A.L. LOWDER	c EIN-PN 56-0990649-001
a Plan name	ACCOLADE INC 401(K) PLAN	
b Name of plan sponsor	ACCOLADE, INC	c EIN-PN 01-0969591-001
a Plan name	ACE INDUSTRIAL SUPPLY INC 401(K) PROFIT SHARING PLAN AND TRUST	
b Name of plan sponsor	ACE INDUSTRIAL SUPPLY INC	c EIN-PN 41-2161289-001
a Plan name	ADD ADHD DIAGNOSTIC AND TREATMENT CENTER 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	ADD ADHD DIAGNOSTIC AND TREATMENT CENTER	c EIN-PN 45-5131655-001
a Plan name	ADVANCED CARDIOLOGY ASSOCIATES PC 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	ADVANCED CARDIOLOGY ASSOCIATES	c EIN-PN 45-4431447-001
a Plan name	ADVANTAGE ARCHIVES 401(K) PLAN	
b Name of plan sponsor	ADVANTAGE ARCHIVES	c EIN-PN 82-4512292-001
a Plan name	AGRI WAY PARTNERS LLC 401(K) PLAN	
b Name of plan sponsor	AGRI WAY PARTNERS, LLC	c EIN-PN 11-3661025-001
a Plan name	AIR CARGO TRANSFER INC 401(K) PROFIT SHARING PLAN AND TRUST	
b Name of plan sponsor	AIR CARGO TRANSFER INC	c EIN-PN 20-2625280-001
a Plan name	AIR TRO INC RETIREMENT SAVINGS PLAN	
b Name of plan sponsor	AIR-TRO, INC.	c EIN-PN 95-2584068-002
a Plan name	ALEXS MEAT DISTRIBUTORS CORP 401(K) PLAN	
b Name of plan sponsor	ALEX'S MEAT DISTRIBUTORS CORP	c EIN-PN 20-0678508-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	ALL ISLAND HOMES LTD 401(K) PROFIT SHARING PLAN AND TRUSTPLAN	
b	Name of plan sponsor	ALL ISLAND HOMES LTD	c EIN-PN 46-1450672-001
a	Plan name	ALL METAL DESIGNS INC 401(K) SALARY REDUCTION PLAN AND TRUST	
b	Name of plan sponsor	ALL METAL DESIGNS	c EIN-PN 38-1892906-001
a	Plan name	ALLIED POWER AND SUBSIDIARIES 401K PLAN PKA ALLIED POWER SERVICES 401K PLAN	
b	Name of plan sponsor	ALLIED POWER SERVICES, LLC.	c EIN-PN 37-1857278-001
a	Plan name	ALPINE MEDICAL GROUP RETIREMENT PLAN	
b	Name of plan sponsor	ALPINE MEDICAL GROUP LLC	c EIN-PN 84-1401924-001
a	Plan name	AMERITAS POOLED EMPLOYER PLAN	
b	Name of plan sponsor	AMERITAS PEP	c EIN-PN 82-3095168-011
a	Plan name	AMS REAL ESTATE SERVICES 401(K) PLAN	
b	Name of plan sponsor	AMS REAL ESTATE SERVICES	c EIN-PN 20-3411329-001
a	Plan name	APPROVED MORTGAGE 401(K) PLAN	
b	Name of plan sponsor	APPROVED MORTGAGE CORPORATION	c EIN-PN 35-1911849-001
a	Plan name	ARCHER REVIEW 401(K) PLAN	
b	Name of plan sponsor	USMLEGALAXY LLC DBA ARCHER REVIEW	c EIN-PN 26-4288906-001
a	Plan name	ARCO DEVELOPMENT SERVICES 401K/PS PLAN	
b	Name of plan sponsor	ARCO DEVELOPMENT SERVICES PLLC	c EIN-PN 86-2988745-001
a	Plan name	ARRAY ALLIANCE, INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	ARRAY ALLIANCE, INC.	c EIN-PN 82-5248574-001
a	Plan name	ARTEFACT GROUP 401(K) PLAN	
b	Name of plan sponsor	ARTEFACT GROUP	c EIN-PN 20-3035342-001
a	Plan name	ASSET ENTERPRISES INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ASSET ENTERPRISES, INC	c EIN-PN 57-1103029-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name ASSOCIATED CLINIC OF PSYCHOLOGY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ASSOCIATED CLINIC OF PSYCHOLOGY	c EIN-PN 41-1425197-001
a	Plan name ASSOCIATION OF PROSECUTING ATTORNEYS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ASSOCIATION OF PROSECUTING ATTORNEYS, INC	c EIN-PN 26-3117485-001
a	Plan name ATKINS BUILDING SERVICE AND PRODUCTS INC 401(K)	
b	Name of plan sponsor ATKINS BUILDING SERVICE AND PRODUCTS, INC	c EIN-PN 43-1187055-001
a	Plan name AUBURN FOUNDRY INC 401(K) PLAN	
b	Name of plan sponsor AUBURN FOUNDRY	c EIN-PN 16-0916055-003
a	Plan name AUSTIN BIOASSAYS LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor AUSTIN BIOASSAYS, LLC	c EIN-PN 74-3025171-001
a	Plan name AUTOMOTIVE PARTS ASSOCIATES INC 401(K) PLAN	
b	Name of plan sponsor AUTOMOTIVE PARTS ASSOCIATES, INC	c EIN-PN 48-1156791-001
a	Plan name AZOMITE MINERAL PRODUCTS, INC. 401(K) PLAN	
b	Name of plan sponsor AZOMITE MINERAL PRODUCTS, INC.	c EIN-PN 46-4123319-001
a	Plan name BAKER LAW GROUP 401(K) PLAN	
b	Name of plan sponsor BAKER LAW GROUP	c EIN-PN 27-5382391-001
a	Plan name BANK FIVE NINE 401(K) PLAN	
b	Name of plan sponsor BANK FIVE NINE	c EIN-PN 39-0148000-002
a	Plan name BARGHAUSEN CONSULTING ENGINEERS INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor BARGHAUSEN CONSULTING ENGINEERS, INC	c EIN-PN 91-1192493-001
a	Plan name BARRETT FIREARMS MANUFACTURING INC 401(K) SALARY REDUCTION PLAN	
b	Name of plan sponsor BARRETT FIREARMS MANUFACTURING	c EIN-PN 62-1224445-001
a	Plan name BAYOU ELECTRICAL SERVICES 401(K) PLAN	
b	Name of plan sponsor BAYOU ELECTRICAL SERVICES	c EIN-PN 76-0537058-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	BBTC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	BRISTOL BAY TELEPHONE COOPERATIVE, INC. (BBTC)	c EIN-PN 92-0047849-001
a	Plan name	BEAR ACQUISITIONS INC 401(K) PLAN	
b	Name of plan sponsor	BEAR ACQUISITIONS, INC	c EIN-PN 81-4357848-001
a	Plan name	BECK GOGOLSKI AND CO INC 401(K) PLAN	
b	Name of plan sponsor	BECK, GOGOLSKI AND CO, INC	c EIN-PN 26-3397779-001
a	Plan name	BECKER LAW, PLLC 401(K) PLAN	
b	Name of plan sponsor	BECKER LAW, PLLC	c EIN-PN 85-3980077-001
a	Plan name	BEMCO OF WESTERN NEW YORK INC 401K PLAN	
b	Name of plan sponsor	BEMCO OF WESTERN NEW YORK INC	c EIN-PN 16-1539492-001
a	Plan name	BENJAMIN BROTHERS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BENJAMIN BROTHERS, INC	c EIN-PN 22-1427656-002
a	Plan name	BESWICK CORPORATION 401(K) PLAN	
b	Name of plan sponsor	BESWICK CORPORATION	c EIN-PN 38-1977703-001
a	Plan name	BIG HORN CONSTRUCTION 401K	
b	Name of plan sponsor	BIG HORN CONSTRUCTION CO.	c EIN-PN 20-3697819-001
a	Plan name	BILL'S ELECTRIC 401K PLAN	
b	Name of plan sponsor	BILL'S ELECTRIC, INC.	c EIN-PN 44-0661886-001
a	Plan name	BNK CONSTRUCTION INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BNK CONSTRUCTION, INC	c EIN-PN 93-1179120-001
a	Plan name	BOB BROWN CHEVROLET INC PROFIT SHARING PLAN	
b	Name of plan sponsor	BOB BROWN CHEVROLET, INC	c EIN-PN 42-0846759-001
a	Plan name	BOB CIASULLI AUTO GROUP 401(K) PLAN	
b	Name of plan sponsor	BOB CIASULLI AUTO GROUP, INC	c 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.)			
a	Plan name	BONNEY FORGE CORP DEFERRED PROFIT SHARING PLAN	
b	Name of plan sponsor	BONNEY FORGE CORP	c EIN-PN 23-2308673-001
a	Plan name	BONNEY FORGE CORP DEFERRED PROFIT SHARING PLAN FOR BARGAINING UNIT EMPLOYEES	
b	Name of plan sponsor	BONNEY FORGE CORP	c EIN-PN 23-2308673-003
a	Plan name	BORDAS AND BORDAS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BORDAS AND BORDAS	c EIN-PN 55-0784362-001
a	Plan name	BOSON HEALTH 401(K) PLAN	
b	Name of plan sponsor	BOSON DHO LLC	c EIN-PN 47-1336709-001
a	Plan name	BRET B GILSDORF DDS LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BRET B GILSDORF, DDS, LLC	c EIN-PN 90-0920288-001
a	Plan name	BREVARD ACHIEVEMENT CENTER INC 401(K) SAVINGS PLAN	
b	Name of plan sponsor	BREVARD ACHIEVEMENT CENTER, INC	c EIN-PN 59-1203280-002
a	Plan name	BURN BRIGHT LLC 401(K) PSP	
b	Name of plan sponsor	BURN BRIGHT, LLC	c EIN-PN 46-5562373-002
a	Plan name	C.D. BARNES ASSOCIATES, INC. 401K & PROFIT SHARING PLAN	
b	Name of plan sponsor	C.D. BARNES ASSOCIATES, INC.	c EIN-PN 38-1442303-001
a	Plan name	CACHE VALLEY BANK 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CACHE VALLEY BANK	c EIN-PN 87-0310100-001
a	Plan name	CACIALLI AUTO REPAIR INC 401(K) PLAN	
b	Name of plan sponsor	CACIALLI AUTO REPAIR INC	c EIN-PN 20-5681021-001
a	Plan name	CALIFORNIA SECURITY SERVICES 401K PS PLAN TRUST	
b	Name of plan sponsor	CALIFORNIA SECURITY SERVICES INC	c EIN-PN 71-0906883-001
a	Plan name	CARAMEROS AND RAWLS 401(K) PLAN	
b	Name of plan sponsor	CARAMEROS AND RAWLS	c EIN-PN 76-0518397-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	CARDINAL MANUFACTURING COMPANY INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CARDINAL MANUFACTURING COMPANY, INC	c EIN-PN 37-1433936-001
a	Plan name	CARR VALLEY CHEESE COMPANY 401(K) PLAN	
b	Name of plan sponsor	CARR VALLEY CHEESE COMPANY, INC	c EIN-PN 39-1558709-001
