

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

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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.

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 INDEXPLUS CONSERVATIVE RETIREMENT FUND
1b Three-digit plan number (PN): 227
1c Effective date of plan
2a Plan sponsor's name (employer, if for a single-employer plan): GREAT GRAY TRUST COMPANY, LLC
2b Employer Identification Number (EIN): 47-2916729
2c Plan Sponsor's telephone number: 866-427-6885
2d Business code (see instructions)

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

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

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.

Form 5500 (2024) v. 240311

<b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	<b>3b</b> Administrator's EIN  <b>3c</b> Administrator's telephone number  <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
<b>4</b> If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: <b>a</b> Sponsor's name <b>c</b> Plan Name	<b>4b</b> EIN  <b>4d</b> PN
<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b>
<b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ). <b>a(1)</b> Total number of active participants at the beginning of the plan year ..... <b>a(2)</b> Total number of active participants at the end of the plan year ..... <b>b</b> Retired or separated participants receiving benefits..... <b>c</b> Other retired or separated participants entitled to future benefits ..... <b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> ..... <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. .... <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> ..... <b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) ..... <b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) ..... <b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> <b>6a(1)</b> <b>6a(2)</b> <b>6b</b> <b>6c</b> <b>6d</b> 0 <b>6e</b> <b>6f</b> <b>6g(1)</b> <b>6g(2)</b> <b>6h</b>
<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....	<b>7</b>

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

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

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

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

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

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

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

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

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

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<b>SCHEDULE D</b> <b>(Form 5500)</b>  Department of the Treasury Internal Revenue Service  Department of Labor Employee Benefits Security Administration	<b>DFE/Participating Plan Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).  <b>▶ File as an attachment to Form 5500.</b>	OMB No. 1210-0110  <hr/> <b>2024</b>  <hr/> <b>This Form is Open to Public Inspection.</b>
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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>	
<b>A</b> Name of plan <u>FLEXPATH INDEXPLUS CONSERVATIVE RETIREMENT FUND</u>	<b>B</b> Three-digit plan number (PN) <span style="float: right;">▶</span> <u>227</u>
<b>C</b> Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>GREAT GRAY TRUST COMPANY, LLC</u>	<b>D</b> Employer Identification Number (EIN) <u>47-2916729</u>

<b>Part I</b>	<b>Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)</b> (Complete as many entries as needed to report all interests in DFEs)
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<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>U.S. TIPS FUND F</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
<b>c</b> EIN-PN <u>36-4495972-001</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>16656860</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>AB US LARGE CAP GROWTH CIT CLASS W</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>ALLIANCEBERNSTEIN LP</u>		
<b>c</b> EIN-PN <u>04-6948485-007</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1618575</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>AMERICAN CENTURY U.S. PREMIER LCG</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>GLOBAL TRUST COMPANY</u>		
<b>c</b> EIN-PN <u>30-6406015-027</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1618575</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>BR MSCI ACWI EX-US IMI INDEX FUND F</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
<b>c</b> EIN-PN <u>27-4955447-001</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>6950641</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>CAPITAL GROUP EUROPACIFIC GROWTH (U</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>CAPITAL BANK AND TRUST COMPANY</u>		
<b>c</b> EIN-PN <u>95-6597294-661</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>595379</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>COLUMBIA TRUST INTEGRATED SCV FUND</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>AMERIPRISE TRUST COMPANY</u>		
<b>c</b> EIN-PN <u>87-2656112-224</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>COMMODITY INDEX DAILY FUND F</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
<b>c</b> EIN-PN <u>27-4616854-001</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: COHEN & STEERS GLOBAL LISTED INFRA		
<b>b</b> Name of sponsor of entity listed in (a): SEI TRUST COMPANY		
<b>c</b> EIN-PN 46-3422853-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 274516
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: COHEN & STEERS COLLECTIVE INVESTMEN		
<b>b</b> Name of sponsor of entity listed in (a): SEI TRUST COMPANY		
<b>c</b> EIN-PN 46-3411346-064	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 28521
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: DUFF & PHELPS MASTER COLLECTIVE INV		
<b>b</b> Name of sponsor of entity listed in (a): SEI TRUST COMPANY		
<b>c</b> EIN-PN 81-3547755-098	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 28521
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: DEVELOPED REAL ESTATE INDEX FUND F		
<b>b</b> Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
<b>c</b> EIN-PN 27-2659367-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: ENHANCED ROLL YIELD INDEX FUND F		
<b>b</b> Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
<b>c</b> EIN-PN 99-3833244-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2354074
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: FTSE NAREIT ALL EQUITY REITS INDEX		
<b>b</b> Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
<b>c</b> EIN-PN 99-3288435-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 199779
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: GLOBAL CORE INFRASTRUCTURE INDEX FU		
<b>b</b> Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
<b>c</b> EIN-PN 99-2814912-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 640957
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: INTERMEDIATE GOVERNMENT BOND INDEX		
<b>b</b> Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
<b>c</b> EIN-PN 94-3326533-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 10854899
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: JPMCB U.S. VALUE FUND		
<b>b</b> Name of sponsor of entity listed in (a): JPMORGAN CHASE BANK, N.A.		
<b>c</b> EIN-PN 87-1901428-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1618575
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: LONG TERM CREDIT BOND INDEX FUND F		
<b>b</b> Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
<b>c</b> EIN-PN 87-1467186-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2116289

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: LONG TERM GOV BOND INDEX FUND F		
<b>b</b> Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
<b>c</b> EIN-PN 82-3997809-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4078996
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: LORD ABBETT TOTAL RETURN II		
<b>b</b> Name of sponsor of entity listed in (a): GREAT GRAY TRUST COMPANY, LLC		
<b>c</b> EIN-PN 82-1151625-324	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4949607
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: MFS INTERNATIONAL GROWTH CIT		
<b>b</b> Name of sponsor of entity listed in (a): MFS HERITAGE TRUST COMPANY		
<b>c</b> EIN-PN 57-1187281-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1091528
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: NEUBERGER BERMAN SMALL CAP GROWTH T		
<b>b</b> Name of sponsor of entity listed in (a): NEUBERGER BERMAN TRUST COMPANY N.A.		
<b>c</b> EIN-PN 20-4797982-013	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 89129
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: NB STRATEGIC MULTI-SECTOR FIXED INC		
<b>b</b> Name of sponsor of entity listed in (a): NEUBERGER BERMAN TRUST CO. N.A.		
<b>c</b> EIN-PN 20-4797982-006	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2474804
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: PGIM TOTAL RETURN BOND FUND		
<b>b</b> Name of sponsor of entity listed in (a): GREAT GRAY TRUST COMPANY, LLC		
<b>c</b> EIN-PN 38-4097323-471	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2474804
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: PIMCO RAE INTERNATIONAL CIT		
<b>b</b> Name of sponsor of entity listed in (a): GREAT GRAY TRUST COMPANY, LLC		
<b>c</b> EIN-PN 38-4139838-617	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1091528
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: PIMCO RAE US SMALL CIT		
<b>b</b> Name of sponsor of entity listed in (a): GREAT GRAY TRUST COMPANY, LLC		
<b>c</b> EIN-PN 88-2858456-798	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 89129
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: PRINCIPAL US REAL ESTATE SECURITIES		
<b>b</b> Name of sponsor of entity listed in (a): GREAT GRAY TRUST COMPANY, LLC		
<b>c</b> EIN-PN 99-3723837-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 28521
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: PUTNAM LARGE CAP VALUE TRUST		
<b>b</b> Name of sponsor of entity listed in (a): PUTNAM FIDUCIARY TRUST COMPANY, LLC		
<b>c</b> EIN-PN 82-3639536-275	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1618575

