

<p style="text-align: center;">Form 5500</p> <p style="font-size: small;">Department of the Treasury Internal Revenue Service</p> <hr/> <p style="font-size: small;">Department of Labor Employee Benefits Security Administration</p> <hr/> <p style="font-size: x-small;">Pension Benefit Guaranty Corporation</p>	<p>Annual Return/Report of Employee Benefit Plan</p> <p style="font-size: x-small;">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).</p> <p>▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	<p style="font-size: x-small;">OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: large; font-weight: bold;">2024</p> <hr/> <p style="font-weight: bold;">This Form is Open to Public Inspection</p>
---	---	---

Part I Annual Report Identification Information
 For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 11/07/2024

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. ▶

Part II Basic Plan Information—enter all requested information

<p>1a Name of plan <u>INDEXSELECT AGGRESSIVE 2025 FUND</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>301</u></p>
<p>2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>GREAT GRAY TRUST COMPANY, LLC</u></p> <p><u>6725 VIA AUSTI PARKWAY, SUITE 260</u> <u>LAS VEGAS, NV 89119</u></p>	<p>1c Effective date of plan</p> <hr/> <p>2b Employer Identification Number (EIN) <u>81-4386547</u></p> <p>2c Plan Sponsor's telephone number <u>866-427-6885</u></p> <p>2d Business code (see instructions)</p>

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.

SIGN HERE		Date	
	Signature of plan administrator		Enter name of individual signing as plan administrator
SIGN HERE		Date	
	Signature of employer/plan sponsor		Enter name of individual signing as employer or plan sponsor
SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>09/12/2025</u>	<u>MATT FALCIANI</u>
	Signature of DFE	Date	Enter name of individual signing as DFE

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 0 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
--	--

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

a Pension Schedules (1) <input type="checkbox"/> R (Retirement Plan Information) (2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary (4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____ (5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	b General Schedules (1) <input checked="" type="checkbox"/> H (Financial Information) (2) <input type="checkbox"/> I (Financial Information – Small Plan) (3) <input type="checkbox"/> A (Insurance Information) – Number Attached <u>0</u> (4) <input type="checkbox"/> C (Service Provider Information) (5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information) (6) <input type="checkbox"/> G (Financial Transaction Schedules)
---	--

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) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 <hr/> 2024 <hr/> This Form is Open to Public Inspection.
---	--	--

For calendar plan year 2024 or fiscal plan year beginning <u>01/01/2024</u> and ending <u>11/07/2024</u>	
A Name of plan <u>INDEXSELECT AGGRESSIVE 2025 FUND</u>	B Three-digit plan number (PN) ▶ <u>301</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>GREAT GRAY TRUST COMPANY, LLC</u>	D Employer Identification Number (EIN) <u>81-4386547</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)
---------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: <u>COMMODITY INDEX DAILY FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>27-4616854-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>DEVELOPED REAL ESTATE INDEX FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>27-2659367-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BR MSCI ACWI EX-US IMI INDEX FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>27-4955447-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RUSSELL 1000 INDEX FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>94-3357216-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RUSSELL 2000 INDEX FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>94-3318704-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>U.S. TIPS FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>36-4495972-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>GREAT GRAY TRUST STABLE VALUE FUND</u>		
b Name of sponsor of entity listed in (a): <u>GREAT GRAY TRUST COMPANY, LLC</u>		
c EIN-PN <u>38-4065313-339</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>

a Name of MTIA, CCT, PSA, or 103-12 IE: LONG TERM CREDIT BOND INDEX FUND		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 87-1467186-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: LONG TERM GOV BOND INDEX FUND		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 82-3997809-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

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)

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	401(K) & PROFIT SHARING PLAN FOR SCHERER PLUMBING, LLC	
b	Name of plan sponsor	SCHERER PLUMBING, LLC	c EIN-PN 80-0533932-001
a	Plan name	2020 EXHIBITS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	2020 EXHIBITS, INC.	c EIN-PN 76-0664110-001
a	Plan name	A & H ELECTRIC CO. 401(K) PLAN	
b	Name of plan sponsor	A & H ELECTRIC CO., LLC	c EIN-PN 74-2053998-001
a	Plan name	AA TRANSPORTATION, INC. 401(K) PLAN	
b	Name of plan sponsor	AA TRANSPORTATION, INC.	c EIN-PN 04-3323452-001
a	Plan name	AAGEX FREIGHT GROUP 401(K) PLAN	
b	Name of plan sponsor	AAGEX FREIGHT GROUP, LLC	c EIN-PN 81-1963398-001
a	Plan name	ABCM CORP & AFFILIATES EMPLOYEE WELFARE PLAN	
b	Name of plan sponsor	ABCM CORPORATION	c EIN-PN 42-1008939-002
a	Plan name	ACCURATE ANSWERING SERVICE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SIGNA MESSAGE CORP.	c EIN-PN 01-0772752-001
a	Plan name	ACME TRUCK LINE 401(K) PLAN	
b	Name of plan sponsor	ACME TRUCK LINE, INC.	c EIN-PN 72-0540787-001
a	Plan name	ACROTECH, INC. RETIREMENT PLAN	
b	Name of plan sponsor	ACROTECH, INC.	c EIN-PN 41-1504672-001
a	Plan name	ACT ENGINEERS, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	ACT ENGINEERS, INC.	c EIN-PN 22-3144331-001
a	Plan name	ACTSOFT, INC. RETIREMENT SAVINGS PLAN 2019	
b	Name of plan sponsor	ACTSOFT, INC.	c EIN-PN 59-3490657-001
a	Plan name	ADVANCED PAINTING CONTRACTORS INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ADVANCED PAINTING CONTRACTORS, INC.	c EIN-PN 59-1395787-001

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	ADX LABS 401(K) PLAN	
b	Name of plan sponsor	ADX NET	c EIN-PN 47-4668903-001
a	Plan name	AEPS CORPORATION 401(K) PLAN	
b	Name of plan sponsor	AMERICAN EAGLE PROTECTIVE SERVICES CORPORATION	c EIN-PN 42-1606508-101
a	Plan name	AEYON LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	AEYON LLC	c EIN-PN 45-2088060-001
a	Plan name	AFFILIATED DERMATOLOGY 401(K) PLAN	
b	Name of plan sponsor	RICHARD LEE AVERITTE, JR., PLLC DBA AFFILIATED DERMATOLOGY	c EIN-PN 74-3037351-001
a	Plan name	AFFORDABLE ENGINEERING SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	AFFORDABLE ENGINEERING SERVICES, INC.	c EIN-PN 59-3812042-001
a	Plan name	AGC BACKOFFICE SUPPORT SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor	AGC BACKOFFICE SUPPORT SERVICES, LLC	c EIN-PN 27-2821517-001
a	Plan name	AIY PROPERTIES, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	AIY PROPERTIES, INC.	c EIN-PN 26-0378911-001
a	Plan name	ALASKA CENTRAL EXPRESS, INC. 401(K) SALARY REDUCTION PLAN	
b	Name of plan sponsor	ALASKA CENTRAL EXPRESS, INC.	c EIN-PN 92-0133124-001
a	Plan name	ALCLEAR, LLC 401(K) PLAN	
b	Name of plan sponsor	ALCLEAR, LLC	c EIN-PN 27-1733425-001
a	Plan name	ALDEN SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	ALDEN SYSTEMS, INC.	c EIN-PN 63-1166907-001
a	Plan name	ALPINE PLASTIC & RECONSTRUCTIVE SURGERY, P.C. 401(K) PLAN	
b	Name of plan sponsor	ALPINE PLASTIC & RECONSTRUCTIVE SURGERY, P.C.	c EIN-PN 87-0542236-002
a	Plan name	ALTIX 401K PLAN	
b	Name of plan sponsor	ALTIX CORPORATION	c EIN-PN 32-0558852-001

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 AMERICAN INTEGRITY 401(K) PLAN	
b	Name of plan sponsor AMERICAN INTEGRITY INSURANCE GROUP, LLC	c EIN-PN 20-5239410-002
a	Plan name AMERICAN LEAKLESS COMPANY LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor AMERICAN LEAKLESS COMPANY LLC	c EIN-PN 26-4282311-001
a	Plan name AMERICAN PHOTO MARKETING, INC. PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor AMERICAN PHOTO MARKETING, INC.	c EIN-PN 38-2393531-001
a	Plan name AMERICAN SURVEYING & ENGINEERING, P.C. RETIREMENT PLAN	
b	Name of plan sponsor AMERICAN SURVEYING & ENGINEERING, P.C.	c EIN-PN 36-3307274-001
a	Plan name AMERICAN VULKAN CORPORATION SAVINGS PLAN	
b	Name of plan sponsor AMERICAN VULKAN CORPORATION	c EIN-PN 59-1372818-002
a	Plan name ANESTHESIOLOGISTS ASSOCIATED, PC 401(K) PROFIT SHARING RETIREMENT PLAN	
b	Name of plan sponsor ANESTHESIOLOGISTS ASSOCIATED, PC	c EIN-PN 63-0577011-003
a	Plan name ANGELICA NURSERIES, INC. 401(K) PLAN	
b	Name of plan sponsor ANGELICA NURSERIES, INC.	c EIN-PN 23-1809386-003
a	Plan name APG 401(K) PLAN	
b	Name of plan sponsor AUTOMATION PRODUCTS GROUP, INC.	c EIN-PN 20-5314683-001
a	Plan name ARCXIS 401(K) PLAN	
b	Name of plan sponsor DPIS ENGINEERING, LLC D/B/A ARCXIS	c EIN-PN 47-2374293-004
a	Plan name ARIZONA TECHNOLOGY COUNCIL MULTIPLE EMPLOYER 401(K) PLAN	
b	Name of plan sponsor ARIZONA TECHNOLOGY COUNCIL	c EIN-PN 86-0684848-002
a	Plan name ARRINGTON WATKINS ARCHITECTS, L.L.C. 401(K) PLAN	
b	Name of plan sponsor ARRINGTON WATKINS ARCHITECTS, L.L.C.	c EIN-PN 86-0779271-001
a	Plan name ARTISTIC IMPRINTS 401(K) PLAN	
b	Name of plan sponsor ARTISTIC IMPRINTS, INC.	c EIN-PN 76-0794441-001

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 ASCEND ELEMENTS, INC. 401(K) PLAN	
b	Name of plan sponsor ASCEND ELEMENTS, INC.	c EIN-PN 82-2222893-001
a	Plan name ASHCOMBE FARM AND GREENHOUSES 401K SAVINGS PLAN	
b	Name of plan sponsor GRO-GREEN CORP	c EIN-PN 23-2098159-001
a	Plan name ASSOCIATED MASONRY PRODUCTS, INC. 401(K) PLAN	
b	Name of plan sponsor ASSOCIATED MASONRY PRODUCTS, INC.	c EIN-PN 20-1174202-002
a	Plan name ASSOCIATES IN GASTROENTEROLOGY, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ASSOCIATES IN GASTROENTEROLOGY, P.C.	c EIN-PN 84-0836256-003
a	Plan name ASSOCIATION OF WOODWORKING & FURNISHING SUPPLIERS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ASSOCIATION OF WOODWORKING & FURNISHING SUPPLIERS	c EIN-PN 95-3539433-001
a	Plan name ASTHMA & PULMONARY SPECIALISTS 401(K) PLAN	
b	Name of plan sponsor ASTHMA & PULMONARY SPECIALISTS OF NORTHERN VIRGINIA, LTD	c EIN-PN 54-1179556-005
a	Plan name AUCTOR CORPORATION 401(K) SAVINGS PLAN	
b	Name of plan sponsor AUCTOR CORPORATION	c EIN-PN 35-1828775-001
a	Plan name AUTOMOTIVE ELEGANCE LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor AUTOMOTIVE ELEGANCE LLC	c EIN-PN 20-0314996-001
a	Plan name AUTOMOTIVE TRAINING CENTER 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor AUTOMOTIVE TRAINING CENTER	c EIN-PN 23-2658637-001
a	Plan name AUTRY GREER & SONS, INC. 401(K) PLAN	
b	Name of plan sponsor AUTRY GREER AND SONS INC.	c EIN-PN 63-0384847-001
a	Plan name AVID BIOSERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor AVID BIOSERVICES, INC.	c EIN-PN 95-3698422-001
a	Plan name AXIOM MEMORY SOLUTIONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor AXIOM MEMORY SOLUTIONS, INC.	c EIN-PN 33-0869859-001

