

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Part I Annual Report Identification Information

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan: FLEXPATH INDEX AGGRESSIVE 2035 FUND; 1b Three-digit plan number (PN): 216; 1c Effective date of plan; 2a Plan sponsor's name: GREAT GRAY TRUST COMPANY, LLC; 2b Employer Identification Number (EIN): 47-2468898; 2c Plan Sponsor's telephone number: 866-427-6885; 2d Business code

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

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

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

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

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

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning <u>01/01/2024</u> and ending <u>12/31/2024</u>	
A Name of plan <u>FLEXPATH INDEX AGGRESSIVE 2035 FUND</u>	B Three-digit plan number (PN) ▶ <u>216</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>47-2468898</u>

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>LIFEPATH INDEX 2045 F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>20-5115008-001</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>229229226</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>LIFEPATH INDEX 2040 F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>71-0986419-001</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>126330301</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
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a Name of MTIA, CCT, PSA, or 103-12 IE:

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

c EIN-PN

d Entity code

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

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

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d Entity code

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

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d Entity code

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

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

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d Entity code

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

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	1ST CHOICE ROOFING COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	1ST CHOICE ROOFING COMPANY	c EIN-PN 11-3793690-001
a	Plan name	401(K) PLAN FOR SALARIED AND CLERICAL EMPLOYEES OF WATTEREDGE, LLC	
b	Name of plan sponsor	WATTEREDGE, LLC	c EIN-PN 35-2446090-001
a	Plan name	A BETTER 401K PLAN	
b	Name of plan sponsor	PENTEGRA SERVICES, INC.	c EIN-PN 13-5645888-002
a	Plan name	A.H. DAVENPORT LLC 401K PLAN	
b	Name of plan sponsor	AH DAVENPORT LLC	c EIN-PN 92-1164904-001
a	Plan name	ACBM LLC 401(K) PLAN	
b	Name of plan sponsor	ACBM LLC	c EIN-PN 83-1560826-001
a	Plan name	ACTION TRUCK CENTER, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	ACTION TRUCK CENTER, INC.	c EIN-PN 63-0706409-001
a	Plan name	ACTIVE MOTIF 401(K) PLAN	
b	Name of plan sponsor	ACTIVE MOTIF, INC.	c EIN-PN 33-0858864-001
a	Plan name	ADAMS BEVERAGES, INC. 401(K) PLAN	
b	Name of plan sponsor	ADAMS BEVERAGES, INC.	c EIN-PN 63-0733351-001
a	Plan name	ADARE PHARMACEUTICALS, INC. 401(K) PLAN	
b	Name of plan sponsor	ADARE PHARMACEUTICALS, INC.	c EIN-PN 31-0988732-003
a	Plan name	ADSTRA, INC.EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor	ADSTRA, INC	c EIN-PN 22-2223741-003
a	Plan name	ADVANCED DATA SYSTEMS CORP 401K PLAN	
b	Name of plan sponsor	ADVANCED DATA SYSTEMS CORPORATION	c EIN-PN 22-3841212-001
a	Plan name	ADVANCED ENVIRONMENTAL MONITORING 401(K) PLAN	
b	Name of plan sponsor	AEM COMMERCIAL, INC.	c EIN-PN 87-3869330-001

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	ADVANCED PAIN CARE 401K PROFIT SHARING	
b	Name of plan sponsor	ADVANCED PAIN CARE	c EIN-PN 33-1043094-001
a	Plan name	ADVANTAGE 401K POOLED EMPLOYER PLAN	
b	Name of plan sponsor	INTERNATIONAL WEST INC	c EIN-PN 33-0107488-007
a	Plan name	AGE SOLUTIONS 401K PLAN	
b	Name of plan sponsor	AGE SOLUTIONS LLC	c EIN-PN 86-2292784-001
a	Plan name	AKRS EQUIPMENT SOLUTIONS INC. 401K PLAN	
b	Name of plan sponsor	AKRS EQUIPMENT SOLUTIONS INC.	c EIN-PN 27-0619457-001
a	Plan name	ALLIANCE FOR AUTOMOTIVE INNOVATION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	ALLIANCE FOR AUTOMOTIVE INNOVATION	c EIN-PN 52-2143968-001
a	Plan name	ALLIANCE SOLUTIONS GROUP LLC POWERED BY TALENTLAUNCH 401(K) PLAN	
b	Name of plan sponsor	ALLIANCE SOLUTIONS GROUP LLC	c EIN-PN 45-4014987-001
a	Plan name	ALLIED MINERAL PRODUCTS 401(K) PLAN	
b	Name of plan sponsor	ALLIED MINERAL PRODUCTS HOLDING, INC.	c EIN-PN 84-3394646-004
a	Plan name	ALTSOURCE 401(K) PLAN	
b	Name of plan sponsor	ALTSOURCE, INC	c EIN-PN 20-2230526-001
a	Plan name	AMERICAN CONSOLIDATED INDUSTRIES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	AMERICAN CONSOLIDATED INDUSTRIES, INC.	c EIN-PN 34-1600691-001
a	Plan name	AMERICOLD LOGISTICS EMPLOYEE SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor	AMERICOLD LOGISTICS EMPLOYEE SAVINGS AND INVEST	c EIN-PN 22-3631006-014
a	Plan name	AMIVERO 401K PLAN	
b	Name of plan sponsor	AMIVERO LLC	c EIN-PN 83-1678875-001
a	Plan name	MILLS IP LAW, PLLC 401K PLAN	
b	Name of plan sponsor	AMBROSE, MILLS & LAZAROW, PLLC	c EIN-PN 88-4011802-001

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	AML RIGHTSOURCE, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	AML RIGHTSOURCE, LLC	c EIN-PN 20-1996855-001
a	Plan name	AMPC LLC 401K RETIREMENT PLAN	
b	Name of plan sponsor	AMPC LLC DBA PROLIANT-APC-BOYER VALLEY CO.-ENTER	c EIN-PN 42-1160181-001
a	Plan name	AMS GROUP 401K PLAN	
b	Name of plan sponsor	AMS GROUP INC	c EIN-PN 45-2981735-001
a	Plan name	ANCORA - MEP	
b	Name of plan sponsor	ANCORA HOLDINGS GROUP, LLC	c EIN-PN 87-2417854-001
a	Plan name	ANDERSON & HOWARD ELECTRIC, INC. 401(K) PLAN	
b	Name of plan sponsor	ANDERSON & HOWARD ELECTRIC, INC.	c EIN-PN 95-2497870-002
a	Plan name	APPARENT LLC AE OF THE RETIREMENT SUCCESS SAVINGS PLAN	
b	Name of plan sponsor	APPARENT LLC	c EIN-PN 92-1325608-873
a	Plan name	AEGEUS 401(K) PLAN	
b	Name of plan sponsor	AEGEUS MANAGEMENT SERVICES, INC.	c EIN-PN 47-5368326-002
a	Plan name	ARAGRA 401(K) PLAN	
b	Name of plan sponsor	ARAGRA TECHNOLOGIES CORPORATION	c EIN-PN 46-2793780-001
a	Plan name	ARCHITECTURAL FLOORS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ARCHITECTURAL FLOORS	c EIN-PN 75-2680510-001
a	Plan name	ARCTURUS HEALTHCARE PLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ARCTURUS HEALTHCARE PLC	c EIN-PN 46-2854201-003
a	Plan name	ARDMORE FRESH AIR 401K PLAN	
b	Name of plan sponsor	ARDMORE FRESH AIR INC	c EIN-PN 75-3198007-001
a	Plan name	ARPELLINI EXPRESS LINES, INC. AND SUBSIDIARIES PROFIT SHARING PLAN	
b	Name of plan sponsor	ARPELLINI EXPRESS LINES, INC.	c EIN-PN 23-1615254-001

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 ARMOR EXPRESS 401(K) PLAN	
b	Name of plan sponsor CENTRAL LAKE ARMOR EXPRESS INC	c EIN-PN 20-2901741-001
a	Plan name ARNEL DEVELOPMENT COMPANY SAVINGS INCENTIVE PLAN	
b	Name of plan sponsor ARNEL DEVELOPMENT COMPANY	c EIN-PN 95-2553658-001
a	Plan name ARRAY TECH, INC. 401(K) PLAN	
b	Name of plan sponsor ARRAY TECH, INC.	c EIN-PN 85-0402479-001
a	Plan name ARTEMIS SURGICAL 401K PLAN	
b	Name of plan sponsor LIGHTBODY MEDICAL TECHNOLOGIES INC	c EIN-PN 93-4024145-001
a	Plan name ASCENT RESOURCES MANAGEMENT SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor ASCENT RESOURCES MANAGEMENT SERVICES, LLC	c EIN-PN 61-1855879-001
a	Plan name ASPEN INSURANCE U.S. SERVICES INC. 401(K) PLAN	
b	Name of plan sponsor ASPEN INSURANCE U.S. SERVICES INC.	c EIN-PN 32-0085193-001
a	Plan name ASSOCIATION OF FUNDRAISING PRO 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor ASSOCIATION OF FUNDRAISING PRO	c EIN-PN 13-2590764-002
a	Plan name ASSURANCEAMERICA CORPORATION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor ASSURANCEAMERICA CORPORATION	c EIN-PN 87-0281240-001
a	Plan name ASTRIX TECHNOLOGY, LLC 401(K) PLAN	
b	Name of plan sponsor ASTRIX TECHNOLOGY, LLC	c EIN-PN 22-3390159-001
a	Plan name ATACO STEEL PRODUCTS CORPORATION NON UNION 401(K) PROFIT SHARING P	
b	Name of plan sponsor ATACO STEEL PRODUCTS CORPORATION	c EIN-PN 39-0748224-002
a	Plan name ATLAS TECHNICAL CONSULTANTS 401K PLAN	
b	Name of plan sponsor ATLAS TECHNICAL CONSULTANTS LLC	c EIN-PN 82-2810953-001
a	Plan name AUTOMEPP OPEN MULTIPLE EMPLOYER 401(K) PLAN	
b	Name of plan sponsor AMI BENEFIT PLAN ADMINISTRATORS, IN	c EIN-PN 34-1781113-002