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL 1000 INDEX FUND F		
<b>b</b> Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
<b>c</b> EIN-PN 94-3357216-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 15116604
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL 2000 INDEX FUND F		
<b>b</b> Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
<b>c</b> EIN-PN 94-3318704-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 416207
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: THE COLLECTIVE DL TOTAL RET BOND FU		
<b>b</b> Name of sponsor of entity listed in (a): THE NORTHERN TRUST COMPANY		
<b>c</b> EIN-PN 90-6169542-009	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4949608
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: U.S. DEBT INDEX FUND F		
<b>b</b> Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
<b>c</b> EIN-PN 94-3291425-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 34669965
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: BR INTERM GOV BOND INDEX FUND F		
<b>b</b> Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
<b>c</b> EIN-PN 94-3326533-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: GLOBAL REAL ESTATE SECURITIES FUND		
<b>b</b> Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST COMPANY		
<b>c</b> EIN-PN 27-5279909-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: CIF II INTL QUALITY GROWTH SERIES 2		
<b>b</b> Name of sponsor of entity listed in (a): WELLINGTON TRUST COMPANY, NA		
<b>c</b> EIN-PN 04-6913417-167	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
<b>a</b>	Plan name 401(K) RETIREMENT AND SAVINGS PLAN FOR SOUTHWEST WATER COMPANY	
<b>b</b>	Name of plan sponsor SOUTHWEST WATER COMPANY	<b>c</b> EIN-PN 95-1840947-003
<b>a</b>	Plan name 4WALL ENTERTAINMENT 401(K) PLAN	
<b>b</b>	Name of plan sponsor ACADIA MANAGEMENT, INC.	<b>c</b> EIN-PN 20-2539295-001
<b>a</b>	Plan name A J. DWOSKIN & ASSOCIATES, INC. EMPLOYEE 401(K) PLAN	
<b>b</b>	Name of plan sponsor A J. DWOSKIN & ASSOCIATES, INC.	<b>c</b> EIN-PN 54-1013098-001
<b>a</b>	Plan name ABBTECH PROFESSIONAL RESOURCES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor ABBTECH PROFESSIONAL RESOURCES,	<b>c</b> EIN-PN 54-1789173-001
<b>a</b>	Plan name ABC BUSINESS FORMS, INC. 401(K)	
<b>b</b>	Name of plan sponsor ABC BUSINESS FORMS, INC.	<b>c</b> EIN-PN 36-2499734-001
<b>a</b>	Plan name ABC IMAGING OF WASHINGTON, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor ABC IMAGING OF WASHINGTON, INC.	<b>c</b> EIN-PN 52-1758526-001
<b>a</b>	Plan name ACME PAPER & SUPPLY CO., INC. 401(K) PLAN AND TRUST	
<b>b</b>	Name of plan sponsor ACME PAPER & SUPPLY CO., INC.	<b>c</b> EIN-PN 52-0748849-002
<b>a</b>	Plan name ACON INVESTMENTS LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor ACON INVESTMENTS, LLC	<b>c</b> EIN-PN 52-1961415-001
<b>a</b>	Plan name ACTUALIZE CONSULTING, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor ACTUALIZE CONSULTING, LLC	<b>c</b> EIN-PN 86-1079277-001
<b>a</b>	Plan name ADELFI CU 401(K) PLAN	
<b>b</b>	Name of plan sponsor ADELFI CREDIT UNION	<b>c</b> EIN-PN 95-6111723-002
<b>a</b>	Plan name ADVANCED SURGEONS, P.C. 401K PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor ADVANCED SURGEONS, PC	<b>c</b> EIN-PN 63-0851248-001
<b>a</b>	Plan name AGC BIOLOGICS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor AGC BIOLOGICS, INC.	<b>c</b> EIN-PN 26-1276219-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
<b>a</b>	Plan name	AIR TEMPERATURE SPECIALISTS, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	AIR TEMPERATURE SPECIALISTS	<b>c</b> EIN-PN 33-0957411-001
<b>a</b>	Plan name	ALL NEW STAMPING EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	ALL NEW STAMPING EMPLOYEES 401(K) PLAN	<b>c</b> EIN-PN 95-2223414-001
<b>a</b>	Plan name	ALL STAR AUTO LIGHTS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ALL STAR AUTO LIGHTS, INC.	<b>c</b> EIN-PN 84-2659383-001
<b>a</b>	Plan name	ALOHA ISLAND CABLE DBA CABLEMASTERS RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	ALOHA ISLAND CABLE DBA CABLEMASTERS	<b>c</b> EIN-PN 33-0676505-001
<b>a</b>	Plan name	ALTOS FEDERAL GROUP, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	ALTOS FEDERAL GROUP, INC.	<b>c</b> EIN-PN 52-2013624-002
<b>a</b>	Plan name	AM PIERCE & ASSOCIATES 401(K) PLAN	
<b>b</b>	Name of plan sponsor	AM PIERCE & ASSOCIATES, INC.	<b>c</b> EIN-PN 26-1231257-001
<b>a</b>	Plan name	AMEREDEV 401(K) PLAN	
<b>b</b>	Name of plan sponsor	AMEREDEV OPERATING, LLC	<b>c</b> EIN-PN 82-0617153-001
<b>a</b>	Plan name	AMERICAN HOTEL & LODGING ASSOCIATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	AMERICAN HOTEL & LODGING ASSOCIA	<b>c</b> EIN-PN 13-0432130-001
<b>a</b>	Plan name	AMES CONSTRUCTION INC. RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	AMES CONSTRUCTION INC	<b>c</b> EIN-PN 41-0871375-010
<b>a</b>	Plan name	AMS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DAC ACQUISITION COMPANY, LLC	<b>c</b> EIN-PN 20-5081488-001
<b>a</b>	Plan name	AMSTAR GROUP, LLC SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	M SHARED SERVICES, LLC	<b>c</b> EIN-PN 82-3594161-001
<b>a</b>	Plan name	AMYX, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	AMYX, INC.	<b>c</b> EIN-PN 54-1979772-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
<b>a</b>	Plan name ANNETT HOLDINGS, INC. EMPLOYEE SAVINGS AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor ANNETT HOLDINGS INC	<b>c</b> EIN-PN 42-1292482-001
<b>a</b>	Plan name AQUA SURVEY, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor AQUA SURVEY, INC.	<b>c</b> EIN-PN 22-2244754-001
<b>a</b>	Plan name AQUATEC INTERNATIONAL, INC.401K PLAN	
<b>b</b>	Name of plan sponsor AQUATEC INTERNATIONAL, INC.	<b>c</b> EIN-PN 33-0364575-001
<b>a</b>	Plan name ARGEE CONSTRUCTION, INC. DBA CRAFTSMAN CONSTRUCTION RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor ARGEE CONSTRUCTION, INC. DBA CRAFTS MAN CONSTRUCTION	<b>c</b> EIN-PN 47-1242149-001
<b>a</b>	Plan name ASSEMBLY HEALTH PLAN 401(K)	
<b>b</b>	Name of plan sponsor PREFERRED PODIATRY MANAGEMENT LLC	<b>c</b> EIN-PN 45-2538551-001
<b>a</b>	Plan name ASSOCIATED NEUROLOGISTS, P.C. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor ASSOCIATED NEUROLOGISTS, P.C.	<b>c</b> EIN-PN 06-0882576-001
<b>a</b>	Plan name ATTAIN CONSULTING GROUP LLC	
<b>b</b>	Name of plan sponsor ATTAIN CONSULTING GROUP LLC	<b>c</b> EIN-PN 85-0709432-001
<b>a</b>	Plan name ATX NETWORKS 401(K) PLAN	
<b>b</b>	Name of plan sponsor ATX NETWORKS (DALLAS) CORP.	<b>c</b> EIN-PN 80-0223540-001
<b>a</b>	Plan name AUTOMEPP OPEN MULTIPLE EMPLOYER 401(K) PLAN	
<b>b</b>	Name of plan sponsor AMI BENEFIT PLAN ADMINISTRATORS, IN	<b>c</b> EIN-PN 34-1781113-002
<b>a</b>	Plan name AVALO THERAPEUTICS 401(K) PLAN	
<b>b</b>	Name of plan sponsor AVALO THERAPEUTICS	<b>c</b> EIN-PN 45-0705648-001
<b>a</b>	Plan name B & B THEATRES OPERATING COMPANY, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor B & B THEATRES OPERATING COMPANY, INC.	<b>c</b> EIN-PN 43-1870501-001
<b>a</b>	Plan name B & D CONSTRUCTION COMPANY, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor B & D CONSTRUCTION COMPANY, INC.	<b>c</b> EIN-PN 33-0890957-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
<b>a</b> Plan name	BACHEM AMERICAS, INC. 401(K) RETIREMENT PLAN	
<b>b</b> Name of plan sponsor	BACHEM AMERICAS ,INC.	<b>c</b> EIN-PN 95-2705001-006
<b>a</b> Plan name	BALTIMORE WATERPROOFING, INC. RETIREMENT SAVINGS PLAN	
<b>b</b> Name of plan sponsor	BALTIMORE WATERPROOFING	<b>c</b> EIN-PN 20-3065991-001
<b>a</b> Plan name	BCI 401(K) PLAN	
<b>b</b> Name of plan sponsor	BAMMAN CONSULTING	<b>c</b> EIN-PN 20-2180288-001
<b>a</b> Plan name	BELLES PROPERTY MANAGEMENT, LLC RETIREMENT SAVINGS PLAN	
<b>b</b> Name of plan sponsor	BELLES PROPERTY MANAGEMENT, LLC	<b>c</b> EIN-PN 47-3346178-003
<b>a</b> Plan name	BELLWETHER ENTERPRISE REAL ESTATE CAPITAL 401(K) PLAN	
<b>b</b> Name of plan sponsor	BELLWETHER ENTERPRISE REAL ESTATE CAPITAL, LLC	<b>c</b> EIN-PN 26-2916887-001
<b>a</b> Plan name	BERK HOLDING CORP 401K PLAN	
<b>b</b> Name of plan sponsor	SETH BERK	<b>c</b> EIN-PN 85-0531894-001
<b>a</b> Plan name	BI-STATE CONSTRUCTION COMPANY, INC. RETIREMENT SAVINGS PLAN	
<b>b</b> Name of plan sponsor	BI-STATE CONSTRUCTION COMPANY, INC.	<b>c</b> EIN-PN 23-1725380-001
<b>a</b> Plan name	BIG BEN ENGINEERING RETIREMENT SAVINGS PLAN	
<b>b</b> Name of plan sponsor	BIG BEN INC DBA BIG BEN ENGINEERING	<b>c</b> EIN-PN 33-0873500-001
<b>a</b> Plan name	BIZERBA USA, INC. 401(K) PLAN	
<b>b</b> Name of plan sponsor	BIZERBA USA, INC.	<b>c</b> EIN-PN 22-2529556-001
<b>a</b> Plan name	BLAIR RUBBER COMPANY 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b> Name of plan sponsor	BLAIR RUBBER COMPANY	<b>c</b> EIN-PN 34-1351173-001
<b>a</b> Plan name	BOLGER LLC RETIREMENT SAVINGS PLAN AND TRUST	
<b>b</b> Name of plan sponsor	BOLGER LLC	<b>c</b> EIN-PN 26-2884864-004
<b>a</b> Plan name	BOWA BUILDERS, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b> Name of plan sponsor	BOWA BUILDERS, INC.	<b>c</b> EIN-PN 54-1440392-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	BROUGH CONSTRUCTION, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	BROUGH CONSTRUCTION, INC.	<b>c</b> EIN-PN 20-2861259-001
<b>a</b>	Plan name	BUCKLEY LAW, PC SALARY REDUCTION PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	BUCKLEY LAW, PC	<b>c</b> EIN-PN 93-0866229-001
<b>a</b>	Plan name	BUCKMAN'S, INC. EMPLOYEES 401(K) PLAN	
<b>b</b>	Name of plan sponsor	BUCKMANS, INC.	<b>c</b> EIN-PN 23-1893537-001
<b>a</b>	Plan name	BUFFINGTON BROTHERS HEATING & AIR CONDITIONING, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	BUFFINGTON BROTHERS HEATING & AIR CONDITIONING INC.	<b>c</b> EIN-PN 43-0913656-001
<b>a</b>	Plan name	BWW LAW GROUP, LLC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	BWW LAW GROUP, LLC	<b>c</b> EIN-PN 52-1965052-001
<b>a</b>	Plan name	C & B PIPING, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	C & B PIPING, INC.	<b>c</b> EIN-PN 63-0900243-001
<b>a</b>	Plan name	CALIFORNIA COMMERCIAL POOLS, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	CALIFORNIA COMMERCIAL POOLS, INC.	<b>c</b> EIN-PN 95-3452683-002
<b>a</b>	Plan name	CALIFORNIA PRO PAINTING, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	CALIFORNIA PRO PAINTING, INC.	<b>c</b> EIN-PN 77-0549284-001
<b>a</b>	Plan name	CALIFORNIA SKATEPARKS RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	CALIFORNIA SKATEPARKS	<b>c</b> EIN-PN 27-0118247-001
<b>a</b>	Plan name	CAMELBACK RESORT 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CMBK RESORT OPERATIONS, LLC	<b>c</b> EIN-PN 83-4414506-001
<b>a</b>	Plan name	CAMP MANAGEMENT 401(K) PLAN	
<b>b</b>	Name of plan sponsor	CAMP MANAGEMENT	<b>c</b> EIN-PN 80-0913630-001
<b>a</b>	Plan name	CAMP OLOWALU, LLC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	CAMP OLOWALU, LLC	<b>c</b> EIN-PN 82-1995467-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
<b>a</b>	Plan name <b>CAPITOL CONCIERGE 401K PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CAPITOL CONCIERGE, INC</b>	<b>c</b> EIN-PN <b>52-1677387-001</b>
<b>a</b>	Plan name <b>CARTESIAN 401(K) / PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CARTESIAN, INC.</b>	<b>c</b> EIN-PN <b>48-1129619-001</b>
<b>a</b>	Plan name <b>CASE PAPER CO., INC. 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CASE PAPER CO., INC.</b>	<b>c</b> EIN-PN <b>11-1945820-004</b>
<b>a</b>	Plan name <b>CENTERSQUARE INVESTMENT MANAGEMENT, LLC RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CENTERSQUARE INVESTMENT MANAGEM</b>	<b>c</b> EIN-PN <b>82-2740442-001</b>
<b>a</b>	Plan name <b>CFI, INC. RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CFI, INC.</b>	<b>c</b> EIN-PN <b>56-1967620-001</b>
<b>a</b>	Plan name <b>CHESAPEAKE EYE CARE MANAGEMENT, LLC 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CHESAPEAKE EYE CARE MANAGEMENT,</b>	<b>c</b> EIN-PN <b>82-1735145-001</b>
<b>a</b>	Plan name <b>CHICO EYE CENTER 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CHICO EYE CENTER</b>	<b>c</b> EIN-PN <b>91-1841310-001</b>
<b>a</b>	Plan name <b>CITY NATIONAL BANK RETIREMENT SAVINGS PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CITY NATIONAL BANK OF FLORIDA</b>	<b>c</b> EIN-PN <b>59-1297458-005</b>
<b>a</b>	Plan name <b>COASTAL EYE CLINIC, P.A. 401K PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>COASTAL EYE CLINIC, P.A.</b>	<b>c</b> EIN-PN <b>56-0948256-001</b>
<b>a</b>	Plan name <b>COLONIAL PARKING 401(K) RETIREMENT SAVINGS PLAN</b>	
<b>b</b>	Name of plan sponsor <b>COLONIAL PARKING, INC.</b>	<b>c</b> EIN-PN <b>53-0215818-003</b>
<b>a</b>	Plan name <b>COLUMBUS RUBBER &amp; GASKET, INC., 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>COLUMBUS RUBBER AND GASKET COMPANY, INC</b>	<b>c</b> EIN-PN <b>64-0588011-001</b>
<b>a</b>	Plan name <b>CONNECTED-HR RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CONNECTED BUSINESS SERVICES, LLC</b>	<b>c</b> EIN-PN <b>45-3734737-001</b>