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	B & W WELDING, INC. 401(K) PLAN	
b	Name of plan sponsor	B & W WELDING, INC.	c EIN-PN 34-1250851-001
a	Plan name	BALANCED GROWTH PARTNERS, L.L.C. 401(K) PLAN	
b	Name of plan sponsor	BALANCED GROWTH PARTNERS, L.L.C.	c EIN-PN 81-4164108-001
a	Plan name	BANK OF SOUTHERN CALIFORNIA NA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BANK OF SOUTHERN CALIFORNIA NA	c EIN-PN 33-0956417-002
a	Plan name	BARFIELD, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	BARFIELD, INC.	c EIN-PN 59-0556588-001
a	Plan name	BASE CONSULTANTS INC. 401(K) PLAN	
b	Name of plan sponsor	BASE CONSULTANTS, INC.	c EIN-PN 20-5884517-001
a	Plan name	BCJIT-1, INC. 401(K) PLAN	
b	Name of plan sponsor	BCJIT-1, INC.	c EIN-PN 82-5208061-001
a	Plan name	BECKENHAUER CONSTRUCTION, INC. SAFE HARBOR 401(K) PLAN	
b	Name of plan sponsor	BECKENHAUER CONSTRUCTION, INC.	c EIN-PN 47-0558199-001
a	Plan name	BEDFORD ROAD PHARMACY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BEDFORD ROAD PHARMACY, INC.	c EIN-PN 52-1096550-001
a	Plan name	BERRY AVIATION, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	BERRY AVIATION, INC.	c EIN-PN 74-2288496-001
a	Plan name	BEST PLUMBING SPECIALTIES PROFIT SHARING PLAN	
b	Name of plan sponsor	BEST PLUMBING SPECIALTIES, INC	c EIN-PN 11-2064672-001
a	Plan name	BETTER WORLD BOOKS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	QUMPUS, INC.	c EIN-PN 20-0241292-001
a	Plan name	BFS SERVICES, INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	BFS SERVICES, INC.	c EIN-PN 75-1567376-002

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	BISON HOLDINGS, LLC 401(K) PLAN	
b	Name of plan sponsor	BISON HOLDINGS, LLC	c EIN-PN 85-4151362-001
a	Plan name	BLACKBIRD, L.L.C. 401(K) PLAN	
b	Name of plan sponsor	BLACKBIRD, LLC	c EIN-PN 46-3045676-001
a	Plan name	BLAINE BROTHERS MAINTENANCE, INC. RETIREMENT PLAN	
b	Name of plan sponsor	BLAINE BROTHERS MAINTENANCE, INC.	c EIN-PN 41-1379303-001
a	Plan name	BLH&T 401(K) PLAN	
b	Name of plan sponsor	BARTLETT LOEB HINDS & THOMPSON PLLC	c EIN-PN 87-4186606-001
a	Plan name	BLUE RIDGE ENVISIONEERING 401K PLAN	
b	Name of plan sponsor	BLUE RIDGE ENVISIONEERING	c EIN-PN 20-5191722-001
a	Plan name	BMC HOLDCO, LLC 401(K) PLAN	
b	Name of plan sponsor	BMC HOLDCO, LLC	c EIN-PN 92-1216638-001
a	Plan name	BMT COMMERCIAL USA, INC. 401(K) PLAN	
b	Name of plan sponsor	BMT COMMERCIAL USA INC	c EIN-PN 33-0516320-001
a	Plan name	BROWN, GRUTTADARO & PRATO, PLLC 401(K) PLAN	
b	Name of plan sponsor	BROWN, GRUTTADARO & PRATO, PLLC	c EIN-PN 46-2666523-001
a	Plan name	BRYAN ENTERPRISES 401(K) PLAN	
b	Name of plan sponsor	CHISOS, LTD	c EIN-PN 76-0479745-002
a	Plan name	BRYAN PHARMACY 401(K) PLAN	
b	Name of plan sponsor	BRYAN PHARMACY, INC.	c EIN-PN 20-1693312-001
a	Plan name	BURNS KULL, INC. DBA BURNS HONDA 401(K) PLAN	
b	Name of plan sponsor	BURNS KULL, INC. DBA BURNS HONDA	c EIN-PN 22-2491857-001
a	Plan name	BURTON MCCUMBER & LONGORIA, LLP EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor	BURTON MCCUMBER & LONGORIA, LLP	c EIN-PN 74-2609610-001

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 BWS INSPECTION SERVICES, LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor BWS INSPECTION SERVICES, LLC	c EIN-PN 82-2544359-001
a	Plan name CABIN CREEK HEALTH SYSTEMS, INC. 401(K)PROFIT SHARING PLAN	
b	Name of plan sponsor CABIN CREEK HEALTH SYSTEMS, INC.	c EIN-PN 55-0709223-001
a	Plan name CAL+D 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CAROLINA ARCHITECTURAL LIGHTING AND DESIGN LLC	c EIN-PN 45-4563581-001
a	Plan name CALI BAMBOO, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CALI BAMBOO LLC	c EIN-PN 20-3050842-001
a	Plan name CALIFORNIA VIBRATORY FEEDERS, INC. 401(K) PROFIT SHARING	
b	Name of plan sponsor CALIFORNIA VIBRATORY FEEDERS, INC.	c EIN-PN 95-2793530-001
a	Plan name CALUMET TANK & EQUIPMENT CO., INC. 401(K) PLAN	
b	Name of plan sponsor CALUMET TANK & EQUIPMENT CO., INC.	c EIN-PN 36-3613757-001
a	Plan name CAPITOL IMAGING, LLC RETIREMENT PLAN	
b	Name of plan sponsor CAPITOL IMAGING, LLC	c EIN-PN 47-4549323-001
a	Plan name CARL WALKER CONSTRUCTION, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CARL WALKER CONSTRUCTION	c EIN-PN 27-1071378-001
a	Plan name CARSON HELICOPTERS, INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor CARSON HELICOPTERS, INC.	c EIN-PN 23-1538917-001
a	Plan name CASCADE PATTERN COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CASCADE PATTERN COMPANY	c EIN-PN 34-1938409-001
a	Plan name CENTER FOR NETWORK THERAPY, LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CENTER FOR NETWORK THERAPY, LLP	c EIN-PN 90-0429545-002
a	Plan name CENTRAL CONTRACTING, INC. 401(K) PLAN	
b	Name of plan sponsor CENTRAL CONTRACTING, INC.	c EIN-PN 55-0710237-001

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 CENTROIS LLC DBA KORTX 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor CENTROIS LLC DBA KORTX	c EIN-PN 46-5402418-001
a	Plan name CERTIFIED ENGINEERING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CERTIFIED ENGINEERING, INC.	c EIN-PN 35-1667227-001
a	Plan name CFCU COMMUNITY CREDIT UNION 401(K) PLAN	
b	Name of plan sponsor CFCU COMMUNITY CREDIT UNION	c EIN-PN 15-0574036-002
a	Plan name CHAMPIONS FOR CHILDREN, INC. 401(K) EMPLOYER SAVINGS PLAN	
b	Name of plan sponsor CHAMPIONS FOR CHILDREN, INC.	c EIN-PN 59-1807551-001
a	Plan name CHARLESTON ENT ASSOCIATES, LLC PROFIT SHARING PLAN	
b	Name of plan sponsor CHARLESTON ENT ASSOCIATES, LLC	c EIN-PN 58-2281023-001
a	Plan name CHARTER TOWNSHIP OF INDEPENDENCE 401(A) RETIREMENT	
b	Name of plan sponsor CHARTER TOWNSHIP OF INDEPENDENCE	c EIN-PN 38-6006906-001
a	Plan name CHEMGLASS 401(K) SAVINGS & INVESTMENT PLAN	
b	Name of plan sponsor CHEMGLASS, INC	c EIN-PN 21-0672397-001
a	Plan name CHERRYLAKE'S 401(K) PLAN	
b	Name of plan sponsor I.M.G. ENTERPRISE INC	c EIN-PN 58-1477943-001
a	Plan name CIANCIO CIANCIO BROWN, P.C. 401(K) PLAN	
b	Name of plan sponsor CIANCIO CIANCIO BROWN, P.C.	c EIN-PN 46-3394064-001
a	Plan name CIL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CIL, INC.	c EIN-PN 04-2983179-001
a	Plan name CINCINNATI CATHOLIC GROUP TRUST 401K PLAN	
b	Name of plan sponsor CINCINNATI CATHOLIC GROUP TRUST	c EIN-PN 92-6050273-009
a	Plan name CITY OF MOUNTAIN VIEW 401A PLAN	
b	Name of plan sponsor CITY OF MOUNTAIN VIEW	c EIN-PN 94-6000379-401

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 CLARK, SCHAEFER, HACKETT & CO. PROFIT SHARING RETIREMENT PLAN (WITH 401(K) PROVISIONS)	
b	Name of plan sponsor CLARK, SCHAEFER, HACKETT & CO.	c EIN-PN 31-0800053-001
a	Plan name CLAWSON COMMUNICATIONS, INC. 401(K) PLAN AND TRUST	
b	Name of plan sponsor CLAWSON COMMUNICATIONS, INC.	c EIN-PN 35-1608918-001
a	Plan name CLEAR LAKE SPECIALTIES, P.A. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CLS HEALTH PLLC	c EIN-PN 20-2798379-001
a	Plan name CLINKENBEARD DENTISTRY 401(K) PLAN	
b	Name of plan sponsor CLINKENBEARD DENTISTRY	c EIN-PN 27-0739698-001
a	Plan name CMC ENGINEERING 401(K) PLAN	
b	Name of plan sponsor CONSTRUCTION METHODS & COORDINATION INC.	c EIN-PN 23-2149767-002
a	Plan name COALITION FOR THE HOMELESS 403(B) PLAN	
b	Name of plan sponsor COALITION FOR THE HOMELESS	c EIN-PN 52-1245499-001
a	Plan name COHN WHOLESALE 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor COHN WHOLESALE FRUIT & GROCERY CO.	c EIN-PN 42-0845853-002
a	Plan name COLLIER COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COLLIER INSURANCE	c EIN-PN 62-0632599-001
a	Plan name COLUMBIA ALINER EMPLOYEES' PROFIT SHARING PLAN	
b	Name of plan sponsor COLUMBIA NORTHWEST, INC.	c EIN-PN 25-1478495-001
a	Plan name COMBINED RESOURCES, INC. 401(K) PLAN	
b	Name of plan sponsor COMBINED RESOURCES, INC.	c EIN-PN 36-3468701-001
a	Plan name COMMERCIAL COLLECTION CORPORATION OF NY, 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COMMERCIAL COLLECTION CORPORATION OF NY, INC	c EIN-PN 16-0864226-001
a	Plan name COMMUNITY ACTION AGENCY OF SOUTH CENTRAL MICHIGAN 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COMMUNITY ACTION AGENCY OF SOUTH CENTRAL MICHIGAN	c EIN-PN 38-1794361-001

