

<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: 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>
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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 (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>FLEXPATH INDEXPLUS CONSERVATIVE 2045 FUND</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>236</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>47-3144367</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>09/15/2025</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
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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) 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.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>FLEXPATH INDEXPLUS CONSERVATIVE 2045 FUND</u>	B Three-digit plan number (PN)	<u>236</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>47-3144367</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>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>282986</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>AB US LARGE CAP GROWTH CIT CLASS W</u>		
b Name of sponsor of entity listed in (a): <u>ALLIANCEBERNSTEIN LP</u>		
c EIN-PN <u>04-6948485-007</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>2317086</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>AMERICAN CENTURY U.S. PREMIER LCG</u>		
b Name of sponsor of entity listed in (a): <u>GLOBAL TRUST COMPANY</u>		
c EIN-PN <u>30-6406015-027</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>2317086</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>11863694</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>CAPITAL GROUP EUROPACIFIC GROWTH (U</u>		
b Name of sponsor of entity listed in (a): <u>CAPITAL BANK AND TRUST COMPANY</u>		
c EIN-PN <u>95-6597294-661</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>1015012</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>COLUMBIA TRUST INTEGRATED SCV FUND</u>		
b Name of sponsor of entity listed in (a): <u>AMERIPRISE TRUST COMPANY</u>		
c EIN-PN <u>87-2656112-224</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>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: COHEN & STEERS GLOBAL LISTED INFRA		
b Name of sponsor of entity listed in (a): SEI TRUST COMPANY		
c EIN-PN 46-3422853-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 414241
a Name of MTIA, CCT, PSA, or 103-12 IE: COHEN & STEERS COLLECTIVE INVESTMEN		
b Name of sponsor of entity listed in (a): SEI TRUST COMPANY		
c EIN-PN 46-3411346-064	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 242246
a Name of MTIA, CCT, PSA, or 103-12 IE: DUFF & PHELPS MASTER COLLECTIVE INV		
b Name of sponsor of entity listed in (a): SEI TRUST COMPANY		
c EIN-PN 81-3547755-098	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 242246
a Name of MTIA, CCT, PSA, or 103-12 IE: DEVELOPED REAL ESTATE INDEX FUND F		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 27-2659367-001	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: ENHANCED ROLL YIELD INDEX FUND F		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 99-3833244-001	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: FTSE NAREIT ALL EQUITY REITS INDEX		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 99-3288435-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1698858
a Name of MTIA, CCT, PSA, or 103-12 IE: GLOBAL CORE INFRASTRUCTURE INDEX FU		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 99-2814912-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 968349
a Name of MTIA, CCT, PSA, or 103-12 IE: INTERMEDIATE GOVERNMENT BOND INDEX		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 94-3326533-001	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: JPMCB U.S. VALUE FUND		
b Name of sponsor of entity listed in (a): JPMORGAN CHASE BANK, N.A.		
c EIN-PN 87-1901428-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2317086
a Name of MTIA, CCT, PSA, or 103-12 IE: LONG TERM CREDIT BOND INDEX FUND F		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 83-1467186-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1819198

a Name of MTIA, CCT, PSA, or 103-12 IE: LONG TERM GOV BOND INDEX FUND F		
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) 1980904
a Name of MTIA, CCT, PSA, or 103-12 IE: LORD ABBETT TOTAL RETURN II		
b Name of sponsor of entity listed in (a): GREAT GRAY TRUST COMPANY, LLC		
c EIN-PN 82-1151625-324	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2356249
a Name of MTIA, CCT, PSA, or 103-12 IE: MFS INTERNATIONAL GROWTH CIT		
b Name of sponsor of entity listed in (a): MFS HERITAGE TRUST COMPANY		
c EIN-PN 57-1187281-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1860855
a Name of MTIA, CCT, PSA, or 103-12 IE: NEUBERGER BERMAN SMALL CAP GROWTH T		
b Name of sponsor of entity listed in (a): NEUBERGER BERMAN TRUST COMPANY N.A.		
c EIN-PN 20-4797982-013	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 224078
a Name of MTIA, CCT, PSA, or 103-12 IE: NEUBERGER BERMAN STRATEGIC MULTI-SE		
b Name of sponsor of entity listed in (a): NEUBERGER BERMAN TRUST CO. N.A.		
c EIN-PN 20-4797982-006	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1178124
a Name of MTIA, CCT, PSA, or 103-12 IE: PGIM TOTAL RETURN BOND FUND		
b Name of sponsor of entity listed in (a): GREAT GRAY TRUST COMPANY, LLC		
c EIN-PN 38-4097323-471	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1178124
a Name of MTIA, CCT, PSA, or 103-12 IE: PIMCO RAE INTERNATIONAL CIT		
b Name of sponsor of entity listed in (a): GREAT GRAY TRUST COMPANY, LLC		
c EIN-PN 38-4139838-617	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1860855
a Name of MTIA, CCT, PSA, or 103-12 IE: PIMCO RAE US SMALL CIT		
b Name of sponsor of entity listed in (a): GREAT GRAY TRUST COMPANY, LLC		
c EIN-PN 88-2858456-798	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 224078
a Name of MTIA, CCT, PSA, or 103-12 IE: PRINCIPAL US REAL ESTATE SECURITIES		
b Name of sponsor of entity listed in (a): GREAT GRAY TRUST COMPANY, LLC		
c EIN-PN 99-3723837-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 242246
a Name of MTIA, CCT, PSA, or 103-12 IE: PUTNAM LARGE CAP VALUE TRUST		
b Name of sponsor of entity listed in (a): PUTNAM FIDUCIARY TRUST COMPANY, LLC		
c EIN-PN 82-3639536-275	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2317086

a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL 1000 INDEX FUND F		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 94-3357216-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 21666107
a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL 2000 INDEX FUND F		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 94-3318704-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1047629
a Name of MTIA, CCT, PSA, or 103-12 IE: THE COLLECTIVE DL TOTAL RET BOND FU		
b Name of sponsor of entity listed in (a): THE NORTHERN TRUST COMPANY		
c EIN-PN 90-6169542-009	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2356249
a Name of MTIA, CCT, PSA, or 103-12 IE: U.S. DEBT INDEX FUND F		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 94-3291425-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 16524229
a Name of MTIA, CCT, PSA, or 103-12 IE: BR INTERM GOV BOND INDEX FUND F		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 94-3326533-001	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: GLOBAL REAL ESTATE SECURITIES FUND		
b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST COMPANY		
c EIN-PN 27-5279909-001	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: CIF II INTL QUALITY GROWTH SERIES 2		
b Name of sponsor of entity listed in (a): WELLINGTON TRUST COMPANY, NA		
c EIN-PN 04-6913417-167	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)