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
<b>a</b>	Plan name CONQUEST SOLUTIONS, LLC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor CONQUEST SOLUTIONS LLC	<b>c</b> EIN-PN 26-4033869-001
<b>a</b>	Plan name CONSILIO 401(K) PLAN	
<b>b</b>	Name of plan sponsor CONSILIO, LLC	<b>c</b> EIN-PN 54-2019342-001
<b>a</b>	Plan name CONTROLLED CREDIT CORPORATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor CONTROLLED CREDIT CORPORATION	<b>c</b> EIN-PN 31-0726808-002
<b>a</b>	Plan name COOPERATIVE OF AMERICAN PHYSICIANS, INC. - MUTUAL PROTECTION TRUST RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor COOPERATIVE OF AMERICAN PHYSICIANS, INC.	<b>c</b> EIN-PN 95-2988063-001
<b>a</b>	Plan name CORDENTAL GROUP MANAGEMENT, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor CORDENTAL GROUP MANAGEMENT, LLC	<b>c</b> EIN-PN 38-4036446-001
<b>a</b>	Plan name CORPORATE ONE FEDERAL CREDIT UNION 401(K) PLAN AND TRUST	
<b>b</b>	Name of plan sponsor CORPORATE ONE FEDERAL CREDIT UNION	<b>c</b> EIN-PN 31-1102257-003
<b>a</b>	Plan name COSSENTINO CONTRACTING COMPANY, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor COSSENTINO CONTRACTING COMPANY, INC.	<b>c</b> EIN-PN 52-0880312-001
<b>a</b>	Plan name CT & T CONCRETE PAVING, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor CT & T CONCRETE PAVING, INC.	<b>c</b> EIN-PN 20-2642225-001
<b>a</b>	Plan name CTSI 401(K) PLAN	
<b>b</b>	Name of plan sponsor COHERENT TECHNICAL SERVICES, INC	<b>c</b> EIN-PN 20-3557917-001
<b>a</b>	Plan name CURI 401(K) PLAN	
<b>b</b>	Name of plan sponsor MEDICAL MUTUAL INSURANCE COMPANY OF NORTH CAROLINA	<b>c</b> EIN-PN 56-1122874-003
<b>a</b>	Plan name D&E WINDOW AND DOOR, LLC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor D&E WINDOW AND DOOR, LLC	<b>c</b> EIN-PN 38-3821078-001
<b>a</b>	Plan name D. L. EVANS BANK 401(K) RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor D. L. EVANS BANK	<b>c</b> EIN-PN 82-0117415-003

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	DALLAS AREA HABITAT FOR HUMANITY 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DALLAS AREA HABITAT FOR HUMANITY	<b>c</b> EIN-PN 75-2097161-001
<b>a</b>	Plan name	DANA INNOVATIONS, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DANA INNOVATIONS, INC.	<b>c</b> EIN-PN 33-0005938-001
<b>a</b>	Plan name	DANIEL GALE 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	DANIEL GALE AGENCY	<b>c</b> EIN-PN 11-3024856-001
<b>a</b>	Plan name	DECISIVEDGE, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	DECISIVEDGE, LLC	<b>c</b> EIN-PN 26-1440851-001
<b>a</b>	Plan name	DES-CASE CORPORATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DES-CASE CORPORATION	<b>c</b> EIN-PN 62-1170280-001
<b>a</b>	Plan name	DGE INVESTMENTS LLC 401(K) PROFIT SHARING PLAN & TRUST	
<b>b</b>	Name of plan sponsor	DGE INVESTMENTS LLC	<b>c</b> EIN-PN 47-3906849-001
<b>a</b>	Plan name	DIAMOND PAPER BOX COMPANY, INC. SECTION 401K PLAN	
<b>b</b>	Name of plan sponsor	DIAMOND PACKAGING, INC.	<b>c</b> EIN-PN 16-0408340-002
<b>a</b>	Plan name	DIRECT SERVICES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DIRECT SERVICES, INC.	<b>c</b> EIN-PN 54-1017844-001
<b>a</b>	Plan name	DIRECTORCORPS INC 401(K) PSP AND TRUST	
<b>b</b>	Name of plan sponsor	DIRECTORCORPS INC	<b>c</b> EIN-PN 62-1376617-001
<b>a</b>	Plan name	DIVENTURES KANSAS CITY LLC	
<b>b</b>	Name of plan sponsor	PAYCHEX INC	<b>c</b> EIN-PN 87-2973983-001
<b>a</b>	Plan name	DMI 401(K) PLAN	
<b>b</b>	Name of plan sponsor	DMI OPERATING COMPANY, LLC	<b>c</b> EIN-PN 34-2018999-001
<b>a</b>	Plan name	E&S RING MANAGEMENT CORPORATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	E&S RING MANAGEMENT CORPORATION	<b>c</b> EIN-PN 95-3977687-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
<b>a</b>	Plan name	E.R. STUEBNER CONSTRUCTION INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	E.R. STUEBNER CONSTRUCTION, INC.	<b>c</b> EIN-PN 23-1462430-002
<b>a</b>	Plan name	EMPLOYEE BENEFIT PLAN OF CGH TECHNOLOGIES, INC.	
<b>b</b>	Name of plan sponsor	CGH TECHNOLOGIES, INC.	<b>c</b> EIN-PN 52-1701132-001
<b>a</b>	Plan name	ENGINEERING CONSTRUCTORS, INC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	ENGINEERING CONSTRUCTORS, INC.	<b>c</b> EIN-PN 85-0263193-001
<b>a</b>	Plan name	EPLAN SERVICES GROUP TRUST	
<b>b</b>	Name of plan sponsor	EPLAN SERVICES GROUP TRUST	<b>c</b> EIN-PN 77-6214267-001
<b>a</b>	Plan name	ERNEST RENDA CONTRACTING, CO., INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	ERNEST RENDA CONTRACTING, CO., INC.	<b>c</b> EIN-PN 22-1597905-001
<b>a</b>	Plan name	EVANS DENTAL GROUP, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	EVANS DENTAL GROUP, LLC	<b>c</b> EIN-PN 45-1657663-001
<b>a</b>	Plan name	EXP U.S. SERVICES, INC. SAVING AND RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	EXP U.S. SERVICES, INC.	<b>c</b> EIN-PN 46-0523964-002
<b>a</b>	Plan name	EXTENDED SERVICE CORPORATION 401(K) PLAN	
<b>b</b>	Name of plan sponsor	EXTENDED SERVICE CORP.	<b>c</b> EIN-PN 54-1231849-002
<b>a</b>	Plan name	FAIRFIELD 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FF PROPERTIES LP	<b>c</b> EIN-PN 04-3177016-003
<b>a</b>	Plan name	FARO 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FARO TECHNOLOGIES, INC.	<b>c</b> EIN-PN 59-3157093-001
<b>a</b>	Plan name	FB BANCORP 401K PLAN	
<b>b</b>	Name of plan sponsor	FB BANCORP	<b>c</b> EIN-PN 88-0392128-001
<b>a</b>	Plan name	FEDERAL RENT-A-FENCE, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	FEDERAL RENT-A-FENCE, INC.	<b>c</b> EIN-PN 22-3264302-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	FEEDMORE, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FEEDMORE, INC.	<b>c</b> EIN-PN 54-1150923-001
<b>a</b>	Plan name	FIRST MILLWORK INC. 401K	
<b>b</b>	Name of plan sponsor	FOREMOST TRIM INC DBA FIRST MILLWORK	<b>c</b> EIN-PN 47-1688108-001
<b>a</b>	Plan name	FIRST STATE PEDIATRICS, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	FIRST STATE PEDIATRICS, LLC	<b>c</b> EIN-PN 27-0848567-001
<b>a</b>	Plan name	FLORY INDUSTRIES, INC. PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FLORY INDUSTRIES, INC.	<b>c</b> EIN-PN 94-2162773-002
<b>a</b>	Plan name	FLYNN RESTAURANT GROUP 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	FLYNN RESTAURANT GROUP 401(K) RETIREMENT PLAN	<b>c</b> EIN-PN 45-1734458-001
<b>a</b>	Plan name	FNB OXFORD BANK PROFIT SHARING AND 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FNB OXFORD BANK	<b>c</b> EIN-PN 64-0156680-001
<b>a</b>	Plan name	FORTUNE TOOL & MACHINE, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FORTUNE TOOL & MACHINE, INC.	<b>c</b> EIN-PN 38-2899607-001
<b>a</b>	Plan name	FOX CERAMIC TILE, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	FOX CERAMIC TILE, INC.	<b>c</b> EIN-PN 48-0849111-001
<b>a</b>	Plan name	FRANKFURT-SHORT-BRUZA ASSOCIATES P.C. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	FRANKFURT-SHORT-BRUZA ASSOCIATES	<b>c</b> EIN-PN 73-1188758-001
<b>a</b>	Plan name	FREEDMAN CLINIC PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	FREEDMAN CLINIC OF INTERNAL MEDICINE, LLP	<b>c</b> EIN-PN 72-0399647-001
<b>a</b>	Plan name	FST LOGISTICS, INC. 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	FST LOGISTICS, INC.	<b>c</b> EIN-PN 31-1584793-001
<b>a</b>	Plan name	G.C. HANFORD MFG. COMPANY PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	G.C. HANFORD MANUFACTURING COMPANY	<b>c</b> EIN-PN 15-0332110-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
<b>a</b>	Plan name <a href="#">GAYLOR ELECTRIC, INC. 401(K) PROFIT SHARING PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GAYLOR ELECTRIC, INC.</a>	<b>c</b> EIN-PN <a href="#">20-3727689-001</a>
<b>a</b>	Plan name <a href="#">GD COPPER RETIREMENT SAVINGS PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GD COPPERU.S.A., INC.</a>	<b>c</b> EIN-PN <a href="#">11-3809687-001</a>
<b>a</b>	Plan name <a href="#">GILBERT LLP 401K PROFIT SHARING PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GILBERT LLP</a>	<b>c</b> EIN-PN <a href="#">52-2283869-001</a>
<b>a</b>	Plan name <a href="#">GLOBAL HEAVY CORP RETIREMENT SAVINGS PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GLOBAL HEAVY CORP</a>	<b>c</b> EIN-PN <a href="#">47-2898733-001</a>
<b>a</b>	Plan name <a href="#">GLOBAL LABS, INC. 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GLOBAL LABS, INC.</a>	<b>c</b> EIN-PN <a href="#">94-3203817-001</a>
<b>a</b>	Plan name <a href="#">GLOBAL LANGUAGE CENTER 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GLOBAL LANGUAGE CENTER</a>	<b>c</b> EIN-PN <a href="#">52-2310922-001</a>
<b>a</b>	Plan name <a href="#">GMP CONTRACTING LLC 401(K) PROFIT SHARING PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GMP CONTRACTING, LLC</a>	<b>c</b> EIN-PN <a href="#">45-3037121-002</a>
<b>a</b>	Plan name <a href="#">GNOSTECH 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GNOSTECH, LLC</a>	<b>c</b> EIN-PN <a href="#">23-2181063-002</a>
<b>a</b>	Plan name <a href="#">GOLDBELT 401K PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GOLDBELT INC</a>	<b>c</b> EIN-PN <a href="#">92-0045465-004</a>
<b>a</b>	Plan name <a href="#">GOLDEN STATE RETIREMENT PLAN AS ADOPTED BY HALL AMBULANCE SERVICE, INC.</a>	
<b>b</b>	Name of plan sponsor <a href="#">HALL AMBULANCE SERVICE, INC.</a>	<b>c</b> EIN-PN <a href="#">95-2788714-003</a>
<b>a</b>	Plan name <a href="#">GOROVE SLADE ASSOCIATES INC 401(K) PROFIT SHARING PLAN &amp; TRUST</a>	
<b>b</b>	Name of plan sponsor <a href="#">GOROVE SLADE ASSOCIATES INC</a>	<b>c</b> EIN-PN <a href="#">52-1160286-005</a>
<b>a</b>	Plan name <a href="#">GRAYBACK FORESTRY, INC. RETIREMENT SAVINGS PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GRAYBACK FORESTRY, INC.</a>	<b>c</b> EIN-PN <a href="#">93-0730231-002</a>