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	AVAAP USA, LLC 401K	
b	Name of plan sponsor	AVAAP USA, LLC	c EIN-PN 26-2647108-001
a	Plan name	AVAILITY, L.L.C. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	AVAILITY, L.L.C.	c EIN-PN 59-3715944-001
a	Plan name	AXXELLA STAFFING 401(K) PLAN	
b	Name of plan sponsor	AXXELLA STAFFING	c EIN-PN 83-4341802-001
a	Plan name	B & V MECHANICAL, INC. 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	B & V MECHANICAL, INC.	c EIN-PN 38-2562518-001
a	Plan name	BADGERLAND OVERHEAD DOOR, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BADGERLAND OVERHEAD DOOR, LLC	c EIN-PN 20-3278269-001
a	Plan name	BARRINGTON CHEMICAL CORPORATION 401K	
b	Name of plan sponsor	BARRINGTON CHEMICAL CORPORATION	c EIN-PN 13-3607795-001
a	Plan name	BEAUTY BY IMAGINATION 401(K) PLAN	
b	Name of plan sponsor	J & D BRUSH ASSOCIATES, LLC	c EIN-PN 82-0640629-001
a	Plan name	BEGGARS PIZZA RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	MANDY ENTERPRISES INC	c EIN-PN 37-1440863-001
a	Plan name	BELLOTA AGRISOLUTIONS & TOOLS USA	
b	Name of plan sponsor	BELLOTA AGRISOLUTIONS & TOOLS USA LLC 401K	c EIN-PN 75-3267235-001
a	Plan name	BENJAMIN OFFICE SUPPLY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BENJAMIN OFFICE SUPPLY, INC.	c EIN-PN 52-1213158-001
a	Plan name	BERNSTEIN MANAGEMENT CORPORATION	
b	Name of plan sponsor	BERNSTEIN MANAGEMENT CORPORATION	c EIN-PN 52-1851812-001
a	Plan name	BERRYMAN TRANSFER & STORAGE CO 401(K) PLAN	
b	Name of plan sponsor	BERRYMAN TRANSFER & STORAGE CO	c EIN-PN 84-3250814-001

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 BINGHAM COMPANIES PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor BINGHAM EQUIPMENT COMPANY	c EIN-PN 86-0139051-001
a	Plan name BIRMINGHAM HEART CLINIC, P.C. PROFIT SHARING PLAN	
b	Name of plan sponsor BIRMINGHAM HEART CLINIC, P.C.	c EIN-PN 63-1119002-001
a	Plan name BLUE STAR GAS ASSOCIATES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GARBERVILLE GAS CORPORATION	c EIN-PN 94-1113690-001
a	Plan name BOB BELL AUTOMOTIVE GROUP 401(K) PLAN AND TRUST	
b	Name of plan sponsor BOB BELL AUTOMOTIVE GROUP	c EIN-PN 52-1707084-001
a	Plan name BOOTS RETAIL USA, INC. 401(K) PLAN	
b	Name of plan sponsor BOOTS RETAIL USA, INC.	c EIN-PN 02-0613669-002
a	Plan name BOWMAN ANDROS PRODUCTS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BOWMAN ANDROS PRODUCTS, LLC	c EIN-PN 90-0683816-001
a	Plan name BRECKENRIDGE PHARMACEUTICAL, INC. 401(K) PLAN	
b	Name of plan sponsor BRECKENRIDGE PHARMACEUTICAL, INC.	c EIN-PN 65-0352825-001
a	Plan name BREMBO NORTH AMERICA, INC. EMPLOYEES' 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor BREMBO NORTH AMERICA, INC.	c EIN-PN 95-4190804-001
a	Plan name BRIJAY AUTOMOTIVE GROUP INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor BRIJAY AUTOMOTIVE GROUP INC	c EIN-PN 26-2868224-001
a	Plan name BRYAN L. HEY BUILDER, INC. 401(K) PLAN	
b	Name of plan sponsor BRYAN L. HEY BUILDER, INC.	c EIN-PN 25-1830568-001
a	Plan name BT U.S. RETIREMENT SAVINGS PLAN 401(K)	
b	Name of plan sponsor BT AMERICAS	c EIN-PN 20-2458368-002
a	Plan name BUILD TO SUIT, INC. 401(K) PLAN	
b	Name of plan sponsor BUILD TO SUIT, INC.	c EIN-PN 75-3024913-001

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	BUSCH'S INC. 401(K) PLAN	
b	Name of plan sponsor	BUSCHS, INC.	c EIN-PN 38-2075818-002
a	Plan name	BUTLER BALANCING CO INC 401K	
b	Name of plan sponsor	BUTLER BALANCING CO INC 401K	c EIN-PN 23-2657938-001
a	Plan name	ANCORA - MEP	
b	Name of plan sponsor	CANTERBURY CAPITAL, LLC	c EIN-PN 47-5207696-001
a	Plan name	CARDIOVASCULAR INSTITUTE OF THE SOUTH 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CARDIOVASCULAR INSTITUTE OF THE SOUTH	c EIN-PN 72-0993441-001
a	Plan name	CARRIX, INC. RETIREMENT PLAN	
b	Name of plan sponsor	CARRIX, INC.	c EIN-PN 91-1653735-002
a	Plan name	CARRUBBA INCORPORATED DEFINED	
b	Name of plan sponsor	CARRUBBA INC	c EIN-PN 06-1021215-001
a	Plan name	CASH PROCESSING SOLUTIONS 401(K)	
b	Name of plan sponsor	CASH PROCESSING SOLUTIONS	c EIN-PN 11-2003579-001
a	Plan name	CATANESE CLASSICS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	CATANESE CLASSIC SEAFOODS, INC.	c EIN-PN 20-0970134-001
a	Plan name	CENTRIC HEALTH 401(K) PLAN	
b	Name of plan sponsor	CENTRIC HEALTH	c EIN-PN 95-3511288-002
a	Plan name	CFP 401K PLAN	
b	Name of plan sponsor	COOKE FAMILY PROVISIONS INC	c EIN-PN 84-3865313-001
a	Plan name	CGRS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CGRS, INC.	c EIN-PN 84-1061813-001
a	Plan name	CHERRY CREEK INSURANCE AGENCY, INC. 401(K) PLAN	
b	Name of plan sponsor	CHERRY CREEK INSURANCE AGENCY, INC.	c EIN-PN 84-1040215-001

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 CHICAGO FLUID SYSTEM TECH 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor CHICAGO FLUID SYSTEM TECH	c EIN-PN 36-4393921-001
a	Plan name CHIMERA INVESTORS LLC 401(K) PLAN	
b	Name of plan sponsor CHIMERA INVESTORS LLC	c EIN-PN 45-5617158-001
a	Plan name CHINA UNICOM AMERICAS OPERATIONS, LTD 401(K) PROFIT SH	
b	Name of plan sponsor CHINA UNICOM AMERICAS OPERATIONS	c EIN-PN 72-1562925-001
a	Plan name CHOATE CONSTRUCTION COMPANY PROFIT SHARING PLAN	
b	Name of plan sponsor CHOATE CONSTRUCTION COMPANY	c EIN-PN 58-1851823-001
a	Plan name CHURNZERO 401(K) PLAN	
b	Name of plan sponsor CHURNZERO, INC	c EIN-PN 47-4149122-001
a	Plan name CIRATA 401(K) RETIREMENT PLAN	
b	Name of plan sponsor CIRATA, INC.	c EIN-PN 20-3515984-002
a	Plan name CIRCLE M	
b	Name of plan sponsor CIRCLE M CONTRACTORS, INC.	c EIN-PN 27-3664871-001
a	Plan name CITS INC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor THE CHILDREN IN THE SHOE, INC	c EIN-PN 52-1716319-001
a	Plan name CITY OF HURST 457B DEFERRED COMPENSATION	
b	Name of plan sponsor CITY OF HURST TX	c EIN-PN 75-6004020-001
a	Plan name CLEAN AIR PRODUCTS 401K PSP	
b	Name of plan sponsor CLEAN AIR PRODUCTS	c EIN-PN 41-1376389-002
a	Plan name CLEARONE ADVANTAGE, LLC	
b	Name of plan sponsor CLEARONE ADVANTAGE, LLC	c EIN-PN 26-3315163-001
a	Plan name CLICK BOARDING, LLC 401(K) PLAN	
b	Name of plan sponsor CLICK BOARDING, LLC	c EIN-PN 46-1355000-001

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	CMA CGM (AMERICA) LLC 401(K) PLAN	
b	Name of plan sponsor	CMA CGM (AMERICA) LLC	c EIN-PN 22-3522528-001
a	Plan name	CMF OPERATING COMPANY LLC 401K PLAN	
b	Name of plan sponsor	CMF OPERATING COMPANY LLC	c EIN-PN 27-0753380-001
a	Plan name	COMBINED PROPERTIES, INCORPORATED 401(K) PLAN	
b	Name of plan sponsor	COMBINED PROPERTIES, INCORPORATED	c EIN-PN 52-1372133-001
a	Plan name	COM-CORP. INDUSTRIES, INC. EMPLOYEES SAVINGS PLAN AND TRUST	
b	Name of plan sponsor	COM-CORP. INDUSTRIES, INC.	c EIN-PN 31-1314332-001
a	Plan name	COMMON CAUSE EDUCATION FUND 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	COMMON CAUSE EDUCATION FUND	c EIN-PN 31-1705370-001
a	Plan name	COMPREHENSIVE ENGINEERING 401(K) RETIREMENT SAVINGS PLAN & TRUST	
b	Name of plan sponsor	COMPREHENSIVE ENGINEERING PC	c EIN-PN 38-3110758-001
a	Plan name	COMTEC MFG., LLC	
b	Name of plan sponsor	DONNA WENDEL	c EIN-PN 88-2927458-007
a	Plan name	CONNECTICUT HEATING & COOLING CONTRACTORS ASSOCIATION RETIREMENT PLAN	
b	Name of plan sponsor	CONNECTICUT HEATING & COOLING CONTRACTORS ASSOCIATION, INC.	c EIN-PN 23-7323973-001
a	Plan name	CONSOLIDATED ENGINEERING LABORATORIES	
b	Name of plan sponsor	CONSOLIDATED ENGINEERING LAB	c EIN-PN 94-2988193-002
a	Plan name	CONSTRUCTION RESOURCES, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CONSTRUCTION RESOURCES, LLC	c EIN-PN 06-1174353-001
a	Plan name	CORELL CONTRACTOR, INC. 401(K) PLAN	
b	Name of plan sponsor	CORELL CONTRACTOR, INC.	c EIN-PN 42-1294898-001
a	Plan name	COSETTE PHARMACEUTICALS, INC. 401(K) PLAN	
b	Name of plan sponsor	COSETTE PHARMACEUTICALS, INC.	c EIN-PN 83-2305806-001