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) RETIREMENT AND SAVINGS PLAN FOR SOUTHWEST WATER COMPANY	
b	Name of plan sponsor	SOUTHWEST WATER COMPANY	c EIN-PN 95-1840947-003
a	Plan name	4WALL ENTERTAINMENT 401(K) PLAN	
b	Name of plan sponsor	ACADIA MANAGEMENT, INC.	c EIN-PN 20-2539295-001
a	Plan name	A & D TECHNOLOGY, INC. 401(K) PLAN	
b	Name of plan sponsor	A & D TECHNOLOGY, INC.	c EIN-PN 20-2813873-001
a	Plan name	A J. DWOSKIN & ASSOCIATES, INC. EMPLOYEE 401(K) PLAN	
b	Name of plan sponsor	A J. DWOSKIN & ASSOCIATES, INC.	c EIN-PN 54-1013098-001
a	Plan name	ABBTECH PROFESSIONAL RESOURCES, INC. 401(K) PLAN	
b	Name of plan sponsor	ABBTECH PROFESSIONAL RESOURCES,	c EIN-PN 54-1789173-001
a	Plan name	ABC IMAGING OF WASHINGTON, INC. 401(K) PLAN	
b	Name of plan sponsor	ABC IMAGING OF WASHINGTON, INC.	c EIN-PN 52-1758526-001
a	Plan name	ACI ELECTRICAL CONTRACTOR, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ACI ELECTRICAL CONTRACTOR, INC.	c EIN-PN 22-3682330-001
a	Plan name	ACON INVESTMENTS LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ACON INVESTMENTS, LLC	c EIN-PN 52-1961415-001
a	Plan name	ACTUALIZE CONSULTING, LLC 401(K) PLAN	
b	Name of plan sponsor	ACTUALIZE CONSULTING, LLC	c EIN-PN 86-1079277-001
a	Plan name	ADVANCE EQUIPMENT MANUFACTURING COMPANY 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ADVANCE EQUIPMENT MANUFACTURING COMPANY	c EIN-PN 36-0707880-002
a	Plan name	AGC BIOLOGICS, INC. 401(K) PLAN	
b	Name of plan sponsor	AGC BIOLOGICS, INC.	c EIN-PN 26-1276219-001
a	Plan name	AIR TEMPERATURE SPECIALISTS, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	AIR TEMPERATURE SPECIALISTS	c EIN-PN 33-0957411-001

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	ALL NEW STAMPING EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ALL NEW STAMPING EMPLOYEES 401(K) PLAN	c EIN-PN 95-2223414-001
a	Plan name	ALOHA ISLAND CABLE DBA CABLEMASTERS RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ALOHA ISLAND CABLE DBA CABLEMASTERS	c EIN-PN 33-0676505-001
a	Plan name	ALTOS FEDERAL GROUP, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ALTOS FEDERAL GROUP, INC.	c EIN-PN 52-2013624-002
a	Plan name	AMEREDEV 401(K) PLAN	
b	Name of plan sponsor	AMEREDEV OPERATING, LLC	c EIN-PN 82-0617153-001
a	Plan name	AMERICAN HOTEL & LODGING ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor	AMERICAN HOTEL & LODGING ASSOCIA	c EIN-PN 13-0432130-001
a	Plan name	AMES CONSTRUCTION INC. RETIREMENT PLAN	
b	Name of plan sponsor	AMES CONSTRUCTION INC	c EIN-PN 41-0871375-010
a	Plan name	AMS 401(K) PLAN	
b	Name of plan sponsor	DAC ACQUISITION COMPANY, LLC	c EIN-PN 20-5081488-001
a	Plan name	AMYX, INC. 401(K) PLAN	
b	Name of plan sponsor	AMYX, INC.	c EIN-PN 54-1979772-001
a	Plan name	ANNETT HOLDINGS, INC. EMPLOYEE SAVINGS AND PROFIT SHARING PLAN	
b	Name of plan sponsor	ANNETT HOLDINGS INC	c EIN-PN 42-1292482-001
a	Plan name	APIC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	APIC	c EIN-PN 23-7256856-001
a	Plan name	AQUATEC INTERNATIONAL, INC.401K PLAN	
b	Name of plan sponsor	AQUATEC INTERNATIONAL, INC.	c EIN-PN 33-0364575-001
a	Plan name	ARGEE CONSTRUCTION, INC. DBA CRAFTSMAN CONSTRUCTION RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ARGEE CONSTRUCTION, INC. DBA CRAFTS MAN CONSTRUCTION	c EIN-PN 47-1242149-001

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	ASSEMBLY HEALTH PLAN 401(K)	
b	Name of plan sponsor	PREFERRED PODIATRY MANAGEMENT LLC	c EIN-PN 45-2538551-001
a	Plan name	ATTAIN CONSULTING GROUP LLC	
b	Name of plan sponsor	ATTAIN CONSULTING GROUP LLC	c EIN-PN 85-0709432-001
a	Plan name	AUTOMEPE OPEN MULTIPLE EMPLOYER 401(K) PLAN	
b	Name of plan sponsor	AMI BENEFIT PLAN ADMINISTRATORS, IN	c EIN-PN 34-1781113-002
a	Plan name	AVALO THERAPEUTICS 401(K) PLAN	
b	Name of plan sponsor	AVALO THERAPEUTICS	c EIN-PN 45-0705648-001
a	Plan name	AVISA PARTNERS U.S., INC. 401(K) PLAN	
b	Name of plan sponsor	AVISA PARTNERS U.S., INC.	c EIN-PN 84-3308851-001
a	Plan name	B & B THEATRES OPERATING COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	B & B THEATRES OPERATING COMPANY, INC.	c EIN-PN 43-1870501-001
a	Plan name	BACHEM AMERICAS, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	BACHEM AMERICAS ,INC.	c EIN-PN 95-2705001-006
a	Plan name	BCI 401(K) PLAN	
b	Name of plan sponsor	BAMMAN CONSULTING	c EIN-PN 20-2180288-001
a	Plan name	BERK HOLDING CORP 401K PLAN	
b	Name of plan sponsor	SETH BERK	c EIN-PN 85-0531894-001
a	Plan name	BETTERS & ASSOCIATES, S. C. 401(K) PLAN	
b	Name of plan sponsor	BETTERS & ASSOCIATES, S.C.	c EIN-PN 39-1783820-001
a	Plan name	BIALEK CORPORATION OF MARYLAND PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor	THE BIALEK CORPORATION OF MARYLA	c EIN-PN 62-1143137-001
a	Plan name	BIG BEN ENGINEERING RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	BIG BEN INC DBA BIG BEN ENGINEERING	c EIN-PN 33-0873500-001

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 BIZERBA USA, INC. 401(K) PLAN	
b	Name of plan sponsor BIZERBA USA, INC.	c EIN-PN 22-2529556-001
a	Plan name BLAIR RUBBER COMPANY 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor BLAIR RUBBER COMPANY	c EIN-PN 34-1351173-001
a	Plan name BROUGH CONSTRUCTION, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor BROUGH CONSTRUCTION, INC.	c EIN-PN 20-2861259-001
a	Plan name BROWN & RIDING INSURANCE SERVICES, INC. EMPLOYEES' 401(K) PLAN	
b	Name of plan sponsor BROWN & RIDING INSURANCE SERVICES, INC.	c EIN-PN 94-2679254-003
a	Plan name BUCKLEY LAW, PC SALARY REDUCTION PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor BUCKLEY LAW, PC	c EIN-PN 93-0866229-001
a	Plan name BUCKMAN'S, INC. EMPLOYEES 401(K) PLAN	
b	Name of plan sponsor BUCKMANS, INC.	c EIN-PN 23-1893537-001
a	Plan name BUFFINGTON BROTHERS HEATING & AIR CONDITIONING, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor BUFFINGTON BROTHERS HEATING & AIR CONDITIONING INC.	c EIN-PN 43-0913656-001
a	Plan name BWW LAW GROUP, LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor BWW LAW GROUP, LLC	c EIN-PN 52-1965052-001
a	Plan name CALIFORNIA COMMERCIAL POOLS, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor CALIFORNIA COMMERCIAL POOLS, INC.	c EIN-PN 95-3452683-002
a	Plan name CALIFORNIA PRO PAINTING, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor CALIFORNIA PRO PAINTING, INC.	c EIN-PN 77-0549284-001
a	Plan name CALIFORNIA SKATEPARKS RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor CALIFORNIA SKATEPARKS	c EIN-PN 27-0118247-001
a	Plan name CAPITAL PROJECT MANAGEMENT, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CAPITAL PROJECT MANAGEMENT	c EIN-PN 23-2827922-001