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
<b>a</b>	Plan name GREEN CIRCLE GROWERS, INC 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor GREEN CIRCLE GROWERS, INC	<b>c</b> EIN-PN 34-1102630-001
<b>a</b>	Plan name GREEN GENERATION SOLUTIONS, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor GREEN GENERATION SOLUTIONS, LLC	<b>c</b> EIN-PN 45-2158079-001
<b>a</b>	Plan name GREEN VALLEY GROCERY 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor GREEN VALLEY GROCERY 401K	<b>c</b> EIN-PN 88-0149656-001
<b>a</b>	Plan name GTZ LANDSCAPE SERVICE INC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor GTZ LANDSCAPE SERVICE INC	<b>c</b> EIN-PN 85-2215458-001
<b>a</b>	Plan name GUERNSEY, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor GUERNSEY, INC.	<b>c</b> EIN-PN 54-0992207-001
<b>a</b>	Plan name GUESS?, INC. 401(K) PLAN AND TRUST	
<b>b</b>	Name of plan sponsor GUESS , INC.	<b>c</b> EIN-PN 95-3679695-001
<b>a</b>	Plan name HARDWOOD CREATIONS RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor HARDWOOD CREATIONS	<b>c</b> EIN-PN 33-0027030-002
<b>a</b>	Plan name HARDY WINDOW COMPANY RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor HARDY WINDOW COMPANY	<b>c</b> EIN-PN 47-0949927-001
<b>a</b>	Plan name HART INTERCIVIC, INC. 401 (K) PLAN	
<b>b</b>	Name of plan sponsor HART INTERCIVIC, INC.	<b>c</b> EIN-PN 95-3248916-001
<b>a</b>	Plan name HAUSER 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor HAUSER, INC. DBA HAUSER	<b>c</b> EIN-PN 31-0800707-001
<b>a</b>	Plan name HAWKINS ELECTRIC SERVICE, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor HAWKINS ELECTRIC SERVICE, INC.	<b>c</b> EIN-PN 52-0631489-001
<b>a</b>	Plan name HEALTHCARE STRATEGIES, INC. EMPLOYEES 401(K) PLAN	
<b>b</b>	Name of plan sponsor HEALTHCARE STRATEGIES, INC.	<b>c</b> EIN-PN 62-1854086-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
<b>a</b>	Plan name <b>HECKLER &amp; FRABIZZIO, P.A. 401(K) PS PLAN</b>	
<b>b</b>	Name of plan sponsor <b>HECKLER &amp; FRABIZZIO, P.A.</b>	<b>c</b> EIN-PN <b>51-0271091-002</b>
<b>a</b>	Plan name <b>HENRY ADAMS, LLC 401(K) SAVINGS PLAN</b>	
<b>b</b>	Name of plan sponsor <b>HENRY ADAMS, LLC</b>	<b>c</b> EIN-PN <b>20-0060224-004</b>
<b>a</b>	Plan name <b>HERITAGE PLASTICS, INC. 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>HERITAGE PLASTICS, INC.</b>	<b>c</b> EIN-PN <b>64-0661427-001</b>
<b>a</b>	Plan name <b>HIGHER POWER ELECTRICAL CONTRACTOR RETIREMENT SAVINGS PLAN</b>	
<b>b</b>	Name of plan sponsor <b>HIGHER POWER ELECTRICAL CONTRACTOR</b>	<b>c</b> EIN-PN <b>46-1959490-001</b>
<b>a</b>	Plan name <b>HMC GROUP 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>HMC GROUP</b>	<b>c</b> EIN-PN <b>95-2109939-001</b>
<b>a</b>	Plan name <b>HORIZON MEDIA, LLC 401(K) RETIREMENT SAVINGS PLAN</b>	
<b>b</b>	Name of plan sponsor <b>HORIZON MEDIA HOLDINGS, LLC</b>	<b>c</b> EIN-PN <b>13-3494927-002</b>
<b>a</b>	Plan name <b>HOWARD W. PHILLIPS &amp; CO., INC. 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>HOWARD W. PHILLIPS &amp; COMPANY, INC.</b>	<b>c</b> EIN-PN <b>52-0812521-001</b>
<b>a</b>	Plan name <b>HUKARIASCENDENT, INC. 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>HUKARIASCENDENT, INC.</b>	<b>c</b> EIN-PN <b>84-1500382-001</b>
<b>a</b>	Plan name <b>HYDRA-TECH 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>WHITTCO, INC.</b>	<b>c</b> EIN-PN <b>20-3444478-001</b>
<b>a</b>	Plan name <b>IDI ADMINISTRATIVE SERVICES, INC. MONEY PURCHASE P</b>	
<b>b</b>	Name of plan sponsor <b>IDI ADMINISTRATIVE SERVICES</b>	<b>c</b> EIN-PN <b>54-1742479-001</b>
<b>a</b>	Plan name <b>IKO HOURLY EMPLOYEE SAVINGS PLAN</b>	
<b>b</b>	Name of plan sponsor <b>IKO INDUSTRIES, INC.</b>	<b>c</b> EIN-PN <b>16-1007213-002</b>
<b>a</b>	Plan name <b>IMPROVING 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>IMPROVING ENTERPRISES, INC.</b>	<b>c</b> EIN-PN <b>34-2013309-001</b>

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	INCORPORATED COUNTY OF LOS ALAMOS NEW MEXICO PENSION PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	INCORPORATED COUNTY OF LOS ALAMOS	<b>c</b> EIN-PN 85-6000679-001
<b>a</b>	Plan name	INDUS ARCHITECTS PLLC/IAP LLC RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	INDUS ARCHITECTS PLLC	<b>c</b> EIN-PN 45-4068622-001
<b>a</b>	Plan name	INFORMATION MANAGEMENT GROUP, INC. 401(K) SALARY SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	INFORMATION MANAGEMENT GROUP, IN	<b>c</b> EIN-PN 54-1817080-001
<b>a</b>	Plan name	INNOVATIVE INJECTION TECHNOLOGIES, INC. 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	INNOVATIVE INJECTION TECHNOLOGIES, INC.	<b>c</b> EIN-PN 16-1668785-001
<b>a</b>	Plan name	INSTITUTIONAL PRODUCTS, LLC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	INSTITUTIONAL PRODUCTS, LLC	<b>c</b> EIN-PN 85-0462518-001
<b>a</b>	Plan name	INTERA INCORPORATED EMPLOYEES SAVINGS TRUST	
<b>b</b>	Name of plan sponsor	INTERA INCORPORATED	<b>c</b> EIN-PN 74-3010638-001
<b>a</b>	Plan name	INTERIOR REMOVAL SPECIALIST, INC RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	INTERIOR REMOVAL SPECIALIST INC	<b>c</b> EIN-PN 95-4462657-001
<b>a</b>	Plan name	INVESTMENT CORPORATION OF PALM BEACH 401(K) PLAN	
<b>b</b>	Name of plan sponsor	INVESTMENT CORP OF PALM BEACH	<b>c</b> EIN-PN 59-1318711-002
<b>a</b>	Plan name	IRON MECHANICAL, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	IRON MECHANICAL, INC.	<b>c</b> EIN-PN 27-0252085-001
<b>a</b>	Plan name	IRWIN NATURALS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	IRWIN NATURALS	<b>c</b> EIN-PN 45-0463960-002
<b>a</b>	Plan name	ITEK 401(K) PLAN	
<b>b</b>	Name of plan sponsor	ITEK SERVICES, INC	<b>c</b> EIN-PN 20-1668311-003
<b>a</b>	Plan name	J.M. EQUIPMENT COMPANY, INC., PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor	J.M. EQUIPMENT COMPANY, INC.	<b>c</b> EIN-PN 94-0693960-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
<b>a</b>	Plan name JOHN J. BRENNAN RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor JOHN J. BRENNAN CONSTRUCTION	<b>c</b> EIN-PN 06-0800500-003
<b>a</b>	Plan name JOHN MADONNA CONSTRUCTION COMPANY, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor JOHN MADONNA CONSTRUCTION COMPANY, INC.	<b>c</b> EIN-PN 73-1695944-002
<b>a</b>	Plan name JPS ELECTRIC INC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor JPS ELECTRIC INC	<b>c</b> EIN-PN 38-4162170-001
<b>a</b>	Plan name K EN M ELEKTRISCH, INC. DBA K&M ELECTRIC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor K EN M ELEKTRISCH, INC. DBA K&M ELECTRIC	<b>c</b> EIN-PN 87-4180545-001
<b>a</b>	Plan name KALEIDOSCOPE ANIMATIONS, INC. 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor KALEIDOSCOPE ANIMATIONS, INC.	<b>c</b> EIN-PN 34-1620905-001
<b>a</b>	Plan name KELLY GROSSMAN ARCHITECTS PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor KELLY GROSSMAN ARCHITECTS, LLC	<b>c</b> EIN-PN 26-2744684-001
<b>a</b>	Plan name KERN HEALTH SYSTEMS RETIREMENT PLAN 457B	
<b>b</b>	Name of plan sponsor KERN HEALTH SYSTEMS	<b>c</b> EIN-PN 77-0392231-457
<b>a</b>	Plan name KETA GROUP, LLC RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor KETA GROUP, LLC	<b>c</b> EIN-PN 41-2115741-001
<b>a</b>	Plan name KEYLOGIC TECHNOLOGIES CORP.	
<b>b</b>	Name of plan sponsor KEYLOGIC TECHNOLOGIES CORP.	<b>c</b> EIN-PN 82-4736977-001
<b>a</b>	Plan name KMM GROUP LTD 401K PLAN	
<b>b</b>	Name of plan sponsor KMM GROUP LTD	<b>c</b> EIN-PN 84-4109846-001
<b>a</b>	Plan name KOIKE ARONSON, INC. SAVINGS INVESTMENT PLAN	
<b>b</b>	Name of plan sponsor KOIKE ARONSON, INC.	<b>c</b> EIN-PN 16-1246213-001
<b>a</b>	Plan name KORTMAN, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor KORTMAN, INC.	<b>c</b> EIN-PN 86-0445719-002