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 COMPASS THERAPEUTICS 401(K) PLAN	
b	Name of plan sponsor COMPASS THERAPEUTICS ADVISORS, INC.	c EIN-PN 47-3107062-001
a	Plan name COMPUCRAFT FABRICATORS INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COMPUCRAFT FABRICATORS INC.	c EIN-PN 23-2368190-002
a	Plan name CONSULTNET, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CONSULTNET, LLC	c EIN-PN 87-0562976-001
a	Plan name CONTENDER SOLUTIONS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CONTENDER SOLUTIONS, LLC	c EIN-PN 46-0955276-001
a	Plan name CONTOUR INDUSTRIES, INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CONTOUR INDUSTRIES, INC.	c EIN-PN 52-2188564-001
a	Plan name COPPOLA SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor COPPOLA SERVICES, INC.	c EIN-PN 13-3328023-002
a	Plan name CORYDON CONVERTING COMPANY, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor CORYDON CONVERTING COMPANY, INC.	c EIN-PN 36-3215825-001
a	Plan name COURTESY FORD, INC. EMPLOYEE 401(K) PLAN	
b	Name of plan sponsor COURTESY FORD, INC.	c EIN-PN 58-0943526-001
a	Plan name CRACO, LLC 401(K) PLAN	
b	Name of plan sponsor CRACO, LLC	c EIN-PN 46-4959108-001
a	Plan name CREDITXPRT 401(K) PLAN	
b	Name of plan sponsor CREDITXPRT INC.	c EIN-PN 52-1826790-001
a	Plan name CRITICAL ENERGY INFRASTRUCTURE SVCS, LLC 401(K) PL	
b	Name of plan sponsor CRITICAL ENERGY INFRASTRUCTURE SERVICES, LLC	c EIN-PN 88-3984260-001
a	Plan name CRITICALPOINT CAPITAL, LLC 401(K) PLAN	
b	Name of plan sponsor CRITICALPOINT PARTNERS, LLC	c EIN-PN 45-5416532-001

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 CROWN LABORATORIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CROWN LABORATORIES, INC.	c EIN-PN 62-1840490-001
a	Plan name CSI 401(K) PLAN	
b	Name of plan sponsor CONTRACTING SPECIALISTS INCORPORATED	c EIN-PN 04-3321649-001
a	Plan name CSI 401K PLAN	
b	Name of plan sponsor CUSTOM SECURITY INTEGRATED, LLC	c EIN-PN 27-3247000-001
a	Plan name CURTIS C HAYNIE DMD PC 401 K PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor CURTIS C. HAYNIE, DMD, PC	c EIN-PN 20-3934018-001
a	Plan name CWI, INC. 401(K) PLAN	
b	Name of plan sponsor CWI, INC	c EIN-PN 36-4734960-001
a	Plan name D & W MECHANICAL 401(K) PLAN	
b	Name of plan sponsor GREAT LAKES MECHANICAL SYSTEMS, INC. DBA D & W MECHANICAL	c EIN-PN 38-2765947-001
a	Plan name DAVIS DEVELOPMENT, INC. 401(K) PLAN	
b	Name of plan sponsor DAVIS DEVELOPMENT, INC.	c EIN-PN 62-1623857-001
a	Plan name DCCM, LLC 401(K) PLAN	
b	Name of plan sponsor DCCM, LLC	c EIN-PN 86-2523370-001
a	Plan name DCD AUTOMOTIVE HOLDINGS, INC. 401(K) PLAN	
b	Name of plan sponsor DCD AUTOMOTIVE HOLDINGS, INC.	c EIN-PN 47-2847221-001
a	Plan name DE WAFELBAKKERS 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor DE WAFELBAKKERS, LLC	c EIN-PN 26-1812271-001
a	Plan name DECISIVEDGE, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DECISIVEDGE, LLC	c EIN-PN 26-1440851-001
a	Plan name DEEPWATCH, INC. 401(K) PLAN	
b	Name of plan sponsor DEEPWATCH, INC.	c EIN-PN 38-4056947-001

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	DEERFIELD AGENCY LLC 401K PLAN
b	Name of plan sponsor	DEERFIELD AGENCY LLC
c	EIN-PN	47-3931876-001
a	Plan name	DEKRA AMERICA, INC. 401(K) PLAN
b	Name of plan sponsor	DEKRA NORTH AMERICA, INC.
c	EIN-PN	47-0901723-001
a	Plan name	DELTA RESEARCH/DELTA GEAR 401(K) PLAN
b	Name of plan sponsor	DELTA RESEARCH CORPORATION
c	EIN-PN	38-1806269-001
a	Plan name	DELTA RETIREMENT PLAN
b	Name of plan sponsor	TECHMET CARBIDES, INC.
c	EIN-PN	56-2130281-003
a	Plan name	DEMAND SCIENCE GROUP 401(K) PLAN
b	Name of plan sponsor	DEMAND SCIENCE GROUP
c	EIN-PN	82-5063011-001
a	Plan name	DEMARCO PRODUCE CO., INC. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	DEMARCO PRODUCE CO., INC.
c	EIN-PN	22-1863914-001
a	Plan name	DENSO TEN AMERICA LIMITED 401(K) SHARED SAVINGS PLAN
b	Name of plan sponsor	DENSO TEN AMERICA LIMITED
c	EIN-PN	95-3047171-001
a	Plan name	DIAGNOSTIC IMAGING CENTERS, P.A. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	DIAGNOSTIC IMAGING CENTERS, P.A.
c	EIN-PN	43-0913846-002
a	Plan name	DIAGNOSTIC SOLUTIONS LABORATORY, LLC EMPLOYEES RETIREMENT PLAN
b	Name of plan sponsor	DIAGNOSTIC SOLUTIONS LABORATORY, LLC
c	EIN-PN	47-3208084-001
a	Plan name	DIAMOND CREDIT UNION 401(K) PLAN AND TRUST
b	Name of plan sponsor	DIAMOND CREDIT UNION
c	EIN-PN	23-1320654-002
a	Plan name	DIFFSTRAT COMPANIES, INC. 401(K) PLAN
b	Name of plan sponsor	DIFFSTRAT COMPANIES, INC.
c	EIN-PN	42-1437161-001
a	Plan name	DIN TAI FUNG RETIREMENT PLAN
b	Name of plan sponsor	DTF MANAGEMENT AND CONSULTING, LLC
c	EIN-PN	47-4678058-001

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	DIVERSIFIED PLASTICS, INC. SAVINGS AND RETIREMENT PLAN AND TRUST	
b	Name of plan sponsor	DIVERSIFIED PLASTICS, INC.	c EIN-PN 41-1322348-001
a	Plan name	DOYLESTOWN COUNTRY CLUB 401K PLAN	
b	Name of plan sponsor	DOYLESTOWN COUNTRY CLUB	c EIN-PN 23-0535085-001
a	Plan name	DPI 401(K) SAVINGS PLAN	
b	Name of plan sponsor	DIVERSIFIED PLASTICS, INC.	c EIN-PN 81-0428980-001
a	Plan name	DRAKE EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor	DRAKE OFFICE OVERLOAD, INC.	c EIN-PN 95-4555406-002
a	Plan name	DULTMEIER SALES LLC 401(K) PLAN	
b	Name of plan sponsor	DULTMEIER SALES LLC	c EIN-PN 47-0430008-001
a	Plan name	DWIGHT W. LOUDON, DDS, PC PROFIT SHARING PLAN	
b	Name of plan sponsor	DWIGHT W. LOUDON, DDS, PC	c EIN-PN 46-0397901-001
a	Plan name	E3 INC 401(K) SAVINGS & RETIREMENT PLAN	
b	Name of plan sponsor	E3 INC MEDICAL ANSWERING SERVICE OF	c EIN-PN 93-1276669-001
a	Plan name	E. K. SERVICES RETIREMENT PLAN	
b	Name of plan sponsor	E.K. SERVICES, INC.	c EIN-PN 25-1644049-001
a	Plan name	E.L. ROBINSON ENGINEERING 401(K) PLAN	
b	Name of plan sponsor	E.L. ROBINSON ENGINEERING CO.	c EIN-PN 55-0594633-001
a	Plan name	EARLY START PRESCHOOLS INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	EARLY START PRESCHOOLS INC.	c EIN-PN 95-4577631-001
a	Plan name	EAST VIEW INFORMATION SERVICES 401(K) SAVINGS PLAN	
b	Name of plan sponsor	EAST VIEW INFORMATION SERVICES, INC.	c EIN-PN 41-1693095-001
a	Plan name	EAST WOOD CLINIC PLLC SAFE HARBOR 401(K) PLAN	
b	Name of plan sponsor	EAST WOOD CLINIC PLLC	c EIN-PN 20-3608763-001

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 EASTERLY COLEMAN FURNITURE, LLC 401(K) PLAN	
b	Name of plan sponsor EASTERLY COLEMAN FURNITURE, LLC	c EIN-PN 54-2017664-001
a	Plan name ECOPRINTQ RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor ECOPRINTQ INC	c EIN-PN 45-2991058-001
a	Plan name ECU WORLDWIDE 401(K) PLAN	
b	Name of plan sponsor ECONOCARIBE CONSOLIDATORS INC.	c EIN-PN 59-1428228-004
a	Plan name EGIS RAIL INC. USA 401(K) PLAN	
b	Name of plan sponsor EGIS RAIL INC. USA	c EIN-PN 82-0711997-001
a	Plan name ELITE SCREENS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ELITE SCREENS, INC.	c EIN-PN 20-0806854-002
a	Plan name EMD ACQUISITION, LLC 401(K) PLAN	
b	Name of plan sponsor EMD ACQUISITION, LLC DBA BORMAN SPECIALITY MATERIALS	c EIN-PN 82-4425456-001
a	Plan name EMPIRE DIE CASTING COMPANY 401(K) RETIREMENT PLAN AND TRUST	
b	Name of plan sponsor EMPIRE DIE CASTING COMPANY	c EIN-PN 61-1727213-002
a	Plan name EMPLOYMENT OPPORTUNITY TRAINING CENTER OF NEPA 401(K) PLAN	
b	Name of plan sponsor EMPLOYMENT OPPORTUNITY TRAINING CENTER OF NEPA	c EIN-PN 25-1562285-001
a	Plan name EMPOWER LIFETIME 2015 TRUST	
b	Name of plan sponsor EMPOWER TRUST COMPANY, LLC	c EIN-PN 84-1455663-011
a	Plan name EQUAL VISION RECORDS 401K PLAN	
b	Name of plan sponsor EQUAL VISION RECORDS,INC	c EIN-PN 13-3872336-001
a	Plan name EVANS GENERAL CONTRACTORS, LLC 401(K) PLAN	
b	Name of plan sponsor EVANS GENERAL CONTRACTORS, LLC	c EIN-PN 58-2602425-001
a	Plan name EXCEPTIONAL HEALTH CARE 401(K) PLAN	
b	Name of plan sponsor EXCEPTIONAL HEALTHCARE, INC.	c EIN-PN 81-1433461-001

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	EXHIBITONE 401(K) PLAN	
b	Name of plan sponsor	EXHIBITONE CORPORATION	c EIN-PN 86-0908752-001
a	Plan name	EYE CARE FOR THE ADIRONDACKS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	EYE CARE FOR THE ADIRONDACKS ASSOCIATES IN OPHTHALMOLOGY, P.C.	c EIN-PN 16-1415081-001
a	Plan name	F/J HESS & SONS, INC. 401(K) PLAN	
b	Name of plan sponsor	F/J HESS & SONS PLUMBING, HEATING AND AIR CONDITIONING, INC.	c EIN-PN 23-2567834-001
a	Plan name	FAMILY GIVING TREE	
b	Name of plan sponsor	FAMILY GIVING TREE	c EIN-PN 77-0284682-002
a	Plan name	FAMILY PRACTICE CENTER, PC 401K PLAN	
b	Name of plan sponsor	FAMILY PRACTICE CENTER, PC	c EIN-PN 23-1919008-005
a	Plan name	FASTCO INDUSTRIES, INC. 401(K) PLAN	
b	Name of plan sponsor	FASTCO INDUSTRIES, INC.	c EIN-PN 38-2253225-001
a	Plan name	FAWBUSH'S GALLERIA, INC. 401(K) PLAN	
b	Name of plan sponsor	FAWBUSH'S GALLERIA, INC.	c EIN-PN 41-1252840-001
a	Plan name	FEDERAL REALTY INVESTMENT TRUST SAVINGS AND RETIREMENT 401(K) PLAN	
b	Name of plan sponsor	FEDERAL REALTY INVESTMENT TRUST	c EIN-PN 52-0782497-001
a	Plan name	FELIX ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor	FELIX ASSOCIATES OF FLORIDA, INC.	c EIN-PN 26-4299335-001
a	Plan name	FINANCE OF AMERICA COMPANIES 401(K) PLAN	
b	Name of plan sponsor	FINANCE OF AMERICA EQUITY CAPITAL LLC	c EIN-PN 80-0948242-001
a	Plan name	FIRE-DEX, LLC 401K PLAN	
b	Name of plan sponsor	FIRE-DEX, LLC	c EIN-PN 20-8033614-001
a	Plan name	FIRST CENTRAL SAVINGS BANK 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	FIRST CENTRAL SAVINGS BANK	c EIN-PN 52-2140279-001