a	Plan name	CASELLAS ALCOVER AND BURGOS RETIREMENT PLAN	
b	Name of plan sponsor	CASELLAS, ALCOVER AND BURGOS	c EIN-PN 66-0690092-001
a	Plan name	CATRAC 401(K) PLAN	
b	Name of plan sponsor	CAPITAL AREA TRAUMA REGIONAL ADVISORY COUNCIL (CATRAC)	c EIN-PN 74-2747806-002
a	Plan name	CBR MANAGEMENT SERVICE INC	
b	Name of plan sponsor	CBR MANAGEMENT SERVICE, INC	c EIN-PN 86-0820414-333
a	Plan name	CCR USA AIRPORT MANAGEMENT, INC. 401(K) PLAN	
b	Name of plan sponsor	CCR USA AIRPORT MANAGEMENT INC.	c EIN-PN 47-5421686-001
a	Plan name	CDR COMPANIES 401(K) PLAN FKA MAGUIRE FLEXSAVER PLAN	
b	Name of plan sponsor	CDR MAGUIRE, INC.	c EIN-PN 05-0318211-002
a	Plan name	CE PRECISION ASSEMBLIES INC 401(K) PLAN	
b	Name of plan sponsor	CE PRECISION ASSEMBLIES, INC	c EIN-PN 52-1462844-001
a	Plan name	CELLTRION USA INC 401(K) PLAN	
b	Name of plan sponsor	CELLTRION USA, INC	c EIN-PN 36-4905731-001
a	Plan name	CENTRAL BRACE AND PROSTHETICS INC PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	CENTRAL BRACE AND PROSTHETICS	c EIN-PN 61-1053249-001
a	Plan name	CENTRAL COAST FAMILY CARE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CENTRAL COAST FAMILY CARE MEDICAL ASSOCIATES OF SANTA MARIA, INC	c EIN-PN 77-0404320-001
a	Plan name	CENTRAL MAINE POWERSPORTS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	AUGUSTA AUTO SALES	c EIN-PN 57-1175978-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name CENTRAL TOOLS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CENTRAL TOOLS INC	c EIN-PN 05-0402749-001
a	Plan name CENTURY GROUP 401(K) PLAN	
b	Name of plan sponsor THE CENTURY GROUP	c EIN-PN 93-1022773-001
a	Plan name CERVELLO GLOBAL CORPORATION 401(K) PLAN	
b	Name of plan sponsor CERVELLO GLOBAL CORPORATION	c EIN-PN 27-2488822-001
a	Plan name CERVELLO TECHNOLOGIES LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor CERVELLO GLOBAL CORPORATION	c EIN-PN 27-2488822-001
a	Plan name CERVELLO TECHNOLOGIES LLC PROFIT SHARING PLAN	
b	Name of plan sponsor CERVELLO GLOBAL CORPORATION	c EIN-PN 27-2488822-002
a	Plan name CFG RETIREMENT PLAN	
b	Name of plan sponsor CFG	c EIN-PN 26-4077163-001
a	Plan name CHAPIN AND BANGS CO INC 401(K) PLAN	
b	Name of plan sponsor CHAPIN AND BANGS COMPANY, INC	c EIN-PN 06-0290380-001
a	Plan name CHAPIN AND BANGS UNION 401(K) PLAN	
b	Name of plan sponsor CHAPIN AND BANGS COMPANY, INC	c EIN-PN 06-0290380-004
a	Plan name CHARLOTTE LUNG AND HEALTH CENTER, INC. 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor CHARLOTTE LUNG & HEALTH CENTER	c EIN-PN 56-2190843-001
a	Plan name CHILDREN AND ADOLESCENT CLINIC PC PROFIT SHARING PLAN	
b	Name of plan sponsor CHILDREN AND ADOLESCENT CLINIC	c EIN-PN 47-0637178-002
a	Plan name CHILDRENS DAY NURSERY AND FAMILY CENTER 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CHILDREN'S DAY NURSERY AND FAMILY CENTER	c EIN-PN 22-1493153-002
a	Plan name CHOICE FINANCIAL GROUP 401(K) PLAN	
b	Name of plan sponsor CHOICE BANK	c EIN-PN 45-0117790-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	CITY PETS RETIREMENT PLAN	
b	Name of plan sponsor	CITY PETS PLLC	c EIN-PN 01-0693341-001
a	Plan name	CLEAN CUT TREE SERVICE, INC 401K PLAN	
b	Name of plan sponsor	CLEAN CUT TREE SERVICE, INC	c EIN-PN 36-3963749-002
a	Plan name	CLEVENGER FRABLE LAVALLEE INC PROFIT SHARING PLAN	
b	Name of plan sponsor	CLEVENGER FRABLE LAVALLEE INC	c EIN-PN 13-3749900-001
a	Plan name	COASTAL EQUIPMENT CORP. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	COASTAL EQUIPMENT CORP	c EIN-PN 54-0990869-002
a	Plan name	COASTAL HYDRAULICS INC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	COASTAL HYDRAULICS INC	c EIN-PN 57-0749948-001
a	Plan name	COLDEN AND SEYMOUR EAR NOSE THROAT AND ALLERGY 401(K) SAVINGS PLAN	
b	Name of plan sponsor	COLDEN AND SEYMOUR EAR, NOSE, THROAT AND ALLERGY	c EIN-PN 20-3995326-001
a	Plan name	COLORADO BLUESKY ENTERPRISES INC. 401(K) PLAN	
b	Name of plan sponsor	COLORADO BLUESKY ENTERPRISES, INC.	c EIN-PN 84-0561888-001
a	Plan name	COLORADO DERMATOLOGY GROUP PLLC 401(K) PLAN	
b	Name of plan sponsor	COLORADO DERMATOLOGY GROUP, PLLC	c EIN-PN 81-3218047-001
a	Plan name	COMMANDER BUILDINGS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	COMMANDER BUILDINGS, INC	c EIN-PN 86-3706474-001
a	Plan name	COMMERCIAL GLASS & ALUMINUM INC. 401(K) PLAN	
b	Name of plan sponsor	COMMERCIAL GLASS & ALUMINUM INC.	c EIN-PN 20-8113192-001
a	Plan name	COMMUNITY WEST CREDIT UNION 401(K) PLAN	
b	Name of plan sponsor	COMMUNITY WEST CREDIT UNION	c EIN-PN 38-1844068-002
a	Plan name	CONNECT LOGISTICS, INC 401K PLAN	
b	Name of plan sponsor	CONNECT LOGISTICS, INC.	c EIN-PN 20-8567688-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name CONTEMPORARY & COSMETIC DERMATOLOGY, PC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CONTEMPORARY & COSMETIC DERMATOLOGY, PC	c EIN-PN 22-3591934-001
a	Plan name CORRUGATED REPLACEMENTS INC RETIREMENT PLAN	
b	Name of plan sponsor CORRUGATED REPLACEMENTS, INC.	c EIN-PN 58-1433555-002
a	Plan name COUNTY NATIONAL BANK 401(K) PLAN	
b	Name of plan sponsor HILLSDALE COUNTY NATIONAL BANK	c EIN-PN 38-0650660-001
a	Plan name COUNTY ROAD ASSOCIATION OF MICHIGAN 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COUNTY ROAD ASSOCIATION OF MICHIGAN	c EIN-PN 38-6004884-002
a	Plan name CRAFT PATTERN AND MOLD LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor CRAFT PATTERN AND MOLD LLC	c EIN-PN 26-1531960-001
a	Plan name CUMMINGS DENTAL 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MATTHEW J CUMMINGS DDS, PC	c EIN-PN 43-1631536-001
a	Plan name CURTIS RESTAURANT SUPPLY 401(K) PLAN	
b	Name of plan sponsor CURTIS RESTAURANT SUPPLY	c EIN-PN 42-1560514-001
a	Plan name CUSTOM MOLDING SOLUTIONS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CUSTOM MOLDING SOLUTIONS	c EIN-PN 01-0646199-001
a	Plan name CUSTOMERSTREAM LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CUSTOMERSTREAM, LLC	c EIN-PN 20-4900186-001
a	Plan name CUTEK INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CUTEK, INC	c EIN-PN 20-2732426-001
a	Plan name D GREG SEAL DDS PC PROFIT SHARING TRUST	
b	Name of plan sponsor D GREG SEAL DDS PC	c EIN-PN 43-1226091-003
a	Plan name DANIELS AND ERICKSON 401(K) PLAN	
b	Name of plan sponsor DANIELS AND ERICKSON	c EIN-PN 75-2916499-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name DAVIS BROTHERS CONSTRUCTION GROUP 401K PLAN	
b	Name of plan sponsor DAVIS BROTHERS CONSTRUCTION GROUP	c EIN-PN 59-1495341-001
a	Plan name DCS PEP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DCS	c EIN-PN 26-4614358-001
a	Plan name DEEP EAST TEXAS LOCAL WORKFORCE DEVELOPMENT BOARD INC 401(K) PLAN	
b	Name of plan sponsor DEEP EAST TEXAS WORKFORCE SOLUTIONS	c EIN-PN 75-2765176-001
a	Plan name DENTAL PROFESSIONALS, S.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DENTAL PROFESSIONALS	c EIN-PN 39-1809079-001
a	Plan name DENTISTRY AT VICKERY CREEK 401(K) PLAN	
b	Name of plan sponsor DENTISTRY AT VICKERY CREEK	c EIN-PN 75-3201454-001
a	Plan name DESIGN RESEARCH ENGINEERING 401(K) AND RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor DESIGN RESEARCH ENGINEERING, LLC	c EIN-PN 38-3264397-001
a	Plan name DICKINSON ARCHITECTS 401(K) PLAN	
b	Name of plan sponsor DICKINSON ARCHITECTS	c EIN-PN 58-1490803-001
a	Plan name DIESEL AFFILIATES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CITY DIESEL OF KNOXVILLE, LLC	c EIN-PN 46-4270134-001
a	Plan name DIGESTIVE HEALTH CONSULTANTS PLC PS PLAN	
b	Name of plan sponsor DIGESTIVE HEALTH CONSULTANTS, PLC	c EIN-PN 38-3416305-001
a	Plan name DIRECT MANAGEMENT CORPORATION 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor DIRECT MANAGEMENT CORPORATION	c EIN-PN 11-2847720-001
a	Plan name DON MAR CREATIONS INC NONUNION 401(K) PLAN	
b	Name of plan sponsor DON MAR CREATIONS	c EIN-PN 05-0352099-002
a	Plan name DON MAR CREATIONS INC UNION 401(K) PLAN	
b	Name of plan sponsor DON MAR CREATIONS	c EIN-PN 05-0352099-004