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	KSL RESORTS 401(K) PLAN	
<b>b</b>	Name of plan sponsor	KSL/MS MANAGEMENT, LLC	<b>c</b> EIN-PN 57-1210922-001
<b>a</b>	Plan name	L & L CONTRACTING, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	L & L CONTRACTING, INC.	<b>c</b> EIN-PN 90-0673303-001
<b>a</b>	Plan name	LAN-CO COMPANIES, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	LAN-CO COMPANIES, INC.	<b>c</b> EIN-PN 16-1580369-001
<b>a</b>	Plan name	LANDSCAPE SUPPORT SERVICES RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	LANDSCAPE SUPPORT SERVICES	<b>c</b> EIN-PN 35-2414529-001
<b>a</b>	Plan name	LEADER ELECTRIC CORP., INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	LEADER ELECTRIC CORP., INC.	<b>c</b> EIN-PN 20-4847785-002
<b>a</b>	Plan name	LEARY EDUCATIONAL FOUNDATION, INC. EMPLOYEE PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	LEARY EDUCATIONAL FOUNDATION, INC.	<b>c</b> EIN-PN 54-0885291-001
<b>a</b>	Plan name	LEASING ASSOCIATES, INC. 401K PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	LEASING ASSOCIATES, INC.	<b>c</b> EIN-PN 76-0167538-001
<b>a</b>	Plan name	LEGEND PICTURES, LLC 401(K) RETIREMENT SAVINGS	
<b>b</b>	Name of plan sponsor	LEGEND PICTURES, LLC	<b>c</b> EIN-PN 20-1394866-001
<b>a</b>	Plan name	LEPI ENTERPRISES, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	LEPI ENTERPRISE, INC.	<b>c</b> EIN-PN 31-1190056-004
<b>a</b>	Plan name	LIBERTY ROOFING CENTER INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	LIBERTY ROOFING CENTER INC	<b>c</b> EIN-PN 13-4350807-001
<b>a</b>	Plan name	LIFEPATH, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	LIFEPATH, INC.	<b>c</b> EIN-PN 04-2542539-001
<b>a</b>	Plan name	LONESTAR CONSTRUCTION RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	LONESTAR CONSTRUCTION	<b>c</b> EIN-PN 32-0348204-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	LORENZ RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	LORENZ INTERNATIONAL LLC	<b>c</b> EIN-PN 75-3013761-001
<b>a</b>	Plan name	LTS 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	LTS	<b>c</b> EIN-PN 20-3409438-001
<b>a</b>	Plan name	M. GLOSSER & SONS, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	M. GLOSSER & SONS, INC.	<b>c</b> EIN-PN 25-0955578-003
<b>a</b>	Plan name	M. J. ROSS CONSTRUCTION, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	M. J. ROSS CONSTRUCTION, INC.	<b>c</b> EIN-PN 77-0252219-001
<b>a</b>	Plan name	MAC PAPERS, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	MAC PAPERS, LLC 401(K) PROFIT SHARING PLAN	<b>c</b> EIN-PN 59-1059698-001
<b>a</b>	Plan name	MAG SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	MAG AEROSPACE INDUSTRIES, LLC	<b>c</b> EIN-PN 26-3112085-002
<b>a</b>	Plan name	MARQUEZ CABLE SYSTEMS, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	MARQUEZ CABLE SYSTEMS, INC.	<b>c</b> EIN-PN 95-4865118-001
<b>a</b>	Plan name	MASSILLON CONSTRUCTION AND SUPPLY, LLC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	MASSILLON CONSTRUCTION AND SUPPLY, LLC	<b>c</b> EIN-PN 27-0660067-001
<b>a</b>	Plan name	MCEVOY OF MARIN 401(K) PLAN	
<b>b</b>	Name of plan sponsor	MCEVOY OF MARIN, LLC	<b>c</b> EIN-PN 94-3303550-001
<b>a</b>	Plan name	MCKENNA BOILER WORKS, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	MCKENNA BOILER WORKS, INC	<b>c</b> EIN-PN 95-1516558-002
<b>a</b>	Plan name	MCKENNA MOTOR COMPANY, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	MCKENNA MOTOR COMPANY, INC.	<b>c</b> EIN-PN 95-3379374-002
<b>a</b>	Plan name	MEAGHER & GEER P.L.L.P. PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor	MEAGHER & GEER, P.L.L.P.	<b>c</b> EIN-PN 41-0726610-003

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
<b>a</b>	Plan name <b>MECHANICAL INDUSTRIES, INC. 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MECHANICAL INDUSTRIES, INC.</b>	<b>c</b> EIN-PN <b>95-4434184-001</b>
<b>a</b>	Plan name <b>MEREDIAN HOLDINGS GROUP, INC. 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MEREDIAN HOLDINGS GROUP, INC.</b>	<b>c</b> EIN-PN <b>47-1087239-001</b>
<b>a</b>	Plan name <b>METAGENICS LLC 401(K) RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>METAGENICS LLC</b>	<b>c</b> EIN-PN <b>95-3841881-002</b>
<b>a</b>	Plan name <b>MG ELECTRIC, INC. 401(K) PROFIT SHARING PLAN AND TRUST</b>	
<b>b</b>	Name of plan sponsor <b>MG ELECTRIC, INC.</b>	<b>c</b> EIN-PN <b>47-5207669-001</b>
<b>a</b>	Plan name <b>MICHAEL FREDERICK PAVING CORPORATION RETIREMENT SAVINGS PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MICHAEL FREDERICK PAVING CORPORATION</b>	<b>c</b> EIN-PN <b>77-0108582-002</b>
<b>a</b>	Plan name <b>MILANI CONSTRUCTION, LLC RETIREMENT SAVINGS PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MILANI CONSTRUCTION, LLC</b>	<b>c</b> EIN-PN <b>77-0681984-001</b>
<b>a</b>	Plan name <b>MILLER, LONG &amp; ARNOLD 401(K) RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MILLER, LONG &amp; ARNOLD CO., INC.</b>	<b>c</b> EIN-PN <b>52-1731486-002</b>
<b>a</b>	Plan name <b>MINNOTTE CORPORATIONS 401K PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MINNOTTE MANUFACTURING CORPORATION</b>	<b>c</b> EIN-PN <b>25-1074347-001</b>
<b>a</b>	Plan name <b>MOBIS PARTS AMERICA, LLC 401(K) PROFIT SHARING PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MOBIS PARTS AMERICA, LLC</b>	<b>c</b> EIN-PN <b>20-0262739-001</b>
<b>a</b>	Plan name <b>MOBIS PARTS MIAMI, LLC 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MOBIS PARTS MIAMI, LLC</b>	<b>c</b> EIN-PN <b>46-2788067-001</b>
<b>a</b>	Plan name <b>MOLY-COP USA LLC 401(K) PLAN</b>	
<b>b</b>	Name of plan sponsor <b>MOLY-COP USA LLC</b>	<b>c</b> EIN-PN <b>20-1689954-001</b>
<b>a</b>	Plan name <b>MOMENTUS CAPITAL RETIREMENT PLAN</b>	
<b>b</b>	Name of plan sponsor <b>CAPITAL IMPACT PARTNERS</b>	<b>c</b> EIN-PN <b>52-1290127-001</b>