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	CAPITOL CONCIERGE 401K PLAN	
b	Name of plan sponsor	CAPITOL CONCIERGE, INC	c EIN-PN 52-1677387-001
a	Plan name	CARTESIAN 401(K) / PROFIT SHARING PLAN	
b	Name of plan sponsor	CARTESIAN, INC.	c EIN-PN 48-1129619-001
a	Plan name	CASE PAPER CO., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CASE PAPER CO., INC.	c EIN-PN 11-1945820-004
a	Plan name	CENTERSQUARE INVESTMENT MANAGEMENT, LLC RETIREMENT PLAN	
b	Name of plan sponsor	CENTERSQUARE INVESTMENT MANAGEM	c EIN-PN 82-2740442-001
a	Plan name	CERTIFIED UTILITY SERVICES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	CERTIFIED UTILITY SERVICES, INC.	c EIN-PN 06-1506699-003
a	Plan name	CFI, INC. RETIREMENT PLAN	
b	Name of plan sponsor	CFI, INC.	c EIN-PN 56-1967620-001
a	Plan name	CHESAPEAKE EYE CARE MANAGEMENT, LLC 401(K) PLAN	
b	Name of plan sponsor	CHESAPEAKE EYE CARE MANAGEMENT,	c EIN-PN 82-1735145-001
a	Plan name	CITY NATIONAL BANK RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	CITY NATIONAL BANK OF FLORIDA	c EIN-PN 59-1297458-005
a	Plan name	COLONIAL PARKING 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	COLONIAL PARKING, INC.	c EIN-PN 53-0215818-003
a	Plan name	COMPASS PROPERTIES LLC 401 K	
b	Name of plan sponsor	COMPASS PROPERTIES LLC	c EIN-PN 81-1197102-001
a	Plan name	CONQUEST SOLUTIONS, LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	CONQUEST SOLUTIONS LLC	c EIN-PN 26-4033869-001
a	Plan name	CONSILIO 401(K) PLAN	
b	Name of plan sponsor	CONSILIO, LLC	c EIN-PN 54-2019342-001

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 COOPERATIVE OF AMERICAN PHYSICIANS, INC. - MUTUAL PROTECTION TRUST RETIREMENT PLAN	
b	Name of plan sponsor COOPERATIVE OF AMERICAN PHYSICIANS, INC.	c EIN-PN 95-2988063-001
a	Plan name CORPORATE ONE FEDERAL CREDIT UNION 401(K) PLAN AND TRUST	
b	Name of plan sponsor CORPORATE ONE FEDERAL CREDIT UNION	c EIN-PN 31-1102257-003
a	Plan name CRAIL CAPITAL LLC 401(K) PLAN	
b	Name of plan sponsor CRAIL CAPITAL LLC	c EIN-PN 87-0790392-001
a	Plan name CT & T CONCRETE PAVING, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor CT & T CONCRETE PAVING, INC.	c EIN-PN 20-2642225-001
a	Plan name CTSI 401(K) PLAN	
b	Name of plan sponsor COHERENT TECHNICAL SERVICES, INC	c EIN-PN 20-3557917-001
a	Plan name CURI 401(K) PLAN	
b	Name of plan sponsor MEDICAL MUTUAL INSURANCE COMPANY OF NORTH CAROLINA	c EIN-PN 56-1122874-003
a	Plan name CUTTING EDGE SUPPLY 401(K) PLAN	
b	Name of plan sponsor BLACK DIAMOND BLADE COMPANY DBA CUTTING EDGE SUPPLY CO.	c EIN-PN 95-3579102-002
a	Plan name DANA INNOVATIONS, INC. 401(K) PLAN	
b	Name of plan sponsor DANA INNOVATIONS, INC.	c EIN-PN 33-0005938-001
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 DGE INVESTMENTS LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor DGE INVESTMENTS LLC	c EIN-PN 47-3906849-001
a	Plan name DIRECT SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor DIRECT SERVICES, INC.	c EIN-PN 54-1017844-001
a	Plan name DIVENTURES ATLANTA LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor DIVENTURES ATLANTA LLC	c EIN-PN 86-3767360-001

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	DMI 401(K) PLAN	
b	Name of plan sponsor	DMI OPERATING COMPANY, LLC	c EIN-PN 34-2018999-001
a	Plan name	E.R. STUEBNER CONSTRUCTION INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	E.R. STUEBNER CONSTRUCTION, INC.	c EIN-PN 23-1462430-002
a	Plan name	ENGINEERING CONSTRUCTORS, INC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ENGINEERING CONSTRUCTORS, INC.	c EIN-PN 85-0263193-001
a	Plan name	EPLAN SERVICES GROUP TRUST	
b	Name of plan sponsor	EPLAN SERVICES GROUP TRUST	c EIN-PN 77-6214267-001
a	Plan name	ERNEST RENDA CONTRACTING, CO., INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ERNEST RENDA CONTRACTING, CO., INC.	c EIN-PN 22-1597905-001
a	Plan name	EVANS DENTAL GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor	EVANS DENTAL GROUP, LLC	c EIN-PN 45-1657663-001
a	Plan name	EXP U.S. SERVICES, INC. SAVING AND RETIREMENT PLAN	
b	Name of plan sponsor	EXP U.S. SERVICES, INC.	c EIN-PN 46-0523964-002
a	Plan name	EXTENDED SERVICE CORPORATION 401(K) PLAN	
b	Name of plan sponsor	EXTENDED SERVICE CORP.	c EIN-PN 54-1231849-002
a	Plan name	FAIRFIELD 401(K) PLAN	
b	Name of plan sponsor	FF PROPERTIES LP	c EIN-PN 04-3177016-003
a	Plan name	FAMILY PRACTICE OF CADILLAC, P.C. 401(K) PLAN	
b	Name of plan sponsor	FAMILY PRACTICE OF CADILLAC, PC	c EIN-PN 38-3146845-001
a	Plan name	FARO 401(K) PLAN	
b	Name of plan sponsor	FARO TECHNOLOGIES, INC.	c EIN-PN 59-3157093-001
a	Plan name	FASONE CONSTRUCTION, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FASONE CONSTRUCTION, INC.	c EIN-PN 95-4665792-001

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 MILLWORK INC. 401K	
b	Name of plan sponsor FOREMOST TRIM INC DBA FIRST MILLWORK	c EIN-PN 47-1688108-001
a	Plan name FLORY INDUSTRIES, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor FLORY INDUSTRIES, INC.	c EIN-PN 94-2162773-002
a	Plan name FLYNN RESTAURANT GROUP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor FLYNN RESTAURANT GROUP 401(K) RETIREMENT PLAN	c EIN-PN 45-1734458-001
a	Plan name FNB OXFORD BANK PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor FNB OXFORD BANK	c EIN-PN 64-0156680-001
a	Plan name FOX CERAMIC TILE, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor FOX CERAMIC TILE, INC.	c EIN-PN 48-0849111-001
a	Plan name FRANKFURT-SHORT-BRUZA ASSOCIATES P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor FRANKFURT-SHORT-BRUZA ASSOCIATES	c EIN-PN 73-1188758-001
a	Plan name G.C. HANFORD MFG. COMPANY PROFIT SHARING PLAN	
b	Name of plan sponsor G.C. HANFORD MANUFACTURING COMPANY	c EIN-PN 15-0332110-001
a	Plan name GAYLOR ELECTRIC, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GAYLOR ELECTRIC, INC.	c EIN-PN 20-3727689-001
a	Plan name GD COPPER RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor GD COPPERU.S.A., INC.	c EIN-PN 11-3809687-001
a	Plan name GILBERT LLP 401K PROFIT SHARING PLAN	
b	Name of plan sponsor GILBERT LLP	c EIN-PN 52-2283869-001
a	Plan name GLOBAL HEAVY CORP RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor GLOBAL HEAVY CORP	c EIN-PN 47-2898733-001
a	Plan name GLOBAL LANGUAGE CENTER 401(K) PLAN	
b	Name of plan sponsor GLOBAL LANGUAGE CENTER	c EIN-PN 52-2310922-001