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	DONALD J. SABOURIN DDS PLLC 401K PLAN	
b	Name of plan sponsor	DONALD J. SABOURIN DDS PLLC	c EIN-PN 37-1440172-001
a	Plan name	DOWNES SWIMMING POOL CO., INC. PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	DOWNES SWIMMING POOL CO., INC.	c EIN-PN 32-2767503-001
a	Plan name	DR RICHARD A STACEY PC PROFIT SHARING PLAN	
b	Name of plan sponsor	DR RICHARD A STACEY, PC	c EIN-PN 47-0827378-001
a	Plan name	DYNPRO INC RETIREMENT PLAN	
b	Name of plan sponsor	DYNPRO, INC	c EIN-PN 56-2127772-001
a	Plan name	EAGLE POINT SOLAR 401(K) PLAN	
b	Name of plan sponsor	EAGLE POINT SOLAR, LLC	c EIN-PN 27-0380936-001
a	Plan name	EAK PENSION PLAN	
b	Name of plan sponsor	VCI, INC.	c EIN-PN 66-0500059-001
a	Plan name	EDMIK INC. 401(K) PLAN	
b	Name of plan sponsor	EDMIK INC.	c EIN-PN 36-2367652-001
a	Plan name	EDUCATIONAL RESOURCE SYSTEMS INC. 401K PLAN	
b	Name of plan sponsor	EDUCATIONAL RESOURCE SYSTEMS, INC.	c EIN-PN 22-3271219-001
a	Plan name	EIS HOLDINGS 401(K) PLAN	
b	Name of plan sponsor	EIS HOLDINGS	c EIN-PN 82-4707104-001
a	Plan name	EMERALD SITE SERVICES INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	EMERALD SITE SERVICES, INC	c EIN-PN 45-3991150-001
a	Plan name	FAMILY EYE CARE OF NEPA, PC 401K PLAN	
b	Name of plan sponsor	FAMILY EYE CARE OF NEPA PC	c EIN-PN 20-1642828-001
a	Plan name	FAMILY VISION 401K PLAN	
b	Name of plan sponsor	FAMILY VISION CENTER OF LA CROSSE LLC	c EIN-PN 81-4895832-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	FARHAN SIDDIQI MD PA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FARHAN SIDDIQI MD PA	c EIN-PN 83-2995871-001
a	Plan name	FG BUILDING PRODUCTS 401(K) PLAN	
b	Name of plan sponsor	FG BUILDING PRODUCTS	c EIN-PN 83-2093365-001
a	Plan name	FILTERBUY 401(K) PLAN	
b	Name of plan sponsor	TMS MANAGEMENT, LLC	c EIN-PN 82-3713087-001
a	Plan name	FIRST COMMONWEALTH FEDERAL CREDIT UNION RETIREMENT PLAN	
b	Name of plan sponsor	FIRST COMMONWEALTH FEDERAL CREDIT UNION	c EIN-PN 23-1568331-003
a	Plan name	FIRST MERIT SOLUTIONS LLC 401(K) PLAN	
b	Name of plan sponsor	FIRST MERIT SOLUTIONS, LLC	c EIN-PN 82-4608951-002
a	Plan name	FITE CONSTRUCTION COMPANY LLC 401(K) PLAN	
b	Name of plan sponsor	FITE CONSTRUCTION COMPANY, LLC	c EIN-PN 82-2664626-001
a	Plan name	FIXLER AND LAGATTUTA LLP 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	FIXLER AND LAGATTUTA LLP	c EIN-PN 20-0726956-001
a	Plan name	FORTY AU 401K PLAN	
b	Name of plan sponsor	FORTY AU, LLC	c EIN-PN 45-3361365-001
a	Plan name	FPS GROUP LLC 401(K) PLAN	
b	Name of plan sponsor	IPX RETIREMENT	c EIN-PN 38-3931263-001
a	Plan name	FRAMERICA CORPORATION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	FRAMERICA CORPORATION	c EIN-PN 11-2835418-001
a	Plan name	FRANCISCAN SISTERS OF DILLINGEN 401(K) PLAN	
b	Name of plan sponsor	FRANCISCAN SISTERS OF DILLINGEN	c EIN-PN 45-0226432-001
a	Plan name	FRANK AND DARBY DOE 401(K)	
b	Name of plan sponsor	FRANK AND DARBY DOE	c EIN-PN 20-5100615-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	FRANK CIOTTA AND ASSOCIATES INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FRANK CIOTTA AND ASSOCIATES, INC	c EIN-PN 11-2935800-001
a	Plan name	FRAZER & FELDMAN, LLP 401K PLAN	
b	Name of plan sponsor	FRAZER & FELDMAN, LLP	c EIN-PN 26-1528841-002
a	Plan name	FRIENDLY HOLDING COMPANY RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	BETTEN FRIENDLY MOTORS	c EIN-PN 38-2023962-001
a	Plan name	FROST HARDWOOD LUMBER COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FROST HARDWOOD LUMBER COMPANY	c EIN-PN 95-2012458-003
a	Plan name	FUND OFFICE 401(K) PLAN	
b	Name of plan sponsor	FUND OFFICE 401(K) PLAN	c EIN-PN 13-6043636-003
a	Plan name	GASKETS INC 401(K) PLAN	
b	Name of plan sponsor	GASKETS, INC	c EIN-PN 39-0981229-001
a	Plan name	GEARS INC 401 K PROFIT SHARING PLAN	
b	Name of plan sponsor	GEARS, INC	c EIN-PN 84-0826066-001
a	Plan name	GEM REHAB 401(K) PLAN	
b	Name of plan sponsor	GEM REHAB PT OT SLP PLLC	c EIN-PN 47-2255364-001
a	Plan name	GENEVA ON THE LAKE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GENEVA ON THE LAKE RESORT, LLC	c EIN-PN 87-2366986-001
a	Plan name	GETTLESON WITZER AND OCONNOR 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GETTLESON WITZER AND O'CONNOR	c EIN-PN 95-4802807-001
a	Plan name	GI MEDICINE ASSOCIATES PC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GI MEDICINE ASSOCIATES, PC	c EIN-PN 38-2081222-002
a	Plan name	GILBERT, WILSON & HUNTER 401(K) PLAN	
b	Name of plan sponsor	GILBERT, WILSON, & HUNTER, LLC	c EIN-PN 86-1993589-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	GLEN ELLYN VOLUNTEER FIRE COMPANY 401(K) PLAN	
b	Name of plan sponsor	GLEN ELLYN VOLUNTEER FIRE COMPANY	c EIN-PN 36-6091920-002
a	Plan name	GOLD STAR PLUMBING INC 401(K)	
b	Name of plan sponsor	GOLD STAR PLUMBING INC	c EIN-PN 27-4210076-001
a	Plan name	GOLDEN ARROW 401(K) PLAN AND TRUST	
b	Name of plan sponsor	GOLDEN ARROW TECHNOLOGY AMERICA INC	c EIN-PN 81-3289868-001
a	Plan name	GOLDEN COAST CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor	GOLDEN COAST CONSTRUCTION	c EIN-PN 52-2449794-001
a	Plan name	GOMEZ & BECKER LLP 401(K) PLAN	
b	Name of plan sponsor	GOMEZ & BECKER LLP	c EIN-PN 81-1214704-001
a	Plan name	GOOD DAY PHARMACY 401(K) PLAN	
b	Name of plan sponsor	GOOD DAY PHARMACY	c EIN-PN 84-1047165-001
a	Plan name	GRANBY TELEPHONE COMPANY PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	GRANBY TELEPHONE COMPANY	c EIN-PN 44-0264840-002
a	Plan name	GRANITE LLC 401(K) PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor	GRANITE LLC	c EIN-PN 13-4222122-001
a	Plan name	GRB ENTERTAINMENT 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	GRB ENTERTAINMENT, INC	c EIN-PN 95-4603859-002
a	Plan name	GREEN HILLS HEALTH CARE CENTER INC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	GREEN HILLS HEALTH CARE CENTER, INC	c EIN-PN 42-1490784-001
a	Plan name	GREGORYS FLEET SUPPLY CORPORATION	
b	Name of plan sponsor	GREGORYS FLEET SUPPLY CORPORATION	c EIN-PN 54-0799767-001
a	Plan name	GRETEL LABS INC 401(K) PLAN	
b	Name of plan sponsor	GRETEL LABS INC	c EIN-PN 84-2806650-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a Plan name	GROW MARKETING 401(K) PLAN	
b Name of plan sponsor	GROW MARKETING	c EIN-PN 47-0853473-001
a Plan name	GS FOSSUM DDS 401(K) PLAN	
b Name of plan sponsor	G.S. FOSSUM, D.D.S.	c EIN-PN 74-2509785-001
a Plan name	H&E EQUIPMENT SERVICES, INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	H&E EQUIPMENT SERVICES, INC.	c EIN-PN 11-3113455-001
a Plan name	HAAS WAREHOUSING INC RETIREMENT PLAN	
b Name of plan sponsor	HAAS WAREHOUSING, INC.	c EIN-PN 44-0369300-001
a Plan name	HAITIAN BRIDGE ALLIANCE, INC 401K PLAN	
b Name of plan sponsor	HAITIAN BRIDGE ALLIANCE, INC	c EIN-PN 81-3558713-001
a Plan name	HANSFORD COUNTY FEEDERS 401K PLAN	
b Name of plan sponsor	HANSFORD COUNTY FEEDERS, LP	c EIN-PN 75-2737133-001
a Plan name	HARDING PUMP AND SUPPLY INC PROFIT SHARING PLAN	
b Name of plan sponsor	HARDING PUMP AND SUPPLY INC	c EIN-PN 74-2445090-001
a Plan name	HARMONY FOUNDATION INC 401(K) PLAN	
b Name of plan sponsor	HARMONY FOUNDATION, INC	c EIN-PN 84-0594732-001
a Plan name	HAYNES DOWNARD LLC 401K PLAN	