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	MOSS TELECOMMUNICATION SERVICES RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	MOSS TELECOMMUNICATION SERVICES	<b>c</b> EIN-PN 38-2181711-001
<b>a</b>	Plan name	MOUNTAIN CASCADE, INC. PROFIT SHARING/401(K) PLAN	
<b>b</b>	Name of plan sponsor	MOUNTAIN CASCADE, INC.	<b>c</b> EIN-PN 94-2806169-002
<b>a</b>	Plan name	MTC US CORP. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	MTC US CORP.	<b>c</b> EIN-PN 26-1314191-001
<b>a</b>	Plan name	MUTUAL OF OMAHA MORTGAGE 401(K) PLAN	
<b>b</b>	Name of plan sponsor	MUTUAL OF OMAHA MORTGAGE, INC.	<b>c</b> EIN-PN 46-1728831-002
<b>a</b>	Plan name	NAPHCARE US INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	NAPHCARE U.S., INC.	<b>c</b> EIN-PN 63-1099646-001
<b>a</b>	Plan name	NATIONAL COMMUNITY PHARMACISTS ASSOCIATION 401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	NATIONAL COMMUNITY PHARMACISTS A	<b>c</b> EIN-PN 36-1520710-001
<b>a</b>	Plan name	NATIONWIDE SEPARATE ACCOUNT	
<b>b</b>	Name of plan sponsor	NATIONWIDE TRUST COMPANY	<b>c</b> EIN-PN 31-1592130-001
<b>a</b>	Plan name	NEON ELECTRIC CORPORATION RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	NEON ELECTRIC CORPORATION	<b>c</b> EIN-PN 74-1079811-002
<b>a</b>	Plan name	NEUROCRINE BIOSCIENCES, INC. 401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	NEUROCRINE BIOSCIENCES	<b>c</b> EIN-PN 33-0525145-001
<b>a</b>	Plan name	NFP CORP. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	NFP CORP.	<b>c</b> EIN-PN 13-4029115-001
<b>a</b>	Plan name	NIKA TECHNOLOGIES, INC. DBA NIKA ARCHITECTS AND ENGINEERS 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	NIKA TECHNOLOGIES, INC.	<b>c</b> EIN-PN 52-2089785-001
<b>a</b>	Plan name	NMR 401(K) PLAN	
<b>b</b>	Name of plan sponsor	NMR CONSULTING, INC.	<b>c</b> EIN-PN 52-2047564-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
<b>a</b>	Plan name NORTHERN REFRIGERATED TRANSPORTATION, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor NORTHERN REFRIGERATED TRANSPORTATION, INC.	<b>c</b> EIN-PN 95-3137599-002
<b>a</b>	Plan name O'HARROW CONSTRUCTION CO. PROFIT SHARING AND SAVINGS PLAN AND TRUST	
<b>b</b>	Name of plan sponsor OHARROW CONSTRUCTION CO.	<b>c</b> EIN-PN 38-1369925-001
<b>a</b>	Plan name OHIO SHARED INFORMATION SERVICES INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor OHIO SHARED INFORMATION SERVICES	<b>c</b> EIN-PN 31-1762094-001
<b>a</b>	Plan name ONEAMERICA SEPARATE ACCOUNT	
<b>b</b>	Name of plan sponsor AMERICAN UNITED LIFE INSURANCE COMPANY	<b>c</b> EIN-PN 35-0145825-100
<b>a</b>	Plan name ONTELLUS 401(K) PLAN	
<b>b</b>	Name of plan sponsor RECORDXTECHNOLGIES DBA ONTELLUS	<b>c</b> EIN-PN 47-2853876-002
<b>a</b>	Plan name OUTCOMES 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor OUTCOMES ONE, INC	<b>c</b> EIN-PN 59-1710804-001
<b>a</b>	Plan name PACIFIC RIM CAPITAL, INC.	
<b>b</b>	Name of plan sponsor PACIFIC RIM CAPITAL, INC.	<b>c</b> EIN-PN 33-0426801-001
<b>a</b>	Plan name PARTNERSHIP FOR PUBLIC SERVICE 401(K) PLAN	
<b>b</b>	Name of plan sponsor PARTNERSHIP FOR PUBLIC SERVICE	<b>c</b> EIN-PN 06-1540513-001
<b>a</b>	Plan name PASSCO COMPANIES, LLC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor PASSCO COMPANIES, LLC	<b>c</b> EIN-PN 20-3448699-001
<b>a</b>	Plan name PASTERNAK & FIDIS, P.C. 401(K) PLAN	
<b>b</b>	Name of plan sponsor PASTERNAK & FIDIS, P.C.	<b>c</b> EIN-PN 52-1186677-001
<b>a</b>	Plan name PATRICIA J. LABRECK, DDS-PLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor PATRICIA J. LABRECK, DDS-PLC	<b>c</b> EIN-PN 38-3600401-001
<b>a</b>	Plan name PCCP, LLC 401(K) RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor PCCP, LLC	<b>c</b> EIN-PN 95-4688051-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	PENZANCE MANAGEMENT, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PENZANCE MANAGEMENT, LLC	<b>c</b> EIN-PN 42-1603451-002
<b>a</b>	Plan name	PERFORMANCE DESIGNS, INC. SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	PERFORMANCE DESIGNS, INC.	<b>c</b> EIN-PN 59-2295522-001
<b>a</b>	Plan name	PERMA-STRUCTO, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PERMA-STRUCTO, INC.	<b>c</b> EIN-PN 39-1048426-001
<b>a</b>	Plan name	PERMOBIL, INC. 401(K) PROFIT SHARING AND TRUST	
<b>b</b>	Name of plan sponsor	PERMOBIL, INC	<b>c</b> EIN-PN 04-3189589-001
<b>a</b>	Plan name	PLSI 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	PYRAMID LOGISTICS SERVICES, INC.	<b>c</b> EIN-PN 33-0794075-001
<b>a</b>	Plan name	POINT BREEZE CREDIT UNION RETIREMENT SAVINGS PLAN & TRUST	
<b>b</b>	Name of plan sponsor	POINT BREEZE CREDIT UNION	<b>c</b> EIN-PN 52-0447180-002
<b>a</b>	Plan name	POWER COMPONENT SYSTEMS, INC. EMPLOYEE 401(K)/PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	POWER COMPONENT SYSTEMS, INC.	<b>c</b> EIN-PN 52-1197676-001
<b>a</b>	Plan name	PRECO INC PROFIT SHARING/401(K) SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	PRECO, LLC	<b>c</b> EIN-PN 87-3882552-001
<b>a</b>	Plan name	PREMIER CARPET, INC. DBA GREEN POLISHING SOLUTIONS RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	PREMIER CARPET, INC. DBA GREEN POLISHING SOLUTIONS	<b>c</b> EIN-PN 95-4876194-001
<b>a</b>	Plan name	PRO FINISH PAINTING, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor	PRO FINISH PAINTING, INC.	<b>c</b> EIN-PN 20-8690058-001
<b>a</b>	Plan name	PRODUCER-WRITERS GUILD OF AMERICA PENSION PLAN 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PRODUCER-WRITERS GUILD OF AMERICA PENSION AND	<b>c</b> EIN-PN 95-2216351-003
<b>a</b>	Plan name	PUMA BIOTECHNOLOGY, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	PUMA BIOTECHNOLOGY, INC.	<b>c</b> EIN-PN 77-0683487-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
<b>a</b>	Plan name PYRAMID SYSTEMS, INC. RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor PYRAMID SYSTEMS, INC.	<b>c</b> EIN-PN 54-1768412-001
<b>a</b>	Plan name QUADRANT, INCORPORATED 401(K) PLAN	
<b>b</b>	Name of plan sponsor QUADRANT, INCORPORATED	<b>c</b> EIN-PN 02-0565405-001
<b>a</b>	Plan name QUALITY MACHINING SERVICES, LLC 401(K) PSP	
<b>b</b>	Name of plan sponsor QUALITY MACHINING SERVICES, LLC	<b>c</b> EIN-PN 62-1737162-001
<b>a</b>	Plan name QUALITY ROOFING SERVICES, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor QUALITY ROOFING SERVICES, INC.	<b>c</b> EIN-PN 06-1303539-001
<b>a</b>	Plan name RAMIREZ MASONRY, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor RAMIREZ MASONRY, INC.	<b>c</b> EIN-PN 95-4067311-001
<b>a</b>	Plan name RATTIGAN CONSTRUCTION, INCORPORATED RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor RATTIGAN CONSTRUCTION, INCORPORATED	<b>c</b> EIN-PN 95-4877929-001
<b>a</b>	Plan name REALTY MANAGEMENT SERVICES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor REALTY MANAGEMENT SERVICES, INC.	<b>c</b> EIN-PN 52-1568244-001
<b>a</b>	Plan name RENTAL CONCEPTS, INC. PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor RENTAL CONCEPTS, INC.	<b>c</b> EIN-PN 34-1506081-001
<b>a</b>	Plan name REX LUMBER, LLC 401(K) AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor REX LUMBER, LLC	<b>c</b> EIN-PN 61-1870518-001
<b>a</b>	Plan name RMC CONSTRUCTION & ROOFING, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor RMC CONSTRUCTION & ROOFING, INC.	<b>c</b> EIN-PN 20-8794696-001
<b>a</b>	Plan name RND CONTRACTORS INC. RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor RND CONTRACTORS INC.	<b>c</b> EIN-PN 20-8581146-001
<b>a</b>	Plan name ROCHE BROS. 401(K) AND PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor ROCHE BROS. MIDCO, LLC	<b>c</b> EIN-PN 04-2264124-001

<b>Part II</b>		<b>Information on Participating Plans (to be completed by DFEs, other than DCGs)</b>	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
<b>a</b>	Plan name	ROGERCO INC.	
<b>b</b>	Name of plan sponsor	ROGERCO, INC.	<b>c</b> EIN-PN 54-1852462-001
<b>a</b>	Plan name	ROMANOFF ELECTRIC, INC. RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	ROMANOFF ELECTRIC, INC.	<b>c</b> EIN-PN 31-1020367-002
<b>a</b>	Plan name	ROSTRAVER TOWNSHIP 401(A) PLAN	
<b>b</b>	Name of plan sponsor	ROSTRAVER TOWNSHIP	<b>c</b> EIN-PN 22-6002685-401
<b>a</b>	Plan name	RUPPERT 401(K) PLAN	
<b>b</b>	Name of plan sponsor	RUPPERT LANDSCAPE LLC	<b>c</b> EIN-PN 20-0802650-001
<b>a</b>	Plan name	S. Y. KIM LAND SURVEYOR, P.C RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	S.Y. KIM LAND SURVEYOR, P.C.	<b>c</b> EIN-PN 14-1668103-001
<b>a</b>	Plan name	SECURIGUARD, INC. RETIREMENT	
<b>b</b>	Name of plan sponsor	SECURIGUARD, INC.	<b>c</b> EIN-PN 54-1189694-001
<b>a</b>	Plan name	SEF ENERGY, LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	SEF ENERGY, LLC	<b>c</b> EIN-PN 81-3424201-001
<b>a</b>	Plan name	SERVICE TRUCKS INTERNATIONAL, INC 401(K) PLAN	
<b>b</b>	Name of plan sponsor	SERVICE TRUCKS INTERNATIONAL, INC	<b>c</b> EIN-PN 42-0940961-001
<b>a</b>	Plan name	SERVICEPOWER, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor	SERVICEPOWER, INC.	<b>c</b> EIN-PN 52-2160760-001
<b>a</b>	Plan name	SHERWOOD INDUSTRIES, INC. PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	SHERWOOD INDUSTRIES, INC.	<b>c</b> EIN-PN 36-2947560-001
<b>a</b>	Plan name	SHIELDS HEALTH CARE GROUP 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor	SHIELDS HEALTH CARE GROUP, INC.	<b>c</b> EIN-PN 04-2974694-001
<b>a</b>	Plan name	SHIVVERS MANUFACTURING, INC. 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor	SHIVVERS MANUFACTURING, INC	<b>c</b> EIN-PN 42-1414147-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
<b>a</b>	Plan name SMART LOGIC 401K PLAN	
<b>b</b>	Name of plan sponsor SMART LOGIC INC	<b>c</b> EIN-PN 54-1922861-001
<b>a</b>	Plan name SNYDER ENVIRONMENTAL SERVICES, INC. RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor SNYDER ENVIRONMENTAL SERVICES, INC.	<b>c</b> EIN-PN 55-0595347-002
<b>a</b>	Plan name SOLV ENERGY 401(K) PLAN	
<b>b</b>	Name of plan sponsor SOLV ENERGY, LLC	<b>c</b> EIN-PN 47-4673720-001
<b>a</b>	Plan name SOUTH BAY HEALTH & INSURANCE SERVICES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor SOUTH BAY HEALTH & INSURANCE SER	<b>c</b> EIN-PN 26-0485597-002
<b>a</b>	Plan name SOUTHERN WALL PRODUCTS, INC. EMPLOYEES SAVINGS TRUST	
<b>b</b>	Name of plan sponsor SOUTHERN WALL PRODUCTS, INC.	<b>c</b> EIN-PN 58-1474780-001
<b>a</b>	Plan name SPECIALTY FOUNDRY PRODUCTS, INC.	
<b>b</b>	Name of plan sponsor SPECIALTY FOUNDRY PRODUCTS, INC.	<b>c</b> EIN-PN 63-1221433-001
<b>a</b>	Plan name SPENCER HODNETT, DDS, MS, PA 401(K) PLAN	
<b>b</b>	Name of plan sponsor SPENCER HODNETT, DDS, MS, PA	<b>c</b> EIN-PN 26-0432804-001
<b>a</b>	Plan name SPUDNIK EQUIPMENT COMPANY LLC 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor SPUDNIK EQUIPMENT COMPANY LLC	<b>c</b> EIN-PN 82-0537789-001
<b>a</b>	Plan name STANLEY MARTIN 401(K) PLAN	
<b>b</b>	Name of plan sponsor STANLEY MARTIN HOMES, LLC	<b>c</b> EIN-PN 20-8046523-001
<b>a</b>	Plan name STATEWIDE CONTRACTING INC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor STATEWIDE CONTRACTING INC	<b>c</b> EIN-PN 47-2914915-001
<b>a</b>	Plan name STILLWATER ELECTRIC INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor STILLWATER ELECTRIC INC.	<b>c</b> EIN-PN 73-1725261-001
<b>a</b>	Plan name SUN LUMBER COMPANY LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor SUN LUMBER COMPANY LLC	<b>c</b> EIN-PN 48-1239755-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
<b>a</b>	Plan name <a href="#">SUNPRO COATINGS, INC. RETIREMENT SAVINGS PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">SUNPRO COATINGS INC.</a>	<b>c</b> EIN-PN <a href="#">46-1840820-001</a>
<b>a</b>	Plan name <a href="#">SUNSTONE HOTEL INVESTORS, INC. 401K PROFIT SHARING</a>	
<b>b</b>	Name of plan sponsor <a href="#">SUNSTONE HOTEL INVESTORS, INC.</a>	<b>c</b> EIN-PN <a href="#">20-1296886-001</a>
<b>a</b>	Plan name <a href="#">SURFACE TECH, INC. RETIREMENT SAVINGS PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">GALLERY PAINTING, INC.</a>	<b>c</b> EIN-PN <a href="#">81-3073661-001</a>
<b>a</b>	Plan name <a href="#">SYMPPLICITY CORPORATION 401(K) PROFIT SHARING PLAN &amp; TRUST</a>	
<b>b</b>	Name of plan sponsor <a href="#">SYMPPLICITY CORPORATION</a>	<b>c</b> EIN-PN <a href="#">36-4160472-001</a>
<b>a</b>	Plan name <a href="#">SYSTEM STUDIES &amp; SIMULATION, INC. 401(K) AND PROFIT SHARING/RETIREMENT PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">SYSTEM STUDIES &amp; SIMULATION, INC.</a>	<b>c</b> EIN-PN <a href="#">63-1060391-001</a>
<b>a</b>	Plan name <a href="#">TEAM LYDERS RETIREMENT PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">SUNDANCE, INC.</a>	<b>c</b> EIN-PN <a href="#">38-3284710-001</a>
<b>a</b>	Plan name <a href="#">TEXSUN ELECTRICAL CONTRACTORS, INC. RETIREMENT SAVINGS PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">TEXSUN ELECTRICAL CONTRACTORS, INC.</a>	<b>c</b> EIN-PN <a href="#">75-1879972-001</a>
<b>a</b>	Plan name <a href="#">THE ALUMINUM ASSOCIATION, INC. EMPLOYEES' SAVINGS AND SUPPLEMENTAL RETIREMENT PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">THE ALUMINUM ASSOCIATION INC.</a>	<b>c</b> EIN-PN <a href="#">13-0428020-001</a>
<b>a</b>	Plan name <a href="#">THE CONTRACTORS RETIREMENT PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">TEMP POWER SYSTEMS</a>	<b>c</b> EIN-PN <a href="#">33-0360706-001</a>
<b>a</b>	Plan name <a href="#">THE COTTAGE GARDENS, INC. 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">THE COTTAGE GARDENS, INC.</a>	<b>c</b> EIN-PN <a href="#">38-1618393-001</a>
<b>a</b>	Plan name <a href="#">THE DONALDSON GROUP 401(K) PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">THE DONALDSON GROUP, LLC</a>	<b>c</b> EIN-PN <a href="#">52-2135284-001</a>
<b>a</b>	Plan name <a href="#">THE HANA GROUP, INC. RETIREMENT PLAN</a>	
<b>b</b>	Name of plan sponsor <a href="#">THE HANA GROUP, INC.</a>	<b>c</b> EIN-PN <a href="#">99-0320188-001</a>