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 FIRST HARVEST FEDERAL CREDIT UNION CASH BALANCE DEFINED BENEFIT PLAN AND TRUST	
b	Name of plan sponsor FIRST HARVEST FEDERAL CREDIT UNION	c EIN-PN 21-0641594-001
a	Plan name FIRST IMPRESSION IRON WORKS, INC. 401(K) PLAN	
b	Name of plan sponsor FIRST IMPRESSION IRON WORKS, INC.	c EIN-PN 82-1958555-001
a	Plan name FIRST NATIONAL BANK IN TRINIDAD 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor FIRST NATIONAL BANK IN TRINIDAD	c EIN-PN 84-0338755-001
a	Plan name FIRST VISION BANK 401K PLAN	
b	Name of plan sponsor FIRST VISION BANK OF TENNESSEE	c EIN-PN 20-3376201-001
a	Plan name FIRSTLIGHTMEDIA US HOLDINGS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor FIRSTLIGHTMEDIA US HOLDINGS INC	c EIN-PN 84-3818092-001
a	Plan name FIRSTWATCH SOLUTIONS, INC. 401(K) PLAN	
b	Name of plan sponsor FIRSTWATCH SOLUTIONS, INC.	c EIN-PN 05-0544884-001
a	Plan name FISK ALLOY, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor FISK HOLDINGS INC.	c EIN-PN 22-2010560-001
a	Plan name FLN-MAR RUBBER & PLASTICS, INC. 401(K) PLAN	
b	Name of plan sponsor FLN-MAR RUBBER & PLASTICS, INC.	c EIN-PN 04-2454639-002
a	Plan name FLORAL BENEFITS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SUNSHINE FLOWERS CORPORATION	c EIN-PN 82-4653162-001
a	Plan name FLORES ARTSCAPE 401(K) PLAN	
b	Name of plan sponsor FLORES ARTSCAPE	c EIN-PN 82-3874533-001
a	Plan name FLOSPORTS 401(K) PLAN	
b	Name of plan sponsor FLOSPORTS, INC.	c EIN-PN 30-0857179-001
a	Plan name FORBRIGHT BANK 401(K) PLAN	
b	Name of plan sponsor FORBRIGHT BANK	c EIN-PN 43-2022906-001

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 FORT ROBOTICS, INC 401(K) PLAN	
b	Name of plan sponsor FORT ROBOTICS, INC.	c EIN-PN 83-2052977-001
a	Plan name FOSTER CAVINESS COMPANY 401(K) PLAN	
b	Name of plan sponsor FOSTER CAVINESS COMPANY, INC.	c EIN-PN 56-0507149-001
a	Plan name FOULGER-PRATT COMPANIES 401(K) PLAN	
b	Name of plan sponsor THE FOULGER-PRATT COMPANIES	c EIN-PN 45-0463021-001
a	Plan name FUTURECARE 401(K) PLAN	
b	Name of plan sponsor FUTURECARE HEALTH AND MANAGEMENT CORPORATION	c EIN-PN 52-1508636-001
a	Plan name G & B LAW, LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor G & B LAW, LLP	c EIN-PN 95-4559472-001
a	Plan name GABLES RESIDENTIAL SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor GABLES RESIDENTIAL SERVICES	c EIN-PN 75-2517913-001
a	Plan name GAGE HOTEL 401(K) PLAN	
b	Name of plan sponsor GAGE HOTEL	c EIN-PN 76-0373351-001
a	Plan name GARDNER SPRINGS DENTISTRY 401(K) PLAN	
b	Name of plan sponsor BRANDON M. GARDNER DDS, PC	c EIN-PN 47-1925053-001
a	Plan name GDC, INC. 401(K) PLAN	
b	Name of plan sponsor GDC, INC.	c EIN-PN 35-1058203-001
a	Plan name GENESEE VALLEY FEDERAL CREDIT UNION CAPITAL ACCUMULATION PLAN	
b	Name of plan sponsor GENESEE VALLEY FEDERAL CREDIT UNION	c EIN-PN 23-7377176-033
a	Plan name GENOVA TECHNOLOGIES 401(K) PLAN	
b	Name of plan sponsor GENOVA TECHNOLOGIES INC.	c EIN-PN 42-1466298-001
a	Plan name GEORGE R. RUHL & SON, INC. 401(K) PLAN	
b	Name of plan sponsor GEORGE R. RUHL & SON, INC.	c EIN-PN 54-0908565-001

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 GEORGETOWN CONSTRUCTION COMPANY EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor GEORGETOWN CONSTRUCTION COMPANY	c EIN-PN 38-2403950-004
a	Plan name GEORGIA NUT COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GEORGIA NUT COMPANY	c EIN-PN 36-2284619-001
a	Plan name GOODWIN & SONS ENTERPRISES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GOODWIN & SONS ENTERPRISES, INC.	c EIN-PN 95-2254510-001
a	Plan name GOOSENECK IMPLEMENT COMPANY RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor GOOSENECK IMPLEMENT COMPANY	c EIN-PN 11-3690698-001
a	Plan name GORDON W. PRATT AGENCY, INC. 401(K) P/S PLAN	
b	Name of plan sponsor GORDON W. PRATT AGENCY, INC.	c EIN-PN 14-1612533-003
a	Plan name GOURMET CULINARY PARTNERS 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor GOURMET CULINARY PARTNERS, LLC	c EIN-PN 83-3649071-001
a	Plan name GULF CITY BODY & TRAILER WORKS, INC. 401(K) PLAN	
b	Name of plan sponsor GULF CITY BODY & TRAILER WORKS, INC.	c EIN-PN 63-0515141-002
a	Plan name HALFACRE CONSTRUCTION COMPANY RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor HALFACRE CONSTRUCTION COMPANY	c EIN-PN 59-1297826-001
a	Plan name HAWAII SMILE DESIGNS RETIREMENT PLAN	
b	Name of plan sponsor HAWAII SMILE DESIGNS, LLC	c EIN-PN 81-1915924-002
a	Plan name HEALTHMARK 401(K) PLAN	
b	Name of plan sponsor HEALTHMARK INDUSTRIES COMPANY	c EIN-PN 38-2073977-001
a	Plan name HEALTHNET, INC. 401(K) PLAN	
b	Name of plan sponsor HEALTHNET, INC.	c EIN-PN 35-1579827-001
a	Plan name HEARTLAND CORN PRODUCTS 401(K) PLAN	
b	Name of plan sponsor HEARTLAND CORN PRODUCTS	c EIN-PN 41-1718412-001

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	HEATHERGLEN SENIOR LIVING, LLC 401(K) PLAN	
b	Name of plan sponsor	HEATHERGLEN SENIOR LIVING, LLC	c EIN-PN 81-3241367-001
a	Plan name	HELICAL DRILLING 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HELICAL DRILLING, INC.	c EIN-PN 36-4615460-001
a	Plan name	HELIENT SYSTEMS LLC	
b	Name of plan sponsor	HELIENT SYSTEMS LLC	c EIN-PN 46-1334455-001
a	Plan name	HELLMANN WORLDWIDE LOGISTICS, INC. 401(K) PLAN	
b	Name of plan sponsor	HELLMANN WORLDWIDE LOGISTICS	c EIN-PN 95-4140705-001
a	Plan name	HERITAGE BROADCASTING COMPANY OF MICHIGAN 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HERITAGE BROADCASTING COMPANY OF MICHIGAN	c EIN-PN 38-2706835-001
a	Plan name	HERMAN & PARTNERS ADVERTISING, LLC 401K PLAN	
b	Name of plan sponsor	HERMAN & PARTNERS ADVERTISING, LLC	c EIN-PN 20-4870007-001
a	Plan name	HILO & KONA FISH COMPANY 401(K) PLAN	
b	Name of plan sponsor	HILO FISH COMPANY, INC.	c EIN-PN 99-0323866-001
a	Plan name	HMBC, INC. 401(K)/PROFIT SHARING PLAN	
b	Name of plan sponsor	HMBC, INC. DBA AMERICAN RESTORATION	c EIN-PN 56-1949832-001
a	Plan name	HR PHARMACEUTICALS, INC. 401K	
b	Name of plan sponsor	HR PHARMACEUTICALS	c EIN-PN 27-1584005-001
a	Plan name	HULL SUPPLY COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	HULL SUPPLY COMPANY, INC	c EIN-PN 74-2020646-001
a	Plan name	HURON, INC. RETIREMENT SAVINGS & INVESTMENT PLAN	
b	Name of plan sponsor	HURON, INC.	c EIN-PN 38-2546791-002
a	Plan name	HUSTON-TILLOTSON UNIVERSITY 401K PLAN	
b	Name of plan sponsor	HUSTON-TILLOTSON UNIVERSITY	c EIN-PN 74-1180151-001

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	IDEATION, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	IDEATION, INC.	c EIN-PN 54-2000837-001
a	Plan name	INDUCTION ELECTRIC 401(K) PLAN	
b	Name of plan sponsor	INDUCTION ELECTRIC, LLC	c EIN-PN 82-2330592-001
a	Plan name	INDUSTRIAL INFO RESOURCES, INC. EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor	INDUSTRIAL INFO RESOURCES, INC.	c EIN-PN 76-0093411-001
a	Plan name	INFOTRAX 401(K) PLAN	
b	Name of plan sponsor	INFOTRAX SYSTEMS	c EIN-PN 87-0584415-001
a	Plan name	INFRASTRUCTURE DESIGN GROUP, INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	INFRASTRUCTURE DESIGN GROUP, INC.	c EIN-PN 46-0863767-001
a	Plan name	INLAND EMPIRE TRUSS, INC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	INLAND EMPIRE TRUSS, INC	c EIN-PN 33-0906910-001
a	Plan name	INLIGHT WEALTH MANAGEMENT, LLC 401(K) PLAN	
b	Name of plan sponsor	INLIGHT WEALTH MANAGMENT, LLC	c EIN-PN 82-2820416-001
a	Plan name	INNOPHOS, INC. 401(K) PLAN	
b	Name of plan sponsor	INNOPHOS, INC.	c EIN-PN 20-1380712-001
a	Plan name	INNOVATIVE DRIVEN 401(K) PLAN	
b	Name of plan sponsor	INNOVATIVE DISCOVERY EMPLOYMENT SERVICES COMPANY, INC.	c EIN-PN 82-1582174-001
a	Plan name	INTELIDENT SOLUTIONS, INC. 401(K) PLAN	
b	Name of plan sponsor	INTELIDENT SOLUTIONS, INC.	c EIN-PN 57-1220613-001
a	Plan name	J WILCO ENTERPRISES LLC 401(K) PLAN	
b	Name of plan sponsor	J WILCO ENTERPRISES LLC DBA SERVPRO	c EIN-PN 46-1855859-001
a	Plan name	J. PEREZ ASSOCIATES, INC. 401(K) PLAN II	
b	Name of plan sponsor	J. PEREZ ASSOCIATES, INC.	c EIN-PN 74-2623123-002