b Name of plan sponsor	HAYNES DOWNARD LLC	c EIN-PN 63-1199963-001
a Plan name	HD SHIPS 401(K) PLAN	
b Name of plan sponsor	HD SHIPPING SOLUTIONS LLC	c EIN-PN 82-4596159-001
a Plan name	HDS TRADING CORP 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	HDS TRADING CORP	c EIN-PN 56-2303877-001
a Plan name	HELLERSTEIN AND BRENNER VISION CENTER PC PROFIT SHARING PLAN	
b Name of plan sponsor	HELLERSTEIN AND BRENNER VISION CENTER PC	c EIN-PN 84-1185693-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name	HIGHHOUSE OIL OPERATIONS INC 401K PROFIT SHARING PLAN
b	Name of plan sponsor	HIGHHOUSE OIL OPERATIONS INC
c	EIN-PN	20-3844440-001
a	Plan name	HIGHWAY MARKETING INC 401(K) PLAN
b	Name of plan sponsor	HIGHWAY MARKETING
c	EIN-PN	75-2576978-001
a	Plan name	HIQ COMPUTERS 401(K) SAVINGS PLAN
b	Name of plan sponsor	HIQ COMPUTERS
c	EIN-PN	20-1991107-001
a	Plan name	HORIZON FEDERAL CREDIT UNION CAPITAL ACCUMULATION PLAN
b	Name of plan sponsor	HORIZON FEDERAL CREDIT UNION
c	EIN-PN	24-0840764-033
a	Plan name	HOWDYSHELL FLOORING INC 401(K) SAFE HARBOR PLAN
b	Name of plan sponsor	HOWDYSHELL FLOORING, INC
c	EIN-PN	02-0581900-001
a	Plan name	HPM FOUNDATION INC DBA HEALTHPROMED RETIREMENT PLAN
b	Name of plan sponsor	HPM FOUNDATION INC DBA HEALTHPROMED
c	EIN-PN	66-0437924-001
a	Plan name	HUGHES SYSTIQUE PRIVATE LIMITED 401(K) PROFIT SHARING PLAN AND TRUST
b	Name of plan sponsor	HUGHES SYSTIQUE PRIVATE LIMITED
c	EIN-PN	98-0561217-001
a	Plan name	HUNTER MACLEAN EXLEY AND DUNN PC 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	HUNTER, MACLEAN, EXLEY AND DUNN, PC
c	EIN-PN	58-2211993-001
a	Plan name	IC EMPLOYEE LEASING LLC 401(K) PLAN
b	Name of plan sponsor	IC EMPLOYEE LEASING LLC
c	EIN-PN	32-0360392-001
a	Plan name	IDEAL ENERGY, INC. 401K PLAN
b	Name of plan sponsor	IDEAL ENERGY, INC.
c	EIN-PN	27-0704312-001
a	Plan name	IMMUNOCORE 401(K) SAVINGS PLAN
b	Name of plan sponsor	IMMUNOCORE LLC
c	EIN-PN	90-0777485-001
a	Plan name	INDEPENDENT MINING CONSULTANTS
b	Name of plan sponsor	INDEPENDENT MINING CONSULTANTS
c	EIN-PN	86-0460579-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name INDUSTRIAL MANAGEMENT CONSULTANTS INC PROFIT SHARING PLAN	
b	Name of plan sponsor INDUSTRIAL MANAGEMENT CONSULTANTS, INC.	c EIN-PN 75-1976033-005
a	Plan name INSIGHT SOURCING GROUP INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor INSIGHT SOURCING GROUP, INC	c EIN-PN 55-0793869-001
a	Plan name INTEGRATED LOGISTICS 2000 LLC 401K PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor INTEGRATED LOGISTICS 2000 LLC	c EIN-PN 54-1952915-001
a	Plan name INTEGRATED WEALTH ADVISORY SERVICES, INC. 401 (K) PS PLAN	
b	Name of plan sponsor INTEGRATED WEALTH ADVISORY SERVICES, INC.	c EIN-PN 48-0988125-001
a	Plan name INTERNATIONAL CPR INSTITUTE INC	
b	Name of plan sponsor INTERNATIONAL CPR INSTITUTE INC	c EIN-PN 22-3963690-001
a	Plan name INTERNATIONAL SOLUTIONS SERVICES LLC 401(K) PLAN	
b	Name of plan sponsor INTERNATIONAL SOLUTIONS SERVICES	c EIN-PN 81-5364821-001
a	Plan name INTERSTATE PACKAGING 401(K) PLAN	
b	Name of plan sponsor INTERSTATE PACKAGING CORP	c EIN-PN 26-0629639-001
a	Plan name INVENTURE RENEWABLES, INC. 401(K) PLAN	
b	Name of plan sponsor INVENTURE RENEWABLES, INC.	c EIN-PN 45-4890950-001
a	Plan name IPG AUTOMOTIVE USA INC 401(K) PLAN	
b	Name of plan sponsor IPG AUTOMOTIVE USA, INC	c EIN-PN 36-4813731-001
a	Plan name IPOS SYSTEMS LLC 1081.01(D) PLAN	
b	Name of plan sponsor IPOS SYSTEMS, LLC	c EIN-PN 20-5617459-002
a	Plan name IPT 401(K) PLAN	
b	Name of plan sponsor INNOVATIVE PEOPLE AND TECHNOLOGY CORPORATION	c EIN-PN 47-3516351-001
a	Plan name IRWIN COHEN GROUP 401(K) PLAN	
b	Name of plan sponsor IRWIN COHEN GROUP	c EIN-PN 36-4458690-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name IVEY PLASTIC SURGERY LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor IVEY PLASTIC SURGERY, LLC	c EIN-PN 84-2564895-001
a	Plan name JAMES A QUAGLINO INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JAMES A QUAGLINO, INC DBA QAUGLINO ROOFING	c EIN-PN 95-2507376-001
a	Plan name JAMES RIVER FAMILY DENTISTRY PC EMPLOYEES RETIREMENT PLAN RETIREMENT PLAN	
b	Name of plan sponsor JAMES RIVER FAMILY DENTISTRY, PC	c EIN-PN 80-0188961-001
a	Plan name JAY FULKROAD AND SONS INC 401(K) PLAN	
b	Name of plan sponsor JAY FULKROAD AND SONS, INC	c EIN-PN 23-2044240-002
a	Plan name JCC OF NEW ORLEANS RETIREMENT PLAN	
b	Name of plan sponsor JCC OF NEW ORLEANS	c EIN-PN 72-0408937-001
a	Plan name JENSEN MORSE BAKER PLLC 401(K) PLAN	
b	Name of plan sponsor JENSEN MORSE BAKER PLLC	c EIN-PN 81-2621677-001
a	Plan name JIM S ADLER AND ASSOC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor JIM S ADLER AND ASSOCIATES	c EIN-PN 74-2122055-001
a	Plan name JM MOLD SOUTH INC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor JM MOLD SOUTH, INC	c EIN-PN 34-1486643-002
a	Plan name JOHN A DALSIN AND SON INC 401(K) PS PLAN	
b	Name of plan sponsor JOHN A DALSIN AND SON, INC	c EIN-PN 41-1408861-001
a	Plan name JOHN S JAMES CO RETIREMENT PLAN	
b	Name of plan sponsor JOHN S JAMES CO	c EIN-PN 58-1276963-001
a	Plan name JOSEPH C DE GRAFFENRIED JR DDS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor JOSEPH C DE GRAFFENRIED, JR, DDS	c EIN-PN 74-2558586-001
a	Plan name JSR INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JSR, INC	c EIN-PN 76-0735639-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name JUICE PHARMA ADVERTISING LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JUICE PHARMA ADVERTISING, LLC	c EIN-PN 75-3085102-001
a	Plan name KEMPER AND KEMPER MDS LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KEMPER AND KEMPER, MD'S LLP	c EIN-PN 61-1315308-006
a	Plan name KEW FOREST PLUMBING AND HEATING INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KEW FOREST PLUMBING AND HEATING, INC	c EIN-PN 11-0951020-001
a	Plan name KEYSTONE REAL ESTATE GROUP INC RETIREMENT PLAN	
b	Name of plan sponsor KEYSTONE REAL ESTATE GROUP, INC	c EIN-PN 25-1315549-001
a	Plan name KIRK RUDY INC PROFIT SHARING PLAN	
b	Name of plan sponsor KIRK RUDY, INC	c EIN-PN 36-2639051-002
a	Plan name KITTREDGE ARCHERY CO 401K PLAN	
b	Name of plan sponsor KITTREDGE ARCHERY CO	c EIN-PN 95-2103532-001
a	Plan name KLEINPETER FARMS DAIRY LLC 401(K) PLAN	
b	Name of plan sponsor KLEINPETER FARMS DAIRY, LLC	c EIN-PN 72-0486435-003
a	Plan name KONEN AND ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor KONEN AND ASSOCIATES, PA	c EIN-PN 75-2877778-001
a	Plan name KRIEGER KLATT ARCHITECTS 401(K) PLAN	
b	Name of plan sponsor KRIEGER KLATT ARCHITECTS	c EIN-PN 32-0336788-001
a	Plan name KRISHNAN COMPANY PC CPAS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KRISHNAN COMPANY, PC, CPAS	c EIN-PN 58-2621421-001
a	Plan name L.A.S. CORPORATION 401K PLAN	
b	Name of plan sponsor LABOR AIDING SYSTEMS CORPORATION	c EIN-PN 46-2427882-001
a	Plan name LA BELLA VITA MEDI SPA 401K PLAN	
b	Name of plan sponsor LA BELLA VITA MEDI SPA	c EIN-PN 88-2471973-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	LAKES ORAL & MAXILLOFACIAL SURGERY P.C. 401(K) PLAN	
b	Name of plan sponsor	LAKES ORAL & MAXILLOFACIAL SURGERY	c EIN-PN 76-0766579-001
a	Plan name	LAKESHORE FAMILY DENTAL CARE SC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LAKESHORE FAMILY DENTAL CARE SC	c EIN-PN 30-0010946-001