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 COSTAFF 401K PLAN	
b	Name of plan sponsor COSTAFF SERVICES LLC	c EIN-PN 38-3546978-002
a	Plan name COVENANT CARE 401(K) PLAN	
b	Name of plan sponsor COVENANT CARE CALIFORNIA, LLC	c EIN-PN 33-0631540-001
a	Plan name CPG BEYOND, INC. 401(K) PLAN	
b	Name of plan sponsor CPG BEYOND, INC.	c EIN-PN 90-0855545-001
a	Plan name CRESCENT CAPITAL GROUP LP 401(K) PLAN	
b	Name of plan sponsor CRESCENT CAPITAL GROUP LP	c EIN-PN 27-2698206-001
a	Plan name CUMBERLAND FINANCIAL GROUP, INC 401K PLAN	
b	Name of plan sponsor CUMBERLAND FINANCIAL GROUP, INC	c EIN-PN 58-2087124-001
a	Plan name CWS SAVINGS PLAN (401(K))	
b	Name of plan sponsor CWS CAPITAL PARTNERS LLC	c EIN-PN 33-0787121-003
a	Plan name DAKOTA SOFTWARE CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DAKOTA SOFTWARE CORPORATION	c EIN-PN 16-1444228-001
a	Plan name DARAG US SERVICES COMPANY 41(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DARAG US SERVICES COMPANY	c EIN-PN 47-3443751-001
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 DEV TECHNOLOGY GROUP - 401K P/S PLAN	
b	Name of plan sponsor DEV TECHNOLOGY GROUP INC	c EIN-PN 52-2110007-001
a	Plan name DIAMOND METALS DISTRIBUTION, LLC 401K PLAN	
b	Name of plan sponsor DIAMOND METALS DISTRIBUTION, LLC	c EIN-PN 82-3633397-001
a	Plan name DISTRICT PHOTO, INC. 401(K) PLAN	
b	Name of plan sponsor DISTRICT PHOTO, INC.	c EIN-PN 52-1191617-001

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	DIVENTURES HOLDINGS LLC 401(K) PROFIT SHARING PLAN & TRUST
b	Name of plan sponsor	DIVENTURES HOLDINGS LLC
c	EIN-PN	27-4512503-001
a	Plan name	DIVERSITEC LLC 401(K) SAVINGS PLAN
b	Name of plan sponsor	DIVERSITEC LLC
c	EIN-PN	75-3046086-001
a	Plan name	DRT STRATEGIES INC 401K PROFIT SHARING PLAN AND TRUST
b	Name of plan sponsor	DRT STRATEGIES INC
c	EIN-PN	20-0526356-001
a	Plan name	DWA MANAGEMENT, LLC 401(K) PLAN
b	Name of plan sponsor	DWA MANAGEMENT, LLC
c	EIN-PN	46-3627105-001
a	Plan name	DYNAMIC SERVICE SOLUTIONS 401(K) PLAN
b	Name of plan sponsor	DYNAMIC SERVICE SOLUTIONS, LLC
c	EIN-PN	80-0625178-001
a	Plan name	E.S. WAGNER COMPANY PSP AND TRUST
b	Name of plan sponsor	ES WAGNER COMPANY
c	EIN-PN	34-0907180-002
a	Plan name	EAGLEBANK 401(K) PLAN
b	Name of plan sponsor	EAGLEBANK
c	EIN-PN	52-2099123-001
a	Plan name	EASTERN DIVERSIFIED SERVICES, INC. 401(K) PLAN
b	Name of plan sponsor	EASTERN DIVERSIFIED SERVICES, INC.
c	EIN-PN	23-2513103-001
a	Plan name	EASTERSEALS OF SOUTHEASTERN PENNSYLVANIA DEFINED CONTRIBUTION & 401(K) PLAN
b	Name of plan sponsor	EASTERSEALS OF SOUTHEASTERN PENNSYLVANIA
c	EIN-PN	23-1352293-003
a	Plan name	EDGE RESEARCH 401(K) PLAN
b	Name of plan sponsor	EDGE RESEARCH, INC.
c	EIN-PN	54-1839444-001
a	Plan name	EDOPS 401K P/S PLAN
b	Name of plan sponsor	EDUCATION BUSINESS SOLUTIONS INC
c	EIN-PN	27-1263534-001
a	Plan name	ELECTRIC MOTOR SALES & SERVICE, INC., 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	ELECTRIC MOTOR SALES & SERVICE, INC.
c	EIN-PN	64-0508039-001

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 ELIPSIS ENGINEERING & CONSULTING, LLC RETIREMENT PLAN	
b	Name of plan sponsor ELIPSIS ENGINEERING & CONSULTING, LLC	c EIN-PN 26-4284102-001
a	Plan name ELITE CASINO RESORTS 401(K) PLAN	
b	Name of plan sponsor ELITE CASINO RESORTS 401(K) PLAN	c EIN-PN 47-3722526-001
a	Plan name EMERGING MARKET SEPARATE ACCOUNT	
b	Name of plan sponsor EMERGING MARKET SEPARATE ACCOUNT	c EIN-PN 46-3943208-001
a	Plan name ENEVATE CORPORATION RETIREMENT PLAN	
b	Name of plan sponsor ENEVATE CORPORATION	c EIN-PN 26-2361179-002
a	Plan name ENNVEE TECHNOGROUP, INC. 401(K) PLAN	
b	Name of plan sponsor ENNVEE TECHNOGROUP, INC.	c EIN-PN 30-0050677-001
a	Plan name ENSEMBLE RETIREMENT SAVINGS PLAN 401(K)	
b	Name of plan sponsor ENSEMBLE HEALTH PARTNERS HOLDINGS, LLC	c EIN-PN 84-2528019-021
a	Plan name ENVIROTECH SERVICES, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor ENVIROTECH SERVICES, INC.	c EIN-PN 84-1102950-001
a	Plan name EPAM SYSTEMS INC. 401K PLAN	
b	Name of plan sponsor EPAM SYSTEMS INC	c EIN-PN 22-3536104-001
a	Plan name ESTATE ADMINISTRATIVE SERVICES LLC	
b	Name of plan sponsor ESTATE ADMINISTRATIVE SERVICES LLC	c EIN-PN 99-0350528-001
a	Plan name EVERZINC 401(K)	
b	Name of plan sponsor EVERZINC CORPORATION	c EIN-PN 76-0264925-001
a	Plan name EXCEL SALON PRODUCTS, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor EXCEL SALON PRODUCTS, INC.	c EIN-PN 38-2043740-002
a	Plan name EXPLORER PIPELINE COMPANY RETIREMENT PLAN	
b	Name of plan sponsor EXPLORER PIPELINE COMPANY	c EIN-PN 73-0785982-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	FALCON GROUP AMERICAS 401(K) PLAN	
b	Name of plan sponsor	FALCON GROUP AMERICAS CORPORATION	c EIN-PN 85-1236075-001
a	Plan name	FARMBANK 401K PLAN	
b	Name of plan sponsor	FARMBANK	c EIN-PN 44-0502072-002
a	Plan name	FARSOUND 401K PLAN	
b	Name of plan sponsor	FARSOUND AVIATION INC	c EIN-PN 92-2658942-001
a	Plan name	FARWELL PROJECT ADVISORS, LLC 401(K) PS PLAN	
b	Name of plan sponsor	FARWELL PROJECT ADVISORS, LLC	c EIN-PN 46-2604294-001
a	Plan name	FEDERATED WIRELESS, INC. 401(K) PLAN	
b	Name of plan sponsor	FEDERATED WIRELESS, INC.	c EIN-PN 46-5077072-001
a	Plan name	FELLING TRAILERS, INC. 401K PLAN	
b	Name of plan sponsor	FELLING TRAILERS INC.	c EIN-PN 41-1329390-001
a	Plan name	FIRST LIBERTY BANK SAVINGS INCENTIVE PLAN	
b	Name of plan sponsor	FIRST LIBERTY BANK	c EIN-PN 73-0351620-001
a	Plan name	FLEETWOOD - FIBRE PACKAGING & GRAPHICS, INC. RETIREMENT SAVINGS AND PROFIT SHARING PLAN	
b	Name of plan sponsor	FLEETWOOD - FIBRE PACKAGING & GRAPHICS, INC.	c EIN-PN 82-1709584-002
a	Plan name	FLEXPATH SERVICES RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	FLEXPATH SERVICES INC.	c EIN-PN 93-3133157-001
a	Plan name	FORE AERO HOLDINGS SAFE HARBOR 401(K) PLAN	
b	Name of plan sponsor	FORE AERO HOLDINGS, LLC	c EIN-PN 81-5122671-001
a	Plan name	FORT MYER CONSTRUCTION CORPORATION 401(K) PLAN	
b	Name of plan sponsor	FORT MYER CONSTRUCTION CORPORATION 401(K) PLAN	c EIN-PN 54-0956585-002
a	Plan name	FRAGALE BUILDING CORPORATION 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	FRAGALE BUILDING CORP	c EIN-PN 04-3167292-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	FRANK LIQUOR COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	FRANK LIQUOR COMPANY, INC.	c EIN-PN 39-0961308-001
a	Plan name	FRANK N. MAGID ASSOCIATES, INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	FRANK N. MAGID ASSOCIATES, INC.	c EIN-PN 42-0894975-001
a	Plan name	FTS 401K PLAN	
b	Name of plan sponsor	FEDERAL TECHNOLOGY SYSTEMS LLC	c EIN-PN 45-2880281-001
a	Plan name	G&W LABORATORIES INC. RETIREMENT PLAN	
b	Name of plan sponsor	G & W LABORATORIES, INC.	c EIN-PN 22-1530141-001
a	Plan name	GATEWAY TERMINALS 401(K) PLAN	
b	Name of plan sponsor	GATEWAY TERMINALS LLC	c EIN-PN 58-2179291-001
a	Plan name	GBS EMPLOYEE 401K	
b	Name of plan sponsor	GENERAL BUSINESS SERVICES, INC	c EIN-PN 92-1118773-002
a	Plan name	GEOFORCE INC. 401K PLAN	
b	Name of plan sponsor	GEOFORCE INC	c EIN-PN 20-8211736-001
a	Plan name	GERBER CIANO KELLY BRADY LLP 401(K) PLAN	
b	Name of plan sponsor	GERBER CIANO KELLY BRADY LLP	c EIN-PN 82-3488440-001
a	Plan name	GETMAN CORPORATION 401K SAVINGS PLAN	
b	Name of plan sponsor	GETMAN CORPORATION	c EIN-PN 38-1957870-001
a	Plan name	GLENN MACHINE WORKS, INC. 401(K) PLAN	
b	Name of plan sponsor	GLENN MACHINE WORKS, INC.	c EIN-PN 64-0470007-001
a	Plan name	GOLDEN ALUMINUM, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	GOLDEN ALUMINUM, INC.	c EIN-PN 76-0589072-001
a	Plan name	GOLDEN RETIREMENT PLAN	
b	Name of plan sponsor	TRG FIDUCIARY SERVICES LLC	c EIN-PN 87-2825570-010