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 GOLDBELT 401K PLAN	
b	Name of plan sponsor GOLDBELT INC	c EIN-PN 92-0045465-004
a	Plan name GOLDEN STATE RETIREMENT PLAN AS ADOPTED BY HALL AMBULANCE SERVICE, INC.	
b	Name of plan sponsor HALL AMBULANCE SERVICE, INC.	c EIN-PN 95-2788714-003
a	Plan name GOODHUE & HAWKINS NAVY YARD, LLC 401(K) PLAN	
b	Name of plan sponsor GOODHUE & HAWKINS NAVY YARD, LLC	c EIN-PN 45-5526536-001
a	Plan name GRAYBACK FORESTRY, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor GRAYBACK FORESTRY, INC.	c EIN-PN 93-0730231-002
a	Plan name GREAT LAKES LANDSCAPE CO. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor GREAT LAKES LANDSCAPE CO.	c EIN-PN 36-3242001-001
a	Plan name GREATER CLEVELAND PARTNERSHIP 401(K) PLAN	
b	Name of plan sponsor GREATER CLEVELAND PARTNERSHIP	c EIN-PN 34-0149250-002
a	Plan name GREEN CIRCLE GROWERS, INC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor GREEN CIRCLE GROWERS, INC	c EIN-PN 34-1102630-001
a	Plan name GREEN GENERATION SOLUTIONS, LLC 401(K) PLAN	
b	Name of plan sponsor GREEN GENERATION SOLUTIONS, LLC	c EIN-PN 45-2158079-001
a	Plan name GREEN VALLEY GROCERY 401(K) RETIREMENT PLAN	
b	Name of plan sponsor GREEN VALLEY GROCERY 401K	c EIN-PN 88-0149656-001
a	Plan name GTZ LANDSCAPE SERVICE INC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor GTZ LANDSCAPE SERVICE INC	c EIN-PN 85-2215458-001
a	Plan name GUESS?, INC. 401(K) PLAN AND TRUST	
b	Name of plan sponsor GUESS , INC.	c EIN-PN 95-3679695-001
a	Plan name HANI AHDAB, DDS, LLC 401(K) PLAN	
b	Name of plan sponsor HANI AHDAB, DDS, LLC	c EIN-PN 81-4159728-001

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	HARDWOOD CREATIONS RETIREMENT PLAN	
b	Name of plan sponsor	HARDWOOD CREATIONS	c EIN-PN 33-0027030-002
a	Plan name	HARDY WINDOW COMPANY RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	HARDY WINDOW COMPANY	c EIN-PN 47-0949927-001
a	Plan name	HART INTERCIVIC, INC. 401 (K) PLAN	
b	Name of plan sponsor	HART INTERCIVIC, INC.	c EIN-PN 95-3248916-001
a	Plan name	HAWKINS ELECTRIC SERVICE, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	HAWKINS ELECTRIC SERVICE, INC.	c EIN-PN 52-0631489-001
a	Plan name	HEALTHCREST SURGICAL 401(K) PLAN	
b	Name of plan sponsor	HEALTHCREST SURGICAL MANAGEMENT, LLC	c EIN-PN 81-3933873-001
a	Plan name	HECKLER & FRABIZZIO, P.A. 401(K) PS PLAN	
b	Name of plan sponsor	HECKLER & FRABIZZIO, P.A.	c EIN-PN 51-0271091-002
a	Plan name	HERCULES FIRE PROTECTION AND PLUMBING, LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	HERCULES FIRE PROTECTION & PLUMBING, LLC	c EIN-PN 38-3734395-001
a	Plan name	HMC GROUP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HMC GROUP	c EIN-PN 95-2109939-001
a	Plan name	HORIZON MEDIA, LLC 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	HORIZON MEDIA HOLDINGS, LLC	c EIN-PN 13-3494927-002
a	Plan name	IKO HOURLY EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor	IKO INDUSTRIES, INC.	c EIN-PN 16-1007213-002
a	Plan name	IMPROVING 401(K) PLAN	
b	Name of plan sponsor	IMPROVING ENTERPRISES, INC.	c EIN-PN 34-2013309-001
a	Plan name	INCORPORATED COUNTY OF LOS ALAMOS NEW MEXICO PENSION PLAN AND TRUST	
b	Name of plan sponsor	INCORPORATED COUNTY OF LOS ALAMOS	c EIN-PN 85-6000679-001

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	INFORMATION MANAGEMENT GROUP, INC. 401(K) SALARY SAVINGS PLAN	
b	Name of plan sponsor	INFORMATION MANAGEMENT GROUP, IN	c EIN-PN 54-1817080-001
a	Plan name	INNOVATIVE INJECTION TECHNOLOGIES, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	INNOVATIVE INJECTION TECHNOLOGIES, INC.	c EIN-PN 16-1668785-001
a	Plan name	INSTITUTIONAL PRODUCTS, LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	INSTITUTIONAL PRODUCTS, LLC	c EIN-PN 85-0462518-001
a	Plan name	INTEGRITY MECHANICAL, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	INTEGRITY MECHANICAL, INC.	c EIN-PN 23-2792860-001
a	Plan name	INTERA INCORPORATED EMPLOYEES SAVINGS TRUST	
b	Name of plan sponsor	INTERA INCORPORATED	c EIN-PN 74-3010638-001
a	Plan name	INTERIOR REMOVAL SPECIALIST, INC RETIREMENT PLAN	
b	Name of plan sponsor	INTERIOR REMOVAL SPECIALIST INC	c EIN-PN 95-4462657-001
a	Plan name	INVESTMENT CORPORATION OF PALM BEACH 401(K) PLAN	
b	Name of plan sponsor	INVESTMENT CORP OF PALM BEACH	c EIN-PN 59-1318711-002
a	Plan name	IRON MECHANICAL, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	IRON MECHANICAL, INC.	c EIN-PN 27-0252085-001
a	Plan name	IRVINE TECHNOLOGY CORPORATION 401(K) PLAN	
b	Name of plan sponsor	IRVINE TECHNOLOGY CORPORATION	c EIN-PN 33-0889599-001
a	Plan name	JOHN MADONNA CONSTRUCTION COMPANY, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	JOHN MADONNA CONSTRUCTION COMPANY, INC.	c EIN-PN 73-1695944-002
a	Plan name	JPS ELECTRIC INC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	JPS ELECTRIC INC	c EIN-PN 38-4162170-001
a	Plan name	JUMPSTART, INC. RETIREMENT PLAN	
b	Name of plan sponsor	JUMPSTART, INC.	c EIN-PN 34-1398522-001