a	Plan name	LANDTECH LLC 401(K) PLAN	
b	Name of plan sponsor	LANDTECH, LLC	c EIN-PN 47-5051198-003
a	Plan name	LDI MAP LLC 401(K) PLAN	
b	Name of plan sponsor	LDI MAP, LLC	c EIN-PN 37-1852548-001
a	Plan name	LECLAIR INDUSTRIES INC 401(K) PLAN	
b	Name of plan sponsor	LECLAIR INDUSTRIES	c EIN-PN 64-0669317-001
a	Plan name	LEDGEWOOD A PROFESSIONAL CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LEDGEWOOD	c EIN-PN 23-2663869-001
a	Plan name	LEGAL SERVICES OF NORTHERN CALIFORNIA 401(K) PLAN	
b	Name of plan sponsor	LEGAL SERVICES OF NORTHERN CALIFORNIA	c EIN-PN 94-1384659-002
a	Plan name	LEHMAN & EILEN LLP 401(K) PLAN	
b	Name of plan sponsor	LEHMAN & EILEN LLP	c EIN-PN 11-3211659-001
a	Plan name	LEZYNE USA INC 401(K) PLAN	
b	Name of plan sponsor	LEZYNE USA, INC	c EIN-PN 26-1751977-001
a	Plan name	LIN CHAI RAWLINSON CPA PC 401(K) PROFIT SHARING	
b	Name of plan sponsor	LIN CHAI RAWLINSON, CPA	c EIN-PN 20-4109393-001
a	Plan name	LOCKART PANAGIOTOU AND CO PLLC 401(K) PROFIT SHARING	
b	Name of plan sponsor	LOCKART PANAGIOTOU AND CO PLLC	c EIN-PN 47-2665399-001
a	Plan name	LSR LLC 401(K) SAVINGS PLAN	
b	Name of plan sponsor	LOUISIANA SUGAR REFINING, LLC	c EIN-PN 80-0489077-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name MAHER AND COMPANY PC PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor MAHER AND COMPANY, PC	c EIN-PN 43-1857127-001
a	Plan name MAJIDIAN DENTAL PC 401(K) PLAN	
b	Name of plan sponsor MAJIDIAN DENTAL PC	c EIN-PN 83-0889738-001
a	Plan name MANDLER ENTERPRISES LTD 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MANDLER ENTERPRISES, LTD.	c EIN-PN 13-3912848-003
a	Plan name MATTHEWS BROTHERS DREDGING, INC. 401(K) PLAN	
b	Name of plan sponsor MATTHEWS BROTHERS DREDGING, INC.	c EIN-PN 64-0905775-001
a	Plan name MATT'S AUTOMOTIVE SERVICE CENTER, LLC 401(K) PLAN	
b	Name of plan sponsor MATT'S AUTOMOTIVE SERVICE CENTER, LLC	c EIN-PN 45-3459495-001
a	Plan name MAVEN380 LLC DBA 380 COMPANIES RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor MAVEN380 LLC DBA 380 COMPANIES	c EIN-PN 88-1578135-003
a	Plan name MBM FABRICATORS COMPANY INC EMPLOYEES SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor MBM FABRICATORS COMPANY, INC	c EIN-PN 38-1684224-001
a	Plan name MEALS ON WHEELS OF GREENVILLE INC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor MEALS ON WHEELS OF GREENVILLE, INC	c EIN-PN 57-0531378-003
a	Plan name MEDICAL DEVELOPMENT MANAGEMENT LLC	
b	Name of plan sponsor MEDICAL DEVELOPMENT MANAGEMENT, LLC	c EIN-PN 48-1308416-001
a	Plan name MEDTHERAPY BIOTECHNOLOGY INC 401(K) PLAN	
b	Name of plan sponsor MEDTHERAPY BIOTECH TECHNOLOGY INC	c EIN-PN 83-1065536-001
a	Plan name MEJDI TOURS 401(K) PLAN	
b	Name of plan sponsor MEJDI TOURS	c EIN-PN 27-1602633-001
a	Plan name MENACO CORPORATION EMPLOYEES PROFIT SHARING PLAN	
b	Name of plan sponsor MENACO CORPORATION	c EIN-PN 66-0400756-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	MERCY CHEFS 401K PLAN	
b	Name of plan sponsor	MERCY CHEFS, INC.	c EIN-PN 20-5050449-001
a	Plan name	MERRELL FAMILY DENTISTRY 401(K) PLAN	
b	Name of plan sponsor	MERRELL FAMILY DENTISTRY	c EIN-PN 46-4288509-001
a	Plan name	METRO EDGE DEVELOPMENT PARTNERS 401K PLAN	
b	Name of plan sponsor	METRO EDGE DEVELOPMENT PARTNERS	c EIN-PN 85-1494108-001
a	Plan name	MEWESD LLC DBA PARTNER IN AGING 401(K) PLAN	
b	Name of plan sponsor	MEWESD, LLC	c EIN-PN 83-2413517-001
a	Plan name	MICHIGAN PHARMACISTS ASSOC EEF DEFERRED COMP PLAN	
b	Name of plan sponsor	MICHIGAN PHARMACISTS ASSOC	c EIN-PN 38-0830740-002
a	Plan name	MICKEY TRUCK BODIES INC 401(K) PLAN	
b	Name of plan sponsor	MICKEY TRUCK BODIES, INC	c EIN-PN 56-0512881-004
a	Plan name	MJD ADVISORS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MJD ADVISORS	c EIN-PN 87-2510335-001
a	Plan name	MMM INC 401(K) PLAN	
b	Name of plan sponsor	MMM PLUMBING, HEATING, AND A C, INC	c EIN-PN 75-1941004-001
a	Plan name	MOMENTOUS HEALTH CARE BATTLE CREEK 401K PLAN	
b	Name of plan sponsor	MOMENTOUS HEALTH CARE	c EIN-PN 86-2476347-001
a	Plan name	MONAHAN PARTNERS, INC. 401(K) PLAN	
b	Name of plan sponsor	MONAHAN PARTNERS, INC	c EIN-PN 27-4287133-001
a	Plan name	MONTGOMERY NEUROSURGICAL ASSOCIATES PC PROFIT SHARING PLAN	
b	Name of plan sponsor	MONTGOMERY NEUROSURGICAL ASSOCIATES, PC	c EIN-PN 63-0995627-001
a	Plan name	MORRIS ASSOCIATES INC PROFIT SHARING 401(K) TRUST	
b	Name of plan sponsor	MORRIS ASSOCIATES, INC	c EIN-PN 38-1675733-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name MOVENDO CAPITAL US INC	
b	Name of plan sponsor MOVENDO CAPITAL US, INC	c EIN-PN 32-0695084-001
a	Plan name MPM 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MADISON PROPERTY MANAGEMENT, INC.	c EIN-PN 39-1622225-001
a	Plan name MR GREENJEANS PRODUCE EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor MR GREENJEANS PRODUCE	c EIN-PN 59-3072478-001
a	Plan name MSH FAMILY ENTERPRISES 401(K) PLAN	
b	Name of plan sponsor MSH FAMILY ENTERPRISES, LLC DBA SHEPHARD FUNERAL CHAPEL	c EIN-PN 92-1662936-001
a	Plan name MULTI CARE MEDICAL PC 401(K) PLAN	
b	Name of plan sponsor MULTI CARE MEDICAL	c EIN-PN 43-1905031-001
a	Plan name MULTIEXPORT FOODS, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor MULTIEXPORT FODS, INC.	c EIN-PN 65-0361348-001
a	Plan name MURR SILER AND ACCOMAZZO PC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor MURR SILER AND ACCOMAZZO, PC	c EIN-PN 84-1203371-002
a	Plan name NATIONWIDE MARKETING GROUP LLC RETIREMENT PLAN	
b	Name of plan sponsor NATIONWIDE MARKETING GROUP, LLC	c EIN-PN 55-0817538-001
a	Plan name NATURES WAY FARMS LLC 401(K) PLAN	
b	Name of plan sponsor NATURE'S WAY FARMS, LLC	c EIN-PN 83-1033824-001
a	Plan name NELSON BROTHERS INC EMPLOYEE CAPITAL ACCUMULATION 401(K) PLAN	
b	Name of plan sponsor NELSON BROTHERS, INC	c EIN-PN 63-0479482-002
a	Plan name NENNEKER ELECTRIC SERVICE INC 401(K) PLAN	
b	Name of plan sponsor NENNEKER ELECTRIC SERVICE, INC	c EIN-PN 35-2018821-001
a	Plan name NETCOM SERVICES LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NETCOM SERVICES, LLC	c EIN-PN 47-0845862-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	NEUMANN CO INC 401(K) PLAN	
b	Name of plan sponsor	NEUMANN CO, INC	c EIN-PN 39-1418597-001
a	Plan name	NEW DAY DENTISTRY 401(K) PLAN	
b	Name of plan sponsor	NEW DAY DENTISTRY	c EIN-PN 26-2618923-001
a	Plan name	NEWLAND CONSTRUCTION COMPANY, INC. 401(K) DEFERRED COMPENSATION AND PROFIT SHARING PLAN	
b	Name of plan sponsor	NEWLAND CONSTRUCTION CO., INC.	c EIN-PN 91-0489231-001
a	Plan name	NEXGEN 401(K)	
b	Name of plan sponsor	NEXGEN INDUSTRIAL SERVICES, INC	c EIN-PN 27-3073403-001
a	Plan name	NEXVEL CONSULTING LLC RETIREMENT PLAN	
b	Name of plan sponsor	NEXVEL CONSULTING LLC	c EIN-PN 66-0678233-001
a	Plan name	NIC 401(K) SAVINGS PLAN	
b	Name of plan sponsor	NET-INTEGRATED CONSULTING (NIC)	c EIN-PN 42-1416082-001
a	Plan name	NIOBRARA RESEARCH AND DEVELOPMENT CORP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NIOBRARA RESEARCH AND DEVELOPMENT CORP	c EIN-PN 48-1036375-002
a	Plan name	NORFOLK DREDGING COMPANY PROFIT SHARING PLAN	
b	Name of plan sponsor	NORFOLK DREDGING COMPANY	c EIN-PN 54-0320740-001
a	Plan name	NORTH COAST OCCUPATIONAL, PHYSICAL & SPEECH THERAPY, LLC 401K PLAN	