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 J.H. MORENO & ASSOCIATES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor J.H. MORENO & ASSOCIATES	c EIN-PN 26-1373472-001
a	Plan name JACK GARRETT FORD 401(K) PLAN	
b	Name of plan sponsor JACK GARRETT FORD, INC.	c EIN-PN 55-0433331-001
a	Plan name JBM PACKAGING COMPANY RETIREMENT PLAN AND TRUST	
b	Name of plan sponsor JBM PACKAGING COMPANY	c EIN-PN 31-1277407-001
a	Plan name JEFFREY J. WOLFE, DDS 401(K) PLAN	
b	Name of plan sponsor JEFFREY J. WOLFE, DDS, PLLC	c EIN-PN 86-2450004-001
a	Plan name JEWISH ALLIANCE OF GREATER RHODE ISLAND RETIREMENT PLAN	
b	Name of plan sponsor JEWISH ALLIANCE OF GREATER RHODE ISLAND	c EIN-PN 27-4127671-001
a	Plan name JILLAMY, INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JILLAMY, INC	c EIN-PN 75-2979513-001
a	Plan name JODYJAZZ, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor JODYJAZZ INC	c EIN-PN 05-0595845-001
a	Plan name JOHNSTONE SUPPLY OF DETROIT 401(K) PLAN	
b	Name of plan sponsor CHESTER LIMITED, INC. DBA JOHNSTONE SUPPLY OF DETROIT	c EIN-PN 38-3336773-001
a	Plan name JRL COAL, INC. 401(K)	
b	Name of plan sponsor JRL COAL, INC.	c EIN-PN 81-4111438-001
a	Plan name JUSTICE & COMPANY, INC. 401(K) P/S PLAN	
b	Name of plan sponsor JUSTICE & COMPANY, INC.	c EIN-PN 20-2144622-001
a	Plan name KABAFUSION 401(K) PLAN	
b	Name of plan sponsor KABAFUSION HOLDINGS, L.L.C.	c EIN-PN 27-3572421-001
a	Plan name KADIANT'S LIVING YOUR ABSOLUTE BEST RETIREMENT LIFE 401(K) PLAN	
b	Name of plan sponsor KADIANT, LLC	c EIN-PN 83-3935694-001

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 KAY BUILDERS, INC. 401(K) PLAN AND TRUST	
b	Name of plan sponsor KAY BUILDERS, INC.	c EIN-PN 23-1715130-001
a	Plan name KEYSTONE INSURERS GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor KEYSTONE INSURERS GROUP, INC.	c EIN-PN 23-2263940-001
a	Plan name KEYSTONE LEATHER 401(K) PLAN	
b	Name of plan sponsor KEYSTONE LEATHER DISTRIBUTORS, LLC	c EIN-PN 37-1461926-001
a	Plan name KIMMEL CLEANERS, INC. 401(K) PLAN	
b	Name of plan sponsor KIMMEL CLEANERS, INC.	c EIN-PN 34-0930171-001
a	Plan name KING'S HAWAIIAN 401(K) PLAN	
b	Name of plan sponsor R&T ONE, INC. (DBA IRRESISTIBLE FOODS GROUP)	c EIN-PN 85-4229454-001
a	Plan name KIZIK 401K SAVINGS PLAN	
b	Name of plan sponsor KIZIK DESIGN, LLC	c EIN-PN 37-1870390-001
a	Plan name KMI HOLDINGS, INC. 401(K) PLAN	
b	Name of plan sponsor KMI HOLDINGS, INC	c EIN-PN 45-4098775-001
a	Plan name KNIGHT TRANSFER SERVICES, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor KNIGHT TRANSFER SERVICES, INC.	c EIN-PN 38-3278095-001
a	Plan name KNUCKLEHEAD'S FEC, LLC 401(K) PLAN	
b	Name of plan sponsor KNUCKLEHEADS FEC, LLC	c EIN-PN 20-5180016-001
a	Plan name LA PERLA NORTH AMERICA INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor LA PERLA NORTH AMERICA INC	c EIN-PN 13-3622358-001
a	Plan name LAKESIDE CASTING 401(K) PLAN	
b	Name of plan sponsor LAKESIDE CASTING	c EIN-PN 26-1529060-001
a	Plan name LCS PRODUCTION CO / SPA DRILLING 401K PLAN	
b	Name of plan sponsor LCS PRODUCTION COMPANY INC	c EIN-PN 75-2072515-001

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	LEO'S RECYCLE AND RUBBISH SERVICE 401(K) PLAN	
b	Name of plan sponsor	LEOS RECYCLE INC.	c EIN-PN 99-0313346-001
a	Plan name	LIFE WORKS 401(K) PLAN	
b	Name of plan sponsor	LIFE WORKS	c EIN-PN 91-1224762-001
a	Plan name	LIFECARE 2.0 401(K) PLAN	
b	Name of plan sponsor	LIFECARE 2.0 MANAGEMENT SERVICES, LLC	c EIN-PN 84-2742973-001
a	Plan name	LIGHTHOUSE ELECTRIC, LLC 401(K) PLAN	
b	Name of plan sponsor	LIGHTHOUSE ELECTRIC, LLC	c EIN-PN 73-1340815-001
a	Plan name	LINDAUER GLOBAL 401(K) PLAN	
b	Name of plan sponsor	LOIS L. LINDAUER SEARCHES, LLC	c EIN-PN 20-8132722-001
a	Plan name	LOCOMOTE EXPRESS 401(K) PLAN	
b	Name of plan sponsor	LOCOMOTE EXPRESS, LLC	c EIN-PN 26-1315298-001
a	Plan name	LORD ELECTRIC COMPANY OF PUERTO RICO, INC EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor	LORD ELECTRIC COMPANY OF PR, INC	c EIN-PN 66-0663585-001
a	Plan name	LOUDDOOR LLC 401(K) PLAN	
b	Name of plan sponsor	LOUDDOOR LLC	c EIN-PN 26-1388651-001
a	Plan name	LOYAL SOURCE GOVERNMENT SERVICES 401(K) PLAN	
b	Name of plan sponsor	LOYAL SOURCE GOVERNMENT SERVICES, LLC	c EIN-PN 30-0564703-001
a	Plan name	LRS HEALTHCARE 401(K) PLAN	
b	Name of plan sponsor	LRS HEALTHCARE	c EIN-PN 20-3629021-001
a	Plan name	LUZERN LABORATORIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LUZERN LABORATORIES INC.	c EIN-PN 73-1729238-001
a	Plan name	M&M CHECK CASHING, LLC 401(K) PLAN	
b	Name of plan sponsor	M&M CHECK CASHING, LLC	c EIN-PN 45-4502011-001

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	M&R STRATEGIC SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	M&R STRATEGIC SERVICES, INC.	c EIN-PN 13-3588025-002
a	Plan name	MADIBA INC SH 401K PS PLAN	
b	Name of plan sponsor	MADIBA INC.	c EIN-PN 03-0414852-001
a	Plan name	MAGNA LEGAL SERVICES 401(K) / PROFIT SHARING PLAN	
b	Name of plan sponsor	MAGNA LEGAL SERVICES, LLC	c EIN-PN 20-8474245-001
a	Plan name	MAGNOLIA PLUMBING EMPLOYEE 401(K) & PROFIT SHARING	
b	Name of plan sponsor	JOSEPH J. MAGNOLIA, INC.	c EIN-PN 53-0235163-003
a	Plan name	MAROUS BROTHERS CONSTRUCTION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MAROUS BROTHERS CONSTRUCTION, INC.	c EIN-PN 34-1327243-002
a	Plan name	MAYFIELD SITE CONTRACTORS, INC. 401(K) PLAN	
b	Name of plan sponsor	MAYFIELD SITE CONTRACTORS, INC.	c EIN-PN 55-0817200-001
a	Plan name	MCKENZIE HEALTH SYSTEM 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MCKENZIE MEMORIAL HOSPITAL	c EIN-PN 38-1738615-001
a	Plan name	MD REVOLUTION, INC. RETIREMENT TRUST	
b	Name of plan sponsor	MD REVOLUTION, INC.	c EIN-PN 45-2485559-001
a	Plan name	MEDZED, LLC 401K PS PLAN	
b	Name of plan sponsor	MEDZED, LLC	c EIN-PN 47-5386891-001
a	Plan name	MERCANTILE PRESS	
b	Name of plan sponsor	MERCANTILE PRESS, INC	c EIN-PN 51-0032940-002
a	Plan name	METROPOLITAN METALS CORP. CASH BALANCE PENSION PLAN	
b	Name of plan sponsor	METROPOLITAN METALS CORPORATION	c EIN-PN 01-0721197-003
a	Plan name	METSON MARINE SERVICES, INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor	METSON MARINE SERVICES, INC.	c EIN-PN 88-0308650-001

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 MICROCOSM, INC. RETIREMENT PLAN	
b	Name of plan sponsor MICROCOSM, INC.	c EIN-PN 33-0056066-001
a	Plan name MILLARD ELECTRIC COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MILLARD ELECTRIC COMPANY, INC.	c EIN-PN 47-0494470-001
a	Plan name MLJ ENVIRONMENTAL, LLC 401(K) PLAN AND TRUST	
b	Name of plan sponsor MLJ ENVIRONMENTAL, LLC	c EIN-PN 20-5147757-002
a	Plan name MNA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MEMORIAL NEUROLOGICAL ASSOCIATION	c EIN-PN 74-1824287-003
a	Plan name MOHS MICROGRAPHIC & SKIN SURGERY, PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MOHS MICROGRAPHIC & SKIN SURGERY, PLLC	c EIN-PN 27-5099347-001
a	Plan name MONARCH INTERNATIONAL, INC. 401(K) PLAN	
b	Name of plan sponsor MONARCH INTERNATIONAL, INC.	c EIN-PN 02-0333450-001
a	Plan name MOODY GARDENS, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor MOODY GARDENS, INC.	c EIN-PN 76-0288131-002
a	Plan name MORRIS PRESS 401(K) PLAN	
b	Name of plan sponsor MORRIS PRINTING GROUP, INC.	c EIN-PN 47-0564855-001
a	Plan name MOTION PICTURE ASSOCIATION, INC. EMPLOYEES' 401(K) PLAN	
b	Name of plan sponsor MOTION PICTURE ASSOCIATION, INC.	c EIN-PN 13-1068220-002
a	Plan name MOTUS RECRUITING 401(K) PLAN	
b	Name of plan sponsor MOTUS RECRUITING AND STAFFING, INC.	c EIN-PN 20-4047255-002
a	Plan name MOUNTAIN VALLEY MECHANICAL 401(K) PLAN	
b	Name of plan sponsor MOUNTAIN VALLEY MECHANICAL, INC.	c EIN-PN 82-0537129-001
a	Plan name MP GLOBAL PRODUCTS, LLC 401(K) PLAN	
b	Name of plan sponsor MP GLOBAL PRODUCTS, LLC	c EIN-PN 91-1838266-001

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 MVP NETWORK CONSULTING, LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor MVP NETWORK CONSULTING, LLC	c EIN-PN 01-0739799-001
a	Plan name N BALDWIN COMPANY 401(K) PLAN	
b	Name of plan sponsor BALDWIN COMPANY	c EIN-PN 46-1856883-001
a	Plan name NAPA VALLEY TOURS & TRANSPORTATION 401(K) PLAN	
b	Name of plan sponsor A WINE VALLEY EXPERIENCE LIMOUSINE	c EIN-PN 94-3331771-001
a	Plan name NAREIT 401(K) RETIREMENT PLAN	
b	Name of plan sponsor ATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS, INC	c EIN-PN 27-3586050-001
a	Plan name NEGROSKI NEUROLOGY, LLP 401(K) PLAN	
b	Name of plan sponsor EGROSKI NEUROLOGY, LLP	c EIN-PN 65-0591670-001
a	Plan name NELSON PAN, D.D.S. 401(K) RETIREMENT TRUST	
b	Name of plan sponsor ELSON PAN, D.D.S.	c EIN-PN 04-3058365-001
a	Plan name NEW BALANCE COMMODITIES 401(K) PLAN	
b	Name of plan sponsor EW BALANCE COMMODITIES, INC.	c EIN-PN 20-4729771-001
a	Plan name NEWDAY USA RETIREMENT PLAN	
b	Name of plan sponsor EWDAY USA	c EIN-PN 22-3887207-003
a	Plan name NEXTEP 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor 899210-01 NEXTEP, INC.	c EIN-PN 73-1543198-333
a	Plan name NHE PENSION PLAN	
b	Name of plan sponsor ATIONWIDE HEALTHCARE SERVICES LLC	c EIN-PN 26-3999886-001
a	Plan name NIC INDUSTRIES, INC. PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor IC INDUSTRIES, INC.	c EIN-PN 91-1767717-001
a	Plan name NICK NICHOLAS FORD 401(K) SALARY REDUCTION PLAN	
b	Name of plan sponsor ICK NICHOLAS FORD, INC.	c EIN-PN 59-2126785-001