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	K EN M ELEKTRISCH, INC. DBA K&M ELECTRIC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	K EN M ELEKTRISCH, INC. DBA K&M ELECTRIC	c EIN-PN 87-4180545-001
a	Plan name	KALEIDOSCOPE ANIMATIONS, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	KALEIDOSCOPE ANIMATIONS, INC.	c EIN-PN 34-1620905-001
a	Plan name	KENNY'S COLLISION CENTER, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	KENNY'S COLLISION CENTER, INC.	c EIN-PN 20-0500306-001
a	Plan name	KERN HEALTH SYSTEMS RETIREMENT PLAN 457B	
b	Name of plan sponsor	KERN HEALTH SYSTEMS	c EIN-PN 77-0392231-457
a	Plan name	KEYLOGIC TECHNOLOGIES CORP.	
b	Name of plan sponsor	KEYLOGIC TECHNOLOGIES CORP.	c EIN-PN 82-4736977-001
a	Plan name	KNOWLEDGE BASED SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	KNOWLEDGE BASED SYSTEMS, INC.	c EIN-PN 74-2505334-001
a	Plan name	KSL RESORTS 401(K) PLAN	
b	Name of plan sponsor	KSL/MS MANAGEMENT, LLC	c EIN-PN 57-1210922-001
a	Plan name	L & L CONSTRUCTION, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	L & L CONSTRUCTION, INC.	c EIN-PN 23-2070629-001
a	Plan name	LAN-CO COMPANIES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	LAN-CO COMPANIES, INC.	c EIN-PN 16-1580369-001
a	Plan name	LANDSCAPE SUPPORT SERVICES RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	LANDSCAPE SUPPORT SERVICES	c EIN-PN 35-2414529-001
a	Plan name	LAS VEGAS PAVING CORPORATION PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor	LAS VEGAS PAVING CORPORATION	c EIN-PN 88-0072823-001
a	Plan name	LDM PLUMBING & MECHANICAL, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	LDM PLUMBING & MECHANICAL, INC.	c EIN-PN 06-1808495-001

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	LEARY EDUCATIONAL FOUNDATION, INC. EMPLOYEE PROFIT SHARING PLAN	
b	Name of plan sponsor	LEARY EDUCATIONAL FOUNDATION, INC.	c EIN-PN 54-0885291-001
a	Plan name	LEASING ASSOCIATES, INC. 401K PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	LEASING ASSOCIATES, INC.	c EIN-PN 76-0167538-001
a	Plan name	LIBERTY ROOFING CENTER INC 401(K) PLAN	
b	Name of plan sponsor	LIBERTY ROOFING CENTER INC	c EIN-PN 13-4350807-001
a	Plan name	LIFEPATH, INC. 401(K) PLAN	
b	Name of plan sponsor	LIFEPATH, INC.	c EIN-PN 04-2542539-001
a	Plan name	LOCKS LAW FIRM 401(K) PLAN	
b	Name of plan sponsor	LOCKS LAW FIRM	c EIN-PN 52-1322614-001
a	Plan name	LONESTAR CONSTRUCTION RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	LONESTAR CONSTRUCTION	c EIN-PN 32-0348204-001
a	Plan name	LTS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LTS	c EIN-PN 20-3409438-001
a	Plan name	M. T. LANEY COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	M. T. LANEY COMPANY, INC.	c EIN-PN 52-2031565-001
a	Plan name	MAC PAPERS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MAC PAPERS, LLC 401(K) PROFIT SHARING PLAN	c EIN-PN 59-1059698-001
a	Plan name	MAG SAVINGS PLAN	
b	Name of plan sponsor	MAG AEROSPACE INDUSTRIES, LLC	c EIN-PN 26-3112085-002
a	Plan name	MANAC TRAILERS USA, INC. SAVINGS PLAN	
b	Name of plan sponsor	MANAC TRAILERS USA, INC.	c EIN-PN 43-1968355-001
a	Plan name	MARQUEZ CABLE SYSTEMS, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	MARQUEZ CABLE SYSTEMS, INC.	c EIN-PN 95-4865118-001

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 MASSILLON CONSTRUCTION AND SUPPLY, LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor MASSILLON CONSTRUCTION AND SUPPLY, LLC	c EIN-PN 27-0660067-001
a	Plan name MCKENNA MOTOR COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor MCKENNA MOTOR COMPANY, INC.	c EIN-PN 95-3379374-002
a	Plan name MECHANICAL INDUSTRIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MECHANICAL INDUSTRIES, INC.	c EIN-PN 95-4434184-001
a	Plan name MEDIC AIR SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor MEDIC AIR SYSTEMS, INC.	c EIN-PN 59-3367217-001
a	Plan name MEREDIAN HOLDINGS GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor MEREDIAN HOLDINGS GROUP, INC.	c EIN-PN 47-1087239-001
a	Plan name METAGENICS LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor METAGENICS LLC	c EIN-PN 95-3841881-002
a	Plan name MG ELECTRIC, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor MG ELECTRIC, INC.	c EIN-PN 47-5207669-001
a	Plan name MILLER PRODUCTS COMPANY 401(K) RETIREMENT PLAN	
b	Name of plan sponsor MILLER PRODUCTS COMPANY	c EIN-PN 42-0822333-001
a	Plan name MOBIS PARTS AMERICA, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MOBIS PARTS AMERICA, LLC	c EIN-PN 20-0262739-001
a	Plan name MOBIS PARTS MIAMI, LLC 401(K) PLAN	
b	Name of plan sponsor MOBIS PARTS MIAMI, LLC	c EIN-PN 46-2788067-001
a	Plan name MOHAWK VALLEY MATERIALS, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor MOHAWK VALLEY MATERIALS, INC.	c EIN-PN 20-8311089-001
a	Plan name MOLY-COP USA LLC 401(K) PLAN	
b	Name of plan sponsor MOLY-COP USA LLC	c EIN-PN 20-1689954-001

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	MOMENTUS CAPITAL RETIREMENT PLAN	
b	Name of plan sponsor	CAPITAL IMPACT PARTNERS	c EIN-PN 52-1290127-001
a	Plan name	MOSS TELECOMMUNICATION SERVICES RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	MOSS TELECOMMUNICATION SERVICES	c EIN-PN 38-2181711-001
a	Plan name	MOUNTAIN CASCADE, INC. PROFIT SHARING/401(K) PLAN	
b	Name of plan sponsor	MOUNTAIN CASCADE, INC.	c EIN-PN 94-2806169-002
a	Plan name	MTC US CORP. 401(K) PLAN	
b	Name of plan sponsor	MTC US CORP.	c EIN-PN 26-1314191-001
a	Plan name	MUTUAL OF OMAHA MORTGAGE 401(K) PLAN	
b	Name of plan sponsor	MUTUAL OF OMAHA MORTGAGE, INC.	c EIN-PN 46-1728831-002
a	Plan name	NAPHCARE US INC. 401(K) PLAN	
b	Name of plan sponsor	NAPHCARE U.S., INC.	c EIN-PN 63-1099646-001
a	Plan name	NATIONAL COMMUNITY PHARMACISTS ASSOCIATION 401(K) SAVINGS PLAN	
b	Name of plan sponsor	NATIONAL COMMUNITY PHARMACISTS A	c EIN-PN 36-1520710-001
a	Plan name	NATIONWIDE SEPARATE ACCOUNT	
b	Name of plan sponsor	NATIONWIDE TRUST COMPANY	c EIN-PN 31-1592130-001
a	Plan name	NEON ELECTRIC CORPORATION RETIREMENT PLAN	
b	Name of plan sponsor	NEON ELECTRIC CORPORATION	c EIN-PN 74-1079811-002
a	Plan name	NEUROCRINE BIOSCIENCES, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	NEUROCRINE BIOSCIENCES	c EIN-PN 33-0525145-001
a	Plan name	NFP CORP. 401(K) PLAN	
b	Name of plan sponsor	NFP CORP.	c EIN-PN 13-4029115-001
a	Plan name	NICHOLAS & COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NICHOLAS & CO., INC.	c EIN-PN 87-0235565-001