b	Name of plan sponsor	NORTH COAST OCCUPATIONAL, PHYSICAL & SPEECH THERAPY, LLC	c EIN-PN 16-1466479-001
a	Plan name	NOTCHVIEW DENTAL GROUP LLP 401(K) PS PLAN	
b	Name of plan sponsor	NOTCHVIEW DENTAL GROUP LLP	c EIN-PN 22-3413144-001
a	Plan name	NOTEABLE LLC	
b	Name of plan sponsor	NOTEABLE, LLC	c EIN-PN 81-1019681-001
a	Plan name	NOVA MARKETING SERVICES RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	NOVA MARKETING, LLC	c EIN-PN 20-3470103-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name NPOWER SOLUTIONS, LLC 401K PLAN PKA ALLIED POWER RESOURCES 401K PLAN	
b	Name of plan sponsor NPOWER SOLUTIONS, LLC	c EIN-PN 82-1707939-001
a	Plan name OLASH MEDICAL ASSOCIATES RETIREMENT PLAN	
b	Name of plan sponsor OLASH MEDICAL ASSOCIATES	c EIN-PN 61-0673730-004
a	Plan name OLSON AND OLSON 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor OLSON AND OLSON LLP	c EIN-PN 74-1901996-001
a	Plan name OMAHA PRIMARY EYE CARE 401(K) PLAN	
b	Name of plan sponsor OMAHA PRIMARY EYE CARE	c EIN-PN 47-0808437-001
a	Plan name OPEN TECHNOLOGY SOLUTIONS LLC 401(K) PLAN	
b	Name of plan sponsor OPEN TECHNOLOGY SOLUTIONS, LLC	c EIN-PN 20-0038158-001
a	Plan name P&C AUTO	
b	Name of plan sponsor CARRIBEAN AUTO DISTRIBUTIONS	c EIN-PN 66-0661674-001
a	Plan name PADRO HOMES INC 401(K)	
b	Name of plan sponsor PADRO HOMES INC	c EIN-PN 81-1173385-001
a	Plan name PALMETTO PROACTIVE HEALTHCARE 401(K) PLAN	
b	Name of plan sponsor PALMETTO PROACTIVE HEALTHCARE, LLC	c EIN-PN 27-1636007-002
a	Plan name PANTHEON WEALTH PLANNING 401(K) PLAN	
b	Name of plan sponsor PANTHEON WEALTH PLANNING	c EIN-PN 46-1605584-001
a	Plan name PAPERLESS INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor PAPERLESS INC	c EIN-PN 26-3488606-001
a	Plan name PATTERSON BROTHERS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PATTERSON BROTHERS, INC	c EIN-PN 62-1386479-001
a	Plan name PEDCARE PA SEG MANAGEMENT LLC 401(K)	
b	Name of plan sponsor PEDIATRIC CLINIC OF MESQUITE, SUNNYVALE AND GARLAND	c EIN-PN 01-0562155-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	PENINSULA DIAGNOSTIC IMAGING 401(K) PLAN	
b	Name of plan sponsor	PENINSULA DIAGNOSTICS IMAGING, INC	c EIN-PN 94-3319715-001
a	Plan name	PENNIAN BANK 401(K) PLAN	
b	Name of plan sponsor	PENNIAN BANK	c EIN-PN 23-0873877-001
a	Plan name	PERFORMA LIMITED US LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PERFORMA LIMITED (US) LLC	c EIN-PN 30-0619882-001
a	Plan name	PETE FOWLER CONSTRUCTION SERVICES INC 401(K) PLAN	
b	Name of plan sponsor	PETE FOWLER CONSTRUCTION SERVICES, INC	c EIN-PN 33-0690564-001
a	Plan name	PIC BUSINESS SYSTEMS INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PIC BUSINESS SYSTEMS, INC	c EIN-PN 74-2490209-001
a	Plan name	PIERSON WIRELESS SAFE HARBOR 401(K) PLAN	
b	Name of plan sponsor	PIERSON WIRELESS	c EIN-PN 20-1240400-001
a	Plan name	PIZARRO & GONZALEZ RETIREMENT PLAN	
b	Name of plan sponsor	PIZARRO & GONZALEZ	c EIN-PN 66-0874652-001
a	Plan name	PLACER PRIVATE PHYSICIANS 401K	
b	Name of plan sponsor	PLACER PRIVATE PHYSICIANS	c EIN-PN 47-1159090-001
a	Plan name	PLAZA ADVISORY GROUP INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PLAZA ADVISORY GROUP, INC	c EIN-PN 43-1854117-001
a	Plan name	PMDSOFT 401 (K)	
b	Name of plan sponsor	PMDSOFT, INC.	c EIN-PN 58-2424430-001
a	Plan name	POKY FEEDERS INC. EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor	POKY FEEDERS INC.	c EIN-PN 36-3052749-001
a	Plan name	POZNECKI CAMARILLO LLC 401(K) PLAN	
b	Name of plan sponsor	POZNECKI CAMARILLO, LLC	c EIN-PN 74-2214090-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name PPI 401(K) RETIREMENT PLAN	
b	Name of plan sponsor PLAN COMPLIANCE SERVICES, INC	c EIN-PN 59-3708427-005
a	Plan name PRECISION FLUID CONTROL 401(K) PLAN & TRUST	
b	Name of plan sponsor PRECISION FLUID CONTROL	c EIN-PN 20-1155852-001
a	Plan name PREFERRED BEEF GROUP 401(K) PLAN	
b	Name of plan sponsor PREFERRED BEEF GROUP	c EIN-PN 75-2737133-001
a	Plan name PREMIER MEDICAL RESOURCES, LLC 401(K) PLAN	
b	Name of plan sponsor PREMIER MEDICAL RESOURCES, LLC	c EIN-PN 82-4466632-001
a	Plan name PREMIER TRANSPORT USA INC 401(K) PLAN	
b	Name of plan sponsor PREMIER TRANSPORT USA INC	c EIN-PN 20-2658104-001
a	Plan name PREMIUM PEANUT LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor PREMIUM PEANUT, LLC	c EIN-PN 47-2464504-001
a	Plan name PRIORITY ONE SECURITY INC 401(K) PLAN	
b	Name of plan sponsor PRIORITY ONE SECURITY SERVICES, INC	c EIN-PN 81-0575504-001
a	Plan name PROVENANCE ENGINEERING, LLC 401K PLAN	
b	Name of plan sponsor PROVENANCE ENGINEERING, LLC	c EIN-PN 83-4318489-001
a	Plan name PURE HEALTH MIAMI 401K PLAN	
b	Name of plan sponsor PURE HEALTH MIAMI, LLC	c EIN-PN 30-0785533-001
a	Plan name PUYALLUP DERMATOLOGY CLINIC PS 401(K) PLAN	
b	Name of plan sponsor PUYALLUP DERMATOLOGY CLINIC	c EIN-PN 91-1149545-001
a	Plan name QUAGLINO ENTERPRISES LLC 401(K) PLAN	
b	Name of plan sponsor QUAGLINO ENTERPRISES, LLC	c EIN-PN 92-1030781-001
a	Plan name QUALIFICATION & REGULATORY CONSULTANTS GROUP RETIREMENT PLAN	
b	Name of plan sponsor QRC GROUP, LLC	c EIN-PN 66-0657276-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name R & D TOOL & ENGINEERING COMPANY PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor R & D TOOL & ENGINEERING COMPANY	c EIN-PN 43-1237713-001
a	Plan name RAB-COM LTD. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor RAB-COM LTD.	c EIN-PN 94-3049616-001
a	Plan name RADIOGRAPHIC ENGINEERING INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor RADIOGRAPHIC ENGINEERING INC	c EIN-PN 59-3704820-002
a	Plan name RALCO ELECTRIC INC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor RALCO ELECTRIC, INC	c EIN-PN 04-3079549-001
a	Plan name RANDD RESTORATION 401(K) PLAN	
b	Name of plan sponsor R AND D RESTORATION INC	c EIN-PN 46-5770161-001
a	Plan name RAVLICH ENTERPRISES INC 401(K) PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor RAVLICH ENTERPRISES	c EIN-PN 73-1674852-001
a	Plan name REEDER ENERGY PARTNERS, L.P. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor REEDER ENERGY PARTNERS, L.P.	c EIN-PN 30-0323095-001
a	Plan name REGEN PROJECTS PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor STUART REGEN GALLERY INC. DBA REGEN PROJECTS	c EIN-PN 95-4239553-001
a	Plan name REHAB CARE COORDINATION 401(K) SAVINGS PLAN	
b	Name of plan sponsor REHABILITATION CARE COORDINATION	c EIN-PN 75-3007798-001
a	Plan name RESTORE ONE INC 401(K) PLAN	
b	Name of plan sponsor RESTORE ONE, INC	c EIN-PN 20-8295069-001
a	Plan name RIATA CAPITAL GROUP 401(K)	
b	Name of plan sponsor RIATA CAPITAL GROUP, LLC	c EIN-PN 47-1248486-001
a	Plan name RIVERA-MUNICH & HERNANDEZ LAW OFFICES P.S.C. RETIREMENT PLAN	
b	Name of plan sponsor RIVERA-MUNICH & HERNANDEZ LAW OFFICES P.S.C.	c EIN-PN 66-0691976-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	ROCKY MOUNTAIN COIN INC 401(K) PLAN	
b	Name of plan sponsor	ROCKY MOUNTAIN COIN, INC	c EIN-PN 84-1073028-001
a	Plan name	ROJOLI SERVICES INC 401(K) PLAN	
b	Name of plan sponsor	ROJOLI SERVICES, INC.	c EIN-PN 83-4007069-001
a	Plan name	ROLLING E. ENTERPRISE, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ROLLING E. ENTERPRISE, LLC	c EIN-PN 47-2112327-001