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
<b>a</b>	Plan name THE IMAGE GROUP, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor THE IMAGE GROUP, INC.	<b>c</b> EIN-PN 34-1629768-001
<b>a</b>	Plan name THE KNOT WORLDWIDE 401K PLAN	
<b>b</b>	Name of plan sponsor THE KNOT WORLDWIDE	<b>c</b> EIN-PN 74-3207805-001
<b>a</b>	Plan name THE KNOX COMPANY RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor KNOX ASSOCIATES, INC.	<b>c</b> EIN-PN 95-3617858-003
<b>a</b>	Plan name THE ORLO FUND 401(K) PLAN	
<b>b</b>	Name of plan sponsor ORLO MANAGEMENT	<b>c</b> EIN-PN 26-4562632-001
<b>a</b>	Plan name THE OXFORD INDUSTRIES, INC. RETIREMENT SAVINGS PLA	
<b>b</b>	Name of plan sponsor OXFORD INDUSTRIES, INC.	<b>c</b> EIN-PN 58-0831862-004
<b>a</b>	Plan name THE PEDIATRIC MANAGEMENT GROUP, LLC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor PEDIATRIC MANAGEMENT GROUP, LLC	<b>c</b> EIN-PN 95-4602048-001
<b>a</b>	Plan name THE WHALEN COMPANY 401(K) PLAN	
<b>b</b>	Name of plan sponsor THE WHALEN COMPANY	<b>c</b> EIN-PN 52-0784012-002
<b>a</b>	Plan name THERAGENICS CORPORATION EMPLOYEE SAVINGS PLAN	
<b>b</b>	Name of plan sponsor THERAGENICS CORPORATION	<b>c</b> EIN-PN 58-1528626-001
<b>a</b>	Plan name THREE WIRE SYSTEMS, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor THREE WIRE SYSTEMS, LLC	<b>c</b> EIN-PN 20-5208324-001
<b>a</b>	Plan name TORN & GLASSER, INC. EMPLOYEES' 401K PLAN	
<b>b</b>	Name of plan sponsor TORN & GLASSER, INC.	<b>c</b> EIN-PN 95-2038611-003
<b>a</b>	Plan name TOWNSHIP OF LOWER MERION 401A	
<b>b</b>	Name of plan sponsor TOWNSHIP OF LOWER MERION	<b>c</b> EIN-PN 23-6003034-401
<b>a</b>	Plan name TP MECHANICAL CONTRACTORS, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor TP MECHANICAL CONTRACTORS, INC.	<b>c</b> EIN-PN 20-0251494-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
<b>a</b>	Plan name TRACE-A-MATIC/AFW/D&H INDUSTRIES EMPLOYEES RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor TRACE-A-MATIC CORPORATION	<b>c</b> EIN-PN 39-1103834-001
<b>a</b>	Plan name TREASURE COAST CARDIOVASCULAR INSTITUTE, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor TREASURE COAST CARDIOVASCULAR INSTITUTE, INC.	<b>c</b> EIN-PN 81-1771630-001
<b>a</b>	Plan name TRIBALCO, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor TRIBALCO, LLC	<b>c</b> EIN-PN 20-1549726-001
<b>a</b>	Plan name TRITON MANAGEMENT SERVICES, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor TRITON MANAGEMENT SERVICES, LLC	<b>c</b> EIN-PN 90-0881315-001
<b>a</b>	Plan name TRIUMPH DESIGN BUILD 401K SAVINGS PLAN	
<b>b</b>	Name of plan sponsor TRIUMPH DESIGN BUILD	<b>c</b> EIN-PN 36-3538898-001
<b>a</b>	Plan name TRUST COMPANY OF VIRGINIA RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor TCV TRUST & WEALTH MANAGEMENT	<b>c</b> EIN-PN 54-1685397-002
<b>a</b>	Plan name TURLOCK SCAVENGER COMPANY PROFIT SHARING 401(K) PLAN	
<b>b</b>	Name of plan sponsor TURLOCK SCAVENGER COMPANY	<b>c</b> EIN-PN 94-2177250-001
<b>a</b>	Plan name TWR ENTERPRISES, INC. 401(K) PLAN	
<b>b</b>	Name of plan sponsor TWR ENTERPRISES, INC.	<b>c</b> EIN-PN 33-0104272-001
<b>a</b>	Plan name U. F. C. W. LOCAL 1546 HEALTH & WELFARE FUND OFFICE EMPLOYEES 401(K) PLAN	
<b>b</b>	Name of plan sponsor U.F.C.W. LOCAL 1546 HEALTH & WELFARE FUND OFFICE	<b>c</b> EIN-PN 36-2139906-001
<b>a</b>	Plan name UNITED REFRIGERATION INC	
<b>b</b>	Name of plan sponsor UNITED REFRIGERATION, INC.	<b>c</b> EIN-PN 23-1307731-001
<b>a</b>	Plan name UNLV MEDICINE 401(K) PLAN	
<b>b</b>	Name of plan sponsor UNLV MEDICINE	<b>c</b> EIN-PN 81-3419791-001
<b>a</b>	Plan name VALLEY VIEW CASINO 401(K) PLAN & TRUST	
<b>b</b>	Name of plan sponsor SAN PASQUAL CASINO DEV GROUP	<b>c</b> EIN-PN 33-0926655-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
<b>a</b>	Plan name VALLESTAR CREDIT UNION 401(K) RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor VALLESTAR CREDIT UNION	<b>c</b> EIN-PN 54-6040482-001
<b>a</b>	Plan name VALPREDO FARMS 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor COUNTRY SWEET PRODUCE, INC.	<b>c</b> EIN-PN 26-2049019-001
<b>a</b>	Plan name VAN DAM ENTERPRISES, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor VAN DAM ENTERPRISES, INC.	<b>c</b> EIN-PN 46-2784874-001
<b>a</b>	Plan name VANDALIA REHAB, LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor VANDALIA REHAB, LLC	<b>c</b> EIN-PN 88-1291851-001
<b>a</b>	Plan name VERIMATRIX 401 K PLAN	
<b>b</b>	Name of plan sponsor VERIMATRIX INC	<b>c</b> EIN-PN 33-0935891-001
<b>a</b>	Plan name VERITAS HHS 401(K) PLAN	
<b>b</b>	Name of plan sponsor VERITAS HHS, LLC	<b>c</b> EIN-PN 27-5319964-001
<b>a</b>	Plan name VERUNA, INC. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor VERUNA, INC.	<b>c</b> EIN-PN 83-4401239-001
<b>a</b>	Plan name VIRGIN ATLANTIC AIRWAYS, LTD. 401(K) RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor VIRGIN ATLANTIC AIRWAYS, LTD.	<b>c</b> EIN-PN 13-3213123-001
<b>a</b>	Plan name VISUAL EDGE TECHNOLOGY, INC. 401(K) SAVINGS AND RETIREMENT PLAN	
<b>b</b>	Name of plan sponsor VISUAL EDGE TECHNOLOGY, INC.	<b>c</b> EIN-PN 94-2991858-001
<b>a</b>	Plan name VMD SYSTEMS INTEGRATORS INC 401K	
<b>b</b>	Name of plan sponsor VMD CORP	<b>c</b> EIN-PN 04-3671521-001
<b>a</b>	Plan name W.L. GARY COMPANY INC 401K	
<b>b</b>	Name of plan sponsor WL GARY COMPANY INC	<b>c</b> EIN-PN 53-0071990-001
<b>a</b>	Plan name WALTON CONSTRUCTION, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor WALTON CONSTRUCTION, INC	<b>c</b> EIN-PN 82-3421806-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
<b>a</b>	Plan name WCJ CONSULTANTS, LLC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor WCJ CONSULTANTS, LLC	<b>c</b> EIN-PN 01-0907258-001
<b>a</b>	Plan name WEBER ELECTRIC, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor WEBER ELECTRIC, INC.	<b>c</b> EIN-PN 74-2714235-001
<b>a</b>	Plan name WEST COAST FITNESS LLC 401(K) PLAN	
<b>b</b>	Name of plan sponsor OTF SERVICES LLC	<b>c</b> EIN-PN 81-4962263-001
<b>a</b>	Plan name WEST MAUI LAND COMPANY, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor WEST MAUI LAND COMPANY, INC.	<b>c</b> EIN-PN 99-0325376-001
<b>a</b>	Plan name WESTCON COMMERCIAL INDUSTRIES, LTD. CO. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor WESTCON COMMERCIAL INDUSTRIES, LTD. CO.	<b>c</b> EIN-PN 38-3899565-001
<b>a</b>	Plan name WESTERN TRAILER CO. 401(K) PROFIT SHARING PLAN	
<b>b</b>	Name of plan sponsor WESTERN TRAILER CO.	<b>c</b> EIN-PN 82-0347136-001
<b>a</b>	Plan name WESTMARK CONSTRUCTION 401(K) PLAN	
<b>b</b>	Name of plan sponsor WESTMARK CONSTRUCTION, INC.	<b>c</b> EIN-PN 91-0892117-001
<b>a</b>	Plan name WESTWIND LANDSCAPE CONSTRUCTION, INC. RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor WESTWIND LANDSCAPE CONSTRUCTION, INC.	<b>c</b> EIN-PN 85-0392769-001
<b>a</b>	Plan name WICKED TECHNOLOGIES LLC RETIREMENT SAVINGS PLAN	
<b>b</b>	Name of plan sponsor WICKED TECHNOLOGIES LLC	<b>c</b> EIN-PN 27-1917293-002
<b>a</b>	Plan name WISE COMPONENTS, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
<b>b</b>	Name of plan sponsor WISE COMPONENTS, INC.	<b>c</b> EIN-PN 13-2895657-001
<b>a</b>	Plan name WNBC 401(K) PLAN	
<b>b</b>	Name of plan sponsor WASHINGTON NATIONALS BASEBALL	<b>c</b> EIN-PN 20-5145890-002
<b>a</b>	Plan name XLA 401(K) PLAN	
<b>b</b>	Name of plan sponsor XLA, INC.	<b>c</b> EIN-PN 52-1653076-001