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 GPD GROUP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor GLAUS, PYLE, SCHOMER, BURNS & DEHAVEN, INC.	c EIN-PN 34-1134715-003
a	Plan name GRAY REED CASH BALANCE PLAN	
b	Name of plan sponsor GRAY REED & MCGRAW LLP	c EIN-PN 81-4045088-003
a	Plan name GREAT LAKES AQUARIUM 401(K) PLAN	
b	Name of plan sponsor GREAT LAKES AQUARIUM	c EIN-PN 41-1659809-001
a	Plan name GREEN VALLEY DAIRY 401(K) PLAN	
b	Name of plan sponsor GREEN VALLEY DAIRY, LLC	c EIN-PN 39-1970472-001
a	Plan name GREENBELT HOMES INC. 401K PROFIT SHARING	
b	Name of plan sponsor GREENBELT HOMES INC	c EIN-PN 52-0625535-001
a	Plan name GROUP PLAN SYSTEMS PEP WITH JULY	
b	Name of plan sponsor GROUP PLAN SYSTEMS LLC	c EIN-PN 88-3548471-001
a	Plan name H & H SALES, INC. 401(K) PLAN	
b	Name of plan sponsor H & H SALES, INC.	c EIN-PN 42-1309803-001
a	Plan name H2OCEAN, INC. DEFINED BENEFIT PENSION PLAN AND TRUST AGREEMENT	
b	Name of plan sponsor H2OCEAN, LLC	c EIN-PN 01-0605608-001
a	Plan name HANCOCK WHITNEY CORPORATION 401(K) SAVINGS PLAN AND TRUST	
b	Name of plan sponsor HANCOCK WHITNEY CORPORATION	c EIN-PN 64-0693170-003
a	Plan name HASTINGS WATER WORKS, INC. 401K RETIREMENT PLAN	
b	Name of plan sponsor HASTINGS WATER WORKS, INC.	c EIN-PN 34-1712822-001
a	Plan name HEALTHPEAK PROPERTIES, INC.401(K) RETIREMENT PLAN	
b	Name of plan sponsor HEALTHPEAK PROPERTIES, INC.	c EIN-PN 33-0091377-001
a	Plan name HEARTLAND SECURITY INSURANCE GROUP ESOP PLAN	
b	Name of plan sponsor HEARTLAND SECURITY INSURANCE GROUP	c EIN-PN 75-2960792-001

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	HENDERSON BROTHERS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	HENDERSON BROTHERS, INC.	c EIN-PN 25-0543730-001
a	Plan name	HERDT CONSULTING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HERDT CONSULTING, INC.	c EIN-PN 04-3694474-001
a	Plan name	HERITAGE ENGINEERING LLC 401K PLAN	
b	Name of plan sponsor	HERITAGE ENGINEERING LLC	c EIN-PN 33-1165890-001
a	Plan name	HF GROUP LLC 401 K PLAN	
b	Name of plan sponsor	HF GROUP LLC 401 K PLAN	c EIN-PN 20-4101469-001
a	Plan name	HORROCKS ENGINEERS 401(K) PLAN	
b	Name of plan sponsor	HORROCKS ENGINEERS, INC.	c EIN-PN 87-0296502-001
a	Plan name	HOSPITAL SUPPORT SERVICES , INC. 401(K) PLAN	
b	Name of plan sponsor	HOSPITAL SUPPORT SERVICES, INC.	c EIN-PN 52-1734119-001
a	Plan name	HOSPITALIST SERVICES OF ALABAMA RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	HOSPITALIST SERVICES OF ALABAMA, LLC	c EIN-PN 46-4167313-001
a	Plan name	HOUSE OF TICKETS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	HOUSE OF TICKETS	c EIN-PN 04-3156576-003
a	Plan name	HOWARD & O'BRIEN PROFIT SHARING PLAN	
b	Name of plan sponsor	HOWARD OBRIEN AND ASSOCIATES	c EIN-PN 36-4565478-002
a	Plan name	HP-UOV 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	THE HEALTH PLAN OF WEST VIRGINIA, INC.	c EIN-PN 55-0585592-002
a	Plan name	HUMAN TOUCH HEALTH CARE SERVICES LLC	
b	Name of plan sponsor	HUMAN TOUCH HEALTH CARE SERVICES LLC	c EIN-PN 45-0898969-001
a	Plan name	HUTCHINSON CLINIC, P.A. EMPLOYEES' 401K PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	HUTCHINSON CLINIC, P.A.	c EIN-PN 48-0734011-002

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	I.D. ASSOCIATES, INC. 401(K) PLAN	
b	Name of plan sponsor	I.D. ASSOCIATES, INC.	c EIN-PN 63-1227182-001
a	Plan name	IBA USA 401K PLAN	
b	Name of plan sponsor	IBA USA, INC.	c EIN-PN 90-1072480-001
a	Plan name	IFCO SYSTEMS US 401(K) PLAN	
b	Name of plan sponsor	IFCO SYSTEMS US, LLC	c EIN-PN 59-3344620-001
a	Plan name	ILS INTERNATIONAL LAUNCH SERVICES INC.	
b	Name of plan sponsor	ILS INTERNATIONAL LAUNCH SERVICES INC	c EIN-PN 77-0346405-001
a	Plan name	IMP 401(K) PLAN	
b	Name of plan sponsor	INTERNAL MEDICINE PARTNERS, LLC	c EIN-PN 81-4987524-001
a	Plan name	IMPROVE HEALTH 401(K) PLAN	
b	Name of plan sponsor	MICHIGAN PEER REVIEW ORGANIZATION	c EIN-PN 38-2536610-001
a	Plan name	IN MOTION DESIGN INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	IN MOTION DESIGN INC.	c EIN-PN 83-0468639-001
a	Plan name	INDUSTRIAL COMMERCIAL PROPERTIES, LLC 401(K) PLAN	
b	Name of plan sponsor	INDUSTRIAL COMMERCIAL PROPERTIES, LLC	c EIN-PN 46-4482861-001
a	Plan name	INFORMATION SYSTEMS & NETWORKS 401(K) PLAN	
b	Name of plan sponsor	INFORMATION SYSTEMS & NETWORKS CORPORATION	c EIN-PN 52-1191165-004
a	Plan name	INNOVATIONS FOR POVERTY ACTION 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	INNOVATIONS FOR POVERTY ACTION	c EIN-PN 06-1660068-001
a	Plan name	INSTITUTE FOR IN VITRO SCIENCES 401K PS PLAN	
b	Name of plan sponsor	INSTITUTE FOR IN VITRO SCIENCES INC	c EIN-PN 52-2029668-001
a	Plan name	INTACT TECHNOLOGY 401K PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	INTACT TECHNOLOGY INC	c EIN-PN 52-1979206-002

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	INTEGRATED FINANCIAL SETTLEMENTS, INC. 401(K) PLAN	
b	Name of plan sponsor	INTEGRATED FINANCIAL SETTLEMENTS, INC.	c EIN-PN 20-4029426-001
a	Plan name	INTEGRICHAIN, INC. 401(K) PLAN	
b	Name of plan sponsor	INTEGRICHAIN, INC.	c EIN-PN 54-2187446-001
a	Plan name	INTELLISENSE SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	INTELLISENSE SYSTEMS, INC.	c EIN-PN 82-3054429-001
a	Plan name	IPC 401(K) PLAN	
b	Name of plan sponsor	IPC SYSTEMS, INC.	c EIN-PN 30-0383566-001
a	Plan name	IT COALITION 401(K) PLAN - US EMPLOYEES	
b	Name of plan sponsor	INFORMATION TECHNOLOGY COALITION, INC.	c EIN-PN 20-5581516-003
a	Plan name	IVANHOE ELECTRIC, INC.	
b	Name of plan sponsor	STEPHANI TERHORST	c EIN-PN 32-0633823-007
a	Plan name	J & S MASONRY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	J & S MASONRY	c EIN-PN 82-0403473-001
a	Plan name	J.E. FULLER/HYDROLOGY AND GEOMORPHOLOGY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	J.E. FULLER/HYDROLOGY AND GEOMORPHOLOGY, INC.	c EIN-PN 86-0785301-002
a	Plan name	J-BERD MECHANICAL CONTRACTORS, INC. 401(K) PLAN	
b	Name of plan sponsor	J-BERD MECHANICAL CONTRACTORS, INC.	c EIN-PN 41-1716695-001
a	Plan name	JET LINX AVIATION, LLC 401(K) PLAN	
b	Name of plan sponsor	JET LINX AVIATION, LLC	c EIN-PN 26-3984455-001
a	Plan name	JND APPLIANCE, LLC 401(K) PLAN	
b	Name of plan sponsor	JND APPLIANCE, LLC	c EIN-PN 27-1581693-001
a	Plan name	JOHN HOUSTON CUSTOM HOMES 401K PLAN	
b	Name of plan sponsor	JHH CENTRAL MANAGEMENT SERVICES LLC	c EIN-PN 46-1356200-001

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 JONESVILLE PAPER TUBE CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JONESVILLE PAPER TUBE CORPORATION	c EIN-PN 38-1493573-001
a	Plan name JSW STEEL USA INC 401K PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor JSW STEEL USA INC	c EIN-PN 61-1539103-001
a	Plan name JSW STEEL USA OHIO, INC. 401(K) PLAN	
b	Name of plan sponsor JSW STEEL USA OHIO, INC.	c EIN-PN 81-3308222-001
a	Plan name KAISER ASSOCIATES, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor KAISER ASSOCIATES, INC.	c EIN-PN 22-2428419-001
a	Plan name KAL KRISHNAN CONSULTING SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor KAL KRISHNAN CONSULTING SERVICES	c EIN-PN 94-3067664-001
a	Plan name KBA, INC. 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor KBA, INC. 401(K) AND PROFIT SHARING PLAN	c EIN-PN 91-1581416-001
a	Plan name KEYTH SECURITY SYSTEMS 401(K) SAVINGS PLAN	
b	Name of plan sponsor KEYTH SECURITY SYSTEMS, INC.	c EIN-PN 36-3694248-001
a	Plan name KING CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor KING CONSTRUCTION LLC	c EIN-PN 33-1056040-001
a	Plan name KIRBY ELECTRIC, INC. 401(K) PROFIT SHARINGPLAN	
b	Name of plan sponsor KIRBY ELECTRIC, INC.	c EIN-PN 25-1057177-001
a	Plan name KISCO SENIOR LIVING, LLC EMPLOYEE SAVINGS AND PROFIT SHARING PLAN	
b	Name of plan sponsor KISCO SENIOR LIVING, LLC	c EIN-PN 13-3924314-001
a	Plan name KNIGHTED VENTURES, LLC 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor KNIGHTED VENTURES, LLC	c EIN-PN 45-4477245-001
a	Plan name KOTTLER METAL PRODUCTS LLC	
b	Name of plan sponsor WEBB HARRINGTON	c EIN-PN 99-2134690-007