a	Plan name	ROOT RIVER STATE BANK PROFIT SHARING PLAN	
b	Name of plan sponsor	ROOT RIVER STATE BANK	c EIN-PN 41-0509460-001
a	Plan name	ROTHE SAN ANTONIO CALIBRATION 401(K) PLAN	
b	Name of plan sponsor	ROTHE SAN ANTONIO CALIBRATION	c EIN-PN 83-1978837-001
a	Plan name	SALTCO LLC 401(K) PLAN	
b	Name of plan sponsor	SALTCO, LLC	c EIN-PN 61-1796787-001
a	Plan name	SCHAFER, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	SCHAFER, INC.	c EIN-PN 38-1548200-003
a	Plan name	SCHLEICH ENTERPRISES INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SCHLEICH ENTERPRISES, INC	c EIN-PN 47-0648893-002
a	Plan name	SCHNEIDER ENGINEERING LTD 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	SCHNEIDER ENGINEERING, LTD.	c EIN-PN 74-2883926-001
a	Plan name	SEA RETIREMENT PLAN	
b	Name of plan sponsor	HAGE CONSULTING GROUP, PSC	c EIN-PN 66-0800962-001
a	Plan name	SEALED INC 401(K) PLAN	
b	Name of plan sponsor	SEALED INC	c EIN-PN 45-3478769-001
a	Plan name	SECURESTRUX 401(K) PLAN	
b	Name of plan sponsor	SECURESTRUX, LLC	c EIN-PN 26-2577741-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	SECURITY EQUIPMENT CORPORATION 401(K) PLAN	
b	Name of plan sponsor	SECURITY EQUIPMENT CORPORATION	c EIN-PN 43-1080928-002
a	Plan name	SEIDER HEATING D/B/A ENVIRA-TECH 401K PLAN	
b	Name of plan sponsor	SEIDER HEATING	c EIN-PN 39-1602647-001
a	Plan name	SEQUOIA PACIFIC BUILDERS INC 401(K) PLAN	
b	Name of plan sponsor	SEQUOIA PACIFIC BUILDERS, INC	c EIN-PN 94-2826625-001
a	Plan name	SESSIONS ISRAEL AND SHARTLE LLC 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	SESSIONS, ISRAEL AND SHARTLE, LLC	c EIN-PN 47-2102132-001
a	Plan name	SHORELAND INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	SHORELAND INC.	c EIN-PN 39-1444288-001
a	Plan name	SIDHU PEDIATRICS LLC PROFIT SHARING PLAN FKA SENATOBIA PEDIATRICS LLC PROFIT SHARING PLAN	
b	Name of plan sponsor	SENATOBIA CHILDRENS CLINIC, PC	c EIN-PN 64-0888518-001
a	Plan name	SIDNEY REHAB LLC 401 (K) PLAN	
b	Name of plan sponsor	SIDNEY REHAB LLC	c EIN-PN 88-1395276-001
a	Plan name	SKC ASSOCIATES 401K PLAN	
b	Name of plan sponsor	SKC ASSOCIATES LLC	c EIN-PN 84-6352330-001
a	Plan name	SONNY OLIVER REALTY RETIREMENT PLAN	
b	Name of plan sponsor	OLIVER OIL COMPANY, SONNY OLIVER REALTY COMPANY	c EIN-PN 56-2150863-001
a	Plan name	SOUTHERN OBSTETRICS AND GYNECOLOGIC ASSOCIATES SC PROFIT SHARING PLAN	
b	Name of plan sponsor	SOUTHERN OBSTETRICS & GYNECOLOGIC ASSOCIATES, SC	c EIN-PN 37-1116881-004
a	Plan name	SPMR LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SMARTPHONE METER READING, LLC	c EIN-PN 75-1584252-002
a	Plan name	SPORTS CARE PHYSICAL THERAPY PC PROFIT SHARING PLAN	
b	Name of plan sponsor	SPORTS CARE PHYSICAL THERAPY PC	c EIN-PN 11-3556386-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	SPUD SOFTWARE 401K PLAN	
b	Name of plan sponsor	SPUD SOFTWARE INC	c EIN-PN 38-3344039-001
a	Plan name	SRT SECURITIES INC SAVINGS PLAN	
b	Name of plan sponsor	SRT SECURITIES, INC	c EIN-PN 27-2872190-001
a	Plan name	ST. LOUIS DEVELOPMENT CORP EMPLOYEES' RETIREMENT PLAN	
b	Name of plan sponsor	ST. LOUIS DEVELOPMENT CORPORATION	c EIN-PN 43-1490972-001
a	Plan name	STARK RFID 401(K) PLAN	
b	Name of plan sponsor	STARK EM LLC	c EIN-PN 27-4289634-001
a	Plan name	STARLINGER-SAHM INC. 401(K) PLAN	
b	Name of plan sponsor	AMERICAN STARLINGER-SAHM, INC.	c EIN-PN 30-0126360-001
a	Plan name	STONEBRAKER MCQUARY AGENCY GROUP INC 401(K) PLAN	
b	Name of plan sponsor	STONEBRAKER MCQUARY AGENCY GROUP, INC	c EIN-PN 91-1665933-001
a	Plan name	STOTLER FEED 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	STOTLER FEED	c EIN-PN 71-0978002-001
a	Plan name	STRATEGIC SOLUTIONS INTERNATIONAL 401(K) PLAN	
b	Name of plan sponsor	STRATEGIC SOLUTIONS INTERNATIONAL	c EIN-PN 47-3486699-001
a	Plan name	SUCCESS BRANDS INC 401(K) PLAN	
b	Name of plan sponsor	SUCCESS BRANDS, INC	c EIN-PN 05-0552834-001
a	Plan name	SUMMERHAYS DEVELOPMENT INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SUMMERHAYS MUSIC	c EIN-PN 87-6121486-001
a	Plan name	SUN CITY GROUP 401K PLAN	
b	Name of plan sponsor	SUN CITY GROUP, INC.	c EIN-PN 20-5001442-001
a	Plan name	SUNDOG PARTNERSHIP 401(K) PLAN	
b	Name of plan sponsor	SUNDOG PARTNERSHIP	c EIN-PN 75-3046044-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	SUNSHINE RIDES EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor	TAZCO, INC	c EIN-PN 84-1162315-001
a	Plan name	SURF AIR MOBILITY INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	SURF AIR MOBILITY INC.	c EIN-PN 36-5025592-001
a	Plan name	SUSE 401(K) PLAN	
b	Name of plan sponsor	SUSE, LLC	c EIN-PN 45-4703967-001
a	Plan name	SWIMMING POOL PRO INC 401(K) PLAN	
b	Name of plan sponsor	SWIMMING POOL PRO INC.	c EIN-PN 82-1773425-001
a	Plan name	SYNERGY DISASTER RECOVERY 401(K) PLAN	
b	Name of plan sponsor	SYNERGY DISASTER RECOVERY	c EIN-PN 84-3533519-001
a	Plan name	TALLAHASSEE ORTHOPEDIC CLINIC ILL PL 401 K PROFIT SHARING PLAN	
b	Name of plan sponsor	TALLAHASSEE ORTHOPEDIC CLINIC, ILL, PL	c EIN-PN 59-3598056-001
a	Plan name	TAYLOR AND SYFAN CONSULTING ENGINEERS INC 401(K) PLAN	
b	Name of plan sponsor	TAYLOR AND SYFAN CONSULTING ENGINEERS INC	c EIN-PN 77-0466685-001
a	Plan name	TAYLOR SALES AND SERVICE INC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	TAYLOR SALES AND SERVICE INC	c EIN-PN 63-1189014-002
a	Plan name	TECHPRO SOLUTIONS LLC	
b	Name of plan sponsor	TECHPRO SOLUTIONS LLC	c EIN-PN 27-1640628-001
a	Plan name	TENNYSON CAPITAL PARTNERS 401(K) PLAN	
b	Name of plan sponsor	TENNYSON CAPITAL PARTNERS	c EIN-PN 47-2877272-001
a	Plan name	TEXANS ANESTHESIOLOGY ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor	TEXANS ANESTHESIOLOGY ASSOCIATES	c EIN-PN 26-0507982-001
a	Plan name	TEXAS AND SOUTHWESTERN CATTLE RAISERS ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor	TEXAS AND SOUTHWESTERN CATTLE RAISERS ASSOCIATION	c EIN-PN 75-0608420-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	THE ADVANTAGE COMPANIES RETIREMENT PLAN	
b	Name of plan sponsor	THE ADVANTAGE COMPANIES	c EIN-PN 75-3120463-001
a	Plan name	THE BUSINESS COUNCIL FOR SUSTAINABLE ENERGY 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	BCSE	c EIN-PN 52-1801630-001
a	Plan name	THE DOBRUSIN LAW FIRM PC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	THE DOBRUSIN LAW FIRM, PC	c EIN-PN 38-3570622-001
a	Plan name	THE E401(K) PLAN FROM FIDELITY INSIGHTS NORTH AMERICA 401(K) PLANS	
b	Name of plan sponsor	INSIGHTS NORTH AMERICA, INC	c EIN-PN 61-1413692-001
a	Plan name	THE ELAM GROUP 401(K) PLAN	
b	Name of plan sponsor	THE ELAM GROUP	c EIN-PN 47-2325876-001
a	Plan name	THE GLASGOLD GROUP 401(K) PLAN	
b	Name of plan sponsor	THE GLASGOLD GROUP	c EIN-PN 26-0646977-002
a	Plan name	THE HARPER COMPANY RETIREMENT PLAN	
b	Name of plan sponsor	THE HARPER COMPANY	c EIN-PN 31-0533105-001
a	Plan name	THE HUNT CORPORATE SERVICES INC. 401K SAVINGS PLAN	
b	Name of plan sponsor	THE HUNT CORPORATE SERVICES, INC.	c EIN-PN 11-2557534-001
a	Plan name	THE LLOYD GROUP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	THE LLOYD GROUP, INC	c EIN-PN 58-2183364-001
a	Plan name	THE OFFICE OF MARVEL & MARCHAND ARCHITECTS, LLP RETIREMENT PLAN	
b	Name of plan sponsor	THE OFFICE OF MARVEL & MARCHAND ARCHITECTS	c EIN-PN 66-0542558-001