<b>SCHEDULE H</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Financial Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).  <b>▶ File as an attachment to Form 5500.</b>	OMB No. 1210-0110  <b>2024</b>  <b>This Form is Open to Public Inspection</b>
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For calendar plan year 2024 or fiscal plan year beginning <b>01/01/2024</b> and ending <b>12/31/2024</b>	
<b>A</b> Name of plan <b>FLEXPATH INDEXPLUS CONSERVATIVE RETIREMENT FUND</b>	<b>B</b> Three-digit plan number (PN) ▶ <b>227</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>GREAT GRAY TRUST COMPANY, LLC</b>	<b>D</b> Employer Identification Number (EIN) <b>47-2916729</b>

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

<b>Assets</b>	<b>(a) Beginning of Year</b>	<b>(b) End of Year</b>
<b>a</b> Total noninterest-bearing cash .....	<b>1a</b>	
<b>b</b> Receivables (less allowance for doubtful accounts):		
<b>(1)</b> Employer contributions .....	<b>1b(1)</b>	
<b>(2)</b> Participant contributions .....	<b>1b(2)</b>	
<b>(3)</b> Other .....	<b>1b(3)</b>	1342096
		27867478
<b>c</b> General investments:		
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....	<b>1c(1)</b>	
<b>(2)</b> U.S. Government securities .....	<b>1c(2)</b>	
<b>(3)</b> Corporate debt instruments (other than employer securities):		
<b>(A)</b> Preferred .....	<b>1c(3)(A)</b>	
<b>(B)</b> All other .....	<b>1c(3)(B)</b>	
<b>(4)</b> Corporate stocks (other than employer securities):		
<b>(A)</b> Preferred .....	<b>1c(4)(A)</b>	
<b>(B)</b> Common .....	<b>1c(4)(B)</b>	
<b>(5)</b> Partnership/joint venture interests .....	<b>1c(5)</b>	
<b>(6)</b> Real estate (other than employer real property) .....	<b>1c(6)</b>	
<b>(7)</b> Loans (other than to participants) .....	<b>1c(7)</b>	
<b>(8)</b> Participant loans .....	<b>1c(8)</b>	
<b>(9)</b> Value of interest in common/collective trusts .....	<b>1c(9)</b>	48615265
<b>(10)</b> Value of interest in pooled separate accounts .....	<b>1c(10)</b>	
<b>(11)</b> Value of interest in master trust investment accounts .....	<b>1c(11)</b>	
<b>(12)</b> Value of interest in 103-12 investment entities .....	<b>1c(12)</b>	
<b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....	<b>1c(13)</b>	203969
<b>(14)</b> Value of funds held in insurance company general account (unallocated contracts) .....	<b>1c(14)</b>	
<b>(15)</b> Other .....	<b>1c(15)</b>	118695166
		198460

<b>1d</b> Employer-related investments:		<b>(a)</b> Beginning of Year	<b>(b)</b> End of Year
(1) Employer securities.....	<b>1d(1)</b>		
(2) Employer real property.....	<b>1d(2)</b>		
<b>e</b> Buildings and other property used in plan operation.....	<b>1e</b>		
<b>f</b> Total assets (add all amounts in lines 1a through 1e).....	<b>1f</b>	50161330	146761104
<b>Liabilities</b>			
<b>g</b> Benefit claims payable.....	<b>1g</b>		
<b>h</b> Operating payables.....	<b>1h</b>	0	64321
<b>i</b> Acquisition indebtedness.....	<b>1i</b>		
<b>j</b> Other liabilities.....	<b>1j</b>	1377909	27867398
<b>k</b> Total liabilities (add all amounts in lines 1g through 1j).....	<b>1k</b>	1377909	27931719
<b>Net Assets</b>			
<b>l</b> Net assets (subtract line 1k from line 1f).....	<b>1l</b>	48783421	118829385

**Part II Income and Expense Statement**

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

<b>Income</b>		<b>(a)</b> Amount	<b>(b)</b> Total
<b>a Contributions:</b>			
(1) Received or receivable in cash from: <b>(A)</b> Employers.....	<b>2a(1)(A)</b>		
<b>(B)</b> Participants.....	<b>2a(1)(B)</b>		
<b>(C)</b> Others (including rollovers).....	<b>2a(1)(C)</b>		
(2) Noncash contributions.....	<b>2a(2)</b>		
(3) Total contributions. Add lines <b>2a(1)(A)</b> , <b>(B)</b> , <b>(C)</b> , and line <b>2a(2)</b> .....	<b>2a(3)</b>		0
<b>b Earnings on investments:</b>			
<b>(1) Interest:</b>			
<b>(A)</b> Interest-bearing cash (including money market accounts and certificates of deposit).....	<b>2b(1)(A)</b>		
<b>(B)</b> U.S. Government securities.....	<b>2b(1)(B)</b>		
<b>(C)</b> Corporate debt instruments.....	<b>2b(1)(C)</b>		
<b>(D)</b> Loans (other than to participants).....	<b>2b(1)(D)</b>		
<b>(E)</b> Participant loans.....	<b>2b(1)(E)</b>		
<b>(F)</b> Other.....	<b>2b(1)(F)</b>		
<b>(G)</b> Total interest. Add lines <b>2b(1)(A)</b> through <b>(F)</b> .....	<b>2b(1)(G)</b>		0
<b>(2) Dividends:</b>			
<b>(A)</b> Preferred stock.....	<b>2b(2)(A)</b>		
<b>(B)</b> Common stock.....	<b>2b(2)(B)</b>		
<b>(C)</b> Registered investment company shares (e.g. mutual funds).....	<b>2b(2)(C)</b>	15716	
<b>(D)</b> Total dividends. Add lines <b>2b(2)(A)</b> , <b>(B)</b> , and <b>(C)</b> .....	<b>2b(2)(D)</b>		15716
(3) Rents.....	<b>2b(3)</b>		
<b>(4) Net gain (loss) on sale of assets:</b>			
<b>(A)</b> Aggregate proceeds.....	<b>2b(4)(A)</b>		
<b>(B)</b> Aggregate carrying amount (see instructions).....	<b>2b(4)(B)</b>		
<b>(C)</b> Subtract line <b>2b(4)(B)</b> from line <b>2b(4)(A)</b> and enter result.....	<b>2b(4)(C)</b>		
<b>(5) Unrealized appreciation (depreciation) of assets:</b>			
<b>(A)</b> Real estate.....	<b>2b(5)(A)</b>		
<b>(B)</b> Other.....	<b>2b(5)(B)</b>		
<b>(C)</b> Total unrealized appreciation of assets. Add lines <b>2b(5)(A)</b> and <b>(B)</b> .....	<b>2b(5)(C)</b>		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts .....	<b>2b(6)</b>		1500268
(7) Net investment gain (loss) from pooled separate accounts .....	<b>2b(7)</b>		
(8) Net investment gain (loss) from master trust investment accounts .....	<b>2b(8)</b>		
(9) Net investment gain (loss) from 103-12 investment entities .....	<b>2b(9)</b>		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) .....	<b>2b(10)</b>		-26505
<b>c</b> Other income .....	<b>2c</b>		
<b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total.....	<b>2d</b>		1489479

**Expenses**

<b>e</b> Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	<b>2e(1)</b>		
(2) To insurance carriers for the provision of benefits .....	<b>2e(2)</b>		
(3) Other.....	<b>2e(3)</b>		
(4) Total benefit payments. Add lines <b>2e(1)</b> through <b>(3)</b> .....	<b>2e(4)</b>		0
<b>f</b> Corrective distributions (see instructions) .....	<b>2f</b>		
<b>g</b> Certain deemed distributions of participant loans (see instructions).....	<b>2g</b>		
<b>h</b> Interest expense.....	<b>2h</b>		
<b>i</b> Administrative expenses:			
(1) Salaries and allowances .....	<b>2i(1)</b>		
(2) Contract administrator fees .....	<b>2i(2)</b>		
(3) Recordkeeping fees .....	<b>2i(3)</b>		
(4) IQPA audit fees .....	<b>2i(4)</b>	2599	
(5) Investment advisory and investment management fees .....	<b>2i(5)</b>	126684	
(6) Bank or trust company trustee/custodial fees .....	<b>2i(6)</b>	23873	
(7) Actuarial fees .....	<b>2i(7)</b>		
(8) Legal fees .....	<b>2i(8)</b>		
(9) Valuation/appraisal fees .....	<b>2i(9)</b>		
(10) Other trustee fees and expenses .....	<b>2i(10)</b>		
(11) Other expenses.....	<b>2i(11)</b>		
(12) Total administrative expenses. Add lines <b>2i(1)</b> through <b>(11)</b> .....	<b>2i(12)</b>		153156
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total.....	<b>2j</b>		153156

**Net Income and Reconciliation**

<b>k</b> Net income (loss). Subtract line <b>2j</b> from line <b>2d</b> .....	<b>2k</b>		1336323
<b>l</b> Transfers of assets:			
(1) To this plan.....	<b>2l(1)</b>		96506757
(2) From this plan .....	<b>2l(2)</b>		27797116

**Part III Accountant's Opinion**

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

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

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

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

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

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

(1) Name:

(2) EIN:

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

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

**Part IV Compliance Questions**

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

During the plan year:

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

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

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

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

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

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