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	KRB MACHINERY COMPANY RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	KRB MACHINERY COMPANY	c EIN-PN 23-2397053-001
a	Plan name	KREISCHER MILLER CAPITAL ACCUMULATION PLAN	
b	Name of plan sponsor	KREISCHER MILLER	c EIN-PN 23-1980475-001
a	Plan name	KRYSTAL BIOTECH, INC. 401(K) PLAN	
b	Name of plan sponsor	KRYSTAL BIOTECH, INC.	c EIN-PN 82-1080209-002
a	Plan name	KSL ASSOCIATE GROUP 401(K) PLAN	
b	Name of plan sponsor	KSL ASSOCIATE GROUP, INC.	c EIN-PN 33-0894084-001
a	Plan name	LA CROSSE CPAS LLC 401(K) P/S PLAN	
b	Name of plan sponsor	LA CROSSE CPAS LLC	c EIN-PN 46-1410019-001
a	Plan name	LAGOS FINANCIAL & INSURANCE SERVICES INC	
b	Name of plan sponsor	LAGOS FINANCIAL INSURANCE SERVICES INC	c EIN-PN 33-0667408-001
a	Plan name	LAKELAND INDUSTRIES, INC. 401(K) PLAN	
b	Name of plan sponsor	LAKELAND INDUSTRIES, INC.	c EIN-PN 13-3115216-001
a	Plan name	LANCASTER COLONY CORPORATION MASTER PENSION TRUST	
b	Name of plan sponsor	CHARLES SCHWAB TRUST BANK TRUSTEE OF LANCASTER COLONY CORPORATION	c EIN-PN 82-3967259-001
a	Plan name	LARSON CONSTRUCTION COMPANY, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	LARSON CONSTRUCTION	c EIN-PN 42-1022004-001
a	Plan name	LASALLE BENEFITS	
b	Name of plan sponsor	J WILLIAM GIMBEL	c EIN-PN 82-1041868-001
a	Plan name	LASERSHIP 401(K) PLAN	
b	Name of plan sponsor	LASERSHIP, INC.	c EIN-PN 54-2015092-001
a	Plan name	LATIN AMERICAN YOUTH CENTER 401(K) PLAN	
b	Name of plan sponsor	LATIN AMERICAN YOUTH CENTER, INC	c EIN-PN 52-1023074-001

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	LATITUDE 36 FOODS LLC 401(K) PLAN	
b	Name of plan sponsor	LATITUDE 36 FOODS LLC	c EIN-PN 35-2594469-001
a	Plan name	LAWRY'S RESTAURANT, INC. PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor	LAWRYS RESTAURANT, INC.	c EIN-PN 95-0925915-001
a	Plan name	LAZY DOG 401(K) PLAN	
b	Name of plan sponsor	LAZY DOG RESTAURANTS, LLC	c EIN-PN 46-1351268-001
a	Plan name	LEASE MANAGEMENT, INC 401(K) PLAN	
b	Name of plan sponsor	LEASE MANAGEMENT, INC.	c EIN-PN 38-1613283-001
a	Plan name	LEMIEUX AND ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor	LEMIEUX & ASSOCIATES, LLC	c EIN-PN 41-2150398-001
a	Plan name	LEWIS BROTHERS LUMBER CO., INC., 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	LEWIS BROTHERS LUMBER CO	c EIN-PN 26-3989832-001
a	Plan name	LEWIS-WATKINS-FARMER AGENCY INC. 401K	
b	Name of plan sponsor	LEWIS WATKINS FARMER AGENCY INC	c EIN-PN 74-2320159-001
a	Plan name	LIBRARY ASSOCIATES, LLC 401(K) PLAN	
b	Name of plan sponsor	LIBRARY ASSOCIATES LLC	c EIN-PN 81-0799369-001
a	Plan name	LIDL US, LLC 401(K) PLAN	
b	Name of plan sponsor	LIDL US, LLC	c EIN-PN 68-0683460-001
a	Plan name	LIEBERT CASSIDY WHITMORE PROFIT SHARING/401K PLAN AND TRUST	
b	Name of plan sponsor	LIEBERT CASSIDY WHITMORE	c EIN-PN 95-3658973-002
a	Plan name	LIFE EQUITY, LLC	
b	Name of plan sponsor	BRECK PLATNER	c EIN-PN 34-1935387-001
a	Plan name	LIGHTHOUSE CENTRAL FLORIDA, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	LIGHTHOUSE CENTRAL FLORIDA, INC.	c EIN-PN 59-2418228-001

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	LIPPES MATHIAS LLP 401(K) PLAN	
b	Name of plan sponsor	LIPPES MATHIAS LLP	c EIN-PN 16-1021918-001
a	Plan name	LIQUIDITY SERVICES, INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	LIQUIDITY SERVICES, INC.	c EIN-PN 52-2209244-001
a	Plan name	LIVE OAK-GOTTESMAN LLC 401K PROFIT	
b	Name of plan sponsor	MICHAEL JOYCE	c EIN-PN 71-1024810-001
a	Plan name	LK METROLOGY, INC. 401(K) PLAN	
b	Name of plan sponsor	LK METROLOGY, INC.	c EIN-PN 82-4364373-001
a	Plan name	LLI HOLDINGS INC 401K PLAN	
b	Name of plan sponsor	LLI HOLDINGS INC	c EIN-PN 83-3829690-001
a	Plan name	LOGIC PD, INC. DBA BEACON EMBEDDEDWORKS 401(K) PLAN	
b	Name of plan sponsor	LOGIC PD, INC. DBA BEACON EMBEDDEDWORKS	c EIN-PN 41-1424025-002
a	Plan name	LOGICMARK 401(K) PLAN	
b	Name of plan sponsor	LOGICMARK, INC.	c EIN-PN 46-0678374-001
a	Plan name	LORI L. REITMAN, MD, LLC 401(K) PSP	
b	Name of plan sponsor	LORI L. REITMAN, MD, LLC	c EIN-PN 47-2145816-001
a	Plan name	LOS ANGELES POLICE FEDERAL CREDIT UNION EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor	LOS ANGELES POLICE FEDERAL CREDIT UNION	c EIN-PN 95-1683316-002
a	Plan name	LOTAME SOLUTIONS, INC. 401(K) PLAN	
b	Name of plan sponsor	LOTAME SOLUTIONS, INC.	c EIN-PN 26-1918422-001
a	Plan name	LUXE BRANDS	
b	Name of plan sponsor	LUXE BRANDS COLLECTIVE, INC	c EIN-PN 86-2784427-002
a	Plan name	M2 CONSTRUCTION, LLC 401(K) PLAN	
b	Name of plan sponsor	M2 CONSTRUCTION, LLC	c EIN-PN 27-0943176-001

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 MACI ASSOCIATES' SAVINGS PLAN	
b	Name of plan sponsor MICHIGAN AUTOMOTIVE COMPRESSOR	c EIN-PN 38-2853246-001
a	Plan name MACRO SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor MSOL, INC. DBA MACRO SOLUTIONS, INC.	c EIN-PN 36-4480652-001
a	Plan name MAGNOLIA PHYSICIAN SERVICES INC. RETIREMENT PLAN	
b	Name of plan sponsor MAGNOLIA PHYSICIAN SERVICES INC.	c EIN-PN 27-2818726-001
a	Plan name MAGNOLIA PLUMBING EMPLOYEE 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor JOSEPH J. MAGNOLIA, INC.	c EIN-PN 53-0235163-003
a	Plan name MALLARD CREEK POLYMERS, LLC EES SAVINGS PLAN	
b	Name of plan sponsor MALLARD CREEK POLYMERS, LLC	c EIN-PN 76-0455769-001
a	Plan name MARCUS NETWORKING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MARCUS NETWORKING, INC.	c EIN-PN 20-2619299-001
a	Plan name MARTIN BAUER, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MARTIN BAUER, INC.	c EIN-PN 33-0892779-001
a	Plan name MASSEY'S PLATE GLASS & ALUMINUM, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MASSEYS PLATE GLASS & ALUMINUM	c EIN-PN 06-1355882-001
a	Plan name MATTRESS FIRM, INC. 401(K) PLAN	
b	Name of plan sponsor MATTRESS FIRM, INC.	c EIN-PN 76-0596008-001
a	Plan name MAXLINEAR, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MAXLINEAR, INC.	c EIN-PN 14-1896129-001
a	Plan name MCCOY GROUP, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MCCOY GROUP, INC.	c EIN-PN 39-1428371-001
a	Plan name MCGEE COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MCGEE COMPANY	c EIN-PN 84-0457707-001

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	MCGOWAN & COMPANY, INC. EMPLOYEES' 401(K) PLAN	
b	Name of plan sponsor	MCGOWAN & COMPANY, INC.	c EIN-PN 34-0841381-001
a	Plan name	MCI, INC. 401(K) PLAN	
b	Name of plan sponsor	MCI, INC.	c EIN-PN 41-1277029-001
a	Plan name	MCPC HOLDINGS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MCPC HOLDINGS, INC.	c EIN-PN 32-0012228-001
a	Plan name	MEDABLE 401(K) PLAN	
b	Name of plan sponsor	MEDABLE, INC.	c EIN-PN 46-0870262-001
a	Plan name	MEDICAL RESOURCE GROUP 401K PLAN	
b	Name of plan sponsor	MEDICAL RESOURCE GROUP	c EIN-PN 34-1874916-001
a	Plan name	MESABA ANIMAL HOSPITAL 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	MESABA ANIMAL HOSPITAL	c EIN-PN 27-1383461-001
a	Plan name	METROSTAR SYSTEMS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	METROSTAR SYSTEMS, LLC	c EIN-PN 54-1954547-001
a	Plan name	MFS SUPPLY LLC 401K PLAN	
b	Name of plan sponsor	MFS SUPPLY LLC	c EIN-PN 20-4935387-001
a	Plan name	MICROSTRATEGY 401(K) SAVINGS PLAN	
b	Name of plan sponsor	MICROSTRATEGY	c EIN-PN 51-0323571-001
a	Plan name	MIDDLEBURG 401K PLAN	
b	Name of plan sponsor	MIDDLEBURG MANAGEMENT LLC	c EIN-PN 46-0927391-001
a	Plan name	MIDWEST CARDIOVASCULAR INSTITUTE 401(K)PROFIT SHARING PLAN	
b	Name of plan sponsor	MIDWEST CARDIOVASCULAR INSTITUTE, S.C.	c EIN-PN 86-1664195-001
a	Plan name	MIDWEST CONTRACT OPERATIONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MIDWEST CONTRACT OPERATIONS, INC.	c EIN-PN 39-1601232-001