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	NIKA TECHNOLOGIES, INC. DBA NIKA ARCHITECTS AND ENGINEERS 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	NIKA TECHNOLOGIES, INC.
c	EIN-PN	52-2089785-001
a	Plan name	NMR 401(K) PLAN
b	Name of plan sponsor	NMR CONSULTING, INC.
c	EIN-PN	52-2047564-001
a	Plan name	NORTHERN REFRIGERATED TRANSPORTATION, INC. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	NORTHERN REFRIGERATED TRANSPORTATION, INC.
c	EIN-PN	95-3137599-002
a	Plan name	NORTHLAND RESIDENTIAL LLC 401(K) PROFIT SHARING PLAN & TRUST
b	Name of plan sponsor	NORTHLAND RESIDENTIAL LLC
c	EIN-PN	04-3280612-001
a	Plan name	NSA MEDIA GROUP, INC. 401(K) PLAN
b	Name of plan sponsor	NSA MEDIA GROUP, INC.
c	EIN-PN	82-0906738-001
a	Plan name	NTS AMEGA WEST 401K PLAN
b	Name of plan sponsor	NTS AMEGA WEST USA INC
c	EIN-PN	85-2888357-001
a	Plan name	OHIO SHARED INFORMATION SERVICES INC. 401(K) PLAN
b	Name of plan sponsor	OHIO SHARED INFORMATION SERVICES
c	EIN-PN	31-1762094-001
a	Plan name	ONEAMERICA SEPARATE ACCOUNT
b	Name of plan sponsor	AMERICAN UNITED LIFE INSURANCE COMPANY
c	EIN-PN	35-0145825-100
a	Plan name	ONTELLUS 401(K) PLAN
b	Name of plan sponsor	RECORDXTECHNOLGIES DBA ONTELLUS
c	EIN-PN	47-2853876-002
a	Plan name	OUTCOMES 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	OUTCOMES ONE, INC
c	EIN-PN	59-1710804-001
a	Plan name	PACIFIC EXCAVATION, INC DAVIS BACON 401(K) PLAN
b	Name of plan sponsor	PACIFIC EXCAVATION, INC.
c	EIN-PN	93-1267825-002
a	Plan name	PARTNERSHIP FOR PUBLIC SERVICE 401(K) PLAN
b	Name of plan sponsor	PARTNERSHIP FOR PUBLIC SERVICE
c	EIN-PN	06-1540513-001

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	PASSCO COMPANIES, LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	PASSCO COMPANIES, LLC	c EIN-PN 20-3448699-001
a	Plan name	PASTERNAK & FIDIS, P.C. 401(K) PLAN	
b	Name of plan sponsor	PASTERNAK & FIDIS, P.C.	c EIN-PN 52-1186677-001
a	Plan name	PDAMC, LLC 401(K) PLAN	
b	Name of plan sponsor	PDAMC, LLC	c EIN-PN 20-0612371-001
a	Plan name	PENN VALLEY GAS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PENN VALLEY GAS	c EIN-PN 23-1600215-001
a	Plan name	PENZANCE MANAGEMENT, LLC 401(K) PLAN	
b	Name of plan sponsor	PENZANCE MANAGEMENT, LLC	c EIN-PN 42-1603451-002
a	Plan name	PERMA-STRUCTO, INC. 401(K) PLAN	
b	Name of plan sponsor	PERMA-STRUCTO, INC.	c EIN-PN 39-1048426-001
a	Plan name	PERMOBIL, INC. 401(K) PROFIT SHARING AND TRUST	
b	Name of plan sponsor	PERMOBIL, INC	c EIN-PN 04-3189589-001
a	Plan name	PFISTER ENERGY, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	PFISTER ENERGY, INC.	c EIN-PN 20-3413769-001
a	Plan name	PIAD PRECISION CASTING CORPORATION INCENTIVE 401(K) PLAN	
b	Name of plan sponsor	PIAD PRECISION CASTING CORPORATION	c EIN-PN 25-1190211-001
a	Plan name	PLSI 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PYRAMID LOGISTICS SERVICES, INC.	c EIN-PN 33-0794075-001
a	Plan name	POLYTEX ENVIRONMENTAL INKS, INC. 401(K) PLAN	
b	Name of plan sponsor	POLYTEX ENVIRONMENTAL INKS, INC.	c EIN-PN 47-1226922-001
a	Plan name	POWER COMPONENT SYSTEMS, INC. EMPLOYEE 401(K)/PROFIT SHARING PLAN	
b	Name of plan sponsor	POWER COMPONENT SYSTEMS, INC.	c EIN-PN 52-1197676-001

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 PRECO INC PROFIT SHARING/401(K) SAVINGS PLAN	
b	Name of plan sponsor PRECO, LLC	c EIN-PN 87-3882552-001
a	Plan name PREFERRED BUSINESS SYSTEMS LLC 401K	
b	Name of plan sponsor PREFERRED BUSINESS SYSTEMS	c EIN-PN 77-1596759-001
a	Plan name PUMA BIOTECHNOLOGY, INC. 401(K) PLAN	
b	Name of plan sponsor PUMA BIOTECHNOLOGY, INC.	c EIN-PN 77-0683487-001
a	Plan name PYRAMID SYSTEMS, INC. RETIREMENT PLAN	
b	Name of plan sponsor PYRAMID SYSTEMS, INC.	c EIN-PN 54-1768412-001
a	Plan name QUADRANT, INCORPORATED 401(K) PLAN	
b	Name of plan sponsor QUADRANT, INCORPORATED	c EIN-PN 02-0565405-001
a	Plan name QUALITY MACHINING SERVICES, LLC 401(K) PSP	
b	Name of plan sponsor QUALITY MACHINING SERVICES, LLC	c EIN-PN 62-1737162-001
a	Plan name QUALITY ROOFING SERVICES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor QUALITY ROOFING SERVICES, INC.	c EIN-PN 06-1303539-001
a	Plan name R.W. MERCER COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor R.W. MERCER COMPANY	c EIN-PN 38-2120488-001
a	Plan name RADAN CONSTRUCTION INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor RADAN CONSTRUCTION INC.	c EIN-PN 33-0480127-001
a	Plan name RAM ENTERPRISE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor RAM ENTERPRISE, INC.	c EIN-PN 93-1073692-001
a	Plan name RATTIGAN CONSTRUCTION, INCORPORATED RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor RATTIGAN CONSTRUCTION, INCORPORATED	c EIN-PN 95-4877929-001
a	Plan name REALTY MANAGEMENT SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor REALTY MANAGEMENT SERVICES, INC.	c EIN-PN 52-1568244-001