a	Plan name	THE STORAGE PLACE 401K PLAN	
b	Name of plan sponsor	ADVANTAGE PUBLIC STORAGE LLC DBA THE STORAGE PLACE	c EIN-PN 74-2944121-001
a	Plan name	THE THOMPSON CENTER FOR PLASTIC SURGERY 401(K) PLAN	
b	Name of plan sponsor	THE THOMPSON CENTER FOR PLASTIC SURGERY	c 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.)			
a	Plan name	TIME EQUITIES INC 401(K) PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor	TIME EQUITIES, INC.	c EIN-PN 13-2659445-001
a	Plan name	TORREY PINES DERMATOLOGY, A MED CORP RETIREMENT PLAN	
b	Name of plan sponsor	TORREY PINES DERMATOLOGY	c EIN-PN 14-1869205-002
a	Plan name	TOTAL HIGHSPEED INTERNET SERVICE 401(K) PLAN	
b	Name of plan sponsor	TOTAL HIGHSPEED INTERNET SERVICE	c EIN-PN 20-2178258-001
a	Plan name	TOWNSEN 401(K)	
b	Name of plan sponsor	SOUTHEAST TEXAS MEDICAL VENTURES LLC	c EIN-PN 36-4867084-001
a	Plan name	TRANSITIONAL SERVICES OF NEW YORK FOR LONG ISLAND	
b	Name of plan sponsor	TRANSITIONAL SERVICES OF NEW YORK FOR LONG ISLAND INC.	c EIN-PN 11-2592828-002
a	Plan name	TRG 401(K) PLAN PEP	
b	Name of plan sponsor	TRG 401(K) PLAN (PEP)	c EIN-PN 93-2789379-005
a	Plan name	TRIBE513 PA 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	TRIBE513, PA	c EIN-PN 20-3730220-001
a	Plan name	TRISTAR BANK 401(K) PLAN	
b	Name of plan sponsor	TRISTAR BANK	c EIN-PN 56-2136525-001
a	Plan name	TRITECH HEALTHCARE MANAGEMENT LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TRITECH HEALTHCARE MANAGEMENT, LLC	c EIN-PN 11-3476592-001
a	Plan name	TRUE AG AND TURF LLC 401(K) PLAN	
b	Name of plan sponsor	TRUE AG AND TURF, LLC	c EIN-PN 93-1668406-001
a	Plan name	TRUE TITLE OF METAIRIE LLC 401(K) PLAN	
b	Name of plan sponsor	TRUE TITLE OF METAIRIE, LLC	c EIN-PN 04-3665255-001
a	Plan name	TUBES INC 401(K) PLAN	
b	Name of plan sponsor	TUBES, INC	c EIN-PN 76-0121226-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	TULSA ENGINEERING AND PLANNING ASSOCIATES INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TULSA ENGINEERING AND PLANNING ASSOCIATES, INC	c EIN-PN 73-1032354-001
a	Plan name	UAS RETIREMENT PLAN	
b	Name of plan sponsor	UAS INTERNATIONAL TRIP SUPPORT	c EIN-PN 48-1308956-001
a	Plan name	UNITED PLANT GOWERS INC 401K PLAN	
b	Name of plan sponsor	UNITED PLANT GROWERS INC	c EIN-PN 33-0783952-001
a	Plan name	UNITY HOSPICE 401(K) PLAN	
b	Name of plan sponsor	UNITY HOSPICE	c EIN-PN 36-3982347-001
a	Plan name	UNIVERSAL PRINTING CO., LLC 401(K) PLAN	
b	Name of plan sponsor	UNIVERSAL PRINTING COMPANY	c EIN-PN 30-0609958-001
a	Plan name	UNMANNED SYSTEMS INCORPORATED 401K PLAN	
b	Name of plan sponsor	UNMANNED SYSTEMS INCORPORATED	c EIN-PN 27-0056512-001
a	Plan name	UPSTATE FOREVER 401(K) PLAN	
b	Name of plan sponsor	UPSTATE FOREVER	c EIN-PN 57-1070433-001
a	Plan name	USILLUMINATIONS LLC 401(K)	
b	Name of plan sponsor	USILLUMINATIONS LLC	c EIN-PN 27-5495132-001
a	Plan name	VALLEY FARM TRANSPORT 401(K) PLAN	
b	Name of plan sponsor	VALLEY FARM TRANSPORT	c EIN-PN 38-3893563-002
a	Plan name	VALLEY IRON INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	VALLEY IRON, INC.	c EIN-PN 77-0014269-001
a	Plan name	VANCE FAMILY MEDICINE PA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	VANCE FAMILY MEDICINE, P.A.	c EIN-PN 56-1892600-001
a	Plan name	VANDALIA REHAB, LLC 401K PLAN	
b	Name of plan sponsor	VANDALIA REHAB, LLC	c EIN-PN 88-1291851-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
a	Plan name	VBS INC 401(K) RETIREMENT PLAN
b	Name of plan sponsor	VBS INC
c	EIN-PN	42-1432674-001
a	Plan name	VERNER CADBY FORD INC 401(K) PLAN
b	Name of plan sponsor	VERNER CADBY FORD, INC
c	EIN-PN	22-1356330-001
a	Plan name	VERTREES HEADACHE CENTER 401K
b	Name of plan sponsor	VERTREES HEADACHE CENTER PLLC
c	EIN-PN	84-3250239-001
a	Plan name	VIRANIM TECHNICAL SOLUTIONS 401(K) PLAN
b	Name of plan sponsor	VIRANIM TECHNICAL SOLUTIONS INC
c	EIN-PN	81-4411666-001
a	Plan name	VISTA VETERINARY HOSPITAL INC PC 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	VISTA VETERINARY HOSPITAL INC PC
c	EIN-PN	91-2089735-001
a	Plan name	VOYAGER PEP
b	Name of plan sponsor	VOYAGER PEP
c	EIN-PN	85-4019239-001
a	Plan name	W BRANDS GLOBAL, INC. 401K PLAN
b	Name of plan sponsor	W BRANDS GLOBAL, INC.
c	EIN-PN	75-2732495-001
a	Plan name	WAGSTAFF TAYLOR AND ASSOCIATES INC 401(K) RETIREMENT PLAN
b	Name of plan sponsor	WAGSTAFF TAYLOR & ASSOCIATES INC
c	EIN-PN	88-4393921-001
a	Plan name	WAUKESHA ROOFING & METAL, INC. 401K SAVINGS PLAN
b	Name of plan sponsor	WAUKESHA ROOFING & SHEET METAL, INC.
c	EIN-PN	39-1730835-001
a	Plan name	WAYNE ENTERPRISES INC 401(K) RETIREMENT SAVINGS PLAN
b	Name of plan sponsor	WAYNE ENTERPRISES, INC
c	EIN-PN	76-0000815-001
a	Plan name	WENCO INDUSTRIES INC 401(K) PLAN
b	Name of plan sponsor	WENCO INDUSTRIES
c	EIN-PN	84-0820842-001
a	Plan name	WESTLAKE RESTAURANT MANAGEMENT 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	WESTLAKE RESTAURANT MANAGEMENT
c	EIN-PN	20-2006923-001

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 12/03/2024 and ending 12/31/2024	
A Name of plan ALTA LORD ABBETT INTERNATIONAL EQUITY	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 ALTA TRUST COMPANY	D Employer Identification Number (EIN) 99-2652504

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

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	26524
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	645298
(2) U.S. Government securities	1c(2)	
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B)	
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	
(10) Value of interest in pooled separate accounts	1c(10)	
(11) Value of interest in master trust investment accounts	1c(11)	
(12) Value of interest in 103-12 investment entities	1c(12)	
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	6670544
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	
(15) Other.....	1c(15)	258

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		7342624
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		5967
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		1603398
k Total liabilities (add all amounts in lines 1g through 1j).....	1k		1609365
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l		5733259

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)		
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	6994	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		-415348
d Total income. Add all income amounts in column (b) and enter total	2d		-408354

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		2076
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	30157	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		30157
j Total expenses. Add all expense amounts in column (b) and enter total	2j		32233

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-440587
l Transfers of assets:			
(1) To this plan	2l(1)		11250347
(2) From this plan	2l(2)		5076501

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name:

(2) EIN:

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

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

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

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

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