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	MIG 401(K) PLAN
b	Name of plan sponsor	MOORE IACOFANO GOLTSMAN, INC
c	EIN-PN	94-3116998-001
a	Plan name	MINNESOTA TRUCK HEADQUARTERS 401(K) PLAN
b	Name of plan sponsor	ST. CLOUD AUTO SALES.COM LLC
c	EIN-PN	26-3548274-001
a	Plan name	MOHAWK GLOBAL LOGISTICS 401(K) PLAN
b	Name of plan sponsor	MOHAWK GLOBAL LOGISTICS
c	EIN-PN	16-1444116-001
a	Plan name	MONTANTE COMPANIES 401(K) PLAN
b	Name of plan sponsor	MONTANTE COMPANIES LLC
c	EIN-PN	82-3445159-001
a	Plan name	MORGAN PROPERTIES 401(K) PLAN
b	Name of plan sponsor	MORGAN PROPERTIES PAYROLL SVCS
c	EIN-PN	23-2852119-001
a	Plan name	MUNDET INC. 401(K) PLAN
b	Name of plan sponsor	MUNDET INC.
c	EIN-PN	54-1397696-009
a	Plan name	MUNSCH HARDT KOPF & HARR, P.C. PROFIT SHARING PLAN
b	Name of plan sponsor	MUNSCH HARDT KOPF & HARR, P.C.
c	EIN-PN	75-2096964-001
a	Plan name	MUTUAL SAVINGS CREDIT UNION 401K
b	Name of plan sponsor	MUTUAL SAVINGS CREDIT UNION
c	EIN-PN	63-0148940-002
a	Plan name	NATIONAL CONSUMER COOPERATIVE BANK RETIREMENT AND 401(K) PLAN
b	Name of plan sponsor	NATIONAL CONSUMER COOPERATIVE BANK
c	EIN-PN	52-1157795-001
a	Plan name	NATIONAL EXPERIENCED WORKFORCE, SOLUTIONS INC. 401K PLAN
b	Name of plan sponsor	NATIONAL EXPERIENCED WORKFORCE S
c	EIN-PN	52-2003078-001
a	Plan name	NBS GOVERNMENT FINANCE GROUP 401(K) PLAN
b	Name of plan sponsor	NBS GOVERNMENT FINANCE GROUP
c	EIN-PN	33-0712512-001
a	Plan name	NEW MEXICO ORTHOPAEDIC ASSOCIATES, PC 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	NEW MEXICO ORTHOPAEDIC ASSOCIATES, P.C.
c	EIN-PN	85-0291612-002

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	NEXION HEALTH, INC. 401K PLAN AND TRUST	
b	Name of plan sponsor	NEXION HEALTH, INC.	c EIN-PN 52-2238971-001
a	Plan name	NIEKAMP FENCE COMPANY LLC DBA BOWDEN FENCE	
b	Name of plan sponsor	CASSI TESTA	c EIN-PN 86-1970789-001
a	Plan name	NIKON METROLOGY, INC. SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor	NIKON METROLOGY, INC.	c EIN-PN 38-3436164-001
a	Plan name	NJI MEDIA 401(K)	
b	Name of plan sponsor	NJI MEDIA, LLC	c EIN-PN 27-1521289-001
a	Plan name	NORTH NEWTON TOWNSHIP 457 DEFERRED COMPENSATION PLAN	
b	Name of plan sponsor	NORTH NEWTON TOWNSHIP	c EIN-PN 23-1871449-001
a	Plan name	NORTHBOUND TRAIN ENTERPRISES LLC 401(K) PLAN	
b	Name of plan sponsor	NORTHBOUND TRAIN ENTERPRISES LLC	c EIN-PN 90-1078400-001
a	Plan name	NORTHEAST ENTREPRENEUR FUND, INC. 401K	
b	Name of plan sponsor	NORTHEAST ENTREPRENEUR FUND, INC.	c EIN-PN 36-3566632-002
a	Plan name	NORTHERN MICHIGAN 401(K) PLAN	
b	Name of plan sponsor	NORTHERN MICHIGAN REHABILITATION SERVICES, INC.	c EIN-PN 38-2736802-001
a	Plan name	NORTHGATE TECHNOLOGIES, INC. & MONAGHAN MEDICAL CORP. EMPLOYEE'S RETIREMENT & SAVINGS PLAN	
b	Name of plan sponsor	MONAGHAN MEDICAL CORP.	c EIN-PN 14-1552699-001
a	Plan name	NORTHWEST DENTAL GROUP OF ROCHESTER 401(K) PLAN	
b	Name of plan sponsor	NORTHWEST DENTAL GROUP OF ROCHESTER	c EIN-PN 41-0967165-002
a	Plan name	NORWOOD MANAGEMENT, INC. 401(K) PLAN	
b	Name of plan sponsor	NORWOOD MANAGEMENT, INC.	c EIN-PN 76-0180698-001
a	Plan name	OHIGRO INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	OHIGRO INC	c EIN-PN 31-0718350-002

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	ON AIR SALES	
b	Name of plan sponsor	ON AIR SALES & MARKETING LLC	c EIN-PN 23-3032588-002
a	Plan name	ONE CARE PEDIATRIC DENTAL 401(K) PLAN	
b	Name of plan sponsor	ACPDO MANAGEMENT, INC. DBA ONE C	c EIN-PN 84-4623222-001
a	Plan name	ONE COMMUNITY HEALTH 401(K) PLAN	
b	Name of plan sponsor	CARES DBA ONE COMMUNITY HEALTH	c EIN-PN 68-0162903-001
a	Plan name	ORS IMPACT 401(K) PLAN	
b	Name of plan sponsor	ORS IMPACT	c EIN-PN 91-1588023-001
a	Plan name	P. J. FITZPATRICK, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	P. J. FITZPATRICK, LLC	c EIN-PN 27-0172384-001
a	Plan name	PAISLEYHR 401K PLAN	
b	Name of plan sponsor	FINGERCHECK PEO LLC DBA PAISLEYHR	c EIN-PN 92-1788164-001
a	Plan name	PALLADIUM GROUP GLOBAL 401(K) PLAN	
b	Name of plan sponsor	PALLADIUM GROUP GLOBAL LLC	c EIN-PN 27-1357362-001
a	Plan name	PARK ENERGY SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor	PARK ENERGY SERVICES, LLC	c EIN-PN 46-4526296-333
a	Plan name	PARS NEUROSURGICAL ASSOCIATES, INC. 401(K) PLAN	
b	Name of plan sponsor	PARS NEUROSURGICAL ASSOCIATES, INC.	c EIN-PN 20-0408843-001
a	Plan name	PAVE AMERICA 401K PLAN	
b	Name of plan sponsor	PAVE AMERICA INTERCO LLC	c EIN-PN 87-1034990-001
a	Plan name	PEACE RIVER CITRUS PRODUCTS, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	PEACE RIVER CITRUS PRODUCTS, INC.	c EIN-PN 65-0262599-001
a	Plan name	PEDDLER'S VILLAGE RETIREMENT PLAN	
b	Name of plan sponsor	PEDDLERS VILLAGE ADMINISTRATION	c EIN-PN 82-3380339-001

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	PEDIATRIC & ADOLESCENT MEDICINE 401(K) PLAN AND TRUST	
b	Name of plan sponsor	P & A MEDICINE, P.C.	c EIN-PN 04-3402361-001
a	Plan name	PEDIATRIC SPECIALISTS OF VIRGINIA 401(K) PLAN	
b	Name of plan sponsor	PEDIATRIC SPECIALISTS OF VIRGINIA, LLC	c EIN-PN 46-1851763-001
a	Plan name	PEMBER COMPANIES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	PEMBER COMPANIES, INC.	c EIN-PN 39-1216720-001
a	Plan name	PENN ELCOM, INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PENN ELCOM, INC	c EIN-PN 33-0568334-001
a	Plan name	PENNS WOODS BANCORP, INC. 401(K) PLAN	
b	Name of plan sponsor	PENNS WOODS BANCORP, INC.	c EIN-PN 23-2226454-001
a	Plan name	PENTAGON FEDERAL CREDIT UNION THRIFT SAVINGS PLAN	
b	Name of plan sponsor	PENTAGON FEDERAL CREDIT UNION	c EIN-PN 53-0197038-002
a	Plan name	PETERSON GENETICS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	PETERSON GENETICS, INC.	c EIN-PN 42-1066918-001
a	Plan name	PHONE2ACTION, INC. 401(K) PLAN	
b	Name of plan sponsor	PHONE2ACTION, INC.	c EIN-PN 46-1004639-001
a	Plan name	PIP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	PROTECTIVE INDUSTRIAL PRODUCTS, INC.	c EIN-PN 14-1659264-001
a	Plan name	PLANNED PARENTHOOD/ORANGE AND SAN BERNARDINO COUNTIES, INC. RETIREMENT PLAN	
b	Name of plan sponsor	PLANNED PARENTHOOD/ORANGE AND SAN BERNARDINO COUNTIES, INC.	c EIN-PN 95-6152773-001
a	Plan name	PME, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PRECISION MANUFACTURING & ENGINEERING, INC.	c EIN-PN 23-2228711-001
a	Plan name	PMHG 401(K) PLAN	
b	Name of plan sponsor	PM HOSPITALITY STRATEGIES, INC.	c EIN-PN 54-1811207-001

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	PODICARE SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	PODICARE SERVICES, INC.	c EIN-PN 65-1040350-001
a	Plan name	PORTFOLIO MEDIA, INC. 401(K) P/S PLAN	
b	Name of plan sponsor	PORTFOLIO MEDIA, INC.	c EIN-PN 84-1660943-001
a	Plan name	POTOMAC FAMILY DINING GROUP 401(K) PLAN	
b	Name of plan sponsor	POTOMAC FAMILY DINING GROUP OPERATING COMPANY LLC	c EIN-PN 27-3546071-001
a	Plan name	PPO CHECK, LTD. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PPO CHECK, LTD.	c EIN-PN 76-0552957-001
a	Plan name	PROCOMM TELECOMMUNICATIONS, INC. 401(K) SALARY REDUCTION PLAN	
b	Name of plan sponsor	PROCOMM TELECOMMUNICATIONS, INC.	c EIN-PN 58-1927156-001
a	Plan name	PROFUND ADVISORS LLC	
b	Name of plan sponsor	PROFUND ADVISORS LLC	c EIN-PN 52-2035194-001
a	Plan name	PROSPERITY BANCSHARES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PROSPERITY BANCSHARES, INC.	c EIN-PN 74-2331986-001
a	Plan name	PSB INSIGHTS, LLC	
b	Name of plan sponsor	PSB INSIGHTS, LLC	c EIN-PN 52-2346069-003
a	Plan name	PTC THERAPEUTICS INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	PTC THERAPEUTICS, INC.	c EIN-PN 04-3416587-002
a	Plan name	PURE FITNESS, LLC 401(K) PLAN	
b	Name of plan sponsor	PURE FITNESS, LLC	c EIN-PN 30-1195328-001
a	Plan name	QUORUM ANALYTICS 401(K) PLAN	
b	Name of plan sponsor	QUORUM ANALYTICS LLC	c EIN-PN 88-2382483-001
a	Plan name	RADIANT CREDIT UNION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	RADIANT CREDIT UNION	c EIN-PN 59-0808589-002