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	NIGHTHAWK CUSTOM 401(K) PLAN	
b Name of plan sponsor	IGHTHAWK CUSTOM LLC	c EIN-PN 20-2269991-001
a Plan name	NOBLE INDUSTRIES, INC. 401(K) PLAN	
b Name of plan sponsor	OBLE INDUSTRIES, INC.	c EIN-PN 27-0028270-001
a Plan name	NORTH CAROLINA MUSEUM OF ART FOUNDATION, INC. 401(K) PLAN	
b Name of plan sponsor	ORTH CAROLINA MUSEUM OF ART FOUNDATION, INC .	c EIN-PN 23-7071511-001
a Plan name	NORTH CAROLINA STATE FIREFIGHTERS' ASSOCIATION DEFINED CONTRIBUTION RETIREMENT PLAN	
b Name of plan sponsor	ORTH CAROLINA STATE FIREFIGHTERS ASSOCIATION	c EIN-PN 56-0614254-001
a Plan name	NORTH CENTRAL INTERNATIONAL 401(K) PLAN	
b Name of plan sponsor	FOX BROTHERS OF SANBORN, INC.	c EIN-PN 41-0873666-001
a Plan name	NORTHEAST ELECTRIC 401(K) PLAN	
b Name of plan sponsor	ORTHEAST ELECTRIC, LLC	c EIN-PN 25-1912987-001
a Plan name	NORTHERN TOOL & EQUIPMENT COMPANY, INC. 401(K) PLAN	
b Name of plan sponsor	ORTHERN TOOL & EQUIPMENT COMPANY, INC.	c EIN-PN 41-1405311-003
a Plan name	NOVA 401(K) PLAN	
b Name of plan sponsor	OVA 401K ASSOCIATES	c EIN-PN 20-1181458-001
a Plan name	NOVA GAS TECHNOLOGIES, INC. 401(K) PLAN	
b Name of plan sponsor	OVA GAS TECHNOLOGIES, INC.	c EIN-PN 22-2475660-001
a Plan name	NOVEN PHARMACEUTICALS, INC. 401(K) PLAN	
b Name of plan sponsor	OVEN PHARMACEUTICALS, INC.	c EIN-PN 59-2767632-001
a Plan name	NTG 401(K) PLAN	
b Name of plan sponsor	ORTHERN TECHNOLOGIES GROUP, INC.	c EIN-PN 01-0678620-001
a Plan name	OAKLAND CHRISTIAN SCHOOL PROFIT SHARING PLAN	
b Name of plan sponsor	OAKLAND CHRISTIAN SCHOOL	c EIN-PN 38-1881948-001

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 OASE NORTH AMERICA, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor OASE NORTH AMERICA, INC.	c EIN-PN 33-0609870-001
a	Plan name OCEAN HOUSE BUILDERS 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor AN, INC.	c EIN-PN 99-0317519-001
a	Plan name OCTO CONSULTING GROUP 401K PLAN	
b	Name of plan sponsor OCTO CONSULTING GROUP, LLC	c EIN-PN 20-4658157-001
a	Plan name OMNI INSTRUMENTATION & ELECTRICAL SERVICES, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor OMNI INSTRUMENTATION & ELECTRICAL SERVICES, INC.	c EIN-PN 22-2947177-001
a	Plan name ONEWORLD 401(K) PLAN	
b	Name of plan sponsor ONEWORLD COMMUNITY HEALTH CENTERS, INC.	c EIN-PN 47-0548990-001
a	Plan name ONIX NETWORKING 401(K) PLAN	
b	Name of plan sponsor ONIX NETWORKING CORP.	c EIN-PN 34-1729033-001
a	Plan name OPPORTUNITY FOUNDATION OF CENTRAL OREGON RETIREMENT PLAN	
b	Name of plan sponsor OPPORTUNITY FOUNDATION OF CENTRAL OREGON	c EIN-PN 93-0576732-001
a	Plan name OPTICSPLANET, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor OPTICSPLANET, INC.	c EIN-PN 36-4397726-001
a	Plan name OPTIMUS STEEL 401(K) PLAN	
b	Name of plan sponsor OPTIMUS STEEL LLC	c EIN-PN 82-4229324-002
a	Plan name ORANGE COAST TITLE FAMILY OF COMPANIES EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor ORANGE COAST TITLE COMPANY	c EIN-PN 95-2871609-001
a	Plan name ORANGEPEOPLE, LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor ORANGEPEOPLE, LLC	c EIN-PN 34-1999165-001
a	Plan name ORDERS CONSTRUCTION COMPANY 401(K) PLAN	
b	Name of plan sponsor ORDERS CONSTRUCTION COMPANY, INC.	c EIN-PN 55-0487806-002

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 OREPAC SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor OREPAC HOLDING COMPANY	c EIN-PN 93-0670556-001
a	Plan name ORION RESOURCE PARTNERS (USA) LP 401(K) PLAN	
b	Name of plan sponsor ORION RESOURCE PARTNERS (USA) L.P.	c EIN-PN 86-1158062-001
a	Plan name OSCAR S. FIELDS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor OSCAR S. FIELDS, INC.	c EIN-PN 54-1197923-001
a	Plan name OXENDALE & ASSOCIATES, INC. 401(K) PLAN	
b	Name of plan sponsor OXENDALE & ASSOCIATES, INC.	c EIN-PN 86-0512737-001
a	Plan name PACIFIC UTILITY INSTALLATION, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor PACIFIC UTILITY INSTALLATION, INC.	c EIN-PN 33-0741430-001
a	Plan name PALACIOS LAW GROUP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE LAW OFFICES OF XAVIER A. PALACIOS & ASSOCIATES, P.C.	c EIN-PN 20-3187871-001
a	Plan name PALMER & CAY, LLC EMPLOYEES 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor PALMER & CAY LLC	c EIN-PN 27-2182440-001
a	Plan name PALMER MANUFACTURING & SUPPLY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PALMER MANUFACTURING & SUPPLY, INC.	c EIN-PN 31-0901016-001
a	Plan name PANIOLO PEDIATRIC AND FAMILY MEDICINE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PANIOLO PEDIATRIC AND FAMILY MEDICINE, INC.	c EIN-PN 82-4177930-001
a	Plan name PARK WEST 401(K) EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor PARK WEST LANDSCAPE, INC.	c EIN-PN 95-3814677-002
a	Plan name PATTEN LAW FIRM PC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor PATTEN LAW FIRM PC	c EIN-PN 26-1728738-002
a	Plan name PEACHTREE HOTEL GROUP 401K	
b	Name of plan sponsor PEACHTREE HOTEL GROUP LLC	c EIN-PN 26-1186759-001

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 PENSACOLA CHRISTIAN COLLEGE, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor PENSACOLA CHRISTIAN COLLEGE, INC.	c EIN-PN 59-0940532-003
a	Plan name PET SCOOP, INC. 401(K) PLAN	
b	Name of plan sponsor PET SCOOP, INC.	c EIN-PN 65-1174028-001
a	Plan name PGH WONG ENGINEERING, INC. 401(K) PLAN	
b	Name of plan sponsor PGH WONG ENGINEERING, INC.	c EIN-PN 94-2987905-001
a	Plan name PHALCON, LTD. 401(K) PLAN	
b	Name of plan sponsor PHALCON LTD.	c EIN-PN 20-8104883-001
a	Plan name PILOT III, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor PILOT III, INC.	c EIN-PN 64-0699089-001
a	Plan name PILOT PRECISION PRODUCTS, LLC 401(K) PLAN	
b	Name of plan sponsor PILOT PRECISION PRODUCTS, LLC	c EIN-PN 81-3661088-002
a	Plan name PINNACLE HOME CARE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PINNACLE HOME CARE, INC.	c EIN-PN 45-0502569-001
a	Plan name PIONEER APCO LLC 401(K) PLAN	
b	Name of plan sponsor PIONEER APCO LLC	c EIN-PN 81-4423588-001
a	Plan name PIONEER HOME 401(K) PLAN	
b	Name of plan sponsor POINEER HOME, INC.	c EIN-PN 41-0711612-002
a	Plan name PLEASANT VALLEY CORPORATION 401(K) PLAN	
b	Name of plan sponsor PLEASANT VALLEY CORPORATION	c EIN-PN 27-0901655-001
a	Plan name POLINGER COMPANY 401(K) PLAN	
b	Name of plan sponsor POLINGER COMPANY	c EIN-PN 52-0624763-002
a	Plan name PRATT INDUSTRIES U.S. LLC 401K & PS	
b	Name of plan sponsor PRATT INDUSTRIES U.S. LLC	c EIN-PN 88-3177888-001

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	PREMIER MORTGAGE RESOURCES 401(K) PLAN	
b	Name of plan sponsor	PREMIER MORTGAGE RESOURCES	c EIN-PN 20-2718340-001
a	Plan name	PREMIER PRODUCTS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	PREMIER PRODUCTS, INC.	c EIN-PN 72-1156291-001
a	Plan name	PRESTIGE FARMS INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	PRESTIGE FARMS, INC.	c EIN-PN 56-0893777-001
a	Plan name	PRIDE CAPITAL PARTNERS, LLC 401(K) PLAN	
b	Name of plan sponsor	PRIDE CAPITAL PARTNERS, LLC	c EIN-PN 54-2131570-001
a	Plan name	PRO FOUND 401(K) PLAN	
b	Name of plan sponsor	PRO FOUND RECOVERY SOLUTIONS, INC.	c EIN-PN 26-4575383-001
a	Plan name	PRO MEDICAL DISTRIBUTION LLC 401(K) PLAN	
b	Name of plan sponsor	PRO MEDICAL DISTRIBUTION LLC	c EIN-PN 47-2447295-001
a	Plan name	PROGYNY, INC. 401(K) PLAN	
b	Name of plan sponsor	PROGYNY, INC.	c EIN-PN 27-2220139-001
a	Plan name	PROVOST UMPHREY LAW FIRM LLP 401(K) PROFIT SHARING PLAN A	
b	Name of plan sponsor	PROVOST UMPHREY LAW FIRM L.L.P.	c EIN-PN 74-1820254-003
a	Plan name	PSIQUANTUM 401(K) PLAN	
b	Name of plan sponsor	PSIQUANTUM CORP.	c EIN-PN 81-1715139-001
a	Plan name	PURVIS FORD 401(K) PLAN	
b	Name of plan sponsor	PURVIS FORD, INC.	c EIN-PN 54-0884429-001
a	Plan name	QCC, LLC PROFIT SHARING PLAN	
b	Name of plan sponsor	QCC, LLC	c EIN-PN 45-4672125-001
a	Plan name	QRC TECHNOLOGIES 401(K) PLAN	
b	Name of plan sponsor	QRC, LLC	c EIN-PN 81-2638163-001