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	REBEL INDUSTRIES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	REBEL INDUSTRIES, INC.	c EIN-PN 71-0879098-001
a	Plan name	RED SEAL MEASUREMENT 401(K) PLAN	
b	Name of plan sponsor	MEASUREMENT TECHNOLOGY GROUP, INC.	c EIN-PN 45-5319547-001
a	Plan name	RENTAL CONCEPTS, INC. PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	RENTAL CONCEPTS, INC.	c EIN-PN 34-1506081-001
a	Plan name	RIVER STREET ARCHITECTURE, LLC 401(K) PLAN	
b	Name of plan sponsor	RIVER STREET ARCHITECTURE, LLC	c EIN-PN 62-1766711-001
a	Plan name	RND CONTRACTORS INC. RETIREMENT PLAN	
b	Name of plan sponsor	RND CONTRACTORS INC.	c EIN-PN 20-8581146-001
a	Plan name	ROCHE BROS. 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	ROCHE BROS. MIDCO, LLC	c EIN-PN 04-2264124-001
a	Plan name	ROSTRAVER TOWNSHIP 401(A) PLAN	
b	Name of plan sponsor	ROSTRAVER TOWNSHIP	c EIN-PN 22-6002685-401
a	Plan name	RUA & SON MECHANICAL, INC. 401(K) & CONTRACTORS PLAN	
b	Name of plan sponsor	RUA & SONS MECHANICAL, INC.	c EIN-PN 51-0437705-001
a	Plan name	RUPPERT 401(K) PLAN	
b	Name of plan sponsor	RUPPERT LANDSCAPE LLC	c EIN-PN 20-0802650-001
a	Plan name	SAFCO FOAM INSULATION LLC 401K PLAN	
b	Name of plan sponsor	SAFCO FOAM INSULATION LLC	c EIN-PN 20-5035946-001
a	Plan name	SECURIGUARD, INC. RETIREMENT	
b	Name of plan sponsor	SECURIGUARD, INC.	c EIN-PN 54-1189694-001
a	Plan name	SEF ENERGY, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SEF ENERGY, LLC	c EIN-PN 81-3424201-001

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	SEPRIO, LLC 401(K) PLAN	
b	Name of plan sponsor	SEPRIO, LLC	c EIN-PN 42-1507519-001
a	Plan name	SERVICE TRUCKS INTERNATIONAL, INC 401(K) PLAN	
b	Name of plan sponsor	SERVICE TRUCKS INTERNATIONAL, INC	c EIN-PN 42-0940961-001
a	Plan name	SERVICEPOWER, INC. 401(K) PLAN	
b	Name of plan sponsor	SERVICEPOWER, INC.	c EIN-PN 52-2160760-001
a	Plan name	SHERWOOD INDUSTRIES, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	SHERWOOD INDUSTRIES, INC.	c EIN-PN 36-2947560-001
a	Plan name	SHIELDS HEALTH CARE GROUP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SHIELDS HEALTH CARE GROUP, INC.	c EIN-PN 04-2974694-001
a	Plan name	SIGNCOMP RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	SIGNCOMP LLC	c EIN-PN 92-2352826-001
a	Plan name	SLATER WATERPROOFING, INC. 401(K) PLAN	
b	Name of plan sponsor	SLATER WATERPROOFING, INC.	c EIN-PN 95-3352055-002
a	Plan name	SNYDER ENVIRONMENTAL SERVICES, INC. RETIREMENT PLAN	
b	Name of plan sponsor	SNYDER ENVIRONMENTAL SERVICES, INC.	c EIN-PN 55-0595347-002
a	Plan name	SOLV ENERGY 401(K) PLAN	
b	Name of plan sponsor	SOLV ENERGY, LLC	c EIN-PN 47-4673720-001
a	Plan name	SOUTH BAY HEALTH & INSURANCE SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	SOUTH BAY HEALTH & INSURANCE SER	c EIN-PN 26-0485597-002
a	Plan name	STANLEY MARTIN 401(K) PLAN	
b	Name of plan sponsor	STANLEY MARTIN HOMES, LLC	c EIN-PN 20-8046523-001
a	Plan name	STATEWIDE CONTRACTING INC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	STATEWIDE CONTRACTING INC	c EIN-PN 47-2914915-001

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 STRUCTURES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor STRUCTURES, INC.	c EIN-PN 84-1481745-001
a	Plan name SUB-LEVEL INSTALLATIONS, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor SUB-LEVEL INSTALLATIONS, INC.	c EIN-PN 22-2574214-001
a	Plan name SUN GARDEN SPECIALTY TEA, INC 401(K) PLAN	
b	Name of plan sponsor SUN GARDEN SPECIALTY TEA, INC	c EIN-PN 77-0593802-001
a	Plan name SUN LUMBER COMPANY LLC 401(K) PLAN	
b	Name of plan sponsor SUN LUMBER COMPANY LLC	c EIN-PN 48-1239755-001
a	Plan name SUNPRO COATINGS, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor SUNPRO COATINGS INC.	c EIN-PN 46-1840820-001
a	Plan name SUNSTONE HOTEL INVESTORS, INC. 401K PROFIT SHARING	
b	Name of plan sponsor SUNSTONE HOTEL INVESTORS, INC.	c EIN-PN 20-1296886-001
a	Plan name SURFACE TECH, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor GALLERY PAINTING, INC.	c EIN-PN 81-3073661-001
a	Plan name SYSTEM STUDIES & SIMULATION, INC. 401(K) AND PROFIT SHARING/RETIREMENT PLAN	
b	Name of plan sponsor SYSTEM STUDIES & SIMULATION, INC.	c EIN-PN 63-1060391-001
a	Plan name TAYLOR GAS CO. INC. 401(K) PLAN	
b	Name of plan sponsor TAYLOR GAS CO. INC.	c EIN-PN 52-0736910-001
a	Plan name TEAM LYDERS RETIREMENT PLAN	
b	Name of plan sponsor SUNDANCE, INC.	c EIN-PN 38-3284710-001
a	Plan name TEOCO CORPORATION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor TEOCO CORPORATION	c EIN-PN 54-1727406-001
a	Plan name TEXSUN ELECTRICAL CONTRACTORS, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor TEXSUN ELECTRICAL CONTRACTORS, INC.	c EIN-PN 75-1879972-001

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	THE ALUMINUM ASSOCIATION, INC. EMPLOYEES' SAVINGS AND SUPPLEMENTAL RETIREMENT PLAN	
b	Name of plan sponsor	THE ALUMINUM ASSOCIATION INC.	c EIN-PN 13-0428020-001
a	Plan name	THE C E GROUP 401(K) PLAN	
b	Name of plan sponsor	THE CONSULTING ENGINEERING GROUP, LLC	c EIN-PN 84-1483963-001
a	Plan name	THE CONTRACTORS RETIREMENT PLAN	
b	Name of plan sponsor	TEMP POWER SYSTEMS	c EIN-PN 33-0360706-001
a	Plan name	THE COTTAGE GARDENS, INC. 401(K) PLAN	
b	Name of plan sponsor	THE COTTAGE GARDENS, INC.	c EIN-PN 38-1618393-001
a	Plan name	THE DONALDSON GROUP 401(K) PLAN	
b	Name of plan sponsor	THE DONALDSON GROUP, LLC	c EIN-PN 52-2135284-001
a	Plan name	THE HANA GROUP, INC. RETIREMENT PLAN	
b	Name of plan sponsor	THE HANA GROUP, INC.	c EIN-PN 99-0320188-001
a	Plan name	THE IMAGE GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	THE IMAGE GROUP, INC.	c EIN-PN 34-1629768-001
a	Plan name	THE KNOT WORLDWIDE 401K PLAN	
b	Name of plan sponsor	THE KNOT WORLDWIDE	c EIN-PN 74-3207805-001
a	Plan name	THE ORLO FUND 401(K) PLAN	
b	Name of plan sponsor	ORLO MANAGEMENT	c EIN-PN 26-4562632-001
a	Plan name	THE OXFORD INDUSTRIES, INC. RETIREMENT SAVINGS PLA	
b	Name of plan sponsor	OXFORD INDUSTRIES, INC.	c EIN-PN 58-0831862-004
a	Plan name	THE PEDIATRIC MANAGEMENT GROUP, LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	PEDIATRIC MANAGEMENT GROUP, LLC	c EIN-PN 95-4602048-001
a	Plan name	THE WHALEN COMPANY 401(K) PLAN	
b	Name of plan sponsor	THE WHALEN COMPANY	c EIN-PN 52-0784012-002