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	RADIOLOGY ASSOCIATES OF ALBUQUERQUE , P.A. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	RADIOLOGY ASSOCIATES OF ALBUQUERQUE , P.A.	c EIN-PN 85-0214117-005
a	Plan name	RAFT 401(K) PLAN	
b	Name of plan sponsor	RAFT LLC	c EIN-PN 46-2689810-001
a	Plan name	RAPPAPORT MANAGEMENT COMPANY 401(K) PLAN	
b	Name of plan sponsor	RAPPAPORT MANAGEMENT COMPANY	c EIN-PN 52-1353340-001
a	Plan name	REBOOT.IO, INC. CASH BALANCE PLAN	
b	Name of plan sponsor	REBOOT.IO, INC.	c EIN-PN 47-1251453-001
a	Plan name	RED VENTURES, LLC 401(K) PLAN	
b	Name of plan sponsor	RED VENTURES LLC	c EIN-PN 56-2177622-001
a	Plan name	REFRIGERATION SUPPLIES DISTRIBUTOR DEFINED CONTRIBUTION RETIREMENT PLAN & TRUST	
b	Name of plan sponsor	RSD - TOTAL CONTROL	c EIN-PN 95-1262130-001
a	Plan name	RELIANCE CONCRETE CONSTRUCTION 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	ZASTROW CONSTRUCTION INC	c EIN-PN 95-4294741-003
a	Plan name	RENMATIX, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	RENMATIX, INC.	c EIN-PN 26-1641190-001
a	Plan name	REPUBLIC ELECTRONICS CORPORATION 401(K) PLAN	
b	Name of plan sponsor	REPUBLIC ELECTRONICS CORPORATION	c EIN-PN 54-0833654-001
a	Plan name	RETIRE RIGHT 401K PLAN	
b	Name of plan sponsor	LEADING PLAN SOLUTIONS LLC	c EIN-PN 86-2271858-002
a	Plan name	RETIREMENT PLAN ADVISORY GROUP RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	RETIREMENT PLAN ADVISORY GROUP	c EIN-PN 26-0341714-001
a	Plan name	RHD TIRE, INC RETIREMENT PLAN	
b	Name of plan sponsor	RHD TIRE, INC	c EIN-PN 38-2067684-001

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	RICHARD P. SLAUGHTER HOLDINGS RETIREMENT	
b	Name of plan sponsor	RICHARD P SLAUGHTER HOLDINGS LLC	c EIN-PN 87-4354020-001
a	Plan name	ROBERT ROHMER D.D.S., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ROBERT ROHMER D.D.S., INC.	c EIN-PN 81-5065105-001
a	Plan name	ROSE CASUAL DINING 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	HT ROSE ENTERPRISES	c EIN-PN 23-2360799-001
a	Plan name	RPS SMARTCOURSE SAVINGS PLAN	
b	Name of plan sponsor	TRG FIDUCIARY SERVICES LLC	c EIN-PN 82-3095168-014
a	Plan name	RUBRIS INC 401K PLAN	
b	Name of plan sponsor	RUBRIS INC	c EIN-PN 84-4572880-001
a	Plan name	ANCORA - MEP	
b	Name of plan sponsor	SA GROUP, LLC	c EIN-PN 27-4911150-001
a	Plan name	SAG CORPORATION 401K PLAN	
b	Name of plan sponsor	SAG CORPORATION	c EIN-PN 54-1369905-001
a	Plan name	SANCTUARY SOFTWARE STUDIO, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	SANCTUARY SOFTWARE STUDIO, INC.	c EIN-PN 34-1759656-001
a	Plan name	SECTEK SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor	SECTEK, INC.	c EIN-PN 34-1726791-002
a	Plan name	SECURONIX, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SECURONIX, INC.	c EIN-PN 47-3465503-001
a	Plan name	SELIGMAN GROUP RETIREMENT PLAN	
b	Name of plan sponsor	PENTEGRA SERVICES, INC.	c EIN-PN 13-3745616-008
a	Plan name	SHADOWBOX STUDIOS 401(K) PLAN	
b	Name of plan sponsor	BLACKHALL MANAGEMENT SERVICES, LLC	c EIN-PN 86-2577275-001

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	SHARE ADVANTAGE CREDIT UNION 401(K) PLAN AND TRUST	
b	Name of plan sponsor	SHARE ADVANTAGE CREDIT UNION	c EIN-PN 41-0226110-001
a	Plan name	SHEETAK INC RETIREMENT PLAN	
b	Name of plan sponsor	SHEETAK INC.	c EIN-PN 26-1553040-001
a	Plan name	SHERWOOD MECHANICAL, INC. 401(K) PLAN	
b	Name of plan sponsor	SHERWOOD MECHANICAL, INC.	c EIN-PN 68-0565225-001
a	Plan name	SHIJI US 401(K) PLAN	
b	Name of plan sponsor	SHIJI US, INC.	c EIN-PN 36-4852590-001
a	Plan name	SHIMANO AMERICAN CORPORATION EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor	SHIMANO AMERICAN CORPORATION	c EIN-PN 33-0203740-001
a	Plan name	SHULMAN, ROGERS, GANDAL, PORDY & ECKER, P.A. RETIREMENT PLAN	
b	Name of plan sponsor	SHULMAN ROGERS GANDAL PORDY & ECKER P A	c EIN-PN 52-1008944-001
a	Plan name	SIDEL, INC. RETIREMENT AND SAVINGS PLAN	
b	Name of plan sponsor	SIDEL, INC.	c EIN-PN 58-1583947-001
a	Plan name	SIMPLUS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	SIMPLUS	c EIN-PN 47-2080218-001
a	Plan name	SOFTRAMS, LLC 401(K) P/S PLAN	
b	Name of plan sponsor	SOFTRAMS, LLC	c EIN-PN 20-8761455-001
a	Plan name	SPECIALTY INSURANCE MANAGERS INC 401K	
b	Name of plan sponsor	SPECIALTY INSURANCE MANAGERS OF TEXAS	c EIN-PN 74-1875040-001
a	Plan name	SPECIALTY MEDICAL GROUP 401(K) PLAN	
b	Name of plan sponsor	SPECIALTY MEDICAL, INC.	c EIN-PN 32-0123076-001
a	Plan name	SPINUTECH 401(K) PLAN	
b	Name of plan sponsor	SPINUTECH, LLC	c EIN-PN 84-1687048-001

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 SPOK HOLDINGS, INC. SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor SPOK HOLDINGS, INC.	c EIN-PN 16-1694797-001
a	Plan name SPRINGVILLE CITY CORP K - 107165	
b	Name of plan sponsor SPRINGVILLE CITY CORP	c EIN-PN 87-6000285-001
a	Plan name SPRUCE POWER 401K PLAN	
b	Name of plan sponsor SPRUCE POWER	c EIN-PN 36-4878506-002
a	Plan name SSB HOLDING COMPANY 401(K) AND EMPLOYEE STOCK OWNERSHIP PLAN	
b	Name of plan sponsor SSB HOLDING COMPANY	c EIN-PN 42-0958005-001
a	Plan name SSCP MANAGEMENT GROUP 401(K) PLAN	
b	Name of plan sponsor SSCP MANAGEMENT, INC.	c EIN-PN 27-4937438-001
a	Plan name ST JOHNS SHIP BUILDING INC 401(K) PROFIT SHARING PLAN & TRU	
b	Name of plan sponsor ST. JOHNS SHIP BUILDING INC.	c EIN-PN 20-4871294-001
a	Plan name STAMATS COMMUNICATIONS, INC. 401(K) PLAN	
b	Name of plan sponsor STAMATS COMMUNICATIONS, INC.	c EIN-PN 42-0641030-002
a	Plan name STANLEY PEARLMAN ENTERPRISES 401(K) PLAN	
b	Name of plan sponsor STANLEY PEARLMAN ENTERPRISES, INC.	c EIN-PN 52-1747521-001
a	Plan name STAR COMPOSITES CORPORATION 401K	
b	Name of plan sponsor STAR COMPOSITES CORPORATION	c EIN-PN 82-4596229-001
a	Plan name STATE BANK & TRUST 401K PROFIT SHARING PLAN	
b	Name of plan sponsor STATE BANK & TRUST OF WINFIELD, AL	c EIN-PN 63-0229440-001
a	Plan name STEP UP FOR STUDENTS 401(K) PLAN	
b	Name of plan sponsor STEP UP FOR STUDENTS-FLORIDA, INC.	c EIN-PN 59-3649371-001
a	Plan name STILLWATER MINING COMPANY 401(K) PLAN	
b	Name of plan sponsor STILLWATER MINING COMPANY	c EIN-PN 81-0480654-001

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 STILLWATER MINING COMPANY BARGAINING UNIT 401(K) PLAN	
b	Name of plan sponsor STILLWATER MINING COMPANY	c EIN-PN 81-0480654-002
a	Plan name STORY COMPANIES LLC 401K PLAN	
b	Name of plan sponsor STORY COMPANIES LLC	c EIN-PN 87-1389402-001
a	Plan name STRUCTURA INC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor STRUCTURA INC	c EIN-PN 20-8066330-001
a	Plan name SULLIVAN MOVING & STORAGE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SULLIVAN MOVING & STORAGE, INC.	c EIN-PN 27-5140787-001
a	Plan name SUMMERWINDS 401K PLAN	
b	Name of plan sponsor SUMMERWINDS GARDEN CENTERS INC	c EIN-PN 82-0500954-001
a	Plan name SUNCOAST SKIN SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor SUNCOAST SKIN SOLUTIONS	c EIN-PN 26-2003898-001
a	Plan name SUPERIOR AMERICAN CRANE 401(K) PLAN	
b	Name of plan sponsor TC/AMERICAN CRANE COMPANY	c EIN-PN 81-3315284-001
a	Plan name SUPERIOR CONSTRUCTION CO. INC. EMPLOYEES	
b	Name of plan sponsor SUPERIOR CONSTRUCTION COMPANY	c EIN-PN 35-1035114-001
a	Plan name SUPERIOR GROUNDCOVER, INC 401K SALARY REDUCTION PLAN & TRUST	
b	Name of plan sponsor SUPERIOR GROUNDCOVER, INC	c EIN-PN 38-3520984-001
a	Plan name SWINERTON 401(K) & SAVINGS PLAN	
b	Name of plan sponsor SWINERTON INCORPORATED	c EIN-PN 93-1132374-001
a	Plan name SYNDAX PHARMACEUTICALS, INC 401(K) PLAN	
b	Name of plan sponsor SYNDAX PHARMACEUTICALS, INC.	c EIN-PN 32-0162505-001
a	Plan name SYUFY ENTERPRISES RETIREMENT PLAN	
b	Name of plan sponsor SYUFY ENTERPRISES, L.P.	c EIN-PN 94-2167713-001