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	QUALAWASH HOLDINGS, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	QUALAWASH HOLDINGS, LLC	c EIN-PN 27-0683851-001
a	Plan name	RAGLAND BROS. RETAIL 401(K) PLAN	
b	Name of plan sponsor	RAGLAND BROS. RETAIL COS., INC.	c EIN-PN 63-0879720-001
a	Plan name	RAISBECK ENGINEERING INC. 401K PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	RAISBECK ENGINEERING INC.	c EIN-PN 91-1172616-001
a	Plan name	RANDALL S. FUDGE, P. C. 401(K) PLAN	
b	Name of plan sponsor	RANDALL S. FUDGE, P.C.	c EIN-PN 73-1570297-001
a	Plan name	RAREFIED ATMOSPHERE 401(K) PLAN	
b	Name of plan sponsor	RAREFIED ATMOSPHERE	c EIN-PN 83-2844690-001
a	Plan name	RBB SYSTEMS, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	RBB SYSTEMS, INC.	c EIN-PN 34-1353186-001
a	Plan name	RBC EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor	RBC, INCORPORATED	c EIN-PN 54-0990960-001
a	Plan name	RBD RETIREMENT PLAN	
b	Name of plan sponsor	R. BRENDAN DUMMIGAN, PC	c EIN-PN 68-0541837-001
a	Plan name	REAL FLOORS, INC. 401(K) PLAN	
b	Name of plan sponsor	REAL FLOORS, INC.	c EIN-PN 58-1719346-001
a	Plan name	REFRACTORY ANCHORS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	REFRACTORY ANCHORS, INC.	c EIN-PN 73-1100660-001
a	Plan name	REGIONAL INDUSTRIES 401(K) PLAN	
b	Name of plan sponsor	REGIONAL INDUSTRIES, LLC	c EIN-PN 22-3558711-001
a	Plan name	REICHMAN JORGENSEN LEHMAN & FELDBERG 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	REICHMAN JORGENSEN LEHMAN & FELDBERG LLP	c EIN-PN 83-2170803-001

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	RESCO PRODUCTS, INC. 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	RESCO PRODUCTS, INC.	c EIN-PN 23-1279448-001
a	Plan name	RESOURCE BANK RETIREMENT PLAN	
b	Name of plan sponsor	RESOURCE BANK	c EIN-PN 72-1410047-001
a	Plan name	RICHARD NEWHART DDS PROFIT SHARING PLAN	
b	Name of plan sponsor	RICHARD NEWHART DDS	c EIN-PN 55-0687516-001
a	Plan name	RICH-TOMKINS CO. 401(K) PLAN	
b	Name of plan sponsor	RICH-TOMKINS CO. INC.	c EIN-PN 23-2116781-002
a	Plan name	RIDGEBACK BIOTHERAPEUTICS L.P. 401(K) PLAN	
b	Name of plan sponsor	RIDGEBACK BIOTHERAPEUTICS L.P.	c EIN-PN 83-2164075-001
a	Plan name	RISK STRATEGIES	
b	Name of plan sponsor	PLAN COMPLIANCE SERVICES	c EIN-PN 59-3708427-001
a	Plan name	RIVERSIDE ORTHODONTICS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	RIVERSIDE ORTHODONTICS, LLC	c EIN-PN 06-1580067-001
a	Plan name	RLH FIRE PROTECTION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	RLH FIRE PROTECTION	c EIN-PN 77-0535230-001
a	Plan name	ROBERTSON-RYAN & ASSOCIATES, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	ROBERTSON RYAN & ASSOCIATES, INC.	c EIN-PN 39-0605130-002
a	Plan name	ROCKY PATEL PREMIUM CIGARS, INC 401(K) PLAN	
b	Name of plan sponsor	ROCKY PATEL PREMIUM CIGARS, INC.	c EIN-PN 56-1948219-001
a	Plan name	ROSS CONTROLS RETIREMENT PLAN	
b	Name of plan sponsor	ROSS CONTROLS	c EIN-PN 38-0985950-005
a	Plan name	ROSS DECCO COMPANY 401(K) PLAN	
b	Name of plan sponsor	ROSS DECCO COMPANY	c EIN-PN 45-4017428-003

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	RPC, INC. RETIREMENT INCOME PLAN	
b	Name of plan sponsor	RPC, INC.	c EIN-PN 58-1550825-001
a	Plan name	RPC, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	RPC, INC.	c EIN-PN 59-2707333-003
a	Plan name	RQAW CORPORATION PROFIT SHARING/401(K) PLAN	
b	Name of plan sponsor	RQAW CORPORATION	c EIN-PN 35-1127849-001
a	Plan name	RUSKEN PACKAGING, INC. 401(K) PLAN	
b	Name of plan sponsor	RUSKEN PACKAGING, INC.	c EIN-PN 63-0776136-001
a	Plan name	SAGIENT 401(K) PLAN	
b	Name of plan sponsor	SAGIENT INSURANCE AND FINANCIAL SERVICES INC.	c EIN-PN 81-0919801-001
a	Plan name	SAM GIUNTA, INC. 401(K) PLAN	
b	Name of plan sponsor	SAM GIUNTA, INC. T/A SHORE TRUE VALUE HARDWARE	c EIN-PN 22-1852902-002
a	Plan name	SANDERS INDUSTRIAL EQUIPMENT CO., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SANDERS INDUSTRIAL EQUIPMENT CO., INC.	c EIN-PN 14-1578633-001
a	Plan name	SANISURE, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SANISURE, LLC	c EIN-PN 84-3210697-001
a	Plan name	SAVANT, INC. 401(K) PLAN	
b	Name of plan sponsor	SAVANT, INC.	c EIN-PN 32-0336471-002
a	Plan name	SAWTOOTH LAND SURVEYING 401(K) PLAN	
b	Name of plan sponsor	SAWTOOTH LAND SURVEYING, LLC	c EIN-PN 30-0528531-001
a	Plan name	SAXCO INTERNATIONAL, LLC SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor	SAXCO INTERNATIONAL, LLC	c EIN-PN 27-3989735-002
a	Plan name	SCIOTEQ, LLC 401(K) PLAN	
b	Name of plan sponsor	SCIOTEQ, LLC	c EIN-PN 20-4660150-001

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 SDI TECHNOLOGIES INC. PENSION PLAN	
b	Name of plan sponsor SDI TECHNOLOGIES INC.	c EIN-PN 13-5676428-001
a	Plan name SEARCH MASTERS, INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor SEARCH MASTERS, INC.	c EIN-PN 34-1119739-001
a	Plan name SID PETERSON MEMORIAL HOSPITAL 401(K) SAVINGS AND PROFIT SHARING PLAN	
b	Name of plan sponsor SID PETERSON MEMORIAL HOSPITAL	c EIN-PN 74-2557820-003
a	Plan name SIERRA CANYON FOUNDATION 401(K) PLAN	
b	Name of plan sponsor SIERRA CANYON HIGH SCHOOL FOUNDATION	c EIN-PN 95-4823704-001
a	Plan name SIETE FAMILY FOODS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor GARZA FOOD VENTURES, LLC DBA SIETE FAMILY FOODS	c EIN-PN 46-5012862-001
a	Plan name SIGMA ENGINEERING SOLUTIONS, INC. CASH BALANCE PLAN	
b	Name of plan sponsor SIGMA ENGINEERING SOLUTIONS, INC.	c EIN-PN 20-3972584-001
a	Plan name SIGNATURE TRANSPORT 401(K) PLAN	
b	Name of plan sponsor SIGNATURE TRANS	c EIN-PN 20-8872264-001
a	Plan name SILICON VALLEY FINANCIAL GROUP 401(K) PLAN	
b	Name of plan sponsor SILICON VALLEY FINANCIAL GROUP	c EIN-PN 94-2511168-002
a	Plan name SILVA'S MECHANICAL SERVICES, INC 401(K) PROFIT SHARING PLAN & TRU	
b	Name of plan sponsor SILVAS MECHANICAL SERVICES, INC	c EIN-PN 20-3497158-001
a	Plan name SINCLAIR CONCRETE, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor SINCLAIR CONCRETE, INC.	c EIN-PN 68-0175510-001
a	Plan name SKYLINE DISPLAYS OF SAN DIEGO 401(K) PLAN	
b	Name of plan sponsor SKDY OF SAN DIEGO, INC.	c EIN-PN 33-0724114-001
a	Plan name SOILS ENGINEERING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SOILS ENGINEERING, INC.	c EIN-PN 95-2429539-001

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 SOLO PRINTING 401(K) SAVINGS PLAN	
b	Name of plan sponsor SOLO PRINTING LLC	c EIN-PN 59-2571138-001
a	Plan name SONAS HOME HEALTH CARE GROUP 401K AND PROFIT SHARING TRUST	
b	Name of plan sponsor FPC ACQUISITION INC. DBA SONAS HOME HEALTH CARE	c EIN-PN 26-0327203-001
a	Plan name SONDERMIND, INC. 401(K) PLAN	
b	Name of plan sponsor SONDERMIND, INC.	c EIN-PN 82-3006071-001
a	Plan name SOUTH TEXAS ONCOLOGY & HEMATOLOGY, PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SOUTH TEXAS ONCOLOGY & HEMATOLOGY, PLLC	c EIN-PN 74-2915297-001
a	Plan name SOUTHEASTERN REAL ESTATE GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor SOUTHEASTERN REAL ESTATE GROUP, LLC	c EIN-PN 20-0911292-001
a	Plan name SPECTRUM CONTROL, INC. 401(K) PLAN	
b	Name of plan sponsor SPECTRUM CONTROL INC.	c EIN-PN 25-1196447-001
a	Plan name SPENCER CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor SPENCER CONSTRUCTION, LLC	c EIN-PN 82-4089972-001
a	Plan name STAFURSKY PAVING CO., INC. 401(K) PLAN	
b	Name of plan sponsor STAFURSKY PAVING CO., INC.	c EIN-PN 23-2206058-001
a	Plan name STALEY STEEL AND BLUDAU FABRICATION RETIREMENT PLAN	
b	Name of plan sponsor STALEY STEELE LLC	c EIN-PN 75-1461141-001
a	Plan name STEVENS COMPANIES 401(K) PLAN & TRUST	
b	Name of plan sponsor STEVENS TRANSPORT, INC.	c EIN-PN 75-1302273-001
a	Plan name STORAGE SOLUTIONS, INC. 401(K) PLAN	
b	Name of plan sponsor STORAGE SOLUTIONS, INC.	c EIN-PN 35-1433521-001
a	Plan name STOVASH, CASE & TINGLEY, PA 401(K) PLAN	
b	Name of plan sponsor STOVASH, CASE & TINGLEY, PA	c EIN-PN 48-1289856-001