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 THERAGENICS CORPORATION EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor THERAGENICS CORPORATION	c EIN-PN 58-1528626-001
a	Plan name THUNDER PLUMBING 401(K) PLAN	
b	Name of plan sponsor THUNDER PLUMBING, INC.	c EIN-PN 35-2314442-001
a	Plan name TORN & GLASSER, INC. EMPLOYEES' 401K PLAN	
b	Name of plan sponsor TORN & GLASSER, INC.	c EIN-PN 95-2038611-003
a	Plan name TOWNSHIP OF LOWER MERION 401A	
b	Name of plan sponsor TOWNSHIP OF LOWER MERION	c EIN-PN 23-6003034-401
a	Plan name TRACE-A-MATIC/AFW/D&H INDUSTRIES EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor TRACE-A-MATIC CORPORATION	c EIN-PN 39-1103834-001
a	Plan name TRAVEL PORTLAND 401(K) PLAN	
b	Name of plan sponsor TRAVEL PORTLAND	c EIN-PN 93-0723862-002
a	Plan name TRAVELERS AID SOCIETY OF GREATER NEW ORLEANS PROFIT SHARING PLAN	
b	Name of plan sponsor TRAVELERS AID SOCIETY OF GREATER	c EIN-PN 72-0408990-002
a	Plan name TREASURE COAST CARDIOVASCULAR INSTITUTE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TREASURE COAST CARDIOVASCULAR INSTITUTE, INC.	c EIN-PN 81-1771630-001
a	Plan name TRIANGLE ENTERPRISES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor TRIANGLE ENTERPRISES, INC.	c EIN-PN 95-4624276-001
a	Plan name TRIUMPH DESIGN BUILD 401K SAVINGS PLAN	
b	Name of plan sponsor TRIUMPH DESIGN BUILD	c EIN-PN 36-3538898-001
a	Plan name TUBACEX US HOLDING SALARIED RETIREMENT PLAN	
b	Name of plan sponsor SALEM TUBE, INC.	c EIN-PN 25-1651664-001
a	Plan name UNITED REFRIGERATION INC	
b	Name of plan sponsor UNITED REFRIGERATION, INC.	c EIN-PN 23-1307731-001

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	UNLV MEDICINE 401(K) PLAN	
b	Name of plan sponsor	UNLV MEDICINE	c EIN-PN 81-3419791-001
a	Plan name	USA BUILDING MAINTENANCE INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	USA BUILDING MAINTENANCE INC.	c EIN-PN 83-4065069-001
a	Plan name	VALLEY PIPELINE SERVICES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	VALLEY PIPELINE SERVICES, INC.	c EIN-PN 46-3475229-001
a	Plan name	VALLEY VIEW CASINO 401(K) PLAN & TRUST	
b	Name of plan sponsor	SAN PASQUAL CASINO DEV GROUP	c EIN-PN 33-0926655-001
a	Plan name	VALPREDO FARMS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	COUNTRY SWEET PRODUCE, INC.	c EIN-PN 26-2049019-001
a	Plan name	VAN DAM ENTERPRISES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	VAN DAM ENTERPRISES, INC.	c EIN-PN 46-2784874-001
a	Plan name	VANDALIA REHAB, LLC 401(K) PLAN	
b	Name of plan sponsor	VANDALIA REHAB, LLC	c EIN-PN 88-1291851-001
a	Plan name	VANDEN BOS ELECTRIC, INC. 401(K) PLAN	
b	Name of plan sponsor	VANDEN BOS ELECTRIC, INC.	c EIN-PN 68-0251448-002
a	Plan name	VARICENT US OPCO CORPORATION 401(K) PLAN	
b	Name of plan sponsor	VARICENT US OPCO CORPORATION	c EIN-PN 84-3655010-001
a	Plan name	VERIMATRIX 401 K PLAN	
b	Name of plan sponsor	VERIMATRIX INC	c EIN-PN 33-0935891-001
a	Plan name	VERITAS HHS 401(K) PLAN	
b	Name of plan sponsor	VERITAS HHS, LLC	c EIN-PN 27-5319964-001
a	Plan name	VIDEON CENTRAL INC 401K AND PSP	
b	Name of plan sponsor	ZACHARY BOYD	c EIN-PN 23-2936071-002

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 VIRGIN ATLANTIC AIRWAYS, LTD. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor VIRGIN ATLANTIC AIRWAYS, LTD.	c EIN-PN 13-3213123-001
a	Plan name VMD SYSTEMS INTEGRATORS INC 401K	
b	Name of plan sponsor VMD CORP	c EIN-PN 04-3671521-001
a	Plan name WALTON CONSTRUCTION, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor WALTON CONSTRUCTION, INC	c EIN-PN 82-3421806-001
a	Plan name WAVELINK SAFE HARBOR 401K PLAN	
b	Name of plan sponsor WAVELINK INC	c EIN-PN 63-1270903-001
a	Plan name WCJ CONSULTANTS, LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor WCJ CONSULTANTS, LLC	c EIN-PN 01-0907258-001
a	Plan name WEBER ELECTRIC, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor WEBER ELECTRIC, INC.	c EIN-PN 74-2714235-001
a	Plan name WEST COAST FITNESS LLC 401(K) PLAN	
b	Name of plan sponsor OTF SERVICES LLC	c EIN-PN 81-4962263-001
a	Plan name WEST MAUI CONSTRUCTION LLC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor WEST MAUI CONSTRUCTION LLC	c EIN-PN 27-2305765-001
a	Plan name WESTCON COMMERCIAL INDUSTRIES, LTD. CO. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor WESTCON COMMERCIAL INDUSTRIES, LTD. CO.	c EIN-PN 38-3899565-001
a	Plan name WESTERN TRAILER CO. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WESTERN TRAILER CO.	c EIN-PN 82-0347136-001
a	Plan name WESTWIND LANDSCAPE CONSTRUCTION, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor WESTWIND LANDSCAPE CONSTRUCTION, INC.	c EIN-PN 85-0392769-001
a	Plan name WINN CONSTRUCTION SERVICES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor WINN CONSTRUCTION SERVICES, INC.	c EIN-PN 46-2428144-001

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

a Plan name	WISE COMPONENTS, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b Name of plan sponsor	WISE COMPONENTS, INC.	c EIN-PN 13-2895657-001

a Plan name	WNBC 401(K) PLAN	
b Name of plan sponsor	WASHINGTON NATIONALS BASEBALL	c EIN-PN 20-5145890-002

a Plan name	XLA 401(K) PLAN	
b Name of plan sponsor	XLA, INC.	c EIN-PN 52-1653076-001

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

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

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

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

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b Name of plan sponsor		c EIN-PN

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

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

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

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan FLEXPATH INDEXPLUS CONSERVATIVE 2045 FUND	B Three-digit plan number (PN) ▶ 236
C Plan sponsor's name as shown on line 2a of Form 5500 GREAT GRAY TRUST COMPANY, LLC	D Employer Identification Number (EIN) 47-3144367

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

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	3217159
		7653316
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)	116597824
(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)	900476
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	80514901
(15) Other	1c(15)	428971

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	120715459	88597188
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h	0	70896
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	3300551	7652912
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	3300551	7723808
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	117414908	80873380

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)	30033	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		9208170
(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)		-48887
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		9189316

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)	4195	
(5) Investment advisory and investment management fees	2i(5)	240909	
(6) Bank or trust company trustee/custodial fees	2i(6)	38523	
(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)		283627
j Total expenses. Add all expense amounts in column (b) and enter total	2j		283627

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		8905689
l Transfers of assets:			
(1) To this plan	2l(1)		17467357
(2) From this plan	2l(2)		62914574

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 _____.