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	TATE ENGINEERING SYSTEMS, INC. RETIREMENT SAVINGS PLAN
b	Name of plan sponsor	TATE ENGINEERING SYSTEMS, INC.
c	EIN-PN	52-1642992-002
a	Plan name	TAYLOR OIL CO., INC. PROFIT SHARING PLAN
b	Name of plan sponsor	TAYLOR OIL CO., INC.
c	EIN-PN	22-1739466-001
a	Plan name	TDS PHARMACY INC
b	Name of plan sponsor	TDS PHARMCY INC
c	EIN-PN	38-3056691-001
a	Plan name	TECHNICOTE, INC. EMPLOYEE RETIREMENT PLAN
b	Name of plan sponsor	TECHNICOTE, INC.
c	EIN-PN	34-1313085-001
a	Plan name	TECHNOSYLVA INC 401K PLAN
b	Name of plan sponsor	TECHNOSYLVA INC
c	EIN-PN	90-1011166-001
a	Plan name	TGR GEOTECHNICAL 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	TGR GEOTECHNICAL, INC.
c	EIN-PN	33-0992320-001
a	Plan name	THE ARK GROUP LLC 401(K) PLAN
b	Name of plan sponsor	THE ARK GROUP LLC
c	EIN-PN	52-2058087-001
a	Plan name	THE CLUB AT BELLA COLLINA 401(K) PLAN
b	Name of plan sponsor	THE CLUB AT BELLA COLLINA, LLC
c	EIN-PN	80-0823313-001
a	Plan name	THE CYPRESS 401K RETIREMENT SAVINGS PLAN
b	Name of plan sponsor	THE CYPRESS CLUB, INC.
c	EIN-PN	57-0951170-001
a	Plan name	THE HOLM GROUP 401K PLAN
b	Name of plan sponsor	THE HOLM GROUP
c	EIN-PN	88-1161931-001
a	Plan name	THE HUMANE SOCIETY OF THE UNITED STATES 401(K) SAVINGS PLAN
b	Name of plan sponsor	THE HUMANE SOCIETY OF THE UNITED STATES
c	EIN-PN	53-0225390-002
a	Plan name	THE INSTITUTE OF SCRAP RECYCLING INDUSTRIES, INC. RETIREMENT SAVINGS 401(K) PLAN
b	Name of plan sponsor	INSTITUTE OF SCRAP RECYCLING IND., INC
c	EIN-PN	31-1205596-001

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 LOS ANGELES COUNTRY CLUB 401(K) PLAN	
b	Name of plan sponsor	LOS ANGELES COUNTRY CLUB	c EIN-PN 95-0948160-002
a	Plan name	THE MOORE 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	WORLDWIDE PRINTING & DISTRIBUTION, INC.	c EIN-PN 73-1500541-001
a	Plan name	THE OLSON COMPANY 401(K) PLAN AND TRUST	
b	Name of plan sponsor	OLSON URBAN HOUSING, LLC	c EIN-PN 33-0884300-001
a	Plan name	THE ROCK CITY INC. 401K PLAN	
b	Name of plan sponsor	THE ROCK CITY INC	c EIN-PN 27-4030536-001
a	Plan name	THE SUN LIGHT & POWER 401(K) PLAN	
b	Name of plan sponsor	SUN LIGHT & POWER	c EIN-PN 94-2357077-001
a	Plan name	THE VIRGINIA TIRE & AUTO 401(K) PLAN	
b	Name of plan sponsor	VTA, LLC	c EIN-PN 54-1082209-002
a	Plan name	THOMPSON ENVIRONMENTAL SURVEYS	
b	Name of plan sponsor	THOMPSON ENVIRONMENTAL SURVERY AND PERM	c EIN-PN 83-0716297-001
a	Plan name	TILT HOLDINGS INC. 401(K) PLAN	
b	Name of plan sponsor	TILT HOLDINGS INC.	c EIN-PN 83-2097293-001
a	Plan name	TN AMERICAS HOLDINGS INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	TN AMERICAS HOLDINGS INC.	c EIN-PN 82-2328206-001
a	Plan name	TOLUNA USA, INC. 401K PLAN	
b	Name of plan sponsor	TOLUNA USA, INC	c EIN-PN 20-5461944-001
a	Plan name	TOOLE DESIGN GROUP 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	TOOLE DESIGN GROUP LLC	c EIN-PN 05-0545429-001
a	Plan name	TORRANCE CASTING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TORRANCE CASTING, INC.	c EIN-PN 39-0903148-003

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	TORY BURCH, LLC 401(K) PLAN	
b	Name of plan sponsor	TORY BURCH, LLC	c EIN-PN 56-2384277-001
a	Plan name	TOSHIBA 401(K) PLAN	
b	Name of plan sponsor	TOSHIBA	c EIN-PN 45-5236414-001
a	Plan name	TOTAL SOLUTIONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TOTAL SOLUTIONS, INC.	c EIN-PN 38-3254202-001
a	Plan name	TRAVERSE GENERAL CONTRACTORS, LLC 401(K) PLAN	
b	Name of plan sponsor	TRAVERSE GENERAL CONTRACTORS, LLC	c EIN-PN 84-4344521-001
a	Plan name	TREASURE ISLAND MARINA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TREASURE ISLAND MARINA	c EIN-PN 59-1668022-001
a	Plan name	TREND HR RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	THE OUTSOURCING LLC	c EIN-PN 81-3185457-001
a	Plan name	TRIONETICS, INC. 401K PLAN	
b	Name of plan sponsor	TRIONETICS, INC.	c EIN-PN 34-1621817-001
a	Plan name	TRIPLE CROWN CONSULTING LLC 401K PLAN	
b	Name of plan sponsor	TRIPLE CROWN CONSULTING LLC	c EIN-PN 20-1368158-001
a	Plan name	TRL SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	TRL SYSTEMS, INC.	c EIN-PN 95-3609841-001
a	Plan name	TROJAN PROFESSIONAL SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	TROJAN PROFESSIONAL SERVICES	c EIN-PN 33-0355439-001
a	Plan name	TROPICALE FOODS, INC. 401(K) PLAN	
b	Name of plan sponsor	TROPICALE FOODS, INC.	c EIN-PN 77-0521367-001
a	Plan name	TSI-VA, LLC RETIREMENT PLAN	
b	Name of plan sponsor	TSI-VA, LLC	c EIN-PN 27-2529504-001

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	TWO RIVERS ENTERPRISES, INC. 401(K) PLAN	
b	Name of plan sponsor	TWO RIVERS ENTERPRISES, INC.	c EIN-PN 41-1994904-001
a	Plan name	ULLIMAN SCHUTTE CONSTRUCTION, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ULLIMAN SCHUTTE CONSTRUCTION, LLC	c EIN-PN 31-1582279-001
a	Plan name	UNIFIED CONTRACTING, INC. 401(K) PLAN	
b	Name of plan sponsor	UNIFIED CONTRACTING, INC.	c EIN-PN 42-1519673-001
a	Plan name	UNION HOME MORTGAGE CORPORATION 401K PL	
b	Name of plan sponsor	UNION HOME MORTGAGE CORPORATION	c EIN-PN 34-1084436-001
a	Plan name	UNITED TALENT AGENCY LLC 401(K) PLAN	
b	Name of plan sponsor	UNITED TALENT AGENCY LLC	c EIN-PN 95-4312582-001
a	Plan name	UNIVERSAL MENTAL HEALTH SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	UNIVERSAL MENTAL HEALTH SERVICES, INC.	c EIN-PN 14-1877453-001
a	Plan name	VANTAGE DATA CENTERS 401K PLAN	
b	Name of plan sponsor	VANTAGE DATA CENTERS MANAGEMENT COMPANY	c EIN-PN 27-2332975-001
a	Plan name	VAULT COMMUNICATIONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	VAULT COMMUNICATIONS, INC.	c EIN-PN 23-2571161-001
a	Plan name	VETUS LEGAL 401K PLAN	
b	Name of plan sponsor	VETUS LEGAL LLC	c EIN-PN 82-3742890-001
a	Plan name	VIRGIN GALACTIC, LLC 401(K) PLAN	
b	Name of plan sponsor	VIRGIN GALACTIC, LLC	c EIN-PN 84-2252157-001
a	Plan name	VISIONARY HOLDING COMPANY, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	VISIONARY HOLDING COMPANY, INC.	c EIN-PN 26-1854466-001
a	Plan name	VISIT ANAHEIM 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ANAHEIM/ORANGE COUNTY VISITOR & CONVENTION BUREAU	c EIN-PN 95-2143156-003

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	VISIT LOUDOUN 401(K) PLAN	
b	Name of plan sponsor	LOUDOUN CONVENTION & VISITORS ASSOCIATION, INC.	c EIN-PN 54-1593470-002
a	Plan name	WARE GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor	WARE GROUP, LLC DBA JOHNSTONE SUPPLY	c EIN-PN 26-3590999-001
a	Plan name	WASHINGTON COUNTY CDA 401(A) PLAN	
b	Name of plan sponsor	WASHINGTON COUNTY COMMUNITY DEVELOPMENT AGENCY	c EIN-PN 41-1408079-001
a	Plan name	WATERMARK SOLUTIONS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WATERMARK SOLUTIONS, LLC	c EIN-PN 33-1070746-001
a	Plan name	WAYNE PERRY, INC. AND FUELING & SERVICE TECHNOLOGIES, INC. 401(K) PLAN	
b	Name of plan sponsor	WAYNE PERRY, INC.	c EIN-PN 95-2880827-002
a	Plan name	WEIDMULLER, INC. EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor	WEIDMULLER, INC.	c EIN-PN 74-3082931-002
a	Plan name	WHEELS UP PARTNERS LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	WHEELS UP PARTNERS LLC	c EIN-PN 45-4068474-001
a	Plan name	WIND RIVER ENVIRONMENTAL 401(K) PLAN	
b	Name of plan sponsor	WIND RIVER ENVIRONMENTAL, LLC	c EIN-PN 04-3487677-001
a	Plan name	WINDSOR SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor	WINDSOR SOLUTIONS, INC.	c EIN-PN 93-1245518-001
a	Plan name	WOLSTEIN GROUP 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	BERTRAM INN	c EIN-PN 34-1900270-001
a	Plan name	WSS 401(K) PLAN	
b	Name of plan sponsor	EUROSTAR, INC.	c EIN-PN 95-3925299-002
a	Plan name	WTS PARADIGM DEFERRED SAVINGS PLAN	
b	Name of plan sponsor	WTS PARADIGM, LLC	c EIN-PN 20-1623787-001

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan FLEXPATH INDEX AGGRESSIVE 2035 FUND	B Three-digit plan number (PN) ▶ 216
C Plan sponsor's name as shown on line 2a of Form 5500 GREAT GRAY TRUST COMPANY, LLC	D Employer Identification Number (EIN) 47-2468898

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

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a	24	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	2186059	579468
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)	290224339	355559527
(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	292410422	356138995
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h	0	106567
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	2269470	579468
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	2269470	686035
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	290140952	355452960

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)		41080578
(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		41080578

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)	16430	
(5) Investment advisory and investment management fees	2i(5)	298797	
(6) Bank or trust company trustee/custodial fees	2i(6)	67062	
(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)		382289
j Total expenses. Add all expense amounts in column (b) and enter total	2j		382289

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		40698289
l Transfers of assets:			
(1) To this plan	2l(1)		106418488
(2) From this plan	2l(2)		81804769

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 _____.