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	STRATEGIC FINANCIAL PARTNERS 401(K) PLAN	
b	Name of plan sponsor	STRATEGIC FINANCIAL PARTNERS LLC	c EIN-PN 81-3150858-001
a	Plan name	STRUCTURAL MODULAR INNOVATIONS, LLC 401(K) PLAN AND TRUST	
b	Name of plan sponsor	STRUCTURAL MODULAR INNOVATIONS, LLC	c EIN-PN 92-1266814-001
a	Plan name	SUMMUS HEALTH CARE 401(K) PLAN	
b	Name of plan sponsor	SUMMUS HEALTH CARE, LLC	c EIN-PN 82-2957179-001
a	Plan name	SUNCOAST ORTHOPAEDIC SURGERY & SPORTS MEDICINE, PA 401(K) PLAN	
b	Name of plan sponsor	SUNCOAST ORTHOPAEDIC SURGERY & SPORTS MEDICINE, PA	c EIN-PN 65-0927444-002
a	Plan name	SUNRISE OILFIELD SUPPLY 401(K) PLAN	
b	Name of plan sponsor	SUNRISE OILFIELD SUPPLY, LLC	c EIN-PN 26-2968651-001
a	Plan name	SVPA, INC. 401(K) PLAN	
b	Name of plan sponsor	SUSQUEHANNA VALLEY PROFESSIONAL ASSOCIATES, INC.	c EIN-PN 23-3005044-001
a	Plan name	T.B.A MANUFACTURING 401(K) PLAN	
b	Name of plan sponsor	TAMPA BRASS AND ALUMINUM CORPORATION	c EIN-PN 59-0944472-001
a	Plan name	TALLAHASSEE NEUROLOGICAL CLINIC, P.A. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TALLAHASSEE NEUROLOGICAL CLINIC, P.	c EIN-PN 59-1286000-006
a	Plan name	TECHLAW CONSULTANTS, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	TECHLAW CONSULTANTS, INC.	c EIN-PN 54-1385706-001
a	Plan name	TERAZO, INC. 401(K) PLAN	
b	Name of plan sponsor	TERAZO, INC.	c EIN-PN 86-2530775-001
a	Plan name	THE ANIMAL CARE CENTER OF PASCO COUNTY, INC. 401(K) PLAN	
b	Name of plan sponsor	THE ANIMAL CARE CENTER OF PASCO COUNTRY, INC.	c EIN-PN 59-3153271-001
a	Plan name	THE ASHGROVE HOLDINGS 401K PLAN	
b	Name of plan sponsor	ASHGROVE HOLDINGS, LLC	c EIN-PN 13-4122483-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name	THE BROWARD ALLIANCE 401(K) PLAN
b	Name of plan sponsor	THE BROWARD ALLIANCE, INC.
c	EIN-PN	59-2697760-002
a	Plan name	THE CLUB AT ROLLING HILLS 401(K) PLAN
b	Name of plan sponsor	THE CLUB AT ROLLING HILLS
c	EIN-PN	84-0455272-001
a	Plan name	THE COMMONWEALTH CLUB 401(K) PLAN
b	Name of plan sponsor	THE COMMONWEALTH CLUB
c	EIN-PN	54-0178730-002
a	Plan name	THE FULL CIRCLE GROUP & THE LEADERSHIP CIRCLE 401(K) PLAN
b	Name of plan sponsor	CONSCIOUS LEADERSHIP, LLC
c	EIN-PN	46-4683521-001
a	Plan name	THE JAMES STREET GROUP 401(K) RETIREMENT PLAN
b	Name of plan sponsor	PLAINTIFF ADVISORY GROUP, LLC
c	EIN-PN	27-1151911-001
a	Plan name	THE LAWRENCE COMMUNITY MANAGEMENT GROUP, INC. 401(K) RETIREMENT PLAN
b	Name of plan sponsor	THE LAWRENCE COMMUNITY MANAGEMENT GROUP, INC.
c	EIN-PN	31-1504597-001
a	Plan name	THE LAWRENCE GROUP COMPANIES 401(K) PLAN
b	Name of plan sponsor	G. M. LAWRENCE & CO.
c	EIN-PN	46-4308986-001
a	Plan name	THE LIPSCOMB COMPANIES 401(K) PLAN
b	Name of plan sponsor	JAMES E LIPSCOMB & SONS INC
c	EIN-PN	63-0835715-001
a	Plan name	THE LITTLETON GROUP 401(K) PLAN
b	Name of plan sponsor	THE LITTLETON GROUP WESTERN DIVISION, INC.
c	EIN-PN	76-0154645-001
a	Plan name	THE NAFTALI GROUP LLC 401(K) PLAN
b	Name of plan sponsor	THE NAFTALI GROUP LLC
c	EIN-PN	45-1986983-001
a	Plan name	THE PATUXENT PARTNERSHIP 401(K) PLAN
b	Name of plan sponsor	THE PATUXENT PARTNERSHIP
c	EIN-PN	52-2056982-001
a	Plan name	THE RUSKIN MOSCOU FALTISCHEK, P.C. 401(K) RETIREMENT PLAN
b	Name of plan sponsor	RUSKIN MOSCOU FALTISCHEK, P.C.
c	EIN-PN	11-2301137-002

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 TELOS GROUP LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE TELOS GROUP LLC	c EIN-PN 45-4992583-001
a	Plan name THE WINDOW NATION 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor WINDOW NATION LLC	c EIN-PN 20-5084724-001
a	Plan name TIDWELL GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor TIDWELL GROUP, LLC	c EIN-PN 27-1490692-001
a	Plan name T-M VACUUM PRODUCTS, INC. 401(K) PLAN	
b	Name of plan sponsor T M VACUUM PRODUCTS, INC.	c EIN-PN 22-1772520-002
a	Plan name TOMAHAWK ENERGY INC 401(K) PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor TOMAHAWK ENERGY INC	c EIN-PN 58-2198682-001
a	Plan name TPS AVIATION, INC. 401(K) PLAN	
b	Name of plan sponsor TPS AVIATION, INC.	c EIN-PN 94-1702749-002
a	Plan name TRANSFORMATION HOSPITALITY SOL 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor TRANSFORMATION HOSPITALITY SOL	c EIN-PN 85-1645541-001
a	Plan name TRANS-TECH ENERGY, LLC 401(K) PLAN	
b	Name of plan sponsor TRANS-TECH ENERGY, LLC	c EIN-PN 46-1316128-001
a	Plan name TRINITY PAYMENT SOLUTIONS, LP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TRINITY PAYMENT SOLUTIONS, LP	c EIN-PN 83-3522540-001
a	Plan name TRIO SUPPLY CHAIN SOLUTIONS LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor TRIO SUPPLY CHAIN SOLUTIONS, LLC	c EIN-PN 46-1741870-001
a	Plan name TROJAN FLORIDA POWDER COATING CO., INC. 401(K) PLAN	
b	Name of plan sponsor TROJAN FLORIDA POWDER COATING CO., INC.	c EIN-PN 27-5205234-001
a	Plan name TROPIC FISH COMPANIES 401(K) PLAN	
b	Name of plan sponsor TROPIC FISH HAWAII, LLC	c EIN-PN 80-0146083-001

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 TSS 401(K) PLAN	
b	Name of plan sponsor TELECOMMUNICATION SUPPORT SERVICES, INC.	c EIN-PN 59-3068703-001
a	Plan name TVS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor THOMPSON VENTULETT STAINBACK & ASSOCIATES INC.	c EIN-PN 58-1274188-002
a	Plan name ULTRAMET 401(K) SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor ULTRAMET	c EIN-PN 95-2662293-001
a	Plan name UNIPRES ALABAMA 401(K) PLAN	
b	Name of plan sponsor UNIPRES ALABAMA, INC.	c EIN-PN 47-1278115-001
a	Plan name UNITED ROAD SERVICES, INC. EMPLOYEE'S 401(K) PLAN	
b	Name of plan sponsor UNITED ROAD SERVICE, INC.	c EIN-PN 94-3278455-001
a	Plan name UNIVERSITY MANAGEMENT, INC. EMPLOYEES PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor UNIVERSITY MANAGEMENT, INC.	c EIN-PN 64-0657688-001
a	Plan name USA ENVIRONMENTAL, INC 401K PLAN	
b	Name of plan sponsor USA ENVIRONMENTAL, INC.	c EIN-PN 59-3516898-001
a	Plan name VALLENCOURT CONSTRUCTION COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor VALLENCOURT CONSTRUCTION COMPANY, INC.	c EIN-PN 59-2469052-001
a	Plan name VALLEY SUPPLY, INC. 401(K) PLAN	
b	Name of plan sponsor VALLEY SUPPLY, INC.	c EIN-PN 25-1774604-003
a	Plan name VANGUARD HEALTHCARE STAFFING, LLC 401(K) PLAN	
b	Name of plan sponsor VANGUARD HEALTHCARE STAFFING, LLC	c EIN-PN 47-4425026-001
a	Plan name VANGUARD PACKAGING 401(K) PLAN	
b	Name of plan sponsor VANGUARD PACKAGING, LLC	c EIN-PN 43-1055764-001
a	Plan name VARIOSYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor VARIOSYSTEMS, INC.	c EIN-PN 75-2793709-001

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	VEITAS & VEITAS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	VEITAS & VEITAS ENGINEERS, INC.	c EIN-PN 30-0520385-001
a	Plan name	VIEJAS RETIREMENT PROGRAM	
b	Name of plan sponsor	THE VIEJAS BAND OF KUMEYAAY INDIANS	c EIN-PN 33-0409825-001
a	Plan name	VINCI CONSTRUCTION LLC 401(K) PLAN	
b	Name of plan sponsor	VINCI CONSTRUCTION LLC	c EIN-PN 83-4527023-001
a	Plan name	VISIONARY TECHNOLOGIES 401K PLAN	
b	Name of plan sponsor	VISIONARY TECHNOLOGIES	c EIN-PN 26-2708292-001
a	Plan name	VISPERO 401(K) PLAN	
b	Name of plan sponsor	FREEDOM SCIENTIFIC, INC.	c EIN-PN 33-0871664-001
a	Plan name	W.A. O'LEARY & SONS, INC 401(K) PLAN	
b	Name of plan sponsor	W.A. OLEARY & SONS, INC	c EIN-PN 26-1761759-001
a	Plan name	WALKERHUGHES GROUP LLC RETIREMENT PLAN	
b	Name of plan sponsor	WALKERHUGHES GROUP LLC	c EIN-PN 82-3375914-001
a	Plan name	WATSONRICE LLP 401(K) PLAN	
b	Name of plan sponsor	WATSONRICE LLP	c EIN-PN 26-1726741-001
a	Plan name	WBDC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	WOMENS BUSINESS DEVELOPMENT COUNCI	c EIN-PN 06-1493737-001
a	Plan name	WEAVERS WAY COOPERATIVE ASSOCIATION, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WEAVERS WAY COOPERATIVE ASSOCIATION	c EIN-PN 23-1887890-001
a	Plan name	WEIS BUILDERS, INC. PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	WEIS BUILDERS, INC.	c EIN-PN 41-0834779-001
a	Plan name	WENTWOOD COMPANIES 401(K) PLAN	
b	Name of plan sponsor	WENTWOOD COMPANIES, INC.	c EIN-PN 83-2138839-001

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	WESTERN HEAVY HAUL, INC. RETIREMENT PLAN	
b	Name of plan sponsor	WESTERN HEAVY HAUL, INC.	c EIN-PN 48-1302875-001
a	Plan name	WESTERWOOD GLOBAL USA CORPORATION 401(K) PLAN	
b	Name of plan sponsor	WESTERWOOD GLOBAL USA CORPORATION	c EIN-PN 80-0905560-001
a	Plan name	WHITE CUP 401(K) PLAN	
b	Name of plan sponsor	WHITE CUP, INC.	c EIN-PN 43-1956167-001
a	Plan name	WHITE SURVEYING COMPANY 401(K) PLAN	
b	Name of plan sponsor	WHITE SURVEYING COMPANY	c EIN-PN 73-0980314-002
a	Plan name	WILLAMETTE VALLEY BANK 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WILLAMETTE VALLEY BANK	c EIN-PN 93-1277376-001
a	Plan name	WILLIAM A. GEPPERT, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	WM. A. GEPPERT, INC.	c EIN-PN 23-0619730-001
a	Plan name	WILSON CREEK WINERY 401 (K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WILSON CREEK WINERY	c EIN-PN 90-0210427-002
a	Plan name	WILSONHCG, INC. 401K PLAN	
b	Name of plan sponsor	WILSONHCG, INC.	c EIN-PN 05-0537889-001
a	Plan name	WOMEN'S PAVILION MEDICAL GROUP, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WOMENS PAVILION MEDICAL GROUP, INC.	c EIN-PN 80-0552953-002
a	Plan name	WRIGHT MANUFACTURING, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	WRIGHT MANUFACTURING, INC.	c EIN-PN 52-1369930-002
a	Plan name	YAQUINA SANITARY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	YAQUINA SANITARY, INC.	c EIN-PN 93-0815501-001
a	Plan name		
b	Name of plan sponsor		c EIN-PN

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
--	--	--

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 11/07/2024	
A Name of plan INDEXSELECT AGGRESSIVE 2025 FUND	B Three-digit plan number (PN) ▶ 301
C Plan sponsor's name as shown on line 2a of Form 5500 GREAT GRAY TRUST COMPANY, LLC	D Employer Identification Number (EIN) 81-4386547

Part I	Asset and Liability Statement
---------------	--------------------------------------

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
Assets			
a Total noninterest-bearing cash	1a	1	1
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	3261436	137679234
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	114142683	0
(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)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	117404120	137679235
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h	0	22732
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	3299403	137656503
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	3299403	137679235
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	114104717	0

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)		
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		0
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(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)		0
(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)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		13571490
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		13571490

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		0
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	5497	
(5) Investment advisory and investment management fees	2i(5)	98904	
(6) Bank or trust company trustee/custodial fees	2i(6)	39980	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		144381
j Total expenses. Add all expense amounts in column (b) and enter total	2j		144381

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		13427109
l Transfers of assets:			
(1) To this plan	2l(1)		64511700
(2) From this plan	2l(2)		192043526

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